

Rotherham Health Select Committee

September 2026

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Commissioning Landscape

Organisational Change:

- Transfer NHS England's direct commissioning functions to integrated care boards (ICBs) from April 2027 - subject to Parliament's approval of changes in primary and secondary legislation.
- Establish pan-ICB commissioning (OPICs) to support ICBs to efficiently and effectively commission these services, including commissioning 'at scale' where appropriate to improve patient outcomes
 - North East North Cumbria
 - Humber North Yorkshire
 - West Yorkshire
 - South Yorkshire
- Support the government's 10 Year Health Plan ambition to establish ICBs as strategic commissioners for all but the most specialised services.
- Working in shadow form, establishing governance arrangements and ways of working

OPIC Remit

- Vaccinations, child health information services (CHIS) and almost all components of screening services
- Health and justice services and sexual assault and abuse services, including sexual assault referral centres
- Specified specialised services, including all previously delegated services and a small number of additional services identified as suitable
- Specialised Mental Health services

For Vaccination and Screening:

- Section 7A vaccination services
- abdominal aortic aneurysm screening service
- breast screening services
- diabetic eye screening services
- bowel cancer screening hubs
- bowel cancer screening centres
- cervical screening HPV cytology laboratory services
- newborn bloodspot screening laboratory services
- CHIS

Local co-ordination of vaccine response to outbreaks is already the responsibility of ICBs and will remain so – supported by local OPIC team.



Vaccination Commissioning Intentions/Activity 2026/27

- Improve uptake and coverage
- Reduce inequalities (reduce the gap between highest and lowest performers)
- Section 7a public health programmes to support delivery of the 10-year plan through:
 - expanding community pharmacy vaccination provision to increase uptake of human papilloma virus (HPV) vaccination (supporting cervical cancer elimination by 2040),
 - rolling out the world's first vaccine for gonorrhoea,
 - lowering the faecal immunochemical test (FIT) threshold in bowel cancer screening,
 - introducing HPV self-testing for cervical screening and
 - using AI in screening pathways

Vaccination:

Pre-school immunisations (0–5 years)

- Improving the uptake of measles containing vaccinations will remain a priority for 2026/27
- Schedule changes from 1st January 2026 – varicella vaccine added as a combined measles, mumps, rubella and varicella (MMRV) vaccine replacing MMR (**MMR D1 Jan-March 2026 91.7%, 2025/26 92.4%**, NB no MMRV data available as children only turn 2 years of age in July 2026)
- MMRV selective vaccination for ≥ 6 years old from November 2026 – March 2028



Vaccination Commissioning Intentions/Activity 2026/27

School Aged Vaccinations

- Improving the uptake of all adolescent vaccines but with focus on HPV
- Roll out the 'Manage Vaccinations In Schools' (MAVIS) digital service across NHS regions to support SAIS vaccinations delivery
- Expansion of delivery to Community Pharmacies
- MenB one off, time limited offer (Y13 age group in 2025/26 academic year, young adults up to 25 years of age starting university or HEFRE for the first time) 20th July 2026-31st March 2027. **As of 28th August SY providers have delivered 4,856 doses of MenB** (unable to break down by sub ICB as pharmacies are not linked in such a way).
- **MenB routine adolescent programme – recommended by JCVI, awaiting ministerial decision.**

Adult Vaccinations

RSV:

- From 1 April 2026 expanded eligibility criteria to include those aged 80 years and over (with no upper age limit) and **ALL** residents in care homes for older adults, regardless of their age.
- From 1 September 2026, further expansion to include adults aged 65 to 74 years with chronic respiratory disease and/or immunosuppression due to disease or treatment



Vaccination Commissioning Intentions/Activity 2026/27

Seasonal and Selective Programmes:

- From 1st October expansion of seasonal flu vaccine offer to people experiencing homelessness (rough sleepers and those using hostels for the homeless or night shelters)
- From 1st October expansion of Pneumococcal vaccine offer to people experiencing homelessness (rough sleepers and those using hostels for the homeless or night shelters)
- Expanded offer of childhood flu vaccine by Community Pharmacy:
 - 1st October – 2- and 3-year-olds and children 2-17 years (inclusive) in at risk groups
 - 1st December – school aged children who missed vaccination as part of school aged immunisation provider offer (can also continue to access the SAIS provider)
- SAIS providers encouraged and able to vaccinate eligible children in nurseries and make an opportunistic offer of the flu vaccine to eligible younger siblings in community catch-up clinics.
- Meet national and ICB set ambitions (working to a three year trajectory) see next slide

See slides 7-9 for uptake



South Yorkshire Flu Vaccination Ambitions

AW26, AW27, AW28 Uptake Ambitions

By AW28 all ICBs will achieve the below.

Care Home Residents: 75%* | Age 65+: 75% | 2-3s: 50% | Primary School: 65% | Secondary School: 55% | Clinical risk group: 52% | Frontline Healthcare Workers: 65%

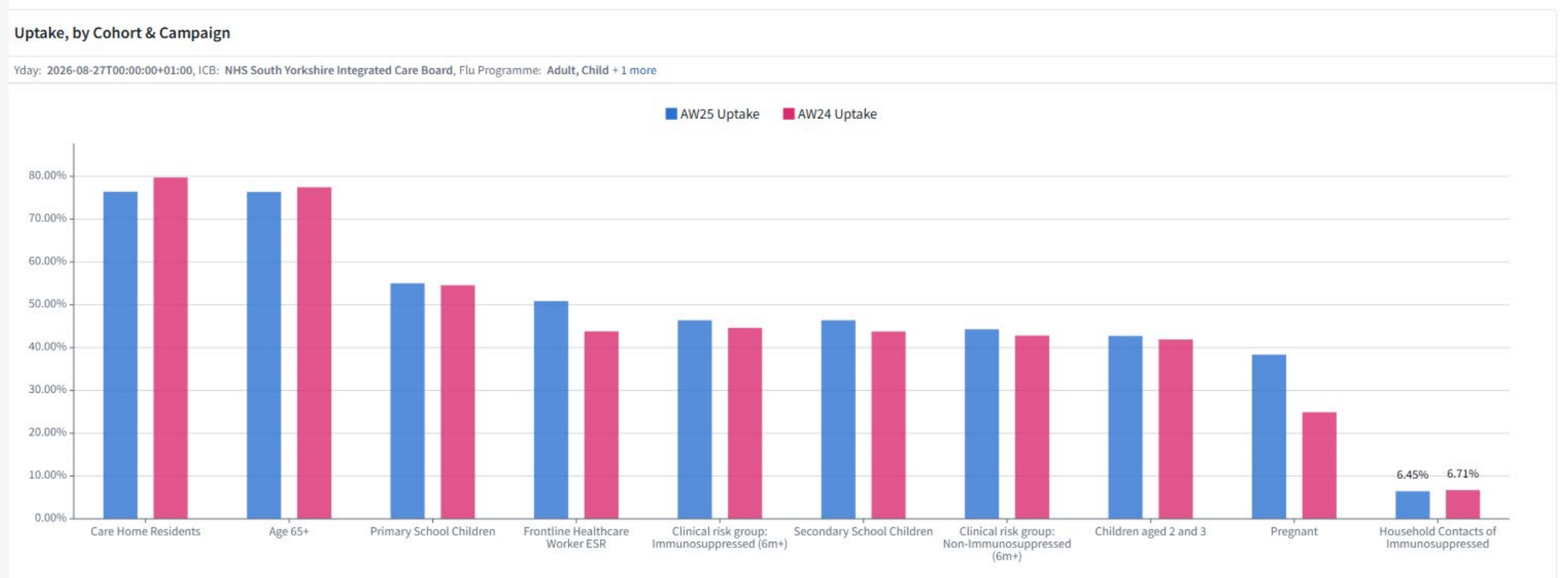
For all cohorts, the increase required is split equally across the 3 years (33.3%, 66.6%, 100%). FHCWs TBC.

ICBs above target are expected to maintain or improve uptake. Pregnant and Household Contacts of Immunosuppressed are expected to maintain AW25 uptake.

**Although not specified in the operational letter, the care home resident ambition in this reporting has been set at 75%, due to the similar demographic and uptake levels to the 65+ cohort.*

Region	ICB	Cohort	AW25 Uptake	AW26 Ambition	AW27 Ambition	AW28 Ambition
NORTH EAST AND YO...	NHS SOUTH YORKSHIR...	Age 65+	76.35%	76.35%	76.35%	76.35%
NORTH EAST AND YO...	NHS SOUTH YORKSHIR...	Care Home Resident	76.41%	76.41%	76.41%	76.41%
NORTH EAST AND YO...	NHS SOUTH YORKSHIR...	Children aged 2 and 3	42.73%	45.16%	47.58%	50.00%
NORTH EAST AND YO...	NHS SOUTH YORKSHIR...	Clinical risk group	44.51%	47.00%	49.50%	52.00%
NORTH EAST AND YO...	NHS SOUTH YORKSHIR...	Household Contact of I...	6.45%	6.45%	6.45%	6.45%
NORTH EAST AND YO...	NHS SOUTH YORKSHIR...	Pregnant	38.38%	38.38%	38.38%	38.38%
NORTH EAST AND YO...	NHS SOUTH YORKSHIR...	Primary School Children	55.03%	58.35%	61.68%	65.00%
NORTH EAST AND YO...	NHS SOUTH YORKSHIR...	Secondary School Chil...	46.37%	49.25%	52.12%	55.00%

2025/26 Flu Vaccination Performance (SY)



Overall increase of 1.48% on previous winter season

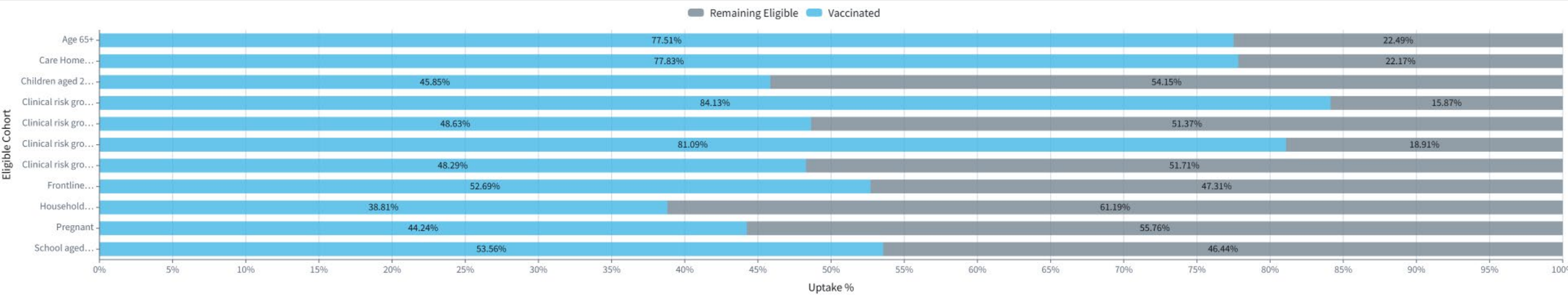
Rotherham Seasonal Flu Vaccination Uptake 2025/26



Percentage Absolute Cumulative Percentage Cumulative

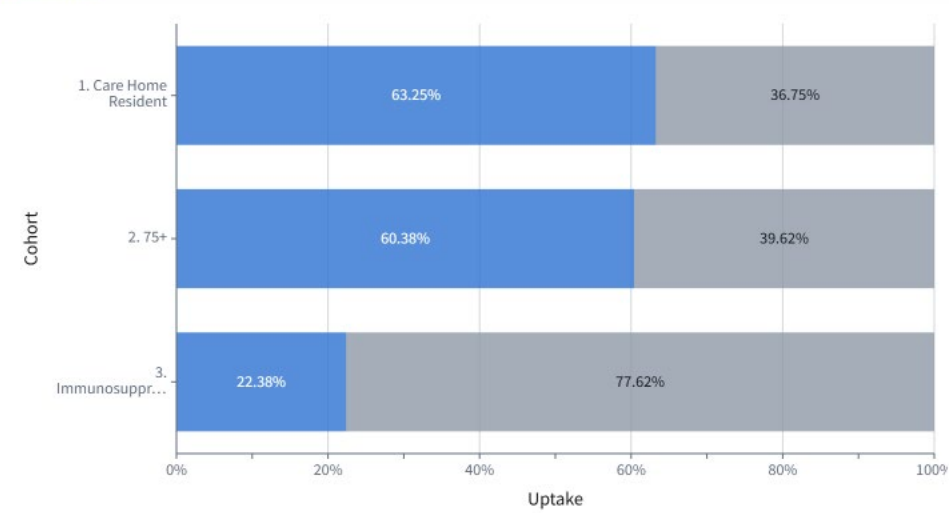
Uptake by Eligible Cohort - Percentage

Use paging ...



Uptake by cohort (individuals are counted in the highest priority cohort) - chart

3 parameters



Spring 2026 COVID
Vaccination Uptake –
Rotherham PCNS

Local Authority Role

Denise Cornwall

Health Protection Principal – Public Health

Local Authority Role

Community Outreach: The Council uses local knowledge to reach underserved or low-uptake neighbourhoods.

Trusted Messengers: We can partner with faith and community leaders to share tailored, multilingual information and address vaccine hesitancy.

Data and Multi-Agency Working: Our Public Health team work alongside the NHS to review local uptake data, identifying specific wards, schools or GPs that need targeted support.

Practical Support: Councils help arrange accessible local venues for pop-up vaccination sites and support community engagement campaigns.



Pathfinder childhood immunisation pilot

The **Pathfinder childhood immunisation pilot** is a **£2 million NHS England initiative** designed to boost routine vaccination rates among children aged 0 to 5 by utilising health visiting teams.

Rotherham was 1 of 12 areas in England chosen as a pilot site; it became operational in Quarter 1 and delivered the first vaccination in May, initially focusing on 1 GP.

The new pilot is supporting families who are not registered with a GP, as well as those facing barriers to accessing healthcare, such as travel costs, childcare responsibilities, language differences, vaccine hesitancy, or other circumstances that make it difficult to attend appointments.

By offering vaccinations during routine health visits, the pilot aims to reduce these barriers, build trust and confidence in immunisation, and help ensure that more children can access the vaccinations they need.



Pathfinder Update

Area	Q1 progress	Next development
Activity	13 referrals and 6 vaccinations delivered	Increase referral flow and monitor outcomes
Referral access	Health Visitor referrals opened across GP registrations	Embed awareness and test accessibility
Workforce	3 support workers, 3 Health Visitors and 1 staff nurse trained/signed off	Continue competency sign-off and confidence support
Clinical links	Initial community and primary-care routes established	Explore UECC and Children's Outpatients pathways
Expansion	Learning gathered from early operation	Consider an additional GP practice after summer