

# Frimley CCG – addressing fertility concerns in women



## Overview

**Reference:** 47

**Location:** Slough

**Target Group:** Care home staff

**Initiative type:** Information

## Contact

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## Top Tip

*Go to the community – don't expect others to come to you, especially if you are trying to engender confidence.*

## Why is this important to us?

In early December we went out to our communities to talk to them about the vaccine. Some were very sceptical and didn't want the vaccine, often due to a lack of trust in authority. We also heard a whole range of concerns from our women around fertility, pregnancy and breastfeeding. We did some specific women only groups around understanding their hesitations and how we can work with them. There was a COVID-19 outbreak at a large local authority care home where there was low uptake among care staff. We learnt that women working in care homes were hesitant due to concerns around fertility.

## What are we doing?

We tried inviting the care home staff to go to vaccination centres again but they were resisting, so we took the vaccine to them. We had GPs going into the care home regularly to manage the outbreak so they would opportunistically offer the vaccine and talk through any questions and concerns among staff. We've also gone out and talked to different communities in their own spaces. We held a session for the Pakistani women and one for African Caribbean women. A clinician attended these sessions and spoke about the vaccine. This covered how it is produced but particularly focused around the cultural impact of the vaccine on women.

## Who is involved?

We've built a range of partnerships with community leaders, faith leaders and the voluntary sector to bring forward different voices. We've spoken to our local councillors and encouraged them to talk to their constituents to encourage uptake through the community. The GP staff and community pharmacists are critical to making this a success for us. Many of our clinicians are woven into the community and have built trust.

## What works for us?

Top-down initiatives have not worked. We have focused on relationship building, collaboration, and listening. Reaching out to respected role models in the community such as clinical and community leaders with influence. **The GP managed to vaccinate over 20 staff in one session just by talking to them.** It helped that the GP was representative of the community she was serving. She was a female who spoke the same language and understood concerns from a cultural perspective as well as from a clinical perspective. This was particularly useful as some of the women were experiencing pressure at home to not have the vaccine. This success was promoted to other care homes. **We have now been to eight care homes and vaccinated about 100 care home staff at their workplace alongside residents.**