Classification: Official



# COVID-19 and seasonal influenza vaccination programmes: Schedule 6A Reporting Requirements



## **Version 2.0, 31 January 2024**

Updates to the previous version are highlighted in yellow.

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# **Schedule 6 – Contract Management, Reporting, and Information Requirements**

### A. Reporting Requirements

This Schedule 6A (Reporting Requirements) sets out the reporting framework to support the delivery of the COVID-19 Vaccination Deployment and Seasonal Influenza Programmes for 1 September 2023 to 31 August 2024.

Please note this schedule may be subject to updates from time to time. Some forms may be retired once replaced by new data flows and there are likely to be new requirements for data collection via Foundry forms.

Vaccines administered must be in line with published JCVI advice and the UK Chief Medical Officers' recommendations.

	Reporting Period	Format of Report	Timing and Method for delivery of Report	Application for Flu	Application for COVID-
National Requirements Reported Centrally					
1. Booking / outreach					
a) National Booking Service (NBS)  Providers will use the National Booking Service (NBS) for all non-Service User COVID-19 vaccination booked	Daily as a minimum requirement	As per NBS feed into Foundry	Daily contemporaneous reporting via NBS as appropriate	Subject to local agreement between	Yes

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appointments and may use the NBS for non-Service User co-administered seasonal influenza vaccination booked appointments for eligible cohorts where requested by the Commissioner (NHSE).				Commissioner (NHSE) and Provider	
The NBS will feed booking data into Foundry to support planning.					
b) Local Booking Systems  Providers may, for Service Users, use Local Booking Systems.	At Commissioner (NHSE) discretion	At Commissioner (NHSE) discretion	Mechanism in place to enable situational reporting of capacity on Local	yes	yes
Providers of vaccinations in Detained Estates will book appointments in clinics, usually via local arrangements.	Using BAU arrangements	Using BAU arrangements	Booking System to commissioner at their request.  Using BAU arrangements		
c) Walk-in					

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Providers will provide "walk-in" appointments for non-Service Users in addition to NBS appointment capacity in line with local population need.  Providers may provide "walk-in" appointments for Service-Users where this is operationally feasible.  Providers should advertise non-Service User "walk-in" clinics and advertise the availability of walk-in opportunities on the Commissioner (NHSE) agreed Designated Site finder website as appropriate and which shall be maintained in-line with current guidance.			Mechanism in place to advertise walk-in capacity.	Subject to local agreement between Commissioner (NHSE) and Provider	Yes
2. Point of Care (PoC) Reporting Requirements 2a) NHS Providers	Daily as a minimum requirement but will be subject to	Point of Care system requirements, as appropriate system	Daily contemporaneous	Yes	Yes

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Providers must use a Commissioner (NHSE) authorised Point of Care system for screening, vaccination event data capture including product and batch details, recording any adverse reactions and querying eligibility, cohort, date of last flu/COVID-19 vaccination(s) and suitable vaccine type. Details of approved PoC systems can be found [here].  The Provider must adhere to defined standards of record keeping as set out in this Schedule 6A and ensure that the vaccination event is recorded on the same day that it is administered, within the point of care system.  In exceptional circumstances, where it has not been possible to record the vaccination event on the date of the	requirements of the Programme	inputs. Guidance on PoC Systems available at: https://digital.nhs.uk/co ronavirus/vaccinations/ training-and- onboarding/point-of- care	reporting via Point of Care System		

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administration of the vaccination, the Provider must record this on the point of care system as soon as possible					
afterwards.  Where the record of the vaccination event is not created within 15 days of					
the vaccination being administered, the Provider shall not be eligible for the contract payments related to the					
delayed recording of the administration of the relevant vaccinations as set out in Schedule 3. Where contract					
payments are claimed and/or automatically submitted an equivalent sum to that which the Provider was not					
eligible shall be recoverable by the Commissioner (NHSE).  Where a record of the vaccination					
needs amending or has not been created on the Point of Care system,					

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the Provider shall be responsible for undertaking the amendment or creation as soon as reasonably possible following notification that the record contains an error.					
2b) Detained Estates  Detained Estate providers will use TPP, SystmOne, HJIS, or any future system in Detained Estates to capture COVID-19 vaccinations. The vaccination event data will feed back to relevant systems, such as the patients GP record, and national and local reporting tools (via Foundry).	Daily as a minimum requirement but will be subject to requirements of the Programme	Point of Care system requirements, as appropriate system inputs. Guidance on PoC Systems available at: <a href="https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/point-of-care">https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/point-of-care</a>	Daily contemporaneous reporting via Point of Care System		Yes

