



Public Health
England

Protecting and improving the nation's health

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Dear Chair

Public Accounts Committee – COVID-19: Planning for a vaccine (part 1)

Following the Public Accounts Committee's evidence session on Monday 11 January on COVID-19: Planning for the vaccine (part 1), I committed to write to you on the questions raised by Ms Olivia Blake on the support that is being put in place in regards to vaccinations for those with learning disabilities, specifically autism, as well as low literacy persons and those without an immigration status.

The Joint Committee on Vaccination and Immunisation (JCVI) advise that adults in a clinically extremely vulnerable group (for example, people with Down's syndrome) and adults over 16 years with severe and profound learning disabilities should be prioritised for vaccine in the first phase of the programme (priority groups 4 and 6, respectively).

To support delivery of the COVID-19 vaccination programme, Public Health England (PHE) has developed a wide range of COVID-19 resources for the public. These resources incorporate learning and evidence from behavioural science, attitudinal surveys and previous flu programmes. This includes resources for those with a learning disability (including invitation letters, posters, information leaflets and videos). These have been developed in collaboration with NHS England and Improvement (NHSEI) and those with lived experience.

PHE has published the first of three Easy Read guides: [COVID-19 vaccination - a guide for people with a learning disability and their carers leaflet](https://www.gov.uk/government/publications/covid-19-vaccination-easy-read-resources). This is available here: <https://www.gov.uk/government/publications/covid-19-vaccination-easy-read-resources>

COVID-19 leaflets are also available in English, Turkish and Polish, and a further 17 languages (Arabic, Albanian, Chinese, Bengali, French, Farsi, Kurdish, Gujarati, Hindi, Panjabi, Nepalese, Romanian, Tagalog, Spanish, Somali, Ukrainian and Urdu) will be published shortly here: <https://www.gov.uk/government/collections/covid-19-vaccination-programme#leaflets-and-posters>. Simple accessible short audio versions of the guidance in the same languages have also been produced.

PHE also chairs a newly established inequalities and COVID-19 immunisation stakeholders' group which has Department of Health and Social Care (DHSC) and NHS England and Improvement (NHSE/I) participation. This serves as a forum for discussion and exchange about optimising implementation and monitoring of the COVID-19 vaccination programme in socially excluded groups. PHE and DHSC leads can support their stakeholders and populations in achieving higher vaccine uptake.

PHE is also monitoring the uptake of COVID-19 vaccine in care homes for people with a learning disability and advising on policy in other settings such as supported living and day centres.

Additionally, PHE is scoping datasets that can be used to better characterise inequalities in COVID-19 vaccination by data linkage, particularly in groups where there is currently an evidence gap. This will be informed by contributions from stakeholder networks. For example, by collaboration with OpenSAFELY (a new secure analytics platform for electronic health records in the NHS which has been created to deliver urgent results during the response), to produce rapid statistics on vaccine coverage in clinical risk categories using fully linked primary care data (roughly 40% of the GP population). This dataset includes people with a learning disability such as Down's Syndrome. By monitoring uptake, actions can be targeted to reduce any gaps that are identified.

The national Screening and Immunisation Learning Disability network, made up of members from PHE and NHS England, also provides a mechanism to share good practice for improving access to screening and immunisation services and reducing inequalities. This includes sharing information and examples in relation to supporting access to COVID-19 vaccination.

At a local and regional level, PHE provides system leadership for immunisation working closely with Directors of Public Health (DsPH). This includes supporting collaboration between local authorities, NHS and other key partners to ensure equitable delivery of programmes and also provide assurance to DsPH via COVID-19 Health Protection and regional Test, Trace, Contain and Enable Boards, which have been established to provide multi-agency regional oversight of and collaboration within the COVID19 response.

An example of the local work ongoing to support people with a learning disability is from the South West Screening and Immunisation Team (SW SIT). SW SIT, Kernow Clinical Commissioning Group (CCG) and local authorities have been engaging with advocacy groups and individuals with a learning disability to understand their barriers and concerns in relation to accessing the vaccine and in identifying information needs for this group. Feedback received indicates that people with a learning disability need more practical information on how they will be called for a vaccination, what they need to do and what to expect at an appointment. This information can be found in their Easy Read invitation letter and the Easy Read leaflet that will accompany it. They should also be given an Easy read version of the What to expect after your COVID-19 vaccination which will be published shortly. SW SIT are continuing to engage at local level with these groups to ensure feedback and to enable any issues arising during the roll-out of the programme to be recognised and addressed promptly at national, regional and local level. PHE is constantly reviewing feedback through this group.

An example of action taken on feedback from recent engagement events is that South West CCGs and local authorities' communications leads are working with PHE, local partners and individuals with a learning disability to produce a short video that can be distributed to general practitioner practices, support groups and individuals via social media to help them prepare for their vaccination appointments. This further builds on successful work undertaken on supporting people with a learning disability access flu, cervical and breast screening appointments.

SW SIT has also worked with the Hidden Disabilities charity in the planning of their delivery models to ensure that the needs of people with all disabilities including learning disabilities and autism are fully considered in their design, for example, building in quieter areas with additional privacy where more time can be taken to address individual needs.

Regarding people with unknown immigrant status, PHE's migrant health guide has clarified that overseas visitors to England, including anyone living in the UK without permission, are eligible and will not be charged for COVID-19 testing, treatment and vaccination. The guide is available to view here: <https://www.gov.uk/guidance/nhs-entitlements-migrant-health-guide>

I hope that this update is helpful to the Committee.

With best wishes

Yours sincerely

A handwritten signature in black ink that reads "Michael Brodie". The script is cursive and fluid, with the first name and last name clearly distinguishable.

Michael Brodie
Interim Chief Executive
Public Health England