Community Pharmacy Site Selection Process

COVID-19 vaccination programme: September 2022 to March 2023 (phase 5)

30 June 2022, Version 1.0
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Other formats of this document are available upon request. Please send your request to: england.pccovidvaccine@nhs.net.

Equalities and health inequalities statement

“Promoting equality and addressing health inequalities are at the heart of NHS England and NHS Improvement’s values. Throughout the development of the policies and processes cited in this document, we have:

- given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it

- given regard to the need to reduce inequalities between patients in access to, and outcomes from, healthcare services and in securing that services are provided in an integrated way where this might reduce health inequalities.”

If you have any queries about the site selection process, please send these to england.pccovidvaccine@nhs.net.

If you have specific questions about your Expression of Interest then these should be directed to your local NHS England Regional Team. Contact details can be found at https://www.england.nhs.uk/primary-care/pharmacy/pharmacy-contract-teams/.
Community Pharmacy Site Selection Process

This document describes the process and timeline for Pharmacy Contractors (as defined in this document) to express an interest in delivering services under the Community Pharmacy National Enhanced Service COVID-19 Vaccination Programme: Phase 5 2022/23 as commissioned by NHS England.

This document is aimed at:

- **Regional Teams of the Commissioner** who, in collaboration with Integrated Care Systems (and subsequently Integrated Care Boards) and other local community partners are responsible for reviewing overall vaccination site coverage and capacity for Phase 5 across all delivery models and establishing that designated vaccination sites are required to deliver System capacity and/or provide equitable access for its local population and wish to commission the ES from Pharmacy Contractors.
- **Pharmacy Contractors** who are currently contracted to deliver COVID-19 vaccinations under the Local Enhanced Service: COVID-19 Vaccination Programme 2021/22 and wish to continue to provide vaccinations for Sept 2022 to March 2023 subject to there being an identified Population Need.
- **Pharmacy Contractors** who are not currently contracted to deliver COVID-19 vaccinations and wish to provide vaccinations for Sept 2022 to March 2023 subject to there being an identified Population Need.

Definitions:

Within this site selection process document:

- the **Commissioner** means the NHS Commissioning Board, responsible for commissioning of pharmaceutical services, and operating under the name NHS England including Regional Teams where those Regional Teams conduct elements of the site selection process locally on the Commissioner’s behalf.
- a **Designated Site** is a site nominated by a Pharmacy Contractor and selected and approved by the Commissioner as the premises from which the vaccination will be administered to patients (unless otherwise approved by the Commissioner)
- the **ES** means the Community Pharmacy National Enhanced Service COVID-19 Vaccination Programme: Phase 5 2022/23 Agreement. Draft (and final version when available) published [here](https://cv19pharmacyeoi.necssu.nhs.uk/).
- the references to **EOI** are to expression of interests made via either a) direct submission to the Regional Team from Pharmacy Contractors that are currently commissioned under the Phase 3 LES as directed in the Site Designation Process, or b) submissions made through the EOI form at [https://cv19pharmacyeoi.necssu.nhs.uk/](https://cv19pharmacyeoi.necssu.nhs.uk/) from other Pharmacy Contractors.
- the **Phase 3 LES 2021/22** means the current Local Enhanced Service: COVID-19 Vaccination Programme 2021/22 Agreement.
- a **Pharmacy Contractor** is a person operating a retail pharmacy business included in a pharmaceutical list maintained by NHS England to provide Pharmaceutical Services, where the pharmaceutical list was prepared under

regulation 10(2)(a) of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 as amended (the “Pharmacy Regulations”) or relates to a scheme made under Part 13 of the Pharmacy Regulations (Local Pharmaceutical Services but excludes appliance contractors.

- **Population Need** is the requirement for a vaccination site from a Pharmacy Contractor as determined by the Regional Team of the Commissioner following a review, in collaboration with Integrated Care Systems and other local community partners, of overall vaccination site coverage and capacity for Phase 5 across all delivery models and when establishing whether particular designated vaccination sites are required to deliver System capacity and/or provide equitable access for its local population.

- **Regional Teams** are Regional Teams of the Commissioner, NHS England.

- **Systems** refers to Integrated Care Systems and other local community partners.

