

# Vaccine outreach for people experiencing homelessness



## Overview

**Reference:** 39

**Location:** Brighton

**Target Group:** Homeless

**Initiative type:** Vaccine outreach

## Contact

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## Top Tip

*Understand your demographic: what they need, why they are hesitant, and what barriers they face.*

## Why is this important to us?

We are the main provider of primary care for people experiencing homelessness in Brighton. Many people experiencing homelessness have underlying health conditions and may live in accommodation where it is difficult to social distance. They may struggle to access mass vaccination centres, due to lack of a phone to book an appointment, distance, or embarrassment. From previous flu vaccination campaigns, we knew that uptake by people experiencing homelessness would likely be lower; there can be false beliefs around vaccinations, as well as mistrust of health professionals due to experiencing prejudice and exclusion in the past.

## What are we doing?

We decided to use an assertive vaccination model; rather than inviting patients to our surgery or mass vaccination sites, we would go out to accommodation. We used a St John Ambulance vehicle to ensure that we had a stable clinical environment to prepare and administer the vaccine in, however in some cases we were able to use accommodation dining rooms. We spoke to the council to determine where we should provide vaccinations according to how many people were housed in each type of accommodation. If the accommodation was supported, we contacted them ahead of time to enable staff there to promote the vaccine to their residents and assist with filling in forms. Several people we vaccinated also registered with a GP with our assistance, and they will more easily be able to access their second dose.

## Who is involved?

We have collaborated with hostel staff, JustLife health engagement workers, St John Ambulance, the local council, Public Health teams, and the CCG. Four staff went to each accommodation; a driver, one person to draw up the vaccine, one person to give the vaccine, and a health engagement worker.

## What works for us?

The uptake has been very good so far. We found uptake was lower in the unsupported accommodation. This was largely due to difficulty gaining building access, people not being there due to lower promotion prior to our arrival, having already had the vaccine, and lower trust of us. Factors that contributed to the initiative's success include our previous experience of working together, as well as our insight into what would work for our community. A challenge we foresee is finding all the people we gave the first dose to, as people can move around a lot.

**We have vaccinated over 800 people in eight weeks, with around 38 people vaccinated per day in the community.** By mid-April, we will go out again to give second doses.