

HKP Vaccine Equity report for March 2023

HKP Communications and engagement.



HKP produced a 'community friendly' poster promoting the evergreen offer and the offer of support from Community workers at the Hove Polyclinic MVU sessions in March 2023.

The aim was to overcome some of the barriers experienced in accessing a vaccination whether that be transport, confidence, language, fear or misinformation. Despite the support offer being widely promoted, no residents got in touch to ask for more information or support to access the MVUs.

Paper NHS Vaccine and MVU posters were put up in the following locations:

- Hove Medical Centre
- Mile Oak Medical Centre
- Portslade Health Centre
- Links Road Surgery
- WellBN – Benfield and Burwash surgeries
- Mile Oak Pharmacy
- Burwash Pharmacy
- Portslade Community Centre
- Portslade Library
- Hangleton Library
- St Richards Community Centre
- Burwash Pharmacy
- Hangleton Community Centre

HKP has extensive community networks via email, what's app and social media and made 9,864+ contacts via these methods. The HKP Community Poster and NHS poster with positive messaging about the 'evergreen offer' were sent as follows:

Social media:

- HKP Twitter
- HKP Website- <https://www.hkproject.org.uk/docs/news/2023-03-02-LeafletVaccB&H.pdf>
- Happenings in Hangleton Facebook group – 7,900 residents
- HKP Staff Facebook page to share.

Emails:

- Health Forum Vaccinations special e-newsletter 227
- HKP e-newsletter to residents 1063
- HK50+ e-list- older residents 240
- HK50+ In shape group-25
- HK50+ Steering group-6

Ethnically diverse community's communications:

WhatsApp Groups:

- Multi-Cultural Yoga - 18
- Multi-Cultural Walking group - 26
- Multi-Cultural Bollywood Group - 19
- Brighton and Hove Bangladeshi welfare association - 39
- Madina Mosque - sent to the Imam -1
- Shahjalal Mosque – Sent to the secretary -1
- Mosaic Family group - 6
- Muslim women's Group - 35
- Multi-Cultural Group Brighton - Sent to Labour Politician -1
- EMAS – 57
- Multi-Cultural parent/Carer group – 46
- BMECP Ethnically diverse community -1

Email:

- Hangleton Park Children Centre staff
- MCWG Members (all languages) - 149
- ECCA lead (all languages) 1
- SIPS Lead and Admin (all languages) 1
- Christian Arabic Club Lead (all languages) 1
- Jamarl Billy – Community engagement team B&H City Council (all languages) 1

West Area Health Forum engagement included the following messaging to the 227 residents and key community group leads:

- If you know anyone who hasn't had a vaccine but would like one, they are still offering first and second doses at the Poly clinic Mobile unit 10.30 -2.30 every Thursday til the end of March.
- We have just heard that there will be a Spring booster for over 75s and immune compromised people that will start early April in the care homes and from mid/late April in the community.
Venues are not yet confirmed as there is a fair few logistics to work around, but your feedback about ensuring a bookable venue in West has been heard.
- The March West Area Health Forum meeting provided an opportunity to give an update about the Spring Booster campaign and for residents to ask any questions.

Community Development team in -person outreach and groups engagement.

The following groups were spoken to in person about the March community support offer at the Hove Polyclinic and provided with the FAQs leaflets, Community poster and NHS evergreen offer posters as appropriate. FAQs materials in Bengali, Farsi and Ukrainian were provided for supporting individuals from ethnically diverse backgrounds. The FAQs NHS information booklet was printed off and taken to the 4 Hove Polyclinic outreach sessions to give to attendees. The Posters were displayed at St Richards and Hangleton community centres.

In- person communication with groups and individuals and Focus groups to inform about the evergreen offer and community sessions at the MVU reached 134+ residents:

- HK50+ Committee -6
- HK Community Action meeting- 30
- Multi-Cultural women's group- 21
- 50+ Hangleton Get Together Club -15
- 50+ Befriending Group- 25
- 50+ Board game drop-in -9
- Pat Shop - Burwash Road -1
- Burwash pharmacy staff
- Hangleton Community center staff
- Al Nour Academy Ramadan Bazaar attendees

The HKP CD team delivered 4 face to face outreach sessions at the MVU drop-ins at Hove Poly clinic: March 9th 12-2pm ,16th 12-2pm, 23rd 12-2pm and 30th 10.30-12 2023.

- 0 patients were spoken to at the 4 outreach sessions.
- CD team gathered feedback from MVU staff.

Reflections and recommendations summary, please refer to Appendix for detailed notes from Focus Groups and in-person engagement:

1. Venues/MVUs-

- Community health venues for MVUs work well due to good bus links and car parks and being familiar and safe environments. Regular presence makes all the difference to people knowing it's there and being able to tell people about it
- The MVU needs to be visible and accessible with seating provided, when busy.
- Queue busting is needed at MVU venues when busy.
- More MVU staff briefing around FAQs, health conditions impacting eligibility and possibly have translated materials available would have helped.