This document and the draft national ES must be read by Pharmacy Contractors prior to expressing an interest so that the Pharmacy Contractor can be confident that they are able to meet all of the requirements within the ES. Pharmacy Contractors should not sign the draft ES. The ES has been provided in draft form to give sufficient information and time to commence planning, but some requirements in the ES and timescales in this process may be subject to change when the Joint Committee on Vaccination and Immunisation has provided additional guidance. A final version of the ES will be issued as soon as details are finalised. Sites expressing an interest following publication of the final ES are not required to read the draft version but should refer to the final version of the ES.

The ES is commissioned by the Commissioner pursuant to the Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013 having consulted with the Pharmaceutical Services Negotiating Committee. Under direction 14, the Commissioner is only authorised to arrange for the provision of enhanced services with Pharmacy Contractors and so only Pharmacy Contractors are eligible to submit an EOI in accordance with this document.

This document and the process within it has been established to ensure that the commissioning of pharmacy-led sites is equitable and transparent and provides assurance to the Commissioner that all vaccination sites meet the required criteria. This site selection process document must be followed by all Pharmacy Contractors who wish to be commissioned to deliver the ES and by Commissioner representatives involved in the commissioning of the ES.

Pharmacy Contractors who are currently contracted to deliver COVID-19 vaccinations under the Phase 3 LES (including those currently paused) and wish to continue to provide vaccinations under the ES for Sept 2022 to March 2023 (subject to there being an identified Population Need) must follow the process within this document if they wish to provide vaccinations in Phase 5 and therefore participate in the ES.

**Key milestone dates:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity / Milestone</th>
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<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
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<tbody>
<tr>
<td>30 June</td>
<td>Expressions of Interest open for Pharmacy Contractors</td>
</tr>
<tr>
<td></td>
<td>- An EOI form at <a href="https://cv19pharmacyeoi.necsu.nhs.uk/">https://cv19pharmacyeoi.necsu.nhs.uk/</a> will be available for submissions by Pharmacy Contractors that are not currently commissioned under the Phase 3 LES.</td>
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<td>- Regional Teams will accept expressions of interest directly from Pharmacy Contractors currently operating under the Phase 3 LES.</td>
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<tr>
<td>14 July 5pm</td>
<td>Deadline for Pharmacy Contractors operating sites under the Phase 3 LES to have informed their Regional Team if they wish to be considered to continue under the ES.</td>
</tr>
<tr>
<td>20 July 5pm</td>
<td>Deadline for Pharmacy Contractors who are not currently commissioned under the Phase 3 LES (including closed sites) to submit their EOI.</td>
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<tr>
<td>19 July onwards</td>
<td>National 'Control Tower' meetings to approve Regional Team site proposals in the context of national parameters (new pharmacy contractors after 20 July)</td>
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<tr>
<td>August onwards</td>
<td>Ad-hoc activity to select new sites by exception using this process as published where there is a new or newly identified Population Need.</td>
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**Stage 1: Identification of Population Need and provider intentions**

Regional Teams will work with local authorities and Integrated Care Systems to prepare plans for delivery of COVID-19 vaccinations from September 2022 as requested in the system letters published on [23 February](https://example.com) and [22 June](https://example.com). Part of this process will be to ascertain which Pharmacy Contractors wish to participate in the COVID-19 vaccination programme from September 2022 to March 2023.

a. **Pharmacy Contractors operating sites under the Phase 3 LES that wish to continue into the next phase**

Pharmacy Contractors that are currently commissioned to provide vaccinations under the Phase 3 LES, including “paused” sites, that wish for their designated site to be considered to continue to deliver COVID-19 vaccinations from September 2022 must register their interest in continuing to provide the service by confirming details in Stage 1 of the Site Designation process (to be published shortly) with their System / Regional Team.

The purpose of this information for the Commissioner is to review the Pharmacy Contractor’s request to continue alongside the Commissioner’s analysis of whether there is a continued Population Need for vaccinations from the Contractor’s site and whether the Pharmacy Contractor continues to be able to meet that Population Need (determined in accordance with Stage 2).
b. Pharmacy Contractors that are not currently commissioned under the Phase 3 LES to provide COVID-19 vaccinations (including closed sites)

Pharmacy Contractors that are not currently commissioned under the Phase 3 LES to provide COVID-19 vaccinations but who wish to participate in Phase 5 of the COVID-19 Vaccination Programme can submit an Expression of Interest (EOI). This includes but is not limited to Pharmacy Contractors that may have been commissioned to provide COVID-19 vaccinations in any previous stage.

