

PATIENT EXPERIENCE, VACCINE UPTAKE, AND TRUST IN PRIMARY CARE:

Roundtable discussion themes, actions, and next steps

ROUNDTABLE CONTEXT AND AIMS

The lack of trust that minoritised ethnic patients and communities indicate towards NHS primary care services plays a significant role in entrenching ethnic health inequity. It determines access to and engagement with healthcare services, adherence to treatments, and ultimately, health outcomes. NHS primary care providers have identified mistrust and low vaccine uptake among minoritised ethnic communities as key, significant challenges. This is reflected in government figures, which demonstrate stark inequity where populations are both ethnically diverse and socioeconomically deprived, such as in East London, which reports uniquely poor disparities. London as a region reports the lowest childhood vaccination rates in England, a driving factor in recent outbreaks of vaccine-preventable diseases such as measles.

On 7 March 2025, the NHS Race and Health Observatory convened healthcare system leaders, policymakers, practitioners, and community representatives for a solutions-focused roundtable discussion on these challenges, further detailed in our new report, [Patient Experience and Trust in NHS Primary Care](#). The roundtable aimed to identify actionable strategies to redress the key drivers of mistrust in primary care and vaccine hesitancy at local, regional, and national levels.



[Patient Experience and Trust in NHS Primary Care Report](#)

Read our report examining the levels of trust that Black, Asian and ethnic minority patients have with NHS primary care services.

KEY DISCUSSION THEMES

Community engagement is foundational to building trust

- Community-led initiatives that prioritise meeting the cultural, linguistic, and accessibility needs of local populations have proven successful in building trust and improving vaccine uptake.
- It is critical to make every patient contact with healthcare providers count, by contextualising the importance of vaccination within a wider, core healthcare offer that is culturally relevant and tailored to meet individual and community needs.
- This relies on working in continuous, non-extractive partnership with local communities, trusted leaders, and the VCSE sector to address the sociocultural factors shaping healthcare decisions.



Ensuring cultural safety skills among a diverse workforce is key

- The healthcare workforce is not uniformly equipped in cultural safety and communications skills, leaving them unable to build trust and have confident vaccine conversations.
- Workforce diversity and ensuring that healthcare teams reflect the communities they serve are key, often overlooked steps to building and sustaining trust.

- Healthcare professionals can also be trusted leaders when they are equipped to address concerns using respectful and culturally appropriate communication and interventions, ultimately leading to better outcomes for patients and



Without addressing systemic factors, inequalities will persist

- Robust and transparent ethnicity and vaccine uptake data collection is essential to identify, monitor, and prevent inequitable health outcomes.
- The lack of a consistent, nationally led approach to collecting and sharing data leaves the healthcare system unable to identify gaps in provision and develop evidence-based solutions.
- Annual changes to vaccination schedules and the high turnover in GP patient lists (up to 20% in London), significantly disrupt and impede vaccine uptake.

KEY ACTIONS AT LOCAL, REGIONAL, AND NATIONAL LEVELS

The roundtable identified the following actions as critical to rebuilding trust in primary care and improving vaccine uptake among minoritised ethnic patients and communities.

Local

- Engage consistently with minoritised ethnic communities, trusted leaders, the VCSE sector, and other local partners to enable strategic, co-produced approaches to building trust, redressing ethnic health inequity, and improving vaccine uptake.
- Integrate vaccination considerations in all wider healthcare contacts and conversations with patients and communities, rather than relying on isolated messaging on vaccine uptake.

Regional

- Identify successful local initiatives and make the case for scale and spread through evaluation in which patient experience is given parity of value alongside quantitative indicators.
- Work with local partners to ensure community engagement and input into the development and implementation of health and vaccine strategies.
- Develop sustainable funding models to enable local partners to maintain consistent community outreach and engagement, rather than relying on short-term project funding.

National

- Establish robust frameworks to collect, analyse, and publish ethnicity and vaccine uptake data ensuring real-time monitoring and accountability.
- Develop mandatory workforce training on cultural safety and communication skills to enable healthcare staff to build patient trust and have confident vaccine conversations.
- Work with local and regional partners to combat social media-driven misinformation in health and vaccination messaging, ensuring resources and campaigns are coproduced with, and are accessible and relevant to, minoritised ethnic communities.

The NHS Race and Health Observatory will work with national and local bodies across the healthcare system, alongside community partners, to progress these key actions.