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3. Stock Management reporting 3a) NHS Providers					
Providers are expected to collaborate with any national, regional and system processes in relation to COVID-19 vaccine stock forecasting, supplying, ordering, and reporting arrangements, which will include complying with the processes and requirements set out in any relevant Standard Operating Procedures.	Weekly stocktake of vaccines and reporting of wastage	Foundry Stock Manager	Foundry Stock Manager		Yes
3b) Detained Estates providers					
The Provider will monitor vaccine stock and wastage per detained estate site and complete the Vaccine Inventory Management form on Foundry.  Exceptions to be discussed with the Commissioner (NHSE) and agreed to	Weekly	Report to include:  • Wastage:  • Vaccine type  • Batch number  • Expiry date	Foundry Form		Yes

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how any other wastage is then monitored / further prevented.		<ul> <li>Quantity</li> <li>Waste reason</li> <li>Stock take:</li> <li>Vaccine type</li> <li>Batch number</li> <li>Expiry date</li> <li>Quantity</li> </ul>			
4. Governance and board attendance  The provider shall attend immunisation working groups/programme boards as may be required by the Commissioner (NHSE)	TBC locally through respective governance boards (for COVID-19 and flu)	TBC locally through respective governance boards (COVID and flu)	TBC by programme (COVID and flu)	Yes	Yes (Note for Detained Estate this will be for COVID-19 only)
5. Safety and Quality of Service Performance					

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Detailing performance against the Quality Requirements (Schedule 4c), PSIRF incidents, Never Events and duty of candour, without limitation:  • Themes and trends from incidents/adverse reactions and evidence of lessons learnt (including NRLS, MHRA Yellow Card reporting, Never events;  • Details of any thresholds that have been breached and any Never Events and breaches in respect of the duty of candour that have occurred;  • Details of all requirements satisfied;	Report to be locally determined with commissioner.	Report to be locally determined with commissioner.	Monthly/quarterly (to be determined locally) report to include timeliness of reporting and actively demonstrate that there is a learning culture.	Yes	Yes
<ul> <li>Details of, and reasons for, any failure to meet requirements;</li> </ul>					

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Report on performance against the HCAI Reduction Plan.					
6. Medicines Management					
Evidenced in an annual report that demonstrates there are robust clinical governance, systems and processes in place to ensure the development, implementation and ongoing review of policies, procedures and tools for the safe and appropriate handling and use of vaccines from receipt through to administration, supply or disposal. As a minimum the report should demonstrate that standards are being met for the following:  • Staff handling vaccines work within (and maintain) their competency, and have appropriate supervision and	Annual	To be locally determined	Annual report	Yes	Yes

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authorisations to perform their duties;					
<ul> <li>Risk assessments are completed at points of change in service delivery (e.g. when a new or additional vaccine is deployed);</li> </ul>					
<ul> <li>Cold chain management is robust;</li> </ul>					
<ul> <li>Legal parameters are adhered to for all vaccine handling tasks, including supply or administration.</li> </ul>					
7. Service User Experience					
Complaints monitoring report, setting out numbers of complaints received and including analysis of key themes and trends in content of complaints.	Monthly  To be agreed locally with Commissioner (NHSE)	[For local agreement]	Local Systems to determine timeframe and in line with existing requirements	Yes	Yes

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Learning to mitigate against further same or similar complaints and actions taken should be detailed in the report as and when appropriate.  Service User satisfaction survey themes and trends including evidence of lessons learnt.					
8. Reducing Inequalities and barriers to access  The Provider will evidence how they have attempted to vaccinate different groups identified by NHS England (and JCVI), including data collection	Seasonal campaign annual	Report to be locally agreed with the Commissioner (NHSE)	Depending on arrangements with the local	Yes	Yes
detailing the number of vaccines given, and the number of vaccines not given, and including evidence of reasons for vaccine refusal.  Sites to demonstrate reasonable adjustments.			commissioner, and at least once during campaign.  To be reported to [Commissioner to insert appropriate contact details for		

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Sites to demonstrate collaborative working with commissioners to identify gaps.			NHS England Region].		
9. Workforce					
Vaccination workforce data (anonymised) entered onto ESR.	N/A – reporting will be automated	ESR download to Foundry dashboard	Report via Foundry (workforce planning tool). A defined naming convention on ESR will need to be used to enable the automated interface.		All relevant organisation s employing and/ or supplying vaccination workforce