

Committee(s): City Health & Wellbeing Board	Dated: 07 Feb 2025
Subject: City and Hackney Immunisations Strategic Action Plan (2024-2027)	Public
Which outcomes in the City Corporation’s Corporate Plan does this proposal aim to impact directly?	2, 3, 4, 9 and 10
Does this proposal require extra revenue and/or capital spending?	No
If so, how much?	N/A
What is the source of Funding?	N/A
Has this Funding Source been agreed with the Chamberlain’s Department?	N/A
Report of: Dr Sandra Husbands, Director of Public Health	For Information
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1. Summary

- 1.1. After clean water, immunisation programmes are the most effective means of safeguarding individuals and communities against vaccine-preventable diseases (VPDs).
- 1.2. Residents in the City of London are however at risk of VPDs due to a downward trend and inequalities in vaccination coverage across the lifecycle. Existing inequalities mean that the burden of VPDs are likely to disproportionately impact certain communities than others. With increasing pressures on the health and care system, as well as financial pressures on public health investment, it is essential to ensure that vaccination programmes in the City reach their full potential.
- 1.3. This report presents the strategic approach to improving vaccination coverage and addressing inequalities across the City of London and Hackney. The plan aims to *safeguard all communities from VPDs by increasing and addressing inequalities in immunisation coverage through action of community-, data- and system-led insights*. The plan aims to deliver this vision by:

- Reaching high-risk groups with vaccinations in community spaces.
- Co-creating resources and campaigns with local communities.
- Using better data to plan and deliver services.
- Making sure services are efficient and evidence-based.
- Training staff to make every interaction an opportunity to promote vaccination.

1.4. The plan was approved and ratified at the City & Hackney Place-Based Partnership Executive Group (previously the Neighbourhood Health and Care Board) in November 2024. Although implementation of the plan is underway, there are several risks which could impact its full and effective delivery:

- **Data quality and accessibility:** most immunisation data is aggregated to the City and Hackney combined level. This is a longstanding issue which, despite multiple attempts to escalate and/or co-develop a solution, has not yet been resolved. This issue has been escalated to the North East London (NEL) data team and NHS England London commissioners to try and identify a solution. Although there were discussions within NEL to develop an immunisation data dashboard, as is in place in other Integrated Care Systems, progress towards this appears to have stalled. The lack of City-specific data risks data-driven planning, monitoring and evaluation.
- **Insufficient and non-recurrent funding:** the implementation of this plan is reliant on multiple funding streams (see funding implications section). Non-recurrent funding (e.g. for the coordination of immunisation activities, campaigns, communications and community engagement work) is however, often tied to specific campaigns, thereby preventing long-term strategic planning.
- **Lack of clarity over devolved commissioning arrangements:** intentions to ‘delegate responsibility for commissioning NHS vaccination services to ICBs’ by April 2025, as outlined in the [NHS vaccination strategy](#), have been delayed at least until April 2026. No details surrounding this delegation have been provided, including relating to funding, which hinders local abilities to plan and prepare for this transition.

1.5. The Board is therefore requested to consider the outlined risks, provide guidance on addressing the associated implementation challenges, and share input on actions that may further optimise the plan.

2. Recommendation(s)

Members of the Health and Wellbeing Board are asked to:

1. Review the strategic action plan, in particular, the plan's vision, objectives and actions.
2. Provide guidance on the risks outlined (particularly those related to data and funding challenges) and those associated with implementing the plan; and
3. Provide input regarding additional actions we should consider to achieve the plan's vision.

Main Report

3. Background

- 3.1. The Strategic Immunisation Action Plan outlines the approach to improving vaccination coverage and addressing inequalities in uptake in the City of London and Hackney.

4. Current Position

- 4.1. The plan was approved and ratified at the City and Hackney Place-Based Partnership Executive Group in November 2024.
- 4.2. Implementation of the plan is already underway, and will be overseen by the CYP Immunisations Group and the Vaccination and Immunisation Steering Group.
- 4.3. Oversight and strategic input will take place at the Health Protection Forum.
- 4.4. Overall accountability sits with the Health and Care board, via the Place-Based Partnership Delivery Group and the Place-Based Partnership Executive Group.

5. Options

- 5.1. While there are no specific decisions required from the Board at this stage, this strategic action plan is intended to be a live document. Therefore, the Board is asked to consider the identified risks and provide input on mitigating the implementation challenges. Additionally, the Board is invited to suggest any further measures it sees fit to optimise the plan's outcomes.

6. Proposals

- 6.1. No further recommendations are proposed at this stage beyond those already highlighted.

7. Key Data

- Childhood vaccination coverage across London is significantly below the national average, and does not meet the WHO target of 95% required for herd immunity.

