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**Subject:** Vaccination Priority Group Report – COVID-19 Spring Booster 2024  
**Date:** 4<sup>th</sup> July 2024

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This report provides details on COVID-19 vaccinations for the 2024 spring season. It presents data and statistics for the current programmes for the eligible groups of Islanders. For data on historic vaccination programmes, please look at previous public health reports found here: [Public Health reports \(gov.je\)](https://gov.je/public-health-reports)

## Key Findings

As at 4<sup>th</sup> July 2024:

- 3,760 spring 2024 COVID-19 boosters have been administered, with 35% of those aged over 75 years having received a Spring booster dose
- an estimated 68% of care home residents have received the 2024 COVID-19 spring booster dose
- an estimated 24% of immunosuppressed individuals have received the 2024 COVID-19 spring booster dose

## COVID-19

### Background

The roll-out of the COVID-19 vaccine in Jersey is aligned to the vaccination programme roll-out in the UK following the advice of the Joint Committee on Vaccination and Immunisation (JCVI<sup>1</sup>). The local vaccine programme has followed the JCVI advised priority groups to prioritise when individuals in our population are able to access a vaccination.

This document sets out coverage of the **2024 Spring Booster COVID-19 vaccine programme** that commenced on 15 April 2024. The report includes the context and challenges of reporting by priority group in Jersey.

The eligibility for the Spring Booster 2024 is as follows:

- all adults aged 75 years and over
- residents in care home for older adults
- persons aged over 6 months who have a weakened immune system (immunosuppressed)

Full details on eligibility criteria can be found at [COVID-19 Spring Booster](#).

Population denominator figures from 2022<sup>2</sup> have been used to calculate vaccine coverage, and reporting has been brought in line with NHS England by removing deceased individuals from coverage estimates. For details on historic COVID-19 vaccinations (e.g. First and second dose coverage and so on) please see historic [Public Health reports \(gov.je\)](https://gov.je/public-health-reports).

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<sup>1</sup> [Greenbook COVID-19](#)

<sup>2</sup> [Population estimates \(gov.je\)](#)

## COVID-19 Spring Booster: Vaccine delivery

The Spring 2024 Booster vaccination programme has been delivered in two ways:

- Through appointments with GP surgeries
- Through visits to residential care homes

**Total COVID-19 Spring 2024 Booster vaccinations up to 4<sup>th</sup> July 2024:**

<b>Total COVID-19 Vaccinations: Spring 2024 Booster</b>	<b>3,760</b>
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## COVID-19 Spring Booster: Coverage estimates by priority groups

Table 1 shows the estimated coverage of each priority group, along with an assessment of the data quality. Each group contains all individuals who are eligible under that population group, therefore the cumulative number of doses may be higher than the total number of doses administered, as individuals may be eligible under more than one priority group.

Data Quality in the table has been colour coded using the following criteria:

**Red** when the estimate is based on data that is deemed to be of poor or questionable data quality

**Amber** for data of moderate quality, with only a small amount of the data being of questionable quality

**Green** when the data quality of the estimate is good

**Table 1. Estimate of coverage of the COVID-19 Spring Booster 2024, by priority group, with data quality assessment, as at 4<sup>th</sup> July 2024**

Priority group/tier	Cohort Size	Spring Booster 2024		Data Quality Assessment
		Doses	%	
Care home residents for older adults <sup>4</sup>	1,016 <sup>°</sup>	695	68%	Amber
Aged 80 years or over	5,450*	2,055	38%	Green
Aged 75 to 79 years	3,910*	1,261	32%	Green
Aged 75 years or over	9,360*	3,316	35%	Green
Immunosuppressed	2,233 <sup>+</sup>	530	24%	Red

<sup>4</sup>This may include younger adults living in care home

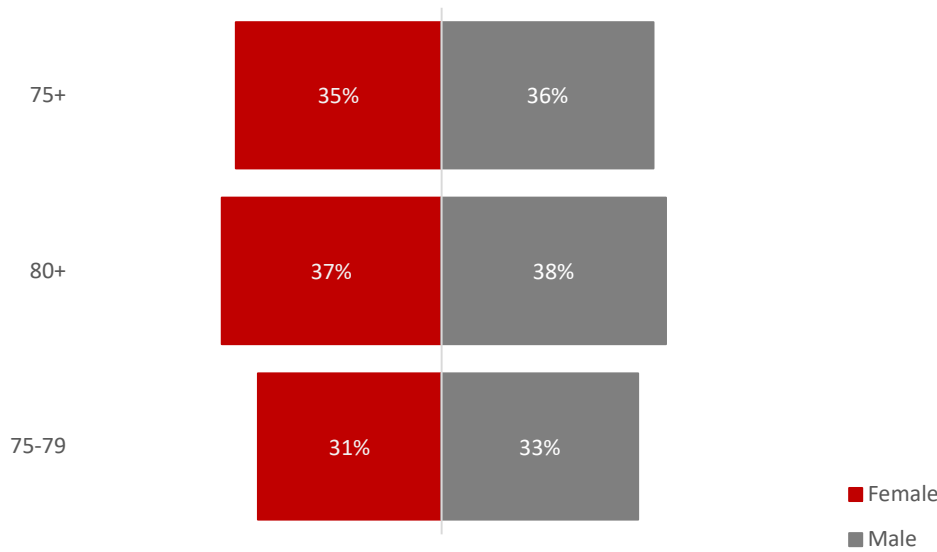
<sup>°</sup>Unstable population (movements in and out of homes)

\*Based on 2022 Population Estimates

<sup>+</sup>collective information held in multiple systems not centralised with potential for double count and transient priority group

Figure 1 provides information about the uptake of vaccination by gender and age group. Note that for those aged under 75, only a small cohort are eligible (for example those who are immunosuppressed, or those living in a care home) to receive a Spring Booster 2024.

**Figure 1. Uptake of COVID-19 Spring Booster 2024 by gender and age**



All the COVID-19 Spring Booster 2024 vaccinations have been Comirnaty Omicron.

## Data quality issues

In order to provide metrics on the proportions of each priority group that have received a vaccine, an understanding of the data quality issues surrounding the population data being used to generate estimates and the actions being taken to remediate these is required. Table 4 sets out these issues.

**Table 4. Issues that have been found within the data being entered when an individual has their vaccine**

Issue	Actions being taken to address issue
<b>Missing care home information, or information about residents in care homes not provided by all homes</b>	Cross-matching to lists provided by care homes (if available). Vaccination team requesting and collating further information about numbers of care home residents
<b>Wrong priority group/tier is allocated</b>	If possible, this is corrected based on dates and other available information. When people return for further doses, missing information will be collected
<b>Imperfect matching from deaths register</b>	Where possible, registered deaths are recorded against vaccine records to ensure deceased individuals are not included in coverage estimates for a given group, but due to data quality issues in either the EMIS vaccine data set or the deaths register a match is not guaranteed in every case.
<b>Care home populations are not stable due to movements in and out of these groups</b>	Population denominators will be reviewed and updated when appropriate
<b>Reciprocal health agreements mean all those on-Island who fall into eligible populations can access a vaccine, even if they don't appear in our population data</b>	As individuals who meet the eligibility criteria are able to receive a vaccine, this may impact on totals. This is assumed to be a small number for each priority group.
<b>Information about immunosuppressed Islanders not held in one information system centrally.</b>	Teams are working to identify individuals in this cohort, and provide targeted communications. Individuals identifying as being immunosuppressed are verified and coded as such when arriving for their vaccine.