Places

- 2.15 Our top priority is to offer a COVID-19 vaccine to everyone in JCVI cohorts 1-4 by 15 February. The network of vaccination sites has been designed to fit the expected vaccine supply and ensure safe and easy access for the whole population.
- 2.16 There are three types of vaccination site:
 - Vaccination centres, using large-scale venues, such as football stadiums and accessed by a national booking service;
 - Hospital hubs, using NHS Trusts across the country; and
 - Local vaccination services, made up of sites led by general practice teams working together in already established primary care networks and pharmacy teams through community pharmacies
- 2.17 This mix will allow people in different age groups, communities and households to get a vaccine in a way that suits them and their needs.
- 2.18 The growing network of vaccination sites will rapidly expand in the days and weeks ahead. Currently, 96% of the population in England is within 10 miles of a vaccine service. By the end of January, everyone will live within 10 miles of a vaccination centre. In a small number of highly rural areas, the vaccination centre will be a mobile unit.
- 2.19 In England, by the end of January, our capacity to vaccinate several hundred thousand a day, and at least 2 million people per week will be achieved by establishing:
 - 206 active hospital hub sites
 - Around 1,200 local vaccination service sites (including primary care networks, community pharmacy sites, and including the ability to travel to those who cannot come to a centre)
 - 50 vaccination centres
- 2.20 The scale of this challenge is enormous, equivalent to establishing a national supermarket business in less than a month. All parts of the healthcare system will be mobilised so that we can vaccinate the highest risk individuals as rapidly as possible. The network will continue to expand and evolve as we progress the

5. Places

- 5.1 Each of the UK nations has plans to scale up vaccine delivery and the following sections of this plan set out the deployment plans of the NHS in England. While exact models will differ slightly from region to region, all four nations' plans involve a mixture of delivery models which include mobile teams to visit care homes, large sites at hospitals, and primary care-based delivery.
- The COVID-19 vaccination is the biggest vaccination programme in NHS history. As of 7 January, the UK had vaccinated more people than the rest of Europe combined, and the arrival of the UK's own Oxford/Astra Zeneca accelerated the pace of vaccination. By 15 February, we will have offered the first vaccine dose to everyone in the top four priority groups identified by the JCVI. That means offering the vaccine to all residents in a care home for older adults and their carers, everyone over the age of 70, all frontline health and social care workers, and everyone who is clinically extremely vulnerable.
- 5.3 The comprehensive planning considerations to date have included the size and make-up of the workforce, training requirements, guidance, consumables and other equipment, as well as the supporting infrastructure required, including warehousing, transport, logistics and 'clinic' storage. These plans build on the NHS's tried and tested approach for delivering vaccinations across the country, including the annual influenza vaccine where we have this year already reached over 80% of over 65s. Our plans factor in:
 - Who should offer a vaccination
 - Geographical variation and diverse communities
 - Access to public and private transport
 - Ensuring NHS services are safe and accessible for people throughout the busy winter period

Safe, convenient and equitable access

5.4 The number of vaccination sites across the country will match expected vaccine supply. The capacity and mix of sites must also ensure safe, convenient and equitable access to vaccination in the order of JCVI cohort prioritisation. This requires the right clinical protocols, invitation and booking systems and clear public communication.

- 50 vaccination centres
- 5.12 We are grateful for the offers from businesses up and down the country, including supermarkets and sporting arenas, to use their venues as vaccination centres. We have been working since the early summer to identify partners and work with those whose facilities have been identified as being suitable to provide support of the vaccine programme. At the moment the rate limiting factor is not the number of vaccination locations, but we are ensuring that all offers are thoroughly considered, alongside local leaders, to understand potential partnerships that build on the existing network. We will also consider whether offers would be better suited for other areas of the response to COVID-19. To streamline this process, offers should be sent to vtf.support.offers@beis.gov.uk
- 5.13 Many partnerships are already in place. For example, Lord's Cricket Ground recently opened as a local vaccination service and sites are also being used as large vaccination centres. One large vaccination centre will open in each of the 7 NHS regions this week with many more expected to be up and running by the end of January. The centres offer a convenient alternative to GP and hospital services and can each deliver thousands of vaccinations every week.
- 5.14 The first seven sites are:
 - Ashton Gate in Bristol (South West)
 - Epsom racecourse in Surrey (South East)
 - Excel Centre in London (London)
 - The Centre for Life (North East and Yorkshire)
 - Etihad Tennis Club in Manchester (North West)
 - Robertson House in Stevenage (East of England)
 - Millennium Point in Birmingham (Midlands)
- 5.15 The initial sites were chosen from those ready to vaccinate large numbers of people quickly to give a geographical spread covering as many people as possible. As the map below shows, currently, 96% of the population in England is within 10 miles of a vaccine service. By the end of January, everyone will live within 10 miles of a vaccination centre. In a small number of highly rural areas, the vaccination centre will be a mobile unit. Vaccine coverage will be reviewed and increased with support from our military advisors who compare provision against

key data such as population density. The mobile model (where "roving" vaccination teams bring the vaccine directly to individuals) which is being used to support the vaccination of care home residents and workers could be extended to more groups in time such as those experiencing homelessness, those escaping abuse in refuges, or communities with lower vaccination rates. Mobile models will also take the vaccine to those in the detained estate. The mobile model will also help more remote rural communities, particularly those at risk of isolation where public transport is limited.

Drawing on local authorities' knowledge of their communities

5.29 Local authorities, working with local NHS colleagues, know their communities best and will play a key role in supporting this, through the expertise of Directors of Public Health and their teams and their wider skills to address diversity and community development. We are committed to ensuring that local authorities and Directors of Public Health have the data they need to understand uptake in their local areas and tailor efforts to reach those who have not yet taken up the vaccine. Local authorities have already been researching the impact of COVID-19 within their communities and we will work closely with them to provide the information they need about COVID-19 vaccines and the vaccine programme to engage actively with communities in the way they feel will work most effectively.

Local authorities leading the way

A number of local authorities are already proactively working in this area, with Hertfordshire County Council leading significant research in this area, published in December 2020 and sharing more widely within the sector. This focuses on three Cs:

- Finding ways to reduce complacency regarding the risks of COVID-19
- Building confidence in the safety and effectiveness of the vaccine; and
- Increasing the convenience of being vaccinated

The national programme is supporting the sharing of this approach and other best practice examples emerging with further webinars hosted to the Local Government Association planned in 2021 for communications and behavioural insight and research teams.

MHCLG is funding the Community Champions Programme which will work with up to 65 local authorities across England to boost work to reach out to ethnic minority and disabled communities. This will include intensive engagement by community voices around vaccinations – learning and other resources from local activity will be shared to a wider audience.

5.30 Meaningful community engagement is also being led by local Integrated Care Systems (ICSs) across the country. For example, Devon ICS are working with national advocacy organisation Friend, Families & Travellers to produce a best practice guide to engaging with the traveller community which will include community informed communications and be shared across the country. Building on lessons learnt, Bristol, North Somerset and South Gloucestershire ICS are