2. Support to reduce barriers-

- Barriers include lack of information, misinformation, apathy, complacency, fear, lack of confidence, lack of support, cultural barriers, mental health.
- Need more tailored support and accessible information for those from ethnically diverse backgrounds to help access correct information, boost confidence and to navigate the system.
- Digital exclusion- need to reach those better who are not on social media/ without IT skills w flyers and support them to access online to find out information.
- Access to vaccinations for unpaid carers when attending with those they care for as standard.

3. Appointments versus drop-ins-

- The accessibility of booking appointments online and telephone was very important to everyone, appointments were preferred by older people, others preferred drop-ins for flexibility.
- Regular, local venues much appreciated.

4. Communications -

- Generally, could be improved to reduce confusing messages around eligibility especially in relation to health conditions. Frequent issues raised in community about difference between immune compromised and clinically vulnerable.

- Clear, targeted positive messaging and information about what is available, when, and where at local venues MVUs is needed.
- A diverse range of methods is needed, not just relying on social media/internet.
- Pop ups work to get people who will only access through word of mouth and who need a transport offer.
- Targeted to low-uptake groups, using trusted voices to support cascading correct information, boosting confidence, and overcoming barriers esp. for ethnically diverse groups.

APPENDIX:

HK50+ Steering Group focus group. Date: 13th March via Zoom. 6 attendees, all 70+ in age. Their reflections on the Autumn booster experience:

Positives:

- Very simple and worked well- no issues at all.
- Very well organised at Racecourse. Gave Bluebird transport a parking space, offered a wheelchair. Lots of volunteers. Very calm and supportive.
- Went online, then called the number. Got an appt with no issues at racecourse. Service and support very good. Took a taxi.
- Travelling: car- 3, Mobility scooter-1, Taxi-1, Blue Bird- 1- bus travel very hard to Racecourse noted
- Lovely to see the volunteers at sessions, it feels like a community endeavour.
- Community drop-ins/pop ups at St Richards and HCC went well- good numbers, mopped up quite a few people who did not have a booster.

Negatives:

- There was no local MVU that we were told about to start with- there was the Racecourse or nothing, then we were told about the Poly clinic MVU via HKP. Had to queue for over an hour at Polyclinic (2 separate times with 60+ people in the queue.)
- Major issue- communications- not knowing where and when it was. Then they offered at PHC, but unfortunately appointments got booked up quickly.
- Wanted to book for Racecourse as knew the Blue Bird Society transport would go there, trying to get an appointment was difficult. Could book it online. Eventually got phone number and booked it. Online easier.
- Racecourse not available every day (race meetings)
- When rang appointment number, offered appts all over the place in Sussex, racecourse only option in city at one point.
- Online appts- Hove Poly Clinic and Portslade Health centre did not appear.
- Poly clinic drop-ins helpful to have but prefer to book an appointment.

What could be done better to improve the experience for Spring boosters for 50+?

- GPs text direct to patients- reminders about Vaccinations, but can they include MVU locations, booking telephone numbers etc.
- Local and accessible venues for MVUs essential e.g. Hove Poly Clinic, Portslade Health Centre – parking, bus links, car parks
- Good PR about what is available and where for Spring booster.

- If drop-in and appointment offered at the same venue- can cause some queuing and chaos, so separate queues needed.
- Central City venue needs to be reinstated - Churchill square was accessible for most, parking, buses.
- Concerns about anti-vaxxers, must remain aware of any issues.

Multi-Cultural Women's Group Focus group. Date: 16th March 2023. 21 Members attended.

21 members attended, spread over all age range and various characteristics and demographics giving the opportunity for wider participation. Overall, it was a good discussion with a good level of engagement. The group felt comfortable being able to discuss their own personal experiences including their family and friends living in UK and abroad.

Majority spoke highly of the following and positives:

- Text reminders were very useful including the contact details.
- Reliant on prompts from GP's
- Staff were friendly and welcoming.
- Like the option of drop in's and community drop in's
- Noticed/understood benefits/positives of vaccines later.

As well as the positives, there were negatives too along with ideas of improvement:

- Not knowing accurate benefits of vaccines
- Not having access to accurate information
- Not knowing how to navigate the system.
- Making it welcoming for everyone
- Drop In's had long waiting times for boosters... around 2 hours at polyclinic. Not good system as when got to the end of the queue there was no vaccine left! No seating/waiting areas.
- Staff lack of knowledge/confidence to answer questions, refer to go back to GP to seek advice.
- Mobile Units not noticeable at Poly, too hidden away at back of car park.
- Being asked why attending? When been invited.
- Not having translated information readily available
- Digital exclusion not knowing how and where.
- Confusing messaging about vaccines
- Incorrect info on numbers of boosters and vaccine for vulnerable
- To better understand the information, would've liked an interpreter/translated resource.
- Anxious of mixing with people again, reluctant to go out, causing isolation affecting mental and physical wellbeing.

What could be done better to improve the experience for the Spring 23 Boosters?

