Dr Onkar Sahota AM Chair of the London Assembly Health Committee C/o lauren.harvey@london.gov.uk Our ref: MGLA271120-0932

Date: 8 January 2021

Dear Onkar,

Thank you for your letter of 26 November 2020 highlighting the findings from the Health Committee's investigation into London's preparedness for COVID-19 vaccine rollout.

Vaccination offers us hope, but I agree with you that this will be an immense logistical challenge. On 23 November, Dr Fiona Twycross, Deputy Mayor for Fire and Resilience, wrote to Sir David Sloman, Regional Director for NHS London, offering our support with vaccination mobilisation. The Greater London Authority has longstanding communications and engagement experience and we have offered all mayoral communications channels and networks to ensure that vaccination rollout does not inadvertently widen health inequalities. In addition to the priority groups recommended by the JCVI, it is critical that vaccine uptake is high amongst the populations in London that have been disproportionately impacted by this pandemic. I recently wrote to the Secretary of State for Health welcoming the prioritisation of care home residents and staff, older people, health and care workers, and those with underlying health issues, while also stressing the importance of ensuring that frontline workers and the needs of groups disproportionately impacted by the first wave are appropriately considered. This includes marginalised groups, BAME communities, disabled people and those living in areas of deprivation.

Thank you for the work the committee has undertaken on this issue and your recommendations for increasing the success of the vaccination programme. I would like to address each recommendation in turn.

Recommendation 1:

The Mayor should work with NHS England and the government on a campaign that:

- Debunks myths around vaccines and vaccinations;
- Reassures people of the safety of the vaccine; and

• Promotes the uptake of vaccines to all age groups, but specifically targets those who the government has said will be getting the vaccine first.

The campaign should specifically address concerns around speed of development, and utilise role modelling. The Mayor should report back to the Committee on his plans for taking this forward.

I agree that a campaign that addresses vaccine hesitancy and promotes the uptake of the vaccine to at risk groups will be vital to ensuring its success. The Department of Health is leading a national campaign to support the NHS in their rollout of the vaccine, and we will be working closely with partners to build our London campaign and ensure that effective messages and information reach

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our diverse communities. We will be working closely with these partners across London, including NHS London and Public Health England (PHE), to ensure we take the opportunity to feed into central plans with London level knowledge and expertise, and that we tailor messages to resonate with Londoners. I will be using my channels to tackle both misinformation and disinformation; sharing positive messages about vaccination and its safety and debunking myths. We will be working with partners to identify message carriers and role models that can communicate key information to Londoners who will be included in the early rollout and those that we know are the most hesitant. Communications have started including social media content on the history and importance of vaccines. Although we know younger Londoners will be later in line for the vaccine, beyond those whose health or job makes them eligible, we have initiated communications now. We are encouraging them to be advocates for vaccination within their families and ensuring they know where to go for trusted and accurate information. I will also be hosting key information on the London.gov coronavirus hub.

In addition to our work on communications campaigns, it is vital that we work with and engage directly with communities and their representatives. My Communities team and health team continue to support regular PHE and NHS briefings to the faith and community networks and which included a vaccine focused additional briefing before the Christmas break. These briefings provide an opportunity to connect with hundreds of community leaders and include opportunities to ask questions and clarify facts. The teams are in regular contact with voluntary and community groups, hosting roundtables and information sessions, and collect a monthly London Community Response survey, which supports partners to understand changing concerns and ensure that communication is timely and relevant.

I agree that the campaign needs to specifically address the concerns some Londoners may have about the speed of this vaccine's development. As I am sure you are aware, the timelines for vaccine development are lengthened through things like funding applications, waiting for regulatory approval, and the recruitment of volunteers. Due to the impact of COVID-19 globally, an unprecedented amount of funding and energy has been directed to COVID-19 vaccine development. In addition, thousands of volunteers have put themselves forward to participate in clinical trials. We need to make clear to Londoners that safety has not been compromised, and that the Medicines and Healthcare products Regulatory Agency (MHRA) would not approve a vaccine that does not meet efficacy and safety levels. I look forward to working alongside you to share these important messages with Londoners as our campaigns develop.