- The City’s single GP practice, The Neaman Practice, serves 78% of the population. The rest are mostly registered with Goodman’s Field (10%) and Spitalfields Practice (8%), both located in Tower Hamlets. A large proportion of the City of London’s more deprived population, living close to the border with Tower Hamlets, are also more likely to be registered with Goodman’s Field and Spitalfields. Estimates from the Neaman Practice alone may therefore not fully reflect borough-wide immunisation coverage.
- Routine childhood immunisation coverage at the Neaman Practice is 92% and above (Table 1), higher than neighbouring borough practices (75% to 89%).
- The 2023-24 school-age vaccination programme highlighted that secondary schools performed above the national average on most programmes.
- The 2023/24 autumn booster programme (for City and Hackney combined) highlighted increasing uptake with age, with optimal coverage in care homes (69%).

Table 1. Childhood vaccination coverage at GP practices serving City of London residents, compared to London and national averages (2023/24).				
GP Practice	6-in-1 vaccine (12 months)	MMR 1st dose (24 months)	DTaP/IPV (5 years)	MMR 2nd dose (5 years)
Neaman	93%	94%	92%	92%
Goodman	89%	82%	90%	81%
Spitalfield	84%	83%	75%	75%
London	86%	82%	72.8%	73%
National	91%	89%	83%	84%

8. Corporate & Strategic Implications

- 8.1. The plan supports the Corporation’s objectives of ‘contributing to a flourishing society’ and ‘shaping outstanding environments’.
- 8.2. The plan has been developed through a comprehensive needs analysis and stakeholder engagement. The plan has identified solutions to address complacency, convenience and confidence barriers. Implementation of the plan will support progress towards equitable vaccine access. Furthermore, delivery of the plan places an emphasis on community engagement and co-productive approaches,

thereby supporting 'cohesive communities' with the 'facilities needed' to drive vaccine uptake.

- 8.3. By addressing these barriers, the plan will increase coverage, lower the risk of VPDs and deliver broader public health benefits, including reduced morbidity and mortality.

9. **Financial Implications**

- 9.1. Implementation of this Strategic Action Plan is reliant on multiple funding streams including health protection expertise and resource from City and Hackney Public Health Team; NHS England funding to primary care and school age immunisation providers; and non-recurrent funding from NHS NEL ICB for the coordination of immunisation activities, campaigns, communications and community engagement work.
- 9.2. Non-recurrent funding is also sometimes made available from NHS England, typically to support local responses to specific VPD risks/threats. Often, as a consequence, deliverables tied to this funding therefore tend to be reactive. In summary, sustainable and sufficient recurrent funding would support more effective and proactive immunisation efforts.
- 9.3. While commissioning responsibilities are set to transfer to ICBs in 2026, there are still many unknowns regarding how devolved commissioning will operate at regional and local level, including specifics around budget allocations, resource requirements, and the structure needed to support local vaccination models. As a result, this plan remains a live and iterative action plan that will be continuously updated to reflect potential changes in the commissioning landscape, and to ensure that goals and deliverables are aligned with the latest funding and operational frameworks.

10. **Resource Implications**

- 10.1. Effective implementation of the plan will require the allocation of resources (e.g. for vaccine outreach etc). The resource implications are however closely tied to the financial considerations outlined.

11. **Legal Implications**

- 11.1. There are no negative legal implications associated with the plan itself. However, under the Health and Social Care Act (2012) and other relevant legislation, Directors of Public Health and local authorities have a duty to safeguard the population from risks to health. Implementation of the plan aligns with these legal responsibilities.

12. **Risk Implications**

12.1. Proxy coverage for the City of London exceeds the London average but remains below the 95% herd immunity target. This risks localised transmission and outbreaks of vaccine preventable diseases, with potential impacts on individual and population health outcomes.

13. **Equalities Implications**

13.1. The plan's core vision is to reduce health inequalities and remove barriers to vaccination uptake among underserved and disadvantaged groups.

14. **Climate Implications**

14.1. The plan has adopted a multi-pronged approach, placing an emphasis on co-produced solutions, community engagement and optimised service delivery.

14.2. Improved vaccination coverage also confers additional wider sector benefits and reduced resource demand (e.g. those arising from increased morbidity due to preventable disease incidence).

14.3. However, sustainability may be impacted by risks such as non-recurrent funding or funding tied to specific campaigns, resulting in more reactive, rather than strategic and targeted efforts.

15. **Security Implications**

15.1. There are no security implications associated with implementation of this plan.

16. **Conclusion**

16.1. The plan presents a critical opportunity to reduce poor health outcomes associated with sub-optimal vaccination coverage in City and Hackney. However, risks related to financial and strategic planning, as well as limited access to disaggregated data, pose challenges to effective implementation. We welcome contributions from the Board to optimise the plan's deliverables, and address its risks as well as implementation challenges.

17. **Appendices**

Appendix 1:

[City and Hackney Immunisations Strategic Action Plan 2024-2027](#)

Appendix 2:

[Data and Evidence Review](#)

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