- Giving people positive and accurate benefits of vaccines
- Accurate information, scientifically, religiously, and culturally backed.
- Accurate information relevant to individual as messaging is confusing.
- Easy and accessible appointment systems
- Navigation system – who when and where to get information and have vaccine?
- Making it accessible for everyone
- Better system for drop in's.
- Reduced waiting times when attending for vaccines.
- Better management of drop in
- Better and easy booking system
- Good system in place preventing 'got to the end of the queue there was no vaccine left!'

- seating/waiting areas for drop in's/MVU's in better location which is both visible and accessible.
- All staff training, including clinician and staff at drop in's,
- Staff not asking why attending when they have been invited.
- Having access to translated information – including hardcopies, electronic, online and access to interpreters for face to face, online and phone.
- Accurate info on numbers of boosters and vaccine for vulnerable
- Having one trusted source to go to for help, advice and guidance.
- Guidance 'after care and support'
- Health and support around mental health and other health conditions
- To include unpaid carers at same as those they are caring for.

MVU staff experiences in delivering this work, their views and feedback they are getting from the service users:

- young people who are planning an overseas trip are coming to get vaccinated due to travel requirements.
- someone who had been shielding for a couple of years came to get vaccine.
- 2 people came earlier in the day. Apparently, people arrive in the morning generally rather than later in the session. The first person was planning to travel to America so that was their motivation to get vaccinated. The second person was a 17-year-old boy – he had been trying to get his second dose (from Tesco) for several weeks but kept presenting too early.
- 1st and 2nd doses – college kids who are planning on travelling to Asia are getting all there vaccines up to date and so decide to get the Covid one to be on the safe side despite not necessarily knowing there are specific restrictions in countries. Obviously not so common but people who have had stem cell transplant have to restart the entire course. So even if they have had 5 vaccines, they have to start again following the transplant. Some YP who have just turned 16 years old turn up for second vaccine.
- Someone came who was pregnant- turned away.
- They have been averaging about 4 people each week across all 3 sites. More people turning up wanting boosters but being turned away.
- People were coming to these sites through word of mouth,
- Students and university students tend to use the drop In's
- Ukranian Community attending MVU's to get vaccinated.
- Younger men coming for 2nd jab, booster.
- Good level of advertising and outreach, working with community/charity organisations actively involved in the area. (eg HKP publicity at the Polyclinic)
- Communication to hear both sides of patient details– bring letter.
- Communication and clearer messaging needed.
- Advertising these MVU sessions – such as TV and radio – as People have feedback 'they came as it was on the news.
- Accepting people without documents -then be given a card to show they have been vaccinated (but have no control/power over how their Country's authority perceives this)
- Wider Advertisements and comms including community groups and social media, TV and radio.
- Saw advert at the Polyclinic itself.

- It is not a high traffic area as Tesco car park, people come just to go to the polyclinic so local and targeted audience for drop in rather than footfall.
- A lot of older people find out via word of mouth and family members.
- Good uptake from older people, they keep appointments, arrive early. Younger adults less reliable.
- FAQs leaflets ok to use if there is a queue as it gives something for people to read. If no queues, find it best to focus on the individual and their needs and answer questions direct.
- A lot more family groups from diverse ethnic communities attend the MVU at St Peters, plus Asian students.
- Some anxiety and reticence from younger men- 20s-30s age group
- A lot of people just turn up and want to get it done without much talking.
- More visibility of the MVU unit – as hidden away at the back of car park
- Better management of drop in system.
- Seating/waiting area access to refreshments and toilets.
- Having established locations
- Staff training as ever-changing rules/guidance. So, staff and service users on the same page
- Print outs of information for Immunosuppressed
- Ever evolving changes to guidance – staff felt overwhelmed. Same for users.
- Communication and clearer messaging
- Clear messaging about ‘Clinically at risk /vulnerable’
- Retrain – on going training for staff and briefing.
- Improved Communication to hear both sides of patient detail – bring letter.

HKP Staff feedback:

5. Thinking about the communities and people you work with, what do you think the current barriers are to them up taking offers of the **spring vaccination**?
 - a. **Answer:** accessibility of venues, appointments, support, and information
6. Thinking about the communities and people you work with, what do you think the current barriers are to them taking up the offer of a **first or second dose** of the vaccine?
 - a. **Answer:** lack of information, misinformation, apathy, complacency, fear, lack of confidence, lack of support, cultural barriers
7. Do you have any ideas of how to increase the uptake of the spring vaccination?
 - a. **Answer:** positive clear messaging and information, targeted work with low-uptake groups, using Trusted voices to support cascading correct information and overcoming barriers esp. for ethnically diverse groups
8. Do you have any ideas of how to increase the uptake of first and second doses, at this stage?
 - a. **Answer:** targeted work with low-uptake groups, using trusted voices to support cascading correct information and overcoming barriers esp. for ethnically diverse groups
9. Do you have any other comments?
 - a. **Answer:** some people are determined to never have the vaccine. I know two 65+ individuals who say this- ‘I do not believe in it’, despite health conditions making them vulnerable.