

Vaccinations Update

June 2022

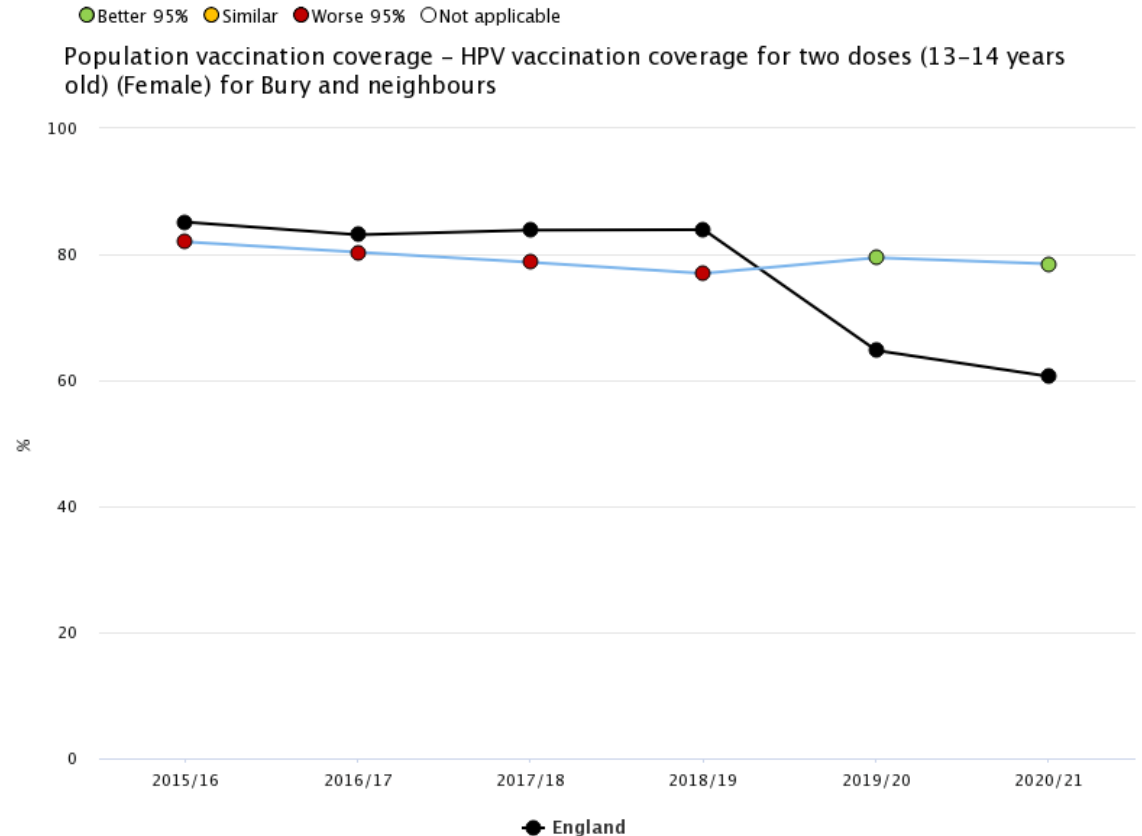
Overall coverage

1. Population coverage in Bury is broadly the same as the English average.
2. Immunisations for children in care, MMR, HPV, and Meningitis ACWY are better than average for England.
3. Bury also has COVID-19 vaccine uptake above average for GM in all cohorts except care home residents for the spring booster (this may be a data quality problem).
4. Bury's coverage is below the English average for
 - a. Pneumococcal vaccines for older adults
 - b. influenza (for older adults, adults in risk groups, and children aged 2-3 years),
 - c. rotavirus, and
 - d. shingles vaccine for older adults



COVID-19 impacts

1. There is little evidence that COVID-19 and the disruption it caused to healthcare services has affected vaccine uptake in Bury.
2. This is in contrast with national and regional trends and in the face of significant pressures on general practice and school aged immunisations providers created by the COVID-19 vaccine programme.
3. The chart opposite provides trends for the human papillomavirus (which causes cervical cancer).
4. This reflects a very significant effort and achievement by the primary care and school aged immunisation teams.



Inequalities

1. For COVID-19 and influenza vaccines, there is clear evidence of inequalities in uptake by deprivation and ethnicity within Bury.
2. However, uptake among more deprived and ethnic minority communities in Bury is generally better than similar communities elsewhere in GM. An important exception is Bury's British Asian residents registered with Bury and Horizon PCNs.
3. There is relatively little difference in uptake of childhood vaccines between practices serving more and less deprived populations.

Priorities

1. Improve COVID-19 spring booster uptake (and data quality) among care home residents and immunosuppressed people;
2. Improve uptake of adult influenza immunisations and reduce inequalities, particularly those affecting Asian and Asian British people, and reduce the extent of inequality in uptake by deprivation for people with long term illnesses;
3. Improve flu vaccine uptake among pre-school children;
4. Improve uptake of pneumococcal and shingles vaccines among eligible older people;
5. Continue to minimise inequality in COVID-19 vaccine uptake; and
6. Improve uptake of hepatitis B vaccine among people entering drug treatment.