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| Mobilisation Guide |
| Version 1, 6 April 2023 |

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​ **To:**  Vaccination Sites Designated in Spring/Summer 2023

11/04/2023

**COVID-19 Vaccination Programme Spring/Summer 2023 Vaccination Campaign: Mobilisation of newly designated sites**

Thank you for agreeing to deliver COVID-19 vaccinations for the Spring/Summer 2023 campaign and supporting our national mission for the NHS to boost our defences against COVID-19.

Your request to set up a new Designated Site has been**approved for onboarding** to allow delivery of COVID-19 vaccinations. Delivery of vaccinations must be in accordance with the appropriate service specification for your site; [General Practice PCN grouping,](https://www.england.nhs.uk/coronavirus/publication/covid-19-enhanced-service-specification/) [Community Pharmacy](https://www.england.nhs.uk/coronavirus/publication/community-pharmacy-national-enhanced-service-covid-19-vaccination-programme/), or [Vaccination Centre / Hospital Hub / Hospital Hub+](https://nhsengland.sharepoint.com/sites/PrimaryCareCovidVaccinationProgrammePCCVPGroup/Shared%20Documents/20220425%20Onwards/20220425%20Onwards%20Site%20Designation%20Process%2C%20Estates%2C%20Supply%20%26%20Log/Regional%20Comms%20-%20letters%2C%20emails%2C%20Mob%20Guides/Site%20Designation%20Mobilisation%20Guides/Mobilisation%20Guide%20Merging%20-%20Spring%202023/Coronavirus).

The timeline for your site to start vaccinating will be subject to completion of final site readiness assurances before vaccine is dispatched.

CP, VC and HH/HH+ sites will not be able to order vaccine or commence vaccinating until confirmation has been received that you have accepted the terms of the ES and your site is site ready to vaccinate.

Your site must continue to meet the [site designation criteria](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2022/07/C1655_COVID-19-vaccination-programme_-Site-designation-and-onboarding-process_-September-2022-March-2023-Phase.pdf), and [readiness checks](https://ppds.palantirfoundry.co.uk/multipass/login/all) throughout the programme. Should you wish to make any changes to your site in future, please contact us at lvssitechanges.covid19@nhs.net and follow the established change request process.

New sites will start to receive permissions to access national vaccination programme from Tech and Data systems. You should take the necessary steps to prepare your site for vaccinations.

Please read the mobilisation guide included in this letter in full. It contains vital information about the programme and steps that you must take.

The table below shows the site set-up timescales for most sites (unless advised otherwise by your regional team).

|  |  |  |
| --- | --- | --- |
|   **Items**  | **Date**   | **Key Actions**   |
| Software – The National Data Platform (also referred to as Foundry)   | 17/03/2023 | Links to register for National Data Platform/Foundry sent to sites by email to the nominated IT administrator(s). Please ensure you activate your account in order to place a vaccine order. In order to use National Data Platform/Foundry, you also need an Okta account (see details in section 8).   |
| Software - Point of Care (POC)   | 22/03/2023 | POC system passwords sent to sites (please access the system within three days to prevent expiry of password).    |
| Software – NBS (where required)     | 22/03/2023 | Guidance for new user on how to access QFlow is [here](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding/q-flow-guidance/site-manager-checklist-for-setting-up-a-new-vaccination-site).  NBS support sessions can be accessed [here](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding#help-and-support).   Guidance and tutorials on how to access and update the Q-Flow attributes can be found [here](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding/q-flow-guidance/manage-location-details).   |
| Vaccine Order    | (See section 4 for cut off times linked to fixed delivery days)   | Site to place vaccine order in the National Data Platform/Foundry Ordering Platform. If you are having issues accessing the National Data Platform or the Ordering Platform please contact Foundry.support@england.nhs.uk. Please note that sites can only be set up to order vaccine once final readiness checks have been completed.    |
| Vaccine Delivery   | As per fixed delivery day (see below)   | Vaccine order to arrive on fixed delivery day subject to orders being placed in the Ordering Platform in the National Data Platform/Foundry by the stipulated cut off time.    |

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| --- |
| **Vaccination Site Designation Date and Vaccine Delivery Day** |
| **Designation date​** | **Vaccine delivery received (subject to orders being placed and fixed delivery day)​** |
| Tuesday 14 March​ | w/c 3 April​ |
| Tuesday 21 March​ | w/c 10 April​ |
| Tuesday 28 March​ | w/c 17 April ​ |
| Tuesday 4 April​ | w/c 24 April ​ |
| Tuesday 11 April​ | w/c 1 May (bank holiday)​ |
| Tuesday 18 April ​ | w/c 8 May​ |
| Tuesday 25 April ​ | w/c 15 May ​ |

NHS England’s guidance and related letters for the COVID-19 vaccination programme can be found at <https://www.england.nhs.uk/coronavirus/covid-19-vaccination-programme/>, and other helpful resources (including many referred to in the mobilisation guide) are available on the [FutureNHS workspace](https://future.nhs.uk/CovidVaccinations/grouphome).  You will be sent an invitation to join the workspace if you are not already a member.

You must sign up to our [Primary Care Bulletin](https://www.england.nhs.uk/email-bulletins/primary-care-bulletin/) and [Cross Programme Bulletin for](https://future.nhs.uk/CovidVaccinations/view?objectID=38665968) regular updates**.**

Thank you again for all your efforts so far and in mobilising your site to participate in the COVID-19 vaccination programme.

Yours faithfully

**Caroline Temmink**

**Director of Operations and Delivery – COVID-19 Vaccination Programme**

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# Reading this guide

This mobilisation guide has been written for COVID-19 Vaccination Sites contracted as part of the COVID-19 Vaccination Programme. You will work with other contractors (Primary Care Network Groupings, Community Pharmacies, Hospital Hubs and Hospital Hub+ and Vaccination Centres) and Local, System and Regional NHS colleagues across delivery models. Together we will deliver the maximum available doses of vaccine​ to minimise morbidity and mortality​ as quickly and as safely as possible.

Please read the guide in full before your site goes live. Some sections of this guide will be updated, and any changes will be communicated via the Cross-Programme Bulletin.

# 1. Contractual arrangements for Spring/Summer 2023 COVID-19 vaccination campaign

**For General Practice led sites (PCN Groupings)**

* 1. Your regional commissioning team will have confirmed with you in writing if you are to continue to deliver the service in the Spring/Summer COVID-19 vaccination campaign. The existing enhanced service specification for General Practice has been updated and published here: [Coronavirus » Enhanced Service (ES) Specification COVID-19 vaccination programme: 1 September 2022 to 31 August 2023 (england.nhs.uk)](https://www.england.nhs.uk/coronavirus/publication/covid-19-enhanced-service-specification/).
	2. PCN Groupings must have a Collaboration Agreement in place before they administer COVID-19 vaccinations. An updated template Collaboration Agreement was published on 21 March 2023 here: [https://www.england.nhs.uk/coronavirus/covid-19-vaccination-programme/covid-19-vaccination-guidance/#primary-care](https://www.england.nhs.uk/coronavirus/covid-19-vaccination-programme/covid-19-vaccination-guidance/) which you can use and adapt.

**For Community Pharmacy led sites (CPs)**

* 1. The updated COVID-19 vaccination enhanced service (ES) specification for Spring/Summer 2023 is published at <https://www.england.nhs.uk/coronavirus/publication/community-pharmacy-national-enhanced-service-covid-19-vaccination-programme/>. Your regional team will complete the details within section on and ask you to sign and return a copy. You should check that you are able to meet all the requirements, then return a signed copy. Your regional team will confirm with you if you are to provide vaccination visits to residents in care homes for older adults and housebound patients.

**For Vaccination Centres (VCs) and Hospital Hub and Hospital Hub+ (HH/HH+s)**

* 1. Your regional commissioning team will agree Standard Contract Variations with Standard Contract holders that will deliver COVID-19 vaccination services in Spring/Summer 2023.
		1. For non-primary care providers who wish to operate as HH / HH+ or Vaccination Centres (VCs), and already hold an NHS Standard Contract, your regional commissioning team will agree Standard Contract and appropriate schedule variations, to enable providers to deliver COVID-19 vaccination services in Spring/Summer 2023.
		2. For non-primary care providers who wish to operate as HH, HH+ or a VC and do not already hold an NHS Standard Contract, your regional commissioning team will issue a new Standard Contract and appropriate schedule so the Providers can deliver COVID-19 vaccination services in Spring/Summer 2023.

# 2. Site Governance and Indemnity

**All Delivery Models**

* 1. The site leadership team should use the [Quality Assurance Framework](https://www.england.nhs.uk/coronavirus/publication/quality-assurance-framework-covid-19-vaccination-sites/) as an audit tool, to be completed after site opening.
	2. For newly designated sites, regional teams will need to complete existing site assurance processes on Foundry for activation and vaccine supply. This includes questions relating to vaccine assurance pending review for future campaigns. Your regional team will advise sites on local vaccine assurance and documentation requirements in accordance with national policy and best practice guidelines.
	3. You must also ensure that your site has a clinical governance process in place, an identified lead to manage the workforce, safe staff arrangements and an operational lead. The [Standard Operating Procedure: Management of COVID-19 vaccination clinical incidents and enquiries](https://www.england.nhs.uk/coronavirus/publication/standard-operating-procedure-management-of-covid-19-vaccination-clinical-incidents-and-enquiries/) provides more detail.
	4. Before opening sites should ensure compliance with and completion of:
* Relevant site assurance requirements (see section 3)
* [Information and guidance from Specialist Pharmacy Service on pharmaceutical aspects of COVID-19 vaccines’ use](https://www.sps.nhs.uk/home/guidance/covid-19/covid-19-vaccines/) guidance
* The [Standard Operating Procedures on handling of multiple vaccines](https://www.sps.nhs.uk/articles/safe-practice-for-handling-multiple-covid-19-vaccines/),
* [Cold chain management](https://www.sps.nhs.uk/articles/maintaining-the-covid-19-vaccines-cold-chain/) compliance

**General Practice led sites (PCN Groupings)**

* 1. The contractor must have in place adequate indemnities and insurance in respect of any legal obligations relating to public and employer’s liability. Please refer to the GP Enhanced Service Specification paragraph 6.5.9 for relevant guidance on s clinical negligence indemnity cover.

**CPs**

* 1. The Responsible Pharmacist (RP) at the CPis always professionally responsible and accountable for safe delivery of the COVID-19 vaccination service being delivered ‘at’ or ‘from’ a CP led site. This includes vaccinations being delivered from all associated premises, including sites on the same or a different floor of the same building the CP and any related pop up or satellite sites.
		1. Where the RP of the registered CP is unable to ensure sufficient supervision of the COVID-19 vaccination service there must be an additional pharmacist on-site supervising the service. This on-site pharmacist must be linked into the RP (and SP) at the registered CP through an appropriate governance framework and fulfil the role of the Clinical Supervisor (CS) as described in the [National Protocol.](https://www.england.nhs.uk/coronavirus/covid-19-vaccination-programme/legal-mechanisms/national-protocols-for-covid-19-vaccines/)
		2. An additional on-site pharmacist (who fulfils the CS role) is always required where the designated site is based in an associated premises, including sites on the same or different floor of the same building the CP is in, a different building such as a village hall, or a mobile or pop-up site.
	2. For designated sites delivering lower numbers of vaccinations a week, it may be possible for the RP to also be the CS for vaccinations being delivered ‘at’ the registered CP itself, or ‘from’ a site on the same floor close to and visible to the registered CP. This can only be determined after a thorough risk assessment has been completed for the vaccination service and an updated risk assessment completed for the remaining CP services. This must consider cumulative risks to ensure the RP is able to ensure sufficient supervision of all the CP services (including clinical supervision). This should be kept under regular review.
	3. CP Contractors and SP must be assured that the service can be carried out in accordance with the ES, all the General Pharmaceutical Council’s (GPhC) standards for registered pharmacies can be met, and safe and effective CP services (including vaccinations) can be delivered to patients and the public.
	4. Information and advice are available from multiple sources and CP professionals must familiarise themselves with relevant guidance including from the [GPhC](https://www.pharmacyregulation.org/standards/guidance/qa-coronavirus/covid-19-vaccination-programme), the [Specialist CP Services (SPS) website](https://www.sps.nhs.uk/home/covid-19-vaccines/) and [UK Health Security Agency (UKHSA](https://www.gov.uk/government/collections/covid-19-vaccination-programme)).
	5. Community CP led sites must always comply with GPhC Standards. Their website has guidance about what is expected of contractors. You can access pages relating to COVID-19 vaccination [here](https://www.pharmacyregulation.org/standards/guidance/qa-coronavirus/covid-19-vaccination-programme).
	6. You must ensure that you have Clinical Negligence and other relevant insurance to cover COVID-19 vaccination activity undertaken at your site in line with your ES agreement.

**VCs and Hospital Hubs (HH/ HH+)**

* 1. The Clinical Lead at the VC/HH/HH+ is always professionally responsible and accountable for safe delivery of the COVID-19 vaccination service being delivered ‘at’ or ‘from’ a VC led site. This includes vaccinations being delivered from all associated premises, including sites on the same or a different floor of the same building the VC and any related pop up or satellite sites.
	2. You must also have a clinical governance process in place, an identified lead to manage the workforce, safe staff arrangements and an operational lead for the site. The [Coronavirus » Standard operating procedure: Management of COVID-19 vaccination clinical incidents and enquiries](https://www.england.nhs.uk/coronavirus/publication/standard-operating-procedure-management-of-covid-19-vaccination-clinical-incidents-and-enquiries/) provides more detail.

# 3. Site and Vaccine Assurance

**All Delivery Models**

* 1. For newly designated sites, regional teams will need to complete site assurance (Appendix A) on Foundry for activation and vaccine supply.
	2. Commissioner and provider organisations responsible for the delivery of vaccination programmes in England should ensure that local practice is in accordance with national policy and best practice guidelines. The Department of Health provides a [protocol](https://www.gov.uk/government/publications/protocol-for-ordering-storing-and-handling-vaccines) that covers the minimum standards expected of professionals responsible for vaccination.
	3. JCVI has provided a statement of guidance for the vaccines available for use in the Spring/Summer 2023 Booster Programme. The vaccines advised for use in the Spring/Summer Booster Programme are listed on the [JCVI statement on spring 2023 COVID-19 vaccinations, 22 February 2023 - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/spring-2023-covid-19-vaccination-programme-jcvi-advice-22-february-2023/jcvi-statement-on-spring-2023-covid-19-vaccinations-22-february-2023) webpage.
	4. The published [Vaccine assurance checklist standardised - COVID-19 Vaccination Programme](https://future.nhs.uk/CovidVaccinations/view?objectId=142633541) is available on NHS Futures for regions and sites to use as a tool for site vaccine readiness.
	5. Regional teams will advise sites on their local vaccine assurance and documentation requirements in accordance with national policy and best practice guidelines. N.B. Vaccine will be provisioned in line with those advised for use in the Spring/Summer 2023 Booster Programme.
	6. Once all site readiness and assurance processes are completed by the Region and confirmed at a National level, sites will be activated on Foundry.
	7. Regions and Integrated Care Boards (ICB) will be able to add all newly designated sites to the supply planner for approved vaccines for the Spring/Summer 2023 campaign within 24 hours of activation on Foundry.
	8. Regions and ICBs will make vaccine allocations for sites as soon as they are confident the site is ready to receive vaccine.
	9. Sites will be able to order vaccine as soon as supply allocations are approved by the ICB and they have a fixed delivery date.
	10. It is imperative that sites maintain up to date contact details on Foundry to ensure vaccine deliveries are fulfilled and our delivery partners can contact the site should they need to. Please advise your regional team of any changes in site contact details as soon as possible (see Regional Vaccination Operations Centre (RVOC) contact details section 17). N.B. sites moving premises must have this approved by the regional team prior to the move taking place. Site moves require 10 days advance notice to ensure processing time for deliveries details to be updated with our supply partners.
	11. The latest COVID-19 2023 Spring Reference Guide and Spring/Summer 2023 Deployment Guide is available online at the [Spring Vaccination Programme Key Documents - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/CovidVaccinations/view?objectID=38666160). You should start working through this document and ensure compliance with all areas of the guidance. Any changes will be communicated via the [Cross Programme bulletin](https://future.nhs.uk/connect.ti/CovidVaccinations/view?objectId=124545733) and all sites should ensure that they read, understand and comply with the most recent version.

# 4. Vaccine Ordering and Supply

**All Delivery Models**

* 1. All sites must log into the National Data Platform/NHS Foundry Platform to order their vaccine supply including any new vaccine in advance. All sites will need to have access to the National Data Platform/Foundry. Access to the National Data Platform/Foundry and Okta will be requested on your behalf for IT administrators of new sites after site designation. You must activate your accounts when the access link is sent by email.
	2. Orders will have a maximum capacity ‘max cap’, which may change weekly depending on programme targets, available capacity and supply availability. The site team will be able to pull down vaccine at a volume up to this maximum cap to be delivered on a specified date. Requests to increase the max cap can be made in the Supply Planner, these requests require approval by the ICB and Regional team before the volumes will flow through the Ordering Platform. Details on using the Supply Planner and Ordering Platform can be found on [Supply, Delivery & Stocktake (Foundry) - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/connect.ti/CovidVaccinations/view?objectID=38666992)
	3. Vaccine deliveries will be made between 08:00 and 18:30hrs Tuesday to Friday during the Spring/Summer 2023 Campaign. Please see below for list of site designation dates and corresponding vaccine delivery dates.

**Table 2. Vaccination Site Designation Date and Vaccine Delivery Day (for Spring/Summer 2023)**

|  |  |
| --- | --- |
| **Designation date​** | **Vaccine delivery received (subject to orders being placed and fixed delivery day)​** |
| Tuesday 14 March​ | w/c 3 April​ |
| Tuesday 21 March​ | w/c 10 April​ |
| Tuesday 28 March​ | w/c 17 April ​ |
| Tuesday 4 April​ | w/c 24 April ​ |
| Tuesday 11 April​ | w/c 1 May (bank holiday)​ |
| Tuesday 18 April ​ | w/c 8 May​ |
| Tuesday 25 April ​ | w/c 15 May ​ |

* 1. An estimated delivery window for the arrival of your vaccine can be viewed on the National Data Platform/Foundry, see “Your Orders” section of the Ordering Platform, the day before your vaccine is due to arrive. This provides you with a 2.5 hour estimated delivery window. Please see the [delivery ETA process guide](https://future.nhs.uk/CovidVaccinations/view?objectId=118940165) for full details. Sites should plan to start vaccinating patients from the day after your scheduled vaccine delivery date.
	2. Sites will receive one delivery per week on their designated day, Tuesday to Friday during the Spring/Summer 2023 Campaign (28 March 2023 – 30 June 2023). At all other times sites will receive one delivery per week on their designated day Monday to Friday (see table below). A delivery will only be made if a site has placed an order through the Ordering Platform on the National Data Platform/Foundry, within the allotted ordering window. No vaccine order means no delivery.
	3. Sites are able to view their fixed delivery day on the [National Data Platform/Foundry Ordering Platform](https://ppds.palantirfoundry.co.uk/multipass/login/all).
	4. Sites confirmed as ready on the National Data Platform/Foundry for Spring/Summer 2023 (and marked active) will receive vaccine on their fixed delivery date if it is ordered before the deadline stipulated below:

|  |  |
| --- | --- |
| **Delivery day**  | **Deadline for vaccine orders \***  |
| Tuesday  | 8am the previous Friday  |
| Wednesday  | 8am on the Monday beforehand  |
| Thursday  | 8am on the Tuesday beforehand  |
| Friday  | 8am on the Wednesday beforehand  |

\* Sites need to allow 24 hours for the site to be activated by the internal teams from the point that the regional teams mark the site ready for Spring/Summer 2023 on the National Data Platform/Foundry.

* 1. To facilitate smooth delivery of the vaccine to your site, please ensure that your named contact, either a registered Health Care Professional (HCP) or appropriately trained and competent member of staff, will be available at the site to receive the vaccine on the delivery day. Delivery drivers are unable to wait for staff to arrive on site, as waiting will have a knock-on effect for later deliveries. Failure to be on site to take receipt of vaccine will result in your vaccine being undelivered and the potential wastage of vaccine. For further guidance to ensure the successful delivery of your vaccine order can be found [here](https://future.nhs.uk/CovidVaccinations/view?objectID=153103205)
	2. Your Lead Contact, as advised at the point of Expression of Interest (CP sites) and designation (all other sites), will be the main point of contact. Please ensure that your Lead is contactable over the next fortnight to receive updates on deliveries. If you do need to change the contact, please inform your regional team contact.
	3. Post-vaccination record cards can be ordered by [visiting the UKHSA website.](https://www.healthpublications.gov.uk/ArticleSearch.html?sp=St-1305&sp=Sreset) Vaccine-related consumables (e.g., syringes) will be delivered with the vaccine in their appropriate quantities.
	4. Vaccine, once delivered, should be stored at 2-8°C.The Expiry date will be clearly marked on the vaccine carton label. Please see [Maintaining the COVID-19 vaccines cold chain – SPS](https://www.sps.nhs.uk/articles/maintaining-the-covid-19-vaccines-cold-chain/) for further guidance on appropriate Cold Chain procedures.
	5. Once the site is mobilised contractors will be expected to collaborate with any national, regional and ICB operations centre in relation to stock forecasting and reporting. This includes reporting weekly stock takes, sites will not be able to order vaccine unless they have completed a stocktake in the last seven days.  A warning notice will pop up in the National Data Platform/Foundry and sites will need to input a stocktake prior to ordering vaccine.
	6. Vaccine consumables, such as needles and syringes, will be delivered with the vaccine supply see section 4.
	7. Queries about vaccine order, supply and delivery will need to be raised to your SVOC with escalations to RVOCs and National COVID Vaccination Operation Centre (NVOC) where required, as per the agreed escalation routes for all other queries. Please complete a [Specific Query Template](https://future.nhs.uk/CovidVaccinations/view?objectId=129815749) for these escalations. For issues that impact on the day or next day vaccination only, call EECL phoneline on 0800 015 7707 (Mon-Fri 09:00-17:00).

# 5. Clinical Preparedness

**All Delivery Models**

* 1. The [National Protocol](https://www.england.nhs.uk/coronavirus/covid-19-vaccination-programme/legal-mechanisms/national-protocols-for-covid-19-vaccines/) is recommended as a legal mechanism for administration for the vaccination programme as it enables splitting the vaccination task into component parts. This allows flexibility to adopt an expanded workforce model including the use of unregistered vaccinators with relevant training and experience to be deployed to support the vaccination process. The nationally authorised Patient Group Directions (PGDs) and National Protocols are available at [Coronavirus » Legal mechanisms (england.nhs.uk)](https://www.england.nhs.uk/coronavirus/covid-19-vaccination-programme/legal-mechanisms/) where you can also find more guidance on the different legal mechanisms for administration.
	2. The [Specialist Pharmacy Service](https://www.sps.nhs.uk/articles/the-legal-mechanisms-available-for-giving-covid-19-vaccines-and-their-application/) has a useful page which sets out who can work under a PGD or Protocol under the COVID-19 vaccination programme. This confirms the legal basis for the vaccination process and who can be involved.
	3. There are various clinical updates, checklists and operational guidance on [FutureNHS](https://future.nhs.uk/CovidVaccinations/view?objectID=35085840). The [Safety Huddle checklist](https://future.nhs.uk/CovidVaccinations/view?objectId=121076965) can be used at the start of every vaccination session, for example as part of a “Safety Huddle” or briefing.
	4. It is important that you only vaccinate people who are eligible, and that patients who are eligible are not turned away. Information can be found in the [Green Book](https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a) and is supported by the [Current Cohort Eligibility Tool](https://future.nhs.uk/CovidVaccinations/view?objectId=31770448). Sites should actively ensure they remain abreast of any updated publications of these resources.
	5. For 5-11, 12-15 and/or 16 & 17 year olds, please ensure you complete the relevant self-assessment checklist(s) on [Future](https://future.nhs.uk/CovidVaccinations/view?objectId=122010373)NHS. Once completed please remember to update your National Booking Service (NBS) profile as required, NBS calendars can be requested via change control. For more information on NBS please see section 9.
	6. Your site should be prepared to receive all age-appropriate vaccines, or any future vaccines recommended by the programme. The national team will confirm any additional assurance requirements.

# 6. Workforce & Training

**All Delivery Models**

**Workforce Management Model**

* 1. The COVID-19 vaccination programme has been supported through a named lead employer in each system. This proved value for money in the height of the pandemic but needs to evolve to reflect the service delivery model. As we transition to a seasonal campaign for vaccination, the deployment approach across the system needs to reflect the reduction in the number of vaccination centres requiring dedicated resource, whilst continuing to ensure that there is sufficient workforce available to meet the requirements of planned, outbreak and surge activity across all delivery models across the system. This means that the Lead Employer contracts will not be extended beyond 31 March 2023 and will be replaced by the requirement for each system to have in place a workforce management model to achieve four workforce objectives (detailed in [this objectives pack](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Ffuture.nhs.uk%2Fconnect.ti%2FCovidVaccinations%2Fview%3FobjectId%3D161097381&data=05%7C01%7Cengland.se-roc%40nhs.net%7Cce14ef3bc64746dfb36d08db208eadfa%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638139569389827257%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=fmTqIYlt7%2BpSJYCs4oYu9d8XK98ew1zRRT0wvkFktZs%3D&reserved=0)). We are asking systems to be transitioning to their new operating model by 1 April 2023. Any site should be able to access additionality of staff, if required, rom the Workforce Management Model in operation in their system.
	2. **The four workforce management objectives that should be achieved throughout**:
		1. Sufficient workforce to meet demand without impacting other services, representative of local community and making optimal use of unregistered practitioners.
		2. Workforce is resilient to support potential surge and outbreak requirements, including alignment with NHS Reserves.
		3. Integrated working across the system, with sharing of workforce between providers.
		4. A trained and competent workforce with rewarding career paths to retain the vaccinations workforce, including ability to deliver other prevention activity where appropriate.

**Training**

* 1. All staff involved in the delivery of COVID-19 vaccination will need to undergo training, the extent of which will vary depending on the staff member’s role and experience. All vaccinators will need to undertake training on the specific vaccine being administered which may be through completing the vaccine-specific e-learning modules within the [COVID-19 Vaccination e-learning programme.](https://www.e-lfh.org.uk/programmes/covid-19-vaccination/) They also need to be assessed and signed-off for competency against the PHE [COVID-19 Vaccinator competency assessment tool](https://www.gov.uk/government/publications/covid-19-vaccinator-competency-assessment-tool) for each specific vaccine they are delivering. Your sites should ensure all staff are adequately trained before they commence vaccinating.
	2. [PHE immunisation training standards](https://www.gov.uk/government/publications/national-minimum-standards-and-core-curriculum-for-immunisation-training-for-registered-healthcare-practitioners) will apply as the minimum national standard for staff undertaking immunisation training.
	3. UKHSA and Health Education England have published useful training resources: [COVID-19: vaccinator training recommendations](https://www.gov.uk/government/publications/covid-19-vaccinator-training-recommendations), [COVID-19 vaccination programme website](https://www.gov.uk/government/collections/covid-19-vaccination-programme) and [Immunisation training standards for healthcare practitioners](https://www.gov.uk/government/publications/national-minimum-standards-and-core-curriculum-for-immunisation-training-for-registered-healthcare-practitioners).
	4. As set out in the training module for each vaccination, informed consent must be obtained before administration of all vaccines, but there is no requirement for consent to be in writing. As part of the consent process, you should also highlight any patients who may lack mental capacity to give their consent at the time of vaccination and refer to the guidance within [FutureNHS](https://future.nhs.uk/CovidVaccinations/view?objectId=110086501) on how to proceed, which includes seeking consent from a patient representative with legal authority, or making a best interests decision.

**Other useful Information:**

* 1. Workforce and training information can be found at [Workforce - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/CovidVaccinations/view?objectID=35134192).
	2. Guidance on workforce planning and skill-mix is included in the [COVID-19 Spring Vaccine Deployment Guide](https://future.nhs.uk/CovidVaccinations/view?objectId=161900549)

**General Practice led sites (PCN Groupings) and CP**

* 1. The [Workforce & Training Toolkit](https://future.nhs.uk/CovidVaccinations/view?objectId=135196677) is designed for LVS leads to use as a practical guide that:
		1. defines the workforce requirements and workforce models based on the legal mechanisms of delivery
		2. shares innovative approaches to optimise the workforce and streamline the vaccination pathway.
		3. We recommend that sites finalise their workforce arrangements, have any new or temporary staff in place, organise appropriate IT log ins and complete all their traininga few days before site go live.
	2. **General Practice led sites (PCN Groupings)** can deploy Additional Roles Reimbursement Scheme (ARRS) staff (where permitted by legislation or protocol) as required to vaccinate. Staff employed via the ARRS may continue to support the COVID-19 vaccination programme in Spring/Summer 2023 and remain eligible for reimbursement. However, this is only on the basis that they are doing so alongside their ARRS role and continue to deliver the requirements for their role as set out in Annex B of the Network Contract DES. For the avoidance of doubt, this means that any ARRS staff may not be fully or wholly deployed to work within a COVID-19 vaccination clinic and remain eligible for reimbursement.

7. Patient Recruitment

**All Delivery Models**

* 1. The national call/recall service will continue to invite and remind people to get their vaccination doses.
		1. Eligible people are contacted through a mixture of the NHS app, SMS message, emails, and letters.
		2. Call/recall communications direct people to book appointments through the NBS online or by calling 119 or to find walk-in services through the Grab a Jab website.
		3. The NBS will offer sites with available appointments that are closest to the postcode that people enter.
	2. You may also wish to engage with your local population using other methods, such as signage, your own website, or social media, directly to patients presenting to you, through local support groups etc. Communication resources are available; speak with your regional team for further information.
	3. Vaccine supply should be optimised so that eligible cohorts receive their doses in a timely manner and vaccine waste is minimised. Sites should consider arrangement of clinics in a way that minimises waste, including plans for using up multidose vials in the event of patients not arriving for appointments (for example contacting patient who have appointments for subsequent days).
	4. Please refer to the [COVID-19 Spring Vaccine Deployment Guide](https://future.nhs.uk/CovidVaccinations/view?objectId=161900549) for further guidance on booking and communications as well as on health inequalities, inclusion health and how to ensure your vaccination service is accessible to the whole population that you serve. Local government together with community and partner agencies may also be able to help you improve access and vaccination uptake among your patient population.
	5. Some patient cohorts are more likely to come forward for vaccination if they can do so without an appointment. Sites should ensure that there is capacity available as walk-in as well as booked appointments.
	6. Healthcare workers in NHS Providers have been asked to provide advice, via the [NHS Standard Contract 23/24](https://www.england.nhs.uk/nhs-standard-contract/23-24/), to eligible immunosuppressed and maternity patients, including signposting to local sites and / or the National Booking System.
	7. **General Practice led sites (PCN Groupings)** using Local Booking Systems will be responsible for appointment booking at the designated site.
		1. It is good practice to send booking reminders before each appointment. Individuals should also be informed of the process for rebooking/changing appointments if necessary. Where appropriate, and licenses allow, PCN grouping sites may be able to use the NBS. If your site would benefit from access to the NBS please contact your regional team.
		2. GP practices know their local populations and may be responsible for generating patient lists based on current cohort eligibility in line with JCVI guidance.  Your combined PCN grouping patient list will inform any local call and recall requirements.
		3. PCN grouping-led COVID-19 vaccination sites and General Practice are also able to access the [GP Vaccine Dashboard](https://digital.nhs.uk/dashboards/gp-covid-19-vaccine-dashboard), developed by NHS Digital to enable general practices and PCN-led local vaccination services to view the uptake of the COVID vaccine of their registered patients. Access is via smartcard controls and further information is available, together with the relevant user guides, on the above link.
		4. We recommend that where applicable, you start booking patients into your vaccination clinic a week in advance of notification of vaccine supply.

**CPs and VCs**

* 1. Local booking arrangements may be used with the written consent of your NHS England regional team, particularly to help improve vaccine uptake in eligible populations and where vaccine hesitance is a concern.
	2. Walk-in clinics should be advertised on the Grab a Jab website (also known as the nhs.uk walk-in vaccine site finder). To advertise the clinic, information must be submitted for publication through the SharePoint site at least 24 hours in advance. More information can be found [here.](https://future.nhs.uk/CovidVaccinations/view?objectId=110336773)

**HH and HH+**

* 1. HH and HH+ may also use Local Booking Systems to manage vaccinations, Hospital Hub+ should use these LBSs alongside the NBS to maximise use of capacity.

# 8. Accessibility and Patient Information

**All Delivery Models**

8.1 It’s important that everyone who is eligible for COVID-19 vaccination feels welcomed and can access COVID-19 vaccination that meets the Accessible Information Standards [here](https://www.england.nhs.uk/2016/08/accessible-information-standard/). Staff should take appropriate consideration of the reasonable adjustments and additional communication support that may be required to facilitate vaccination for disabled people, and also, those that require language interpretation services.

8.2 The following resources are available:

8.2.1 British Sign Language support for people with hearing impairments is available at appointments via either an onsite BSL interpreter or using the SignVideo app [here](https://signvideo.co.uk/?gclid=EAIaIQobChMIureA1pjP_QIVkM3tCh1BYgLcEAAYASAAEgL2E_D_BwE) by selecting the NHS 119 button in the app’s SignDirectory. Vaccination information is also available in accessible formats on GOV.uk [here](https://www.gov.uk/government/publications/covid-19-vaccination-easy-read-resources).

8.2.2 Information for visually impaired people is available to order in a range of accessible formats.

8.2.3 A social media graphic and letter are available in different languages, to reassure people who may not be registered with a GP or have leave to remain in the UK, about their right to free COVID-19 vaccinations, treatment and testing.

8.2.5To be as fully accommodating as possible for members of the public with Severe Mental Illness, Learning Disability and Autism please familiarise yourself with [Learning-Disability-Framework-Oct-2019.pdf (skillsforhealth.org.uk)](https://www.skillsforhealth.org.uk/wp-content/uploads/2020/11/Learning-Disability-Framework-Oct-2019.pdf) and [Learning disability (skillsforcare.org.uk)](https://www.skillsforcare.org.uk/Developing-your-workforce/Care-topics/Learning-disability/Learning-disability.aspx).

8.2.6 UKHSA has created several leaflets for patients. You can view the key resources [here](https://www.gov.uk/government/collections/covid-19-vaccination-programme). Please ensure relevant staff familiarise themselves with the content of the leaflets.

* 1. You should consider how you can meet the needs of your local population, for example by providing access to information accounting for different information or communication needs (e.g., translations, easy-read). All COVID-19 publication materials are required to be accessible and sites should ensure they have materials in the format patients prefer. British Sign Language videos, large print, easy read, Braille versions of the key leaflets, as well as versions in a large number of different languages, are available. Most leaflets can be printed or shared digitally at the point of requirement. If you need to print leaflets at any point, for example, in a specific language, you can download PDF versions which can be printed on an office printer and copied on a photocopier, or professional printer-ready versions [here](https://www.healthpublications.gov.uk/Home.html).
	2. Please note a supply of Braille leaflets should be maintained at the site as it is the only leaflet which cannot be shared digitally. Switching on the Braille attribute in Q-Flow means your site can support vaccination bookings from people who require appropriate support and also access to information and guidance published in Braille.
	3. Please ensure you have the latest version of all publications at your site and review these regularly. These can be ordered by visiting the [Publications Portal online](https://www.healthpublications.gov.uk/Home.html) or by telephone (0300 123 1002, Monday to Friday 9am-17:30pm). You must register on that site as an organisation, not an individual, to enable you to order enough leaflets. The delivery of the publications is free and takes between 5-7 days.
	4. COVID-19 vaccination: easy-read resources for children and young people can be found [here](https://www.gov.uk/government/publications/covid-19-vaccination-easy-read-resources-for-children-and-young-people).
	5. Sites should ensure accessibility attributes are updated so people booking vaccination appointments can choose a site that meets their needs. This information will be visible through the NBS at the point of booking. Guidance and tutorials on how to access and update the Q-Flow attributes can be found [here](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding/q-flow-guidance/manage-location-details). Switching on the Braille attribute in Q-Flow means your site is able to support vaccination bookings from people who require appropriate support and also access to information and guidance published in Braille.
	6. Please use the [Covid-19 Spring Vaccine Deployment Guide](file:///C%3A/Users/wboyes/Downloads/20230315_Covid-19%20Spring%20Vaccine%20Deployment%20Guide%20-%20FINAL_%20%284%29.pdf) for further information on Communications and Engagement

# 9. Equipment and Consumables

**All Delivery Models**

* 1. All new sites will need to procure their equipment, consumables, and appropriate PPE via their usual ordering routes or from regional supplies (see Appendix B).
	2. Sites should carry out a risk assessment to assess the need to have a defibrillator (AED) on site. Sites must be able to respond rapidly should a patient suffer a heart attack whilst attending a vaccination site. This may be an AED on site, a publicly available AED that the site staff can access and operate, or consistent rapid access to emergency services. It is important to note that vaccination does not increase the risk of heart attacks and a local risk assessment must be based on guidance on First Aid and Resuscitation.  This includes consideration as a minimum of the following:
		1. Location (e.g., remoteness)
		2. Workforce (including the consistent presence of healthcare professionals with advanced skills in resuscitation)
		3. Volumes of patients presenting (quantities of equipment and workforce requirements)
		4. Quantities of equipment / medicines held
	3. In discussion with the regional clinical lead and taking into account the availability of AEDs in other locations nearby (which can be checked here <https://www.heartsafe.org.uk/aed-locations>),the regional team may be able to relocate AEDs from other sites who are closed or have more than one AED if the risk assessment requires this to satisfy resuscitation equipment access requirements and the National Data Platform/Foundry readiness checks. Where there is a delay in supply, sites should take account the balance of benefits and harms of not starting to vaccinate and agree with their regional team whether to begin vaccinating whilst they await supply.
	4. Providers should be prepared to respond to three possible medical emergencies associated with vaccination: fainting, hyperventilation, and anaphylaxis.
	5. All sites must have an Anaphylaxis kit on site to commence vaccinations which includes:
* 3 x 1ml Adrenaline (Epinephrine) Ampules 1 in 1,000 (1mg in 1ml)
* 3 x Disposable Syringes 1ml
* 3 X BD Eclipse Disposable Safety Needles (Green) 21G x 1½”
* 3 X BD Eclipse Disposable Safety Needles (Blue) 23G x 1”
* 3 X Filter Needles with 5-micron filter 19(G) x 1½”
	1. Sites should refer to the Anaphylaxis (Vaccination) Guidelines 2021 (issued December 2020) as required. <https://www.resus.org.uk/about-us/news-and-events/rcuk-publishes-anaphylaxis-guidance-vaccination-settings>. If an anaphylaxis kit is used for an anaphylaxis event, this should be replaced immediately (please also remember to complete a Yellow Card report in these instances).
	2. Training should be undertaken in accordance with the national recommended programme approach for the training of registered and unregistered staff. All staff at designated sites as a minimum should have Basic Life Support (BLS) training, with some staff trained to a higher level, where required.
	3. All sites should at a minimum include a registered healthcare professional trained within the previous 18 months in the management of anaphylaxis, cardiopulmonary resuscitation, and use of an automated external defibrillator. UKHSA has included resuscitation training within the COVID-19 vaccination programme training resources, which can be found on the GOV.uk website.
	4. Sites need sufficient vaccine storage space at 2-8 °C and all sites must have a data logger, to ensure that vaccine is constantly stored at the correct temperature. If you feel that you need additional fridge capacity, please contact your regional team and requests will be dealt with by exception. Data loggers are one aspect of cold chain management and sites should have access to fridge temperature history where possible and review this regularly to maintain vaccine integrity and reduce vaccine waste. Further information is available on the SPS website: [Cold chain management for COVID-19 Vaccines](https://www.sps.nhs.uk/articles/maintaining-the-covid-19-vaccines-cold-chain/). Sites can refer to the fridge manual for the full specifications and are advised to ensure that they are optimising the use of functions available.
	5. If you do require further items speak to your RVOC to understand whether there is existing local stock available. RVOC contact details are listed under ‘Useful information’ (section 17).

9.17 Operational Considerations:

* + 1. Ensure that multiple PODs do not cross over. Larger centres should take into account additional considerations that larger volumes of people bring.
		2. Sites to consider the needs of people that may find standing in queues difficult. Carers / advocates may need to attend to support a user to access the vaccination.
		3. Emergency equipment should be sufficient for the size of the Vaccination Site and conveniently placed throughout.
		4. Site trials before going live are advised to ensure staff are familiar with their roles and flow can be seen and tested.
		5. Sites must ensure that a clear policy relating to the local complaint procedure is in place. This should guide people to the appropriate mechanisms for raising concerns and complaints to facilitate to local satisfactory resolution in line with the NHS Complaints procedure.
		6. All transit materials/packaging for the initial equipment should be kept (pallets/boxes etc) as they will be needed to repackage the equipment for return when the centre closes.
		7. See ([link)](https://www.sps.nhs.uk/articles/using-fridges-appropriately-to-store-covid-19-vaccines/) manuals to fridges and freezers being used across all vaccination delivery models.
	1. NHS England may require sites to vaccinate people in other settings such as care homes or domiciliary settings. In these instances, further equipment such as a cool box may be required. You should discuss access to this equipment with your regional team since this equipment will be shared with other local Vaccination Centres.
	2. Regional teams may be able to provide support by way of equipment loan, but it is envisaged that equipment will not be supplied to low volume sites, unless there are exceptional circumstances.
	3. Please consider how you can utilise your current space and furniture/equipment to accommodate patients waiting for and receiving their vaccinations without impacting other usual services.

# 10. Clinical Waste

**All Delivery Models**

* 1. It is vitally important that vaccination sites segregate all waste into the proper waste streams. Doing so reduces pressures on the waste services infrastructure, reduces the impact on the environment, significantly reduces costs and ensures compliance with relevant waste regulations.All waste should be disposed of using the allocated consumables and stored securely on site or transferred to another site as required (e.g., in the case of roving vaccination clinics) following each vaccination session.
	2. For further information on **clinical waste management** please refer to the [SOP](https://www.england.nhs.uk/coronavirus/publication/covid-19-waste-management-standard-operating-procedure/). Your regional team will usually arrange for collection of your clinical waste (or NHS England will fund the collection).
	3. **Offensive and general waste** should be processed through existing arrangements in line with the [SOP](https://www.england.nhs.uk/coronavirus/publication/covid-19-waste-management-standard-operating-procedure/)

# 11. Non-clinical IT Equipment & Systems

**All Delivery Models**

* 1. Non-clinical IT equipment (NCIT) will not be provided by National NHSE to Regions/Sites (except in exceptional circumstances to support surge scenarios), if new sites need to request NCIT this should be sourced from existing stockholdings within Regions and ICSs.

|  |  |
| --- | --- |
| **IT system**  | **Explanatory notes**  |
| The National Data Platform/NHS Foundry LVS Site 360  | This system is used for various key functions; ordering vaccine, requesting change to vaccine allocation amounts, site information, reporting, data collection and operational planning. All team members, as identified by you, will receive an invitation to log into the National Data Platform/NHS Foundry. You can access your site details [here.](https://ppds.palantirfoundry.co.uk/workspace/carbon/ri.carbon.main.workspace.8a82681c-7f9d-478c-b487-dce12b14cbbd/ri.workshop.main.module.a04a98fa-5b1c-498b-948d-ee0362180d91) Weekly stock position report, due each Monday morning to reflect stock held at close of day on Sunday, must be returned on the [Site Stock Manager app (palantirfoundry.co.uk)](https://ppds.palantirfoundry.co.uk/workspace/module/view/latest/ri.workshop.main.module.0848f2f6-f131-4e15-98fb-aeffb6091683) [[ppds.palantirfoundry.co.uk]](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Furldefense.proofpoint.com%2Fv2%2Furl%3Fu%3Dhttps-3A__ppds.palantirfoundry.co.uk_secure-2Dupload_forms_pkdgf7xndpkqat2qhoeo467wnc%26d%3DDwMFAg%26c%3Dizlc9mHr637UR4lpLEZLFFS3Vn2UXBrZ4tFb6oOnmz8%26r%3D7-_GeXmM08j1sWpW2He9pczhq8dhTt3CWatsFI4WNwI%26m%3DBMSf1sWfpjc3dO_Y2kCuIu7YRvd9s2f4rBGiK8xlizo%26s%3D5egwLSny9GBth7HBlIgOi8ca46iWA4JlKGsD4RTDIyo%26e%3D&data=04%7C01%7CKevin.Mcleod192%40mod.gov.uk%7C41e463f228af4833842208d8d4f06028%7Cbe7760ed5953484bae95d0a16dfa09e5%7C0%7C0%7C637493476160119475%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=CBPIi9MSwjJshZBLBOj7UG5JgRSk5DluOxPbwHJ9Txk%3D&reserved=0).  Your staff will be responsible for ordering vaccine for your site in the Ordering Platform, as per the vaccine allocation set in the Supply Planner. Please expect to see an email from england.traininganddeployment@nhs.net containing a link to all support and training documentation.   New users will also be sent an email inviting them to set up a password for Okta, the first step for logging into the National Data Platform/Foundry. See section 4.1 for the steps to access Okta. You will also need to download Google authenticator App for unique login codes for the National Data Platform/Foundry access.  |
| More information & training  | User guides are available via the NHS Foundry LVS Site 360 [Home page](https://nhsi.okta-emea.com/app/nhsimprovementandnhsengland_privacypreservingdatastore_1/exk3pwn7ubRN8J06k0i7/sso/saml). All the training materials and user guides for Foundry are also on [FutureNHS.](https://future.nhs.uk/CovidVaccinations/view?objectID=41682256)       |
| Site Stock Manager  | The Site Stock Manager function on the National Data Platform/Foundry is for recording your weekly [stock take on Foundry.](https://ppds.palantirfoundry.co.uk/workspace/module/view/latest/ri.workshop.main.module.0848f2f6-f131-4e15-98fb-aeffb6091683) For the user guide and videos on how to use the function follow [this link](https://future.nhs.uk/CovidVaccinations/view?objectID=38666992) to information on FutureNHS.  to information on FutureNHS.  |
| Helpdesk  |  Foundry.support@england.nhs.uk  |
| Point of Care System i.e. Outcomes4Health, Sonar  | These systems are used to record vaccination events and require a suitable 4G/Wi-Fi connection. Two of your team, as identified by you, will receive administrators log in details. They will be able to create and manage the site user accounts.   |
| More information & training  | Links to training information for each POC system is available [here](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/point-of-care).  |
| National Booking Service (NBS) (as appropriate) & Q-Flow  | NBS allows the public to book and manage their appointments at vaccination centres and CP sites. Q-Flow is the administration system that interacts with NBS. You will need to manage your clinics within Q-Flow. Before uploading appointment capacity to the NBS, you need to ensure that the requirements of the legal framework (for example National Protocol, Patient Group Direction), contractual, and clinical requirements are met. Sufficient vaccination appointments should be available in any given week for appointment types, [assured age-based cohorts](https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a), and assured vaccine types as agreed with the regional team.  See section 12 for more information. Additional operational guidance can be found [here](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding/q-flow-guidance/operational-guidance).  |
| More information & training  | All **training materials for Q-Flow/NBS** can be accessed from the following platforms: [NHS Digital Q-Flow](https://digital.nhs.uk/coronavirus/vaccinations/q-flow-guidance) and [training and onboarding.](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding)  · You Tube Video Tutorials:  * [How to create a calendar in Q-Flow](https://www.youtube.com/watch?v=15M7ZL7073Q)
* [How to update site details in Q-Flow](https://www.youtube.com/watch?v=qik6CkwMyAQ)
* [How to create a user in Q-Flow](https://www.youtube.com/watch?v=vF_xWag9nlY)

[Direct site support is available with NBS and Q-Flow super-users](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding#help-and-support)every Monday, Wednesday, and Friday from 1:30pm to 2pm.  |
| FutureNHS Platform  | This workspace holds key documents; such as the ES, consumables deliveries, training and [discussion forum](https://future.nhs.uk/CovidVaccinations/view?objectID=913754) to chat about the service with other programme participants.  |
| More information & training  | If you are not already a member of FutureNHS, you will be sent an invitation to join.  If you do not receive an invite or would like other team members to have access then follow this [link.](https://future.nhs.uk/)  |
| Helpdesk  | <https://future.nhs.uk/> or email P\_C\_N-manager@future.nhs.uk if you do not receive log in details.  |

# 12. National Booking Service (NBS) Site Management

**General Practice led sites (PCN Groupings), CPs, VCs and HH+ sites**

* 1. The two IT users provided at site designation will receive an email with log in details for Q-Flow. Q-Flow is the back-end site management system to support vaccination bookings through the National Booking Service (NBS) online guidance on how to and use Q-flow is available at [National Booking System (NBS) and Q-Flow Support - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/connect.ti/CovidVaccinations/view?objectID=30579600)
	2. It is important for site managers to begin by updating the Q-Flow attributes, guidance on how to do this can be found at [Manage site details - NHS Digital](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding/q-flow-guidance/manage-location-details). This is where you set your sites accessibility criteria, longitude and latitude, the age cohort you are assured to vaccinate and set your site availability to publish ‘online’ on the NBS. You will need to include information about your site such as access to parking when setting up Q-Flow. Site Managers must update the ‘accessibility attributes’ and ensure the information displayed is accurate so that people booking vaccination appointments can choose a site that meets their needs. This information will be visible through the NBS at the point of booking.
	3. If you experience any issues with NBS/Q-Flow, you will find answers to frequently asked questions and advice on where to go for support at [NHS Futures.](https://future.nhs.uk/CovidVaccinations/view?objectID=30579600) Support sessions on MS Teams are also available for site managers on Mondays, Wednesdays and Fridays at 1:30-2:00 and can be accessed at [National Booking Service - training and onboarding - NHS Digital](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding#help-and-support).
	4. Site managers are responsible for creating and managing additional user accounts in Q-Flow. Guidance on how to do this can be found at [Create and manage user accounts - NHS Digital](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding/q-flow-guidance/create-and-manage-user-accounts). User accounts are locked if they are unused for 50 consecutive days or more. A site manager can reactivate these accounts, and it is recommended to check user access at least a week before starting vaccinations.
	5. Site managers set up clinic availability in Q-Flow – instructions on how to do this is available at [create appointment availability.](https://digital.nhs.uk/coronavirus/vaccinations/training-and-onboarding/national-booking-service-training-and-onboarding/q-flow-guidance/create-appointment-slots) Appointment calendars can be loaded by sites for the day after scheduled vaccine delivery date as per the table in section 9. Before uploading appointment capacity to the NBS, you need to ensure that the requirements of the legal framework (for example National Protocol, Patient Group Direction), contractual, and clinical requirements are met. Sufficient vaccination appointments should be available in any given week for appointment types, [assured age-based cohorts](https://www.gov.uk/government/publications/covid-19-the-green-book-chapter-14a%22%20/t%20%22_blank), and assured vaccine types as agreed with the regional team.

# 13. Recording vaccination events

**All Delivery Models**

* 1. All sites providing COVID-19 vaccinations are expected to record details of each event electronically, on an [authorised POC system](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdigital.nhs.uk%2Fcoronavirus%2Fvaccinations%2Ftraining-and-onboarding%2Fpoint-of-care&data=05%7C01%7Ccharlotte.kirkdale%40nhs.net%7C6b53e8af881046e0d03008db196a5856%7C37c354b285b047f5b2220), in real time by default, except in exceptional circumstances. Ensuring that records of each vaccination event are accurate and timely is essential for the vaccination programme to be delivered safely and effectively. Data latency (the delay between an event occurring and a record being created) is currently one of the biggest risks to the COVID-19 vaccination programme as it presents both clinical and operational risks.
	2. To capture real time data, administrative support is advised. In very specific circumstances where real time data entry is not possible (e.g., vaccinating housebound patients or the POC system is unavailable):
* A paper list should be printed in as short a time as possible before the vaccination event takes place (ideally same day) to reduce the risk of duplicate vaccination doses
* Need to be sure that all data that is needed is captured
* The record of vaccination events must be added to the POC system as soon as possible after the POC system becomes available again.
* You must continue to maintain good data quality of your records ensuring that they are synced with the Patient Demographic Service where possible.
	1. From 3 April 2023, it will no longer be possible to create COVID-19 vaccination records in Point of Care (PoC) systems if more than 15 days have passed since vaccination was administered. There will be no alternative route for sites to add these records as the Vaccination Data Resolution Service no longer accepts requests from sites to enter late records. Members of the public with missing records will still be able to have their record added by calling 119. The PoC change also means that providers will not be able to claim / be paid an Item of Service fee and any relevant additional payments for COVID-19 vaccinations which are not inputted within 15 days after administration. We also reserve the right to recover payments from providers in accordance with the requirements stipulated in service specification (which is less than 15 days for record creation).
	2. A record of consent should be recorded within the POC system by the healthcare professional.
	3. It is essential that the vaccine type, dose and batch number are recorded accurately into the vaccination record. You must scan the barcode on the carton of each new batch. The details will then be available for selection when recording the vaccination event.
	4. Some helpful vaccination record queries can be found here [GP COVID-19 vaccination record queries - NHS Digital](https://digital.nhs.uk/coronavirus/vaccinations/gp-covid-19-vaccination-record-queries).
	5. NHS England is responsible for processing patient’s personal data for the purposes of the national vaccination programme. To find out more, you can access our [privacy notice](https://www.england.nhs.uk/contact-us/privacy-notice/) or search for “NHS England Privacy Notice” in your browser. It is recommended that patients are directed to this link within any communications.
	6. There is no need for CPs or other delivery models to report the vaccination event to the GP, as vaccination event data captured within POCs will flow back to the relevant GP patient record within 24 hours of the vaccination event and to the National Immunisation Management Service (NIMS).

# 14. Security

**All Delivery Models**

* 1. Guidance in relation to the security of premises and the personal safety of staff can be found on [FutureNHS.](https://future.nhs.uk/CovidVaccinations/view?objectID=35134032)
	2. As part of your preparation for readiness, providers should take proactive steps to develop and maintain a strong security culture within their vaccine sites. Staff and volunteers should have a clear understanding of the main risks and of what is required of them.
	3. Site security leads must liaise with their local police force and Local Resilience Forum and implement any advice/ recommendations being given. Site security leads must ensure:
		1. All site security measures and procedures are implemented and disseminated to staff.
		2. That processes are in place, such as smooth vaccination delivery and detection of suspicious activity.
		3. It is recommended that lockable storage facilities are available to store laptops, tablets, and other high-value equipment out of sight.
		4. A site business continuity plan and staff emergency contact details are up to date.
		5. All staff are made aware of their responsibility to report any security concerns, incidents, or breaches.
		6. Procedures in place for staff to report, in a timely manner, any security concerns.
		7. Plans are in place to respond to expected or unexpected protests, including mitigation against potential disruption of the site’s operations.
	4. There is a risk of being exposed to challenging behaviour / protest as part of providing COVID-19 vaccinations. Guidance on protest security and on managing challenging behaviour is available ﷟<https://ct.highfieldelearning.com>.
	5. Please escalate any questions to your regional team / RVOC. Further information on site and vaccine security can be found in the [COVID-19 Spring Vaccine Deployment Guide](https://future.nhs.uk/CovidVaccinations/view?objectId=161900549).
	6. All sites/teams and management should read and understand the Security Information for Sites that is available on NHS Futures and the NHS website.
		1. DHSC Site Security Guidance [DHSC Site Security Guidance - [DHSC Site Security Guidance - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/CovidVaccinations/view?objectId=114950021)](https://future.nhs.uk/CovidVaccinations/view?objectId=114950021)
		2. Personal Security Guidance [UKCVS Personal Security Guidance - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/connect.ti/CovidVaccinations/view?objectId=116190373)
		3. Protest Security Guidance [Protest Security Guidance - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/CovidVaccinations/view?objectId=114949989)
		4. Managing Challenging Behaviours [Managing challenging behaviours at vaccination sites: a practical guide for site managers - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/CovidVaccinations/view?objectId=110333541)
	7. Site security leads should be aware of and review the ‘security section’ of their Standard Operating Procedure and a security plan and risk assessment specific to the site or venue is carried out. Site Security Risk Assessment can be found [Site Security Risk Assessment - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/CovidVaccinations/view?objectId=93775653)
	8. Sites are to ensure that all security related incidents are recorded through the normal SBAR reporting system to NVOC. SBAR Incident Reporting Template[SBAR - Incident reporting standard template - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/CovidVaccinations/view?objectID=115110853). Security Incident Reporting Process  [Security Incident Reporting Process- Aug 2021 - COVID-19 Vaccination Programme - FutureNHS Collaboration Platform](https://future.nhs.uk/CovidVaccinations/view?objectId=113814565)

# 16. Other delivery methods; satellites, pop ups and roving models

**All Delivery Models**

* 1. You may wish to provide roving/mobile vaccinations at a location outside of your designated site, to help improve access and support maximising vaccine uptake in communities where uptake is low. The link [here](https://www.england.nhs.uk/coronavirus/publication/standard-operating-procedure-roving-and-mobile-models/) takes you to the Roving and mobile models SOP which describes how to operate roving and mobile vaccination models.
	2. With the agreement of the commissioner, Designated sites are also able to run temporary vaccination clinics (‘pop-ups’). Annex C of the  [Site designation and onboarding process document](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2022/07/C1655_COVID-19-vaccination-programme_-Site-designation-and-onboarding-process_-September-2022-March-2023-Phase.pdf) provides guidance on how these temporary vaccination clinics can be set up.
	3. To access hints and tips on implementing these types of service follow the link [here.](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2021/06/C1432-Standard-Operating-Procedure-Roving-and-mobile-models-v2.pdf)

**General Practice led sites (PCN Groupings), VCs & HHs / HH+s**

* 1. The link [here](https://www.england.nhs.uk/coronavirus/publication/standard-operating-procedure-roving-and-mobile-models/) takes you to the site classification guidancewhich describes how to operate a satellite model. That model enables the administration of COVID-19 vaccines at identified locations outside of vaccination ‘base’ sites.

# 15. Finance

Finance guidance documents for PCN Groupings and community pharmacies will be published on FutureNHS.

Finance information for HH/HH+ and VCs can be found in the finance schedule (3) for provider Trusts and non-NHS sites can be found [here](https://www.england.nhs.uk/coronavirus/publication/covid-19-vaccination-programme-standard-contract-schedules/).

# 16. Useful information

**All Delivery Models**

* 1. All Site Lead contacts and additional comms contacts supplied to the programme will receive an update from the national team twice a week, the [Cross Programme bulletin](https://future.nhs.uk/CovidVaccinations/view?objectID=38665968) containing new or important developments and / or information relating to the COVID-19 vaccination programme. This update is cascaded by email via your RVOC.
	2. For queries about IT issues, POC, the National Data Platform/Foundry, NBS, Data and other IT services issues, contact the Covid Vaccination Help Desk on vaccineservicedesk@england.nhs.uk.

17.4 For access to FutureNHS follow this link <https://future.nhs.uk/>.

17.5 For all other queries, contact your RVOC in the first instance:

* North East & Yorkshire england.ney-vacc-cell@nhs.net
* North West Covid-19.MVNW@nhs.net
* Midlands england.midscovid19vacs.pmo2@nhs.net
* East of England england.eoe-vacprg@nhs.net
* London england.london-covid19voc@nhs.net
* South East england.se-roc@nhs.net
* South West england.swcovid19-voc1@nhs.net
	1. Each SVOC team has responsibility for running the COVID-19 Vaccinations Service in their area. The SVOC team will be able to advise you on the appropriate contact for help in your local area. For SVOC contact details follow this [link](https://future.nhs.uk/CovidVaccinations/view?objectId=96618469).
	2. There is a national escalation process; sites will need to escalate to their relevant SVOC who will review and escalate to regional/national colleagues if unable to resolve the query.

# Appendix A –Site Readiness Questions

**General Practice led sites (PCN Groupings) Site Readiness Questions**

**Estates & Infrastructure**

Does the site have appropriate infrastructure to commence vaccinations?

Yes/No

*This should include a contract or license agreement to use the premises, sufficient car parking and site security, sufficient space for vaccination, patient flow and social distancing measures (as appropriate), hand washing and post-vaccination observation facilities (as appropriate), vaccine storage and clinical waste management facilities, connectivity*

**Tech & Data**

Does the site have appropriate tech and data infrastructure to commence vaccinations?

Yes/No

*This should include a Collaborative Booking System with processes for call/recall agreed and appointment slots visible to all practices in the PCN grouping*

**Equipment & Supply**

Does the site have appropriate equipment and supplies to commence vaccinations?

Yes/No

*This should include laptops, desktops, barcode scanners, a pharmaceutical fridge and data logger, PPE, anaphylaxis and resuscitation equipment, patient-facing information, named registered Health Care Professional for vaccine ordering and receipt.*

**Workforce**

Does the site have sufficient and safe staffing arrangements in place?

Yes/No

*This should include an appropriate clinical lead available for each session/clinic, a named operational site lead, and identified lead practice with sufficient capacity to deliver the minimum contractual volume of vaccinations (as required) and provide resuscitation and Basic Life Support, good clinical governance, standard operating procedures and defined accountabilities*

**Staff Training**

Are staff operating within the site adequately screened and trained?

Yes/No

*This includes but is not limited to staff involved in handling and drawing up vaccine, vaccinators, those supervising vaccine administration and post vaccination observation. Training includes but is not limited to COVID-19 vaccine specific modules for JCVI recommended vaccines, consent and the consent process, anaphylaxis management and treatment, vaccine co-administration (e.g., Flu), clinical IT systems, resuscitation, and adherence to any relevant clinical checklists e.g., Clinical Checklist Part C for vaccinating 16- & 17-year-olds, or the Comirnaty 10mcg vaccine handling checklist for vaccinating 5–11-year-olds*

**Vaccine Assurance**

Does the site have robust clinical governance processes 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 to administration?

Yes/No

*The clinical governance process should cover:
 • Robust cold chain management - sites are strongly encouraged to use the COVID-19 cold chain management audit tool available on the Future NHS Workspace;
 • risk assessment for use of multiple vaccines including vaccine segregation considerations and implementation of Specialist Pharmacy Service (SPS) recommendations; this includes utilising pharmaceutical and medicines oversight and leadership to support this process
 • approved standard operating procedures;
 • ability to revise the above as required following updated JCVI guidance, Green Book Chapter 14a amendments, publication of refreshed Patient Group Directions or National Protocols, and changes to product licensing and characteristics.*

For a vaccine not previously used at the site, has an action plan been developed to ensure implementation of revised or new policies, procedures, tools and risk assessments prior to both receipt and use of vaccines?

Yes/No/N/A

Is the site assured for Comirnaty 30 Concentrate (Pfizer)?

Yes/No

Is the site assured for Comirnaty 10 Concentrate (Pfizer)?

Yes/No

Is the site assured for Comirnaty Bivalent?

Yes/No/N/A

This includes completion of the vaccine checklist part B

Is the site assured for Spikevax Original (Moderna)?

Yes/No

Is the site assured for Spikevax Bivalent (Moderna)?

Yes/No

Is this site assured for Comirnaty BA.4-5/Original?

Yes/No

Is this site assured for VidPrevtyn Beta?

Yes/No

**Overall Readiness**

The Regional Team confirm that the GP practices that form a PCN grouping and have signed-up to participate in the 2022/23 Enhanced Service have a signed Collaboration Agreement in place with a named host practice (in the ODS portal) to receive payments on behalf of the grouping and nominated MYS users. A clinical assurance site visit been undertaken (where required) and the Site is deemed fully ready to administer vaccinations?

Yes/No

**CP Site Readiness Questions**

**Estates & Infrastructure**

Does the site have appropriate infrastructure to commence vaccinations?

Yes/No

*This should include a contract or license agreement to use the premises, sufficient car parking and site security, sufficient space for vaccination, patient flow and social distancing measures (as appropriate), hand washing and post-vaccination observation facilities (as appropriate), vaccine storage and clinical waste management facilities, connectivity, tech and data infrastructure*

**Equipment & Supply**

Does the site have appropriate equipment and supplies to commence vaccinations?

Yes/No

*This should include laptops, desktops, barcode scanners, a pharmaceutical fridge and data logger, PPE, anaphylaxis and resuscitation equipment, patient-facing information, named registered Health Care Professional for vaccine ordering and receipt.*

**Workforce**

Does the site have sufficient and safe staffing arrangements in place?

Yes/No

*This should include an appropriate clinical lead available for each session/clinic, a named operational site lead, sufficient capacity to deliver contractual minimum vaccinations and provide resuscitation and Basic Life Support, good clinical governance, standard operating procedures and defined accountabilities*

**Staff Training**

Are staff operating within the site adequately screened and trained?

Yes/No

*This includes but is not limited to staff involved in handling and drawing up vaccine, vaccinators, those supervising vaccine administration and post vaccination observation. Training includes but is not limited to COVID-19 vaccine specific modules for JCVI recommended vaccines, consent and the consent process, anaphylaxis management and treatment, vaccine co-administration (e.g., Flu), clinical IT systems, resuscitation*

**Clinical**

Has the contractor met the requirements in the Clinical Checklist Part A to vaccinate those aged 16 – 17 years?

Yes/No

Has the contractor met the requirements in the Clinical Checklist Part B to vaccinate those aged 12 – 15 years?

Yes/No/N/A

Has the contractor met the requirements in the Clinical Checklist Part C and the Comirnaty 10mcg vaccine handling checklist to vaccinate those aged 5 – 11 years?

Yes/No/N/A

**Vaccine Assurance**

Does the site have robust clinical governance processes 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 to administration?

Yes/No

*The clinical governance process should cover:*

*• Robust cold chain management - sites are strongly encouraged to use the COVID-19 cold chain management audit tool available on the Future NHS Workspace;*

*• risk assessment for use of multiple vaccines including vaccine segregation considerations and implementation of Specialist Pharmacy Service (SPS) recommendations; this includes utilising pharmaceutical and medicines oversight and leadership to support this process*

*• approved standard operating procedures;*

*• ability to revise the above as required following updated JCVI guidance, Green Book Chapter 14a amendments, publication of refreshed Patient Group Directions or National Protocols, and changes to product licensing and characteristics.*

For a vaccine not previously used at the site, has an action plan been developed to ensure implementation of revised or new policies, procedures, tools and risk assessments prior to both receipt and use of vaccines?

Yes/No/N/A

Is the site assured for Comirnaty 30 Concentrate (Pfizer)?

Yes/No

Is the site assured for Comirnaty 10 Concentrate (Pfizer)?

Yes/No

Is the site assured for Comirnaty Bivalent?

Yes/No

*This includes completion of the vaccine checklist part B*

Is the site assured for Spikevax Original (Moderna)?

Yes/No

Is the site assured for Spikevax Bivalent (Moderna)?

Yes/No

Is this site assured for Comirnaty BA.4-5/Original?

Yes/No

Is this site assured for VidPrevtyn Beta?

Yes/No

**Overall Readiness**

The Regional Team confirm the pharmacy contractor has signed the 2022/23 Enhanced Service contract, a clinical assurance site visit been undertaken (where required) and the Site is deemed fully ready to administer vaccinations?

Yes/No

**VC Site Readiness Questions**

##### **Estates & Infrastructure**

Does the site have appropriate infrastructure to commence vaccinations?

Yes/No

*This should include a contract or licence agreement to use the premises, planning permission to operate as a VC secured, CQC licence, public liability, building and contents insurance and fire regulations, sufficient car parking and site security, patient flow and social distancing measures, hand washing and post-vaccination observation facilities, cold chain management and vaccine storage and clinical waste management facilities, connectivity, BCP Plan*

##### **Equipment & Supply**

Does the site have appropriate equipment and supplies to commence vaccinations?

Yes/No

*This should include laptops, desktops, barcode scanners, a pharmaceutical fridge and data logger, PPE, anaphylaxis and resuscitation equipment, patient-facing information, named registered Health Care Professional for vaccine ordering and receipt and NBS booking function.*

##### **Workforce**

Does the site have sufficient and safe staffing arrangements in place?

Yes/No

This should include an appropriate clinical lead available for each session/clinic, a named operational site lead, a named pharmaceutical assurance lead, sufficient capacity to deliver contractual minimum vaccinations and provide resuscitation and Basic Life Support, good clinical governance, standard operating procedures and defined accountabilities

##### **Staff Training**

Are staff operating within the site adequately screened and trained?

Yes/No

*This includes but is not limited to staff involved in handling and drawing up vaccine, vaccinators, those supervising vaccine administration and post vaccination observation. Training includes but is not limited to COVID-19 vaccine specific modules for JCVI recommended vaccines, consent and the consent process, anaphylaxis management and treatment, vaccine co-administration (e.g., Flu), clinical IT systems, resuscitation etc.*

##### **Clinical**

Has the contractor met the requirements in the Clinical Checklist Part A to vaccinate those aged 16 – 17 years?

Yes/No

Has the contractor met the requirements in the Clinical Checklist Part B to vaccinate those aged 12 – 15 years?

Yes/No

Has the contractor met the requirements in the Clinical Checklist Part C and the Comirnaty 10mcg vaccine handling checklist to vaccinate those aged 5 – 11 years?

Yes/No

##### **Vaccine Assurance**

Does the site have robust clinical governance processes 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 to administration?

Yes/No

*The clinical governance process should cover:
• Robust cold chain management - sites are strongly encouraged to use the COVID-19 cold chain management audit tool available on the Future NHS Workspace;
• risk assessment for use of multiple vaccines including vaccine segregation considerations and implementation of Specialist Pharmacy Service (SPS) recommendations; this includes utilising pharmaceutical and medicines oversight and leadership to support this process
• approved standard operating procedures;
• ability to revise the above as required following updated JCVI guidance, Green Book Chapter 14a amendments, publication of refreshed Patient Group Directions or National Protocols, and changes to product licensing and characteristics.*

For a vaccine not previously used at the site, has an action plan been developed to ensure implementation of revised or new policies, procedures, tools and risk assessments prior to both receipt and use of vaccines?

Yes/No/N/A

Is the site assured for Comirnaty 30 Concentrate (Pfizer)?

Yes/ No

Is the site assured for Comirnaty 10 Concentrate (Pfizer)?

Yes/No

Is the site assured for Comirnaty Bivalent?

Yes/No

This includes completion of the vaccine checklist part B

Is the site assured for Spikevax Original (Moderna)?

Yes/No

Is the site assured for Spikevax Bivalent (Moderna)?

Yes/No

Is this site assured for Nuvaxovid?

Yes/No/N/A

This includes completion of the published KLOEs for Nuvaxovid and vaccine checklist part B

Is the site assured for Comirnaty BA.4-5/Original?

Yes/No

Is the site assured for VidPrevtyn Beta?

Yes/No

##### **UKHSA Direct Supply**

Does the site have access to an IMMFORM account, registration complete including the immform account number added to Foundry?

Yes/No/N/A

Have defrost labels been received for Moderna Vaccine?

Yes/No/N/A

Does the site have ULT PPE for Pfizer vaccine sublimation?

Yes/No/N/A

Is there an appropriate space and area for the sublimation of the Dry Ice from the receipt of Pfizer vaccine in place?

Yes/No/N/A

##### **Overall Readiness**

The Regional Team confirm the hosting NHS trust for the VC site has signed the 2022/23 contract, a clinical assurance site visit been undertaken (where required) and the Site is deemed fully ready to administer vaccinations?

Yes/No

**HH/+ and Hospital Hub Site Readiness Questions**

##### **Readiness**

The Region is content that this site is safe and ready to vaccinate. In particular, they confirm that the site:

Has in place a named service lead responsible for the vaccination service?

Yes/No

Required

Has processes in place to create and maintain the right environment for the high-quality, safe and effective practice of vaccination?

Yes/No

Required

Ensures clinical practice is in line with established standards, policies and procedures for healthcare settings?

Yes/No

Required

##### **Clinical**

Has the contractor met the requirements in the Clinical Checklist Part A to vaccinate those aged 16 – 17 years?

Yes/No/N/A

Required

Has the contractor met the requirements in the Clinical Checklist Part B to vaccinate those aged 12 – 15 years?

Yes/No/N/A

Required

Has the contractor met the requirements in the Clinical Checklist Part C and the Comirnaty 10mcg vaccine handling checklist to vaccinate those aged 5 – 11 years?

Yes/No/N/A

Required

##### **Vaccine Assurance**

Does the site have robust clinical governance processes to ensure the development, implementation and ongoing review of policies, procedures including staff training and tools for the safe and appropriate handling and use of vaccines from receipt to administration?

Yes/No

Required

*The clinical governance process should cover:
• Robust cold chain management - sites are strongly encouraged to use the COVID-19 cold chain management audit tool available on the Future NHS Workspace;
• risk assessment for use of multiple vaccines including vaccine segregation considerations and implementation of Specialist Pharmacy Service (SPS) recommendations; this includes utilising pharmaceutical and medicines oversight and leadership to support this process
• approved standard operating procedures;
• ability to revise the above as required following updated JCVI guidance, Green Book Chapter 14a amendments, publication of refreshed Patient Group Directions or National Protocols, and changes to product licensing and characteristics.*

For a vaccine not previously used at the site, has an action plan been developed to ensure implementation of revised or new policies, procedures, tools and risk assessments prior to both receipt and use of vaccines?

Yes/No/N/A

Required

Is the site assured for Comirnaty 30 Concentrate (Pfizer)?

Yes/No

Required

Is the site assured for Comirnaty 10 Concentrate (Pfizer)?

Yes/No

Required

Is the site assured for Comirnaty Bivalent?

Yes/No

Required

Is the site assured for Spikevax Original (Moderna)?

Yes/No

Required

Is the site assured for Spikevax Bivalent (Moderna)?

Yes/No

Required

Is the site assured for Nuvaxovid?

Yes/No

Required

Is the site assured for Comirnaty BA.4-5/Original?

Yes/No

Required

Is the site assured for VidPrevtyn Beta?

Yes/No

Required

##### **UKHSA Direct Supply**

Does the site have access to an ImmForm account, registration complete including the ImmForm account number added to Foundry?

Yes/No/N/A

Required

Have defrost labels been received for vaccine?

Yes/No/N/A

Required

Does the site have ULT PPE for sublimation dry ice?

Yes/No/N/A

Required

Is there an appropriate space and area for the sublimation of the Dry Ice from the receipt of Pfizer vaccine in place?

Yes/No/N/A

# Appendix B – Recommended equipment list

|  |
| --- |
| **Community Pharmacy SMALL (100 - 349 vaccinations per week)**  |
| **Description**  | **Quantity**  | **MANDATORY / OPTIONAL**  |
| