

Official
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To: ICS and STP leaders

Copy to:

- All SAIS providers
- CCG Accountable Officers
- PCN-led Local Vaccination Services
- Community Pharmacy-led Local Vaccination Services
- Chief Executives of all NHS trusts and foundation trusts
- NHS Regional Directors
- NHS Regional Directors of Commissioning
- Directors of Public Health
- All Local Government Chief Executives

19 October 2021

Dear Colleague,

COVID-19 vaccination deployment next steps for 12 – 15-year-old vaccination

Collectively, with partners at a national and local level, the NHS in England has delivered over 83 million vaccinations.

Vaccination for this group continues to be deployed by School Age Immunisation Service (SAIS) providers, working with local partners to minimise inequalities and ensure comprehensive coverage. As infection rates and school absences due to COVID-19 rise, local systems should continue to prioritise support for their local SAIS teams.

Following our letter of 15 September, we are writing to ask you to take immediate action to stand up an out of school offer, maximising capacity for 12-15s over the October half term and beyond, as quickly as possible. A copy of the letter can be found [here](#).

ACTIONS NOW REQUIRED

IN SCHOOL OFFER

School age immunisation providers continue to deliver a safe and effective vaccination programme to all children aged 12-15, alongside other programmes such as seasonal flu. To build on the progress to date, SAIS teams working with their system partners are encouraged to identify any additional support they might need to maintain pace.

Equipment

For some schools and providers, estates and timely access to consumables can be a challenge. SAIS providers are able to access a wide range of nationally procured consumables, such as furniture and stationery, as well as estate solutions. There is also a high number of mobile enabled laptops available from the national programme which can

be drawn down. These are both Wi-Fi and SIM card enabled devices to allow for real time patient administration as the vaccination event occurs. Please contact your regional team for more information on how to draw down on this support.

Workforce capacity and supply

To ensure the effective delivery of in school vaccinations we are asking that steps are taken to ensure that rosters are planned throughout the lifetime of the programme and in doing so staffing capacity is maximised. Vaccination in school settings is funded through a reimbursed method and therefore all costs incurred can be reclaimed.

To ensure that you have sufficient workforce in place, you should contact your system lead employer to discuss your requirements and agree where they can provide additionality to ensure that you have maximum capacity. System lead employers can assist with providing a range of staff from registered healthcare professionals, unregistered vaccinators and clinical support staff including administrators. Across each region and system there are a number of rapid contingency staffing solutions which can be deployed where needed – if you need short term rapid vaccination capacity please contact your lead employer.

The national protocol is the recommended legal mechanism for delivery. The [workforce considerations to support school aged immunisation service teams for child vaccination](#) guidance details the recommended clinical staffing model to ensure the most productive delivery and also sets out how to maximise the use of the unregistered vaccination staff that have been well recruited to across the programme.

OUT OF SCHOOL OFFER

National Booking Service

Functionality of the National Booking Service (NBS) will change shortly so that vaccinations for 12-15-year olds can be booked online or via 119. This complements existing SAIS provision and ensures those who prefer to access a COVID-19 vaccination outside of a school setting can do so. NBS access will help maintain access throughout the school holidays and beyond.

All vaccination services that are part of the NBS and have the appropriate staffing and assurance in place are now asked to ensure appointments are planned and made available to enable the booking for this age group to begin.

Consenting

National pre-consenting materials, including a copy of the Patient Information Leaflet, will be issued using national call/recall services. All delivery models vaccinating this cohort need to ensure that electronic recording and storage of consent is in place and a registered healthcare professional is available on-site. Consenting is the responsibility of each provider who should ensure that their consent processes follow best practice outlined in the [Green Book](#). Additional information, including template consenting material can be found [here](#).

Contracting and assurance

Changes have now been made to the [Enhanced Service for general practices working in PCN groupings](#) and to the [community pharmacy LES](#) to allow vaccinations to be delivered to this cohort under these arrangements. **PCNs and CPs can only proceed to vaccinate this group if they have agreement in writing from their commissioner.** PCNs should only be commissioned to vaccinate this group in the unique circumstances that there is no other capacity available (through VCs, HH and CPs) given efforts across the system to support wider access and the level of existing involvement of PCNs in the programme. Where access to primary medical services is challenged, commissioners must not commission the PCN to vaccinate 12-15 year olds.

Vaccination Centres and Hospital Hubs are able to offer to this cohort and should ensure that additional local capacity is made available.

All sites must meet and confirm assurance requirements (part A and B) have been met by return to their regional team.

Workforce capacity and supply

Over recent months there has been a significant amount of work undertaken by regions and systems to ensure that all vaccination services have the capability to deliver to a wider range of patient cohorts. As the programme now expands access for healthy children and young people to other settings, we are asking that steps are taken to ensure that more staff are equipped and competent to vaccinate this cohort.

The national protocol is the recommended clinical workforce model to ensure maximum coverage of staffing. The [workforce considerations for phase 3 children's vaccination guidance](#) details all of the key training and vetting requirements to vaccinate children and young people of all ages. We are asking that you review this guidance and ensure that you are taking steps to ensure that you have sufficient staff trained and competent to vaccinate this cohort.

To ensure that you have sufficient workforce in place, we are asking you to continue with forward planning your rosters to ensure you have sufficient capacity. Your system lead employer can assist with providing additionality to maximise your capacity through providing a range of staff from registered healthcare professionals, unregistered vaccinators and clinical support staff including administrators. Across each region and system there are a number of rapid contingency staffing solutions which can be deployed where needed – if you need short term rapid vaccination capacity please contact your lead employer.

Booster vaccination

These changes will need to be delivered alongside the existing booster and flu vaccination programmes. We recognise this is challenging but we must continue to turbo-charge delivery of our life-saving programme. Additional support to deliver at every level of the system is available for all cohorts and includes the workforce offer set out above.

We will also be doing more national-level communications and to increase awareness, with the national marketing campaign to encourage booster and flu uptake launching this week. All materials can be found at <https://campaignresources.phe.gov.uk/resources/>

Thank you for your continued efforts. We are grateful for everything that you are doing to make the NHS-delivery of this programme the success that it is.

Yours sincerely



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