The purpose of this EOI is to gather information for the Commissioner to assess whether the Pharmacy Contractor can meet the key designation criteria (Stage 2) and, if so, whether the proposed site is best placed to meet the identified Population Need (Stage 3).

Pharmacy Contractors that have submitted an EOI previously and have retained the automated confirmation detailing their responses do not need to complete all details again. The EOI form at https://cv19pharmacyeoi.necsu.nhs.uk/ will permit Pharmacy Contractors to indicate that they wish to be considered again and refer to their previous submission if they believe that it provides sufficient information for the Regional Team to make a decision on their site suitability.

Off-site premises for vaccination sites (sites not located in a Pharmacy)

In Phase 5, vaccination sites should be located in NHS estate (including pharmacies), other public sector estate and, only where required and by exception, commercial estate. Most Pharmacy Contractors will have limited access to and visibility of suitable NHS and public sector estate and should not approach landlords until they know whether they are likely to be awarded a contract. For that reason, we have not required Pharmacy Contractors to identify suitable premises themselves within the initial EOI, although they may propose a site if they wish. Pharmacy Contractors should note that they should not enter into any agreement or arrangement with landlords or property custodians (or incur or commit to incurring any costs of any nature) until such time as the relevant proposed site is fully approved at the conclusion of both this Site Selection process and the Site Designation process. Regional teams will provide additional information and support to Pharmacy Contractors where an off-site location is needed.

Stage 2: Review of sites against key designation requirements

Regional Team Commissioners, in collaboration with Systems, will agree the Population Need as it applies to the possible locations of sites, number of vaccinations that will be required and the age groups to be vaccinated. They will also determine the likely requirement for vaccinations of eligible care home residents and housebound patients.

Following this analysis, the Regional Team will review the information relating to each locality and consider current and prospective providers to determine whether each could meet the identified Population Need. In locations where there is a possible match, the site(s) and/or prospective site(s) information will be considered against the key designation requirements below. Where a Pharmacy Contractor has not demonstrated that they would be able to meet the key designation requirements
Then their EOI will be rejected and they will not be considered any further in relation commissioning of this ES.

Where necessary, such as where more prospective sites meet the key designation requirements than are required to meet System need, Commissioners will then use the site selection criteria detailed in Stage 3 to determine which Pharmacy Contractors can best meet the relevant Population Need.

**Key designation requirements for community pharmacy-led sites:**

1. The location of the site or prospective site must be in a location that could meet the Population Need.
2. The capacity of the site or prospective site must be appropriate for the Population Need.
3. The age groups that the site or prospective site is offering to vaccinate must be appropriate for the Population Need.
4. The ability of the Pharmacy Contractor to provide vaccinations to eligible care home residents and people who are housebound matches the Population Need, including where the Commissioner has made or will make separate arrangements for the vaccination of these cohorts.
5. The Pharmacy Contractor must:
   a. Be able to offer at least 100 vaccines per week through a combination of published walk-in clinics and through the National Booking Service over each week of an expected 12-week period without affecting the delivery of their core NHS services.
   b. Be in good standing with NHS England in relation to provision of service, with the Regional Team holding no outstanding concerns about their ability to satisfy their Terms of Service (as set out in the Pharmacy Regulations) including in relation to opening hours.
   c. Have read the ES (draft until published ES is available) and be confident that they will be able to both meet the requirements and commence vaccinating within 4 weeks of notification of contract award.
6. The most recent GPhC inspection of the Pharmacy (if one has taken place) must have resulted in ‘Standards Met’ for all 5 principles.

Where the Pharmacy Contractor has not satisfied requirements 1 or 2 or 3 or 4, then the site or proposed site must be rejected and a record of the reason for rejection recorded by the Commissioner, but the EOI will be retained by the Regional Team, who may consider it again if there is a new or changed Population Need that arises within the duration of the ES.

Where the Pharmacy Contractor has not met requirements 5 or 6 then the site or prospective site should be rejected, that site will not be considered any further in relation to commissioning of this ES, and a record of the reason for rejection recorded by the Commissioner.