Recommendation 2:

The Mayor should use his strategic role as Chair of the London Health Board, and his networks with London's healthcare organisations, to ensure that all frontline workers involved in delivering the vaccine are employing consistent messaging about vaccines during their engagement with patients.

I agree that consistent, clear and reassuring messaging from these groups is key. We know that frontline health and care workers are some of the most trusted and influential information carriers in our society. They are one of our greatest assets for vaccine communication and I will work closely with the NHS and our partners in the unions to amplify their voices.

Health and care workers, being one of the first groups to receive the vaccine, will also need targeted messaging to encourage them to take up the offer. This is vital to help protect them and the people they care about, as well as supporting them to be effective message carriers. I am devastated by the loss of life we have already seen in this group, and we all owe these workers a debt of gratitude. We know that there is scope to improve the uptake of existing vaccines, like flu,

within the health and care workforce. It is vital that they have the information they need to make the right choices to protect themselves and their patients. I stand ready to support the NHS and local authorities, where I can, in their messaging to staff, as we build on and create new campaigns together. I will continue to work with the NHS, as part of our relationship on the London Health Board, and beyond; in the many forums where we come together to tackle the pandemic and to support the health of Londoners.

Recommendations 3:

The Mayor should work, through the health equity group, with local authorities to identify areas of London that would benefit from local outreach activities and/or campaign activities, and ensure that no areas are excluded from access to vaccines. The Mayor should also share learnings from the pan-London campaign with local authorities to assist in their outreach activities

Early in this pandemic, it was clear that certain populations and communities were being disproportionately impacted by this virus. There have now been numerous studies and reports published that have revealed the detail behind these inequities and their determinants. It is critical that we learn from the early impacts of the pandemic and ensure that populations at higher risk are protected and prioritised for vaccination. As mentioned, I have written to the Secretary of State for Health about this issue.

There are likely to be significant differences in attitude to vaccines among different groups. There is a growing pool of insight, including your committee's own investigations, that indicate BAME Londoners are much more hesitant to take up the vaccine compared to White British Londoners. Given the disproportionate impact of this virus on BAME communities, it is critical that we use our resources to support increased outreach to communities at higher risk, ensuring equity in vaccine uptake. It is important that we build on the learnings from the first wave of the pandemic: considerations of the needs of these groups and the barrier they face must therefore be placed front and centre when developing the NHS implementation plans in London, ensuring culturally relevant communications and engagement.

Evidence from the flu vaccine programme illustrates that uptake of vaccinations can be low amongst those who are already marginalised within our society, such as those who are asylum seekers and refugees, homeless, gypsies and travellers and sex workers. It is crucial that planning for vaccine distribution and communications includes dedicated consideration of how to effectively reach these groups. It is not sufficient to assume their needs will be reflected in plans to roll the vaccine out across the wider population; additional outreach and dedicated targeting of these populations will be needed. Many people from marginalised groups are not registered with a GP so lack of an NHS number must not prove a barrier to receiving the vaccine. NHS England will need to deal with this as an inclusion health issue, and we will work to support them in all ways that we can.

I am committed to working with partners, as we seek to tackle the vital issue of ensuring equity in vaccine update. We have a strong track record of working as a pan-London partnership on issues like this, including the work of the Keep London Safe campaign that I was pleased my teams continue to support. London can also be proud of the way it has used Find and Treat to take testing to our vulnerable homeless populations. There is rich learning, cooperation and experience that we can draw on as we plan the support for the vaccine rollout. I remain committed to working closely with local authorities, who understand their communities so well. My team are working closely with partners to establish the right structures to enable and support these vital conversations, and to bring together the talent and insight from agencies across London. Please rest assured that these concerns about equity are of the highest priority.

I hope you found my response helpful, and I look forward to working alongside you and the committee on these important issues going forward.

Yours sincerely,

Jachellen

Sadiq Khan Mayor of London