### What we did

Public Health Scotland conducted a national health inequalities impact assessment (HIIA) to support flu vaccine and COVID-19 vaccine programme delivery.

The HIIA is a tool that can be used to assess the impact of policy or practice on people. It goes beyond an equality impact assessment by assessing broader impacts, including on health inequalities, protected characteristics, socioeconomic factors and human rights. HIIAs allow consideration of the potential differential impacts of policies and practices, and enables measures to be identified to reduce and mitigate the negative impacts and identify relevant protective measures.

During 2020/21, a wide range of stakeholders were invited to consider the potential impacts of the flu vaccine and COVID-19 vaccine programme delivery on confirmed eligible groups for the national flu and COVID-19 vaccination programmes, using the HIIA approach. They were also asked to consider the potential impacts on the proposed eligible groups for a potential COVID-19 booster vaccine programme.

In July 2021, the Public Health Scotland Vaccine Confidence and Equity team developed and issued an online HIIA survey to stakeholder and partner organisations. The high-level findings from the survey were then presented at a national HIIA consultation and engagement meeting held in August 2021. The event was attended by individuals representing 18 voluntary sector organisations, local NHS Health Boards, Deep End GP practice network and national organisations, including Scottish Government, National Services Scotland and NHS Education for Scotland. This report includes the recommendations from both the online survey and the national meeting. It also includes and builds on recommendations from consultation and engagement work held in 2020 and follows discussion and agreement with senior leaders.

# **Key findings**

There have been many positive examples of inclusive planning and practice within the vaccination programme in Scotland. However, there is still more to do to ensure an inclusive approach is embedded throughout the vaccination programme. The HIIA has highlighted a number of key areas that can be built on to achieve this.

## Communications/marketing

- Develop national messages to clarify who is eligible, and when and where people can get the vaccine – local communications should complement this.
- Emphasise the importance of getting vaccinated and what vaccines are offered.
- Develop national messages in other languages and formats to support those whose first language is not English – target this locally with communities.
- Clarify how people can make/reschedule appointments, or get vaccinated if they have no fixed address or CHI number.

#### Informed consent

- Develop a suite of accessible information to support informed consent (pre and post vaccination).
- Tailor information to address key issues of concern to different communities (e.g. vaccine safety or effectiveness).
- Promote information available in different languages and formats.
- Ensure wide dissemination via vaccination clinics, NHS inform, free phone lines (with an interpretation option) and a strong social media presence.

### Invitations to appointments

 Ensure people receive an invitation in an appropriate language or format (e.g. letter, phone call, email or SMS text message).

- Develop digital and phone line options to register, book or reschedule appointments.
- Build in appointment reminders to encourage attendance.
- Provide options to attend as part of a household or support network.
- Ensure there are appropriate data information systems (collect communication/language preferences and support required to enable access to an appointment), including triggers to identify people newly eligible for vaccines.

#### Vaccination services/clinics

- Use local community venues with appropriate communication support and facilities (e.g. interpretation facility, vaccine information in a range of languages and formats appropriate to community, all venues should be wheelchair accessible with rigid seating available, good lighting and transport links).
- Hold outreach clinics or offer drop-in options for populations that would benefit, for example, in areas of high deprivation, at homeless shelters, Gypsy/Traveller sites, and deliver these at the same time as mainstream offering (not as mop up).
- Provide opportunistic vaccination for those 'not known' or recorded on healthcare system – link with relevant third sector or community groups.
- Staff venue entrances to support those with additional support needs (e.g. older people, those with dementia, autism or who have limited mobility).

is required, and state the person should select the gender that matches their health record. Call handler training should include awareness of gender reassignment in relation to vaccination, so they can appropriately support callers.

 Ensure the booking system adheres to confidentiality and information governance for all service users.

## Provide sufficient information or signposting about how to get the vaccine for the following groups

- People with underlying health conditions (e.g. they can speak to their consultant/GP to address how potential side effects might impact or not on their condition).
- Health and social care workers.
- Independent NHS contractors.
- Refugees and asylum seekers.

## Examples of work undertaken during spring/summer 2021

- Gathering feedback from lived experience is a key element of service improvement. Discussions with the Royal National Institute of Blind People (RNIB) Scotland provided useful insight into the invitation process and the layout of the letter. Public Health Scotland worked to amend the letter, so its accessibility was improved. This included increasing the font size, reducing the amount of bold text and removing grey textboxes.
- During 2021, vaccination appointments have been held at a range of venues across Scotland remote, rural and urban. Some Health Boards have provided travel vouchers with appointment letters to remove any financial barrier for people to attend their vaccination appointment. Other Health Boards have offered community transport to help people get to clinics this option was highlighted in the national appointment invitation letters.