The stage 2 process may be rapid where the number of Pharmacy Contractors meeting the key designation requirements are appropriate to Population Need. There may be other localities that are affected by changes to requirements or proposed sites where a Population Need is identified at a later date and Pharmacy Contractors are then matched to key designation requirements after several weeks. Where
Pharmacy Contractors are unable to meet their initial commitments and withdraw from their contracts, there may be a requirement for additional sites led by Pharmacy Contractors after a longer period of time.

If, after reviewing the key designation requirements, the Commissioner determines that there are no applications that sufficiently meet the Population Need, the Commissioner may invite further EOI for that locality. The Commissioner will provide better visibility and more detail of the requirements in that locality or population, for example in the form of a postcode or postcodes for the locality where the Population Need could be met. Invitations to submit these targeted EOI will be communicated locally by Regional Teams and publicised to all Pharmacy Contractors on the website https://cv19pharmacyeoi.necsu.nhs.uk/.

Stage 3: Selection of proposed sites.

Following assessment in Stage 2, if the number and capacity of the proposed sites are appropriate to Population Need and not likely to result in overcapacity that may lead to vaccine wastage and/or inefficient use of staff, then all the sites identified should go through to stage 4 and the Stage 3 will not need to be applied.

If there are more sites identified than are required, then the Commissioner will consider the Site Selection criteria within this Stage 3 to select the sites that will best meet Population Need and make best use of resources.

Commissioners should record their views as to the extent to which the requirements have been demonstrated. The Commissioner may consider involving the local pharmaceutical committee, patient representatives and/or other community partners in reviewing decisions made.

This stage can take several weeks, and the Commissioner may request additional information from the Pharmacy Contractor where this would be helpful for the purpose of ensuring the best possible outcome for the population. If the Pharmacy Contractor fails to provide all additional information within the deadline specified by the Commissioner, the Commissioner may reject the site or prospective site and that site will not be considered any further in relation commissioning of this ES.

Where a site has met the key designation requirements (stage 2) but is not selected to go forward into stage 4, the Regional Team will retain a record of the details and will contact the Pharmacy Contractor should there be additional opportunities identified in future.
**Site selection criteria**

Within the system letter of 22 June are outlined high-level principles to inform Autumn 2022 System planning. The table below shows examples of how Pharmacy Contractors can demonstrate their contribution to these planning principles. Please note that these should not be viewed as a set of criteria which need to be ‘ticked off’ and there is not an expectation that, for example all sites must have experience in offering vaccinations away from their Designated site through a roving or pop-up model, but a demonstration of how the proposed site is expected to function will enable the Commissioner to assess how well the proposed site would meet Population Need and contribute to the overall network of commissioned sites.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Principle</th>
<th>Examples of how Pharmacy Contractors can demonstrate their contribution</th>
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</table>
| Safety and Clinical Quality | • Ability to understand the complex nature of the vaccination service.  
• Other relevant experience in supporting other vaccination models, vaccines, or aseptic services.  
• Has appropriate clinical leadership.  
• Appropriately reports near misses, patient safety and shares learning.  
• Demonstration of good governance or learning from previous irregularities.  
• In good standing with both NHS and professional regulator (GPhC). | • Experience of handling medicines with complex storage and usage requirements.  
• Experience in drawing up medicines from vials / administering vaccinations.  
• Experience in managing high patient throughput clinical services.  
• Plans for clinical leadership of the site.  
• Usage of a system for reporting safety issues.  
• Application of a learning culture and quality improvement approach.  
• Demonstration of good standing through meeting standards in relation to Community Pharmacy Assurance Framework and/or GPhC inspection report. |
| Coverage / Access | • Use of NHS or local authority estate (including pharmacy premises).  
• Suitable opening hours to meet local Population Need.  
• Sufficient size of site to handle expected patient throughput, provide safe working conditions and vaccine handling. | • Site on NHS premises or with estimate of costs to the programme. (See below).  
• Proposed site opening clinic times that include weekends and evenings.  
• Description of plans to support walk-ins and booked appointments. |
| Addressing inequality | • Ability to meet the needs of the local population including specific health inclusion groups and address any potential impacts on health inequalities / access.  
• Provision of reasonable adjustments to support people with disabilities and access to information accounting for different information or communication needs (e.g. translations, easy-read).  
• Local infrastructure including public transportation, local road networks, parking, etc. | • Site plans (need not be professionally drafted) with dimensions, including space for preparing vaccine and post-vaccination observation, where required.  
• Explanation of the local population needs and how they are met by the Pharmacy Contractor.  
• Description of how a site at this location and with this Pharmacy Contractor would support underserved communities. (Including but not limited to: Young people, working age people, Black and Minority Ethnic (BME) communities, people with Learning Disabilities (LDA), women who are pregnant or breastfeeding, people with severe mental illness, people experiencing homelessness, travelling communities, migrant workers, refugee and asylum seekers, poorer communities).  
• Description of plans to support patients with additional communication needs.  
• Good site access including, but not limited to, parking and public transport links. |
| --- | --- | --- |
| Capacity | • Ability to vaccinate the minimum weekly volume consistently throughout the programme. | • Plans to generate demand for vaccinations with roving / pop-up models where appropriate.  
• Description of which age cohorts will be able to use the site.  
• Description of the system that will be used to minimise vaccine wastage, including the use of all available doses in a vial.  
• Number of flu vaccinations administered in 2021/22.  
• Confirmation that the minimum weekly volume of COVID-19 vaccinations can be met alongside Flu vaccinations. |
| Value for Money | • Plans to ensure that taxpayer money is spent in a way that maximises value for money, for example the cost when | • Detailed list of equipment that would be required by the site.  
• Description of other costs such as for estate, security etc. |
compared with the required number of vaccinations that will be administered.

