



# COVID-19 Vaccination Uptake in Ireland

## Weekly Report

### Spring Campaign 2024

Week ending Sunday 16<sup>th</sup> June 2024

Latest Summary Statistics Absolute Numbers of COVID-19 Spring 2024 Campaign Doses and Percentage Uptake of the Census 2022 Population between 01/03/2024 and 16/06/2024, midnight

Age Group	No. Booster Doses	Census 2022 Population	No. Booster doses as % Uptake Census 2022 Population
5-11yrs	46	491930	0.01
12-69yrs	18606	3823623	0.49
70-79yrs	49109	357144	13.75
80+yrs	77137	181027	42.61

# Spring 2024 COVID-19 Campaign Target Groups



- The COVID-19 Spring 2024 vaccination campaign officially began on 22/04/2024, but for the purposes of presenting a summary account of the uptake, the investigation period has been set at 01/03/2024.
- The administration of vaccine doses follows the guidelines set down by the National Immunisation Advisory Committee (NIAC), which are available here at [https://rcpi.access.preservica.com/uncategorized/IO\\_43750ce7-2657-44a3-9e2b-48d245f0fc4d/](https://rcpi.access.preservica.com/uncategorized/IO_43750ce7-2657-44a3-9e2b-48d245f0fc4d/).
- The primary target groups of the Spring COVID-19 2024 vaccine campaign include:
  - those aged 80 years and older;
  - those living in long term care facilities for older adults;
  - those aged 5 years and older with immunocompromise associated with a suboptimal response to vaccination and
  - those aged 70 to 79 years are not a primary target group, but this age cohort, following discussion with a health care provider (e.g., GP, pharmacist or vaccination centre) can request the vaccine.
- For pregnant women, a single primary vaccination dose is recommended. A booster dose is recommended all year and is not seasonal and can be given if it is more than six months since their previous dose or infection at any stage in pregnancy. The booster is ideally given between 20-34 weeks' gestation. If it is more than 12 months since their previous COVID-19 vaccine or infection administration earlier in pregnancy should be considered.
- For health care workers who were not previously vaccinated, a single primary dose is recommended. A booster dose is not recommended as part of the Spring COVID-19 2024 vaccine campaign unless immunocompromised.

# Vaccination status definitions and primary and booster courses completed

- Over the course of a campaign, the vaccination status of individuals can change. For COVID-19 vaccination, individuals must first complete their primary course treatment before being offered a booster dose. Currently, the inter dose period (since last vaccine dose or SARS-CoV-2 infection) is six months, although in exceptional circumstances a minimum interval of three months may be used. Furthermore, completion of a primary course requires receiving one or more primary doses depending in part on the immunocompromised status.
- In broad terms, there are two main vaccination courses: a primary course with primary doses and a booster course with booster doses. On the IIS COVID-19 dashboard, there features a third ‘additional’ course, where an additional dose is offered to those who are immunocompromised to complete their primary course treatment. For the purposes of reporting here , an additional dose is categorised as a primary dose.
- The number of individuals who have not yet completed their primary course treatment or who have, or who have completed a booster course is determined by a combination of factors: dose type (primary and booster), age and immunocompromised status at the time of vaccination administration. The colour coded Table A below illustrates how the total counts of primary and booster courses are calculated from the different combinations of dose types, age (6 months to 4 years or 5 years of age or older) and immunocompromised status details.
- Table A** How counts of completed primary and booster courses are calculated based on combination of dose type, age and immunocompromised status at time of last vaccination of individuals

Last Dose Course	Last Dose Classification/Type	6 months-4 years of age & Immunocompromised Status Not Differentiated	5+ years of age & Not Immunocompromised	5+ years of age & Immunocompromised
Primary Course	Primary Dose 1	Not Primary Course Completed	Primary Course Completed	Not Primary Course Completed
Primary Course	Primary Dose 2	Primary Course Completed	Primary Course Completed	Primary Course Completed
Primary Course	Primary Dose 3	Primary Course Completed	Primary Course Completed	Primary Course Completed
Primary Course	Primary Additional Dose*	Not Applicable	Booster Course Completed*	Primary Course Completed
Course 2	Booster Dose	Not Recommended	Booster Course Completed	Booster Course Completed

\* A primary additional dose given to a person who is 5+ year of age and is not immunocompromised is incorrect and is in fact a booster dose

# Methodology



- *Data were provided by OCIO based on data in the data lake PROD environment (includes COVAX registered vaccinations and GP administered vaccinations).*
- *DENOMINATOR USE: In this report, uptake is calculated based on Census 2022 population. See <https://www.cso.ie/en/releasesandpublications/ep/p-cpsr/censusofpopulation2022-summaryresults/populationchanges/>*

# Summary Findings



*Between 01/03/2024 and 16/06/2024 (last date of the eight week of the Spring 2024 COVID-19 vaccination campaign)*

- 1,189 primary course completions were recorded;
- 155 individuals have yet to complete their primary course;
- 145,324 booster course completions were reported;
- Booster course completion uptake among 70-79 year-olds was 13.8% and among 80+ year olds, it was 42.6%;
- 53.2% of booster doses were administered in GP clinics, 19.0% in HSE clinics and 27.8% in pharmacies;
- 99.8% of all booster courses completed were Pfizer BioNTech – Comirnaty Omicron XBB.1.5;
- Uptake was highest at 20.3% among 70–79-year-olds in Co. Dublin and 57.3% among 80+ years olds in Co. Wicklow;
- Uptake among residential care facility residents was highest in Co. Dublin, accounting for 31.3% of booster courses completed;
- Uptake among the immunocompromised was highest in Co. Dublin at 32.9% and in Co. Cork at 18.1% of booster courses completed;
- 263 booster completed courses among pregnant women aged between 18 and 59 years.

# COVID-19 vaccination course completions administered between 01/03/2024 and 16/06/2024, midnight



## ***Primary courses***

- Between 01/03/2024 and 16/06/2024, a total of 1,189 primary course completions were recorded. There are 155 individuals who have yet to complete their primary course. During the eight week of the campaign, 09/06/2024 to 16/06/2024, a total of a total of 108 primary course completions were recorded.

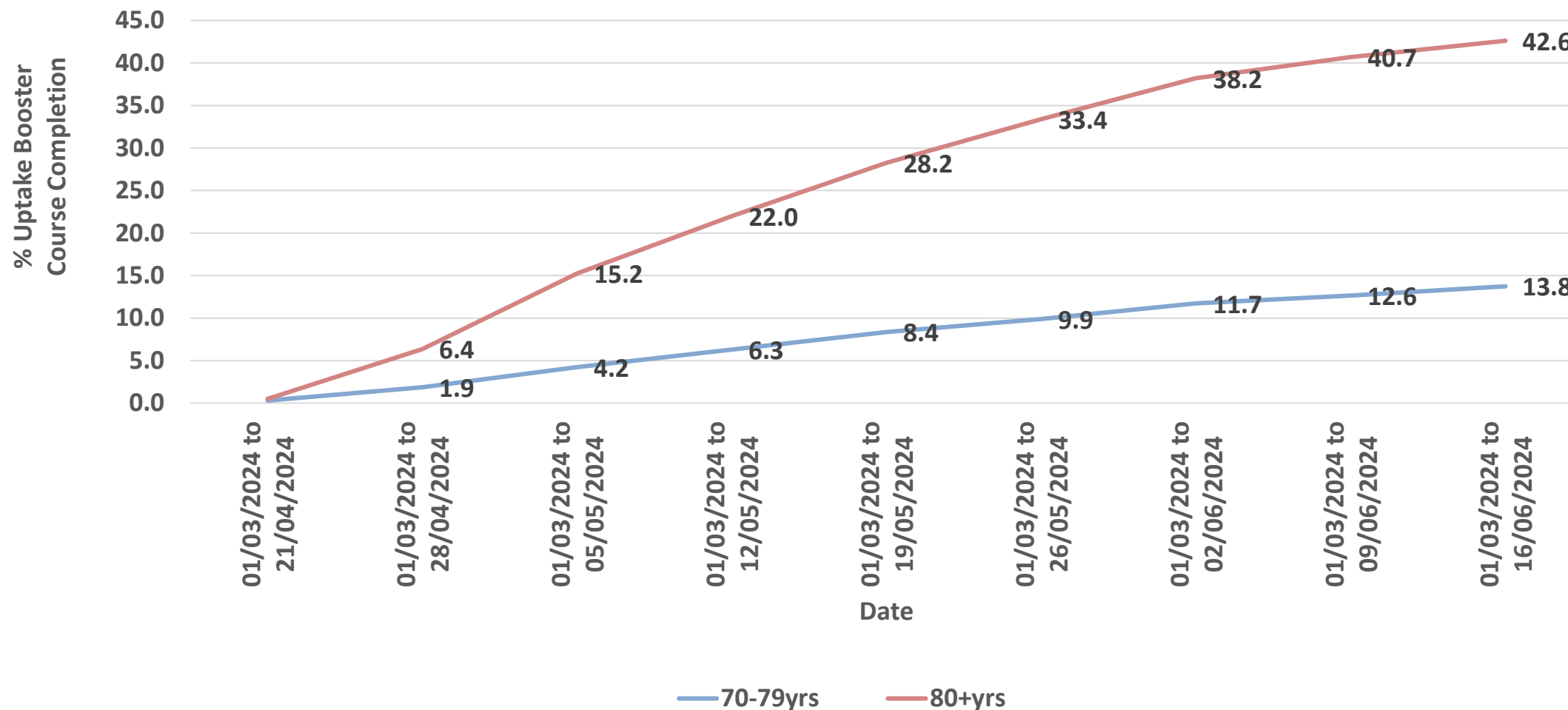
## ***Booster courses***

- Between 01/03/2024 and 16/06/2024, there were 145,324 booster course completions. During the eight week of the campaign, 09/06/2024 to 16/06/2024, a total of a total of 9,027 booster course completions were recorded.

## COVID-19 Booster Course Completions by Age Group between 01/03/2024 and 16/06/2024, midnight

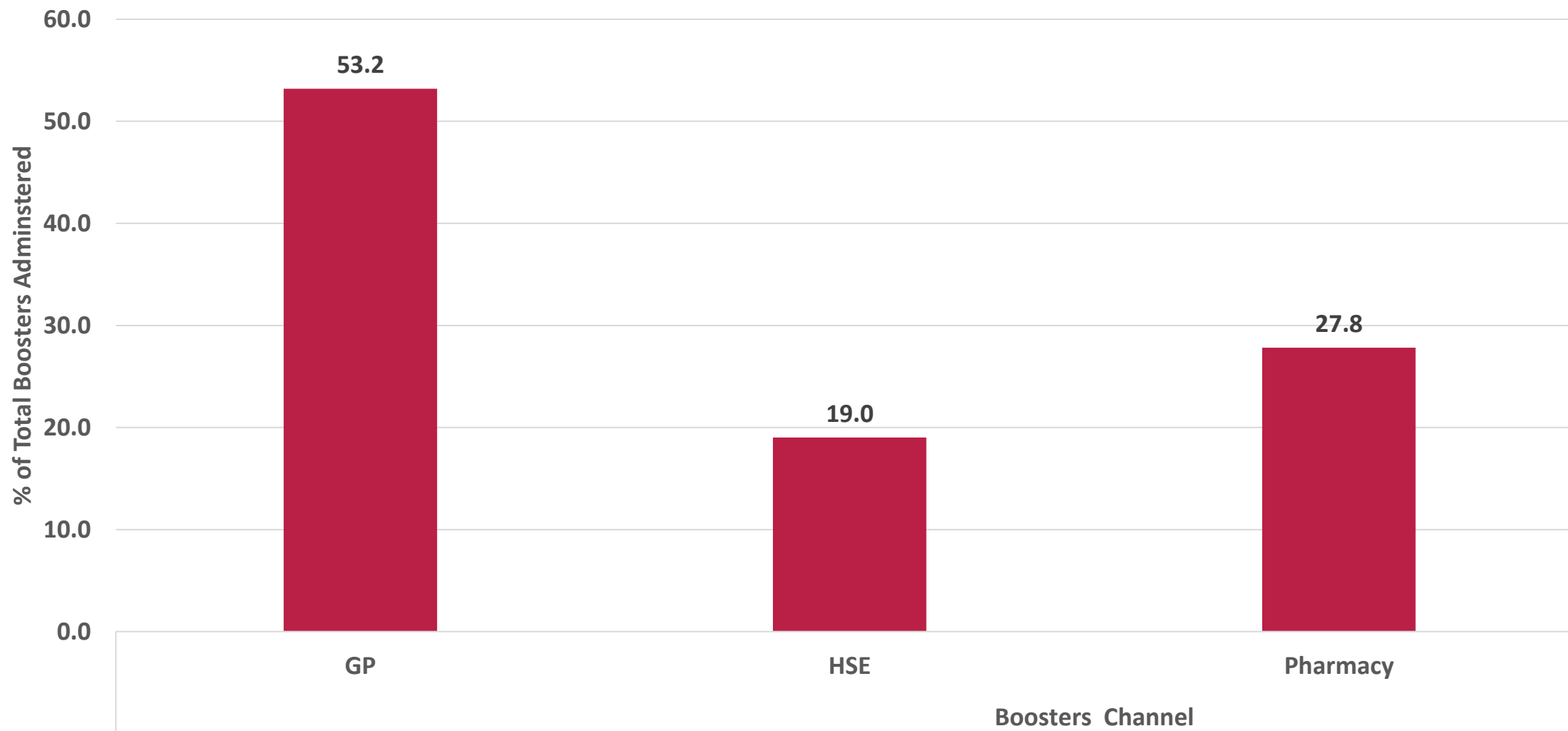
Age Group	No. Boosters	Census 2022 Population	No. Booster doses % Uptake Population Census 2022
All Ages	144898	5149139	2.81
6months+	144898	5120241	2.83
6months-49yrs	4031	3424088	0.12
5+yrs	144898	4853724	2.99
12+yrs	144852	4361794	3.32
12-17yrs	64	431222	0.01
18+yrs	144788	3930572	3.68
50+yrs	140867	1696153	8.31
60+yrs	136344	1048985	13.00
50-69yrs	14621	1157982	1.26
65+yrs	132384	776315	17.05
70+yrs	126246	538171	23.46
5-11yrs	46	491930	0.01
12-69yrs	18606	3823623	0.49
70-79yrs	49109	357144	13.75
80+yrs	77137	181027	42.61

# Percentage of Spring 2024 Booster Completed Courses by Age Group and Week administered between 01/03/2024 and 16/06/2024, midnight

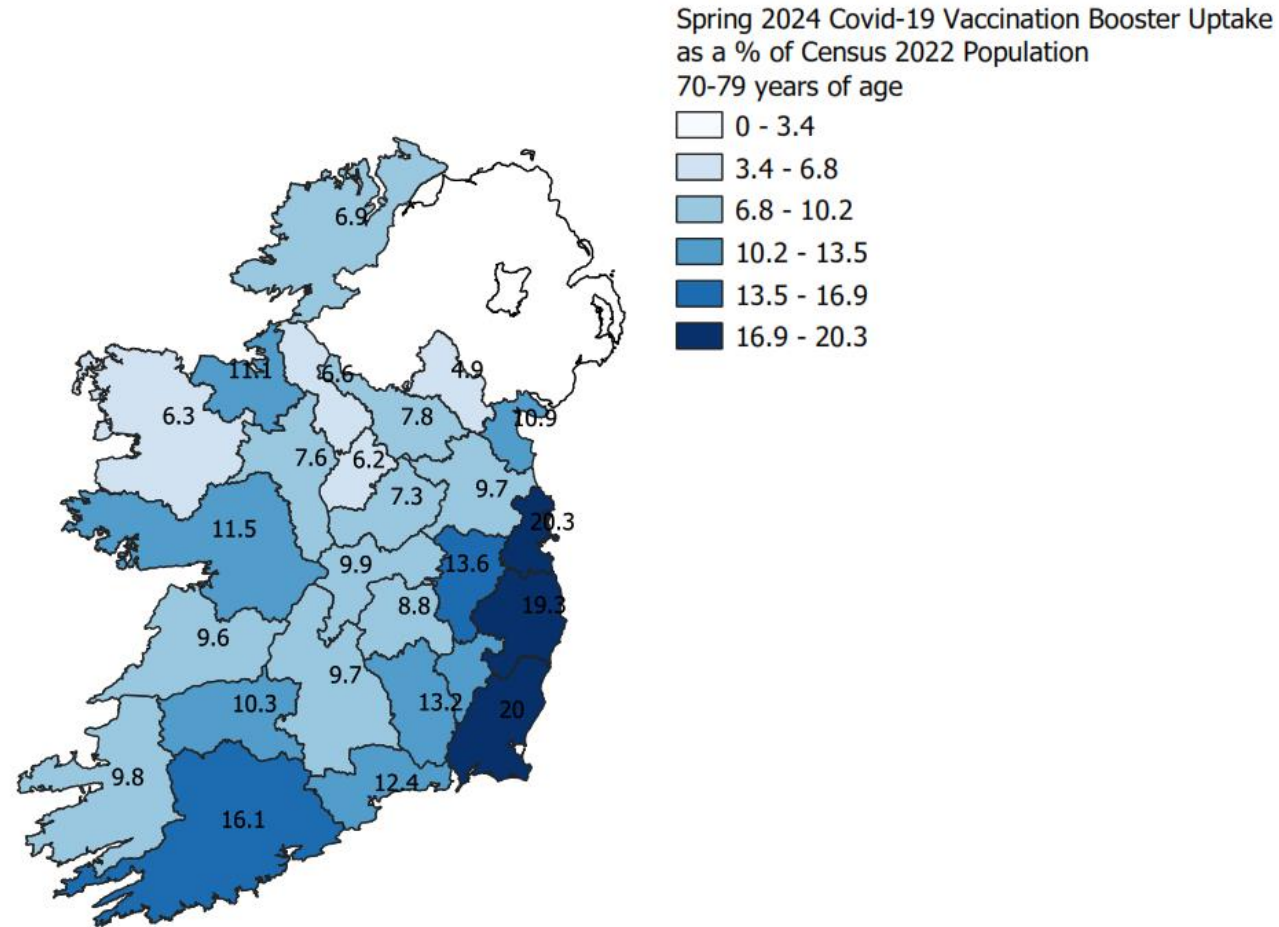




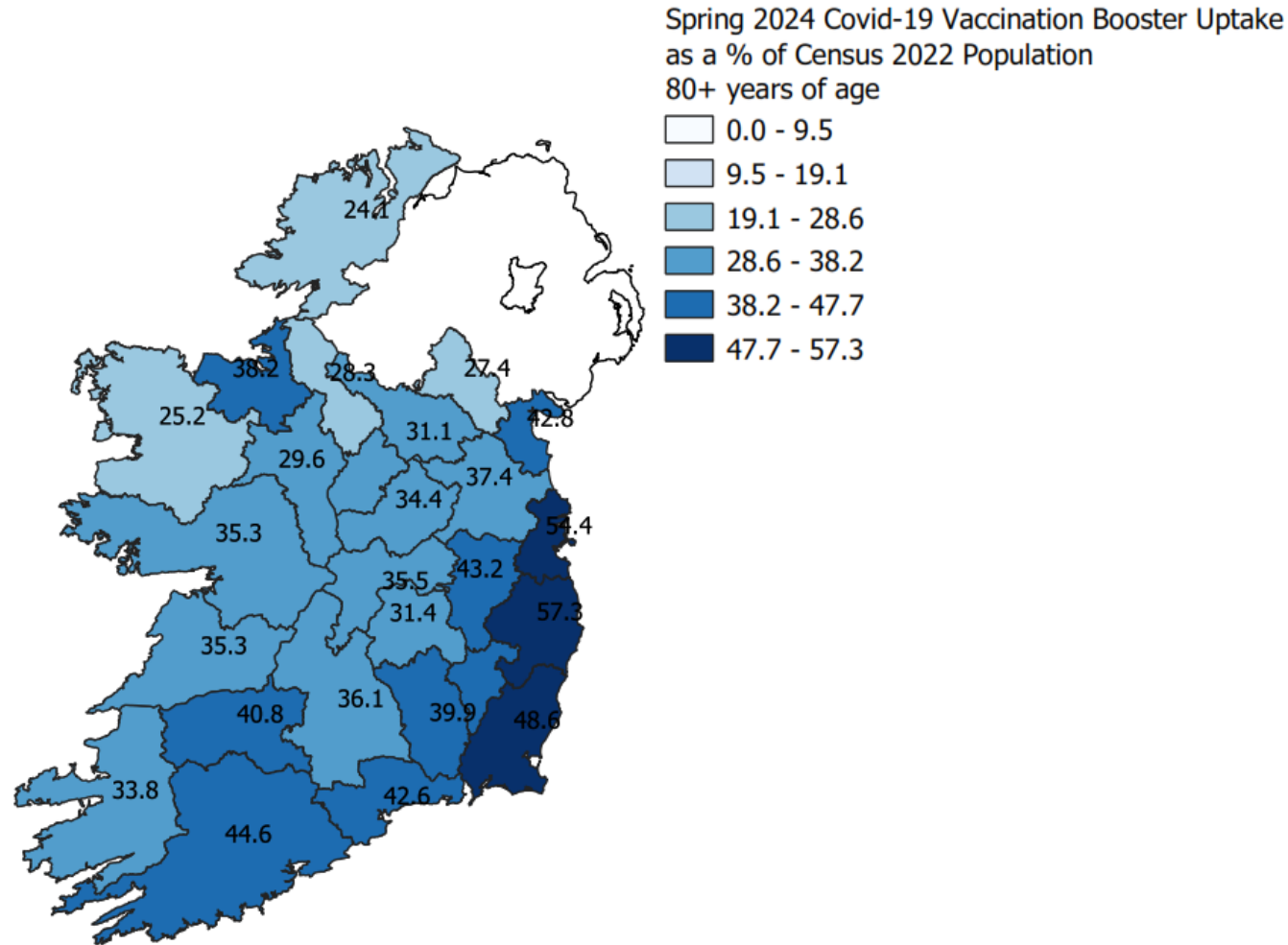
# Percentage of Spring 2024 Booster Completed Courses by Distribution Channel administered between 01/03/2024 and 16/06/2024, midnight



# Uptake of Spring 2024 Booster Courses Completed by county as a percentage of the Census 2022 population among 70-79 year olds between 01/03/2024 and 16/06/2024, midnight



# Uptake of Spring 2024 Booster Courses Completed by county as a percentage of the Census 2022 population among 80+ year olds between 01/03/2024 and 16/06/2024, midnight



# **Uptake of Spring 2024 Booster Doses Among Fair Deal residents in residential care facilities from 01/03/2024 to 04/06/2024**



528 residential care facilities were identified from the matched dataset.

## **COVID-19 Vaccination Uptake**

- Overall uptake was 76.9% with 9 (1.7%) of the 528 RCFs reporting 100% uptake.
- There were 10 locations (1.9%) where no vaccinations were reported, or uptake was  $\leq 10\%$
- 177 out of 528 RCFs (33.5%) RCFs had an uptake range between  $>10\%$  and  $<75\%$ , 271 RCFs (51.3%) had an uptake range between  $>75\%$  and  $<90\%$  and 11.6% had an uptake range between  $>90\%$  and  $<100\%$ .
- Overall uptake ranged from 58.8% in county Longford to 83.7% in county Leitrim.
- CHO 8 reported the lowest uptake at 73.1% and CHO 9 reported the highest at 80.5%.

# Acknowledgements

Sincere thanks to the following for providing the data for this report:

- National Immunisation Office (NIO)
- Office of the Chief Information Officer (OCIO)
- HSE Integrated Information Services (IIS) and COVAX Implementation team of Salesforce, IBM, PWC, EY
- HSE procurement/acute hospitals/CHOs/vaccinating teams and administrators/IT staff
- HSE Health Intelligence, Strategic Planning & Transformation Unit
- NHSS for Fair Deal Resident Data
- HR-Sap for HSE HCW Data



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# Caveats I



- Uptake data reported refers to the period up to midnight of the last day of the latest epidemiological week Monday to Sunday.
- Where county and/or age group calculation of estimated uptake exceeds 100% due to data capture issues within Coax or where the numerator exceeds the population estimate/denominator then the uptake will be rounded down to **99.9%** (unless otherwise indicated in the report).
- Total reported doses in this report now includes all vaccination doses on the IIS/COVAX data system, including those received abroad by Irish residents.
- Reported figures excludes vaccination records where the death of the individual has been recorded.
- While data is presented in terms of total number of people receiving boosters as a proportion of total population, it should be noted that not all people within these populations will be eligible for vaccination at a given time for example if they have recently had COVID-19 infection.
- It was not possible to accurately summarise the number of individuals aged between 6 months and 4 years and between 5 and 11 years with underlying medical conditions and therefore eligible for primary vaccination because those details in the IIS/COVAX extract are combined in a complex way with target groupings.

## Caveats II



- The data in this report are based on the vaccination records stored on the COVAX system. The vaccination status and other variables on the person's account and vaccination record such as risk factors and cohorted groupings are as recorded on this system. For values recorded on the person's account, these may not be updated at each vaccination event depending on them being provided by the vaccine recipient and recorded at the time of vaccination.
- Furthermore, for vaccinations given at GP practices and pharmacies, these other variables are not necessarily mandatory at the source of record (GP Practice or Pharmacy System) and so may not update changes on the person account in COVAX. As a result, in some cases, the data may reflect a historic value (such as risk factor or cohort).
- In addition, a person may have more than one risk factor for a given vaccination event, but all relevant risk factors may not be recorded.
- Also, cohorting (such as healthcare worker) is dependent on this information being supplied by the vaccine recipient at the time of vaccination and this being recorded on the system of record. Therefore, this data presented in this report is based on the vaccination status of individuals registered on the COVAX system based on their last dose received.
- This means that the risk factor profile of those same individuals may not reflect their actual status at that same time for the reasons explained above