Vaccine Champions Grants: FAQs

It is recommended that these FAQs are read alongside the Information Pack and the recording of the Information Session.

1. How many Vaccine Champions should our organisation recruit?

As a guide, organisations are encouraged to recruit 2-3 Vaccine Champions. This helps ensure champions have peer support and reduces the risk of individuals feeling isolated in their role.

The exact number will depend on your delivery model, including whether champions are volunteers or paid staff. Organisations may recruit more champions if appropriate to their proposed activities.

2. Are there specific targets for individual organisations?

Nova has overall programme targets for the Wakefield District, such as the number of meaningful conversations held. However, as this is a new pilot programme, **specific targets will not be allocated to individual organisations at this stage**.

The focus during the pilot phase is on learning, gathering insight, and understanding what can be achieved through community-led approaches. Successful organisations will be supported to identify opportunities to maximise their impact and contribute to programme learning.

3. Will resources and promotional materials be provided?

Yes. Organisations will have access to a range of resources, including:

- Core vaccine information and messaging
- Public health campaign materials
- Leaflets and information resources
- Branding guidance and templates
- Training materials

Some resources can be adapted to suit local communities, but organisations should ensure they use approved and accurate public health messages rather than creating entirely new vaccine information materials.

4. Can we create our own vaccine information materials?

Organisations may adapt templates and resources to make them more relevant to their communities. However, core health messages should remain consistent with approved public health information to maintain accuracy, trust and brand recognition.

5. How were the priority geographical areas selected?

The target areas were identified by analysing local immunisation uptake data.

Public Health reviewed vaccination uptake across the district and selected areas where uptake is much lower than average. The programme aims to focus resources where they can have the greatest impact in reducing health inequalities and improving access to trusted information.

6. What kinds of activities are you looking to fund?

The programme aims to support **trusted conversations in communities** rather than formal health promotion events.

Examples include:

- Discussions within parent and toddler groups
- Conversations at community groups and coffee mornings
- Engagement through faith groups or cultural networks
- Informal discussions within existing support services
- Activities embedded within services already accessed by target communities

We are particularly interested in approaches that build on existing trusted relationships.

7. Are innovative approaches encouraged?

Yes. We welcome creative and innovative ideas that help:

- Address vaccine misinformation and disinformation
- Improve understanding of vaccination programmes
- Increase confidence in vaccination
- Reach groups that may experience barriers to accessing information

Applications do not need to create something entirely new but should demonstrate how trusted community relationships will be used effectively.

8. Can activities be delivered in schools?

The programme is not intended to duplicate the work already undertaken by school immunisation services.

Applications should focus on activities delivered in **community settings,** such as youth groups, family services, informal educational settings, community venues or other spaces where trusted conversations naturally take place.

9. Is immunisation uptake data available for applicants?

Public Health publishes district-level information, but detailed geographical data is not routinely shared due to data interpretation and governance considerations.

Applicants should use the priority communities and areas identified within the programme guidance rather than relying on detailed local immunisation datasets.

10. Do I need to use a tablet or phone when speaking to community members?

No. We want conversations to feel as natural and person-centred as possible, particularly during one-to-one interactions. Familiarise yourself with the questions beforehand so you can gather the information you need without having to refer to your device or making community members feel like they are completing a checklist. If certain questions, such as someone's first language, do not come up naturally, you can skip these when filling the questionnaire on your phone/tablet after. Remember, you can skip questions such as a person's race, country of birth, ethnicity, etc. We do, however need as much information as possible so we can tackle inequalities amongst different demographics if they exist.

11. Do organisations need to be Gateway members to apply?

Yes. Applicant organisations must be current Gateway members or apply by the fund closing date.

Before submitting an application, organisations should ensure their **Gateway annual review is up to date.** If you are unsure, please contact the Gateway team for advice (gateway@nova-wd.org.uk)