| Workforce | Efficient use of the workforce, optimising the unregistered and volunteer workforce, to ensure sustainability and flexibility to support both planned and surge requirements. | Description of the workforce plan for the service including an appropriate number of clinical and admin staff to maintain a safe service.  
Anticipated use of Lead Employer / volunteer workforce, drawing down additional workforce in a way that will maximise uptake of planned and surge vaccination delivery.  
Anticipated use of the National Protocol. |
Off-site premises

Where the Pharmacy Contractor has indicated that they would wish to operate a site that is not on their pharmacy premises, and the capacity required and Population Need in that locality would support that premises outside of the pharmacy may be needed, and the Pharmacy Contractor has been assessed as best meeting Population Needs using the Site Selection criteria above, the Commissioner should:

1. Review any prospective site information put forward by the Pharmacy Contractor (if they have done so), considering whether it is a commercial property and the cost (or likely cost) to the programme, including for any security that may be required.
2. If the property suggested is a commercial property or there is not a specific property suggested, then the Commissioner must determine whether there are vacant NHS or local authority properties that may be suitable and available by liaising with their colleagues in NHS Estates.
3. If the Commissioner locates an appropriate property, then they should advise the Pharmacy Contractor of the proposed site and confirm with the Pharmacy Contractor that they would be happy to proceed at that location.
4. If there are no suitable NHS or local authority properties available, or the Pharmacy Contractor does not agree to proceed at the location identified in point 3 above, then the Commissioner should provide the Pharmacy Contractor with information relating to the size, location and VFM guardrails for the site and give the Pharmacy Contractor an opportunity to identify a suitable property.
5. If the Pharmacy Contractor is unable to identify any properties within 2 weeks, or the Commissioner considers that the property / properties identified by the Pharmacy Contractor are unsuitable (by reference to the size, location and VFM guardrails) then the Commissioner should review options for alternate commissioning.

Stage 4. Verification of plans submitted within the EOI

The Commissioner should inform the site or prospective site that they are being considered for commissioning under the ES and agree the requirements of the site: site capacity, location and age cohorts to be vaccinated and additional plans such as for roving or pop-up models submitted within their EOI. Note that until the contract is awarded following the national Site Designation meeting (Stage 5), work undertaken by the Pharmacy Contractor should be limited, and funding should not be committed.

a. For existing sites

Where a site that is currently contracted to the Phase 3 ES is continuing into Phase 5, the Regional Team will submit their details to the national team as described in the Site Designation Process (to be published shortly) and will receive their final ES in due course. The site will have already been linked to the national supply chain and data sources and so will only be required to go through national designation and site readiness by exception.

b. For new sites
More detail about site designation, onboarding and final readiness checks for Regional Teams can be found within the Site Designation Process (to be published shortly). A summary is provided here to support Pharmacy Contractors in their understanding of the commissioning process.

The Commissioner will want to use this stage to confirm costs and/or equipment that may be required and to review plans for the vaccination site alongside the Pharmacy Contractor. They may choose to ask questions of the Pharmacy Contractor, conduct a virtual interview or review of the proposed site, use peer networks or others with an experience in delivering similar programmes, or to visit the proposed site as is deemed appropriate. The Superintendent Pharmacist is responsible for putting in place processes and procedures to secure safe and effective operations, and so any additional assurance carried out by the Commissioner must be collaborative, mindful of this legal responsibility and proportionate to risk so as not to impose inappropriate burden on the Pharmacy Contractor.

Should the Commissioner determine that:

- they are not able to verify that the Pharmacy Contractor is able to meet the requirements of the ES or to meet Value for Money (VFM) requirements; or
- they are not satisfied that the site is able to meet the plans submitted in the EOI that formed a basis for selection at Stage 2 or 3 within the required timescales.

then the Commissioner will inform the Pharmacy Contractor that their site will not be required and the reasons that it is being rejected, and will revisit other EOI to select another site or proposed site.

If the Regional Team determines that the Pharmacy Contractor will be able to meet the requirements of the ES, VFM, and plans submitted within the EOI as agreed, then the Regional Team should gather information from the site lead and submit it to the national programme support functions ‘Control Tower’ meeting. This will include contact details for IT systems such as: the Foundry system access (to review information held about the site, reporting and vaccine ordering); the NHS Future Collaboration platform (to review guidance and other relevant information about the COVID-19 vaccination programme); National Booking Service (NBS) administrators (to set up other NBS users and schedule appointments); preferred point of care system and administrators if relevant (to record vaccinations). Further information on how this information will be submitted can be found in the Site Designation Document.

Stage 5: National ‘Control Tower’ meeting (For new sites)

More detail about site designation, onboarding and final readiness can be found within the Site Designation Process (to be published shortly). A summary is provided here to support Pharmacy Contractors in their understanding of the full commissioning process.
During ‘Control Tower’ meetings (at which sites are designated), the Commissioner will further consider whether the total number and geographical distribution of each proposed site by Regional Teams supports fair and equitable access for patients and can be supported by COVID-19 vaccination operational support functions in the necessary timeframe in the national context.

Where the number of recommended sites exceeds the number that can be accommodated, the Commissioner’s Regional Teams will prioritise the list of proposed sites according to capacity and access need. The national vaccination programme workstreams, working with Regional Teams will then take a decision as to whether each site should be approved.

If a site is designated as a COVID-19 vaccination site then the Pharmacy Contractor will be informed that they have been approved by the national team, will be invited to confirm acceptance of the ES (once the final version is published) and given instructions to prepare for their Designated Site to go live. Equipment will be delivered if appropriate and agreed with the Commissioner and Data and Technology processes will be completed. Pharmacy Contractors must not incur any costs that they expect to be reimbursed without written authorisation from the Commissioner.

Once approved, all Designated Sites must continue to meet the site selection criteria against which they were assessed for the duration of the ES. The Commissioner should be informed immediately if for any reason a Designated Site ceases to meet the criteria.

**Stage 6: Site readiness and go-live (for new or ‘paused’ sites only)**

New or previously closed sites will be required to confirm to their Regional Team in writing that they have completed their preparations and are ready to receive vaccine. The Regional Team will then confirm the site is ready on Foundry and the site will be marked as ‘active’ and able to order vaccines.

The names of Designated Sites will be published following contract award on the NHS England website at [https://www.england.nhs.uk/coronavirus/publication/vaccination-sites/](https://www.england.nhs.uk/coronavirus/publication/vaccination-sites/)

**Future participation in the COVID-19 vaccination programme**

As System requirements change over time, the Commissioner may choose to commission this service from additional sites. If this occurs during the duration of this national ES, the Commissioner will consider again EOI that have already been submitted and apply this process from Stage 2 onwards. Where there are insufficient EOI to meet Population Need then the Commissioner may request further EOI from Pharmacy Contractors as described in Stage 2.

Although there are still a number of uncertainties about the vaccinations that may be required in the future, and constraints as to how providers are able to engage with the programme this Autumn, we are now planning to take stock of what is currently working well in all our vaccination programmes and be ambitious about how we can develop this even further for 23/24 and beyond. Over the next few weeks we will be
in touch with you to hear your views and what opportunities and challenges exist at a local, regional and national level to refine our approach to deliver maximum uptake, address health inequalities and improve access to a wider range of health and wellbeing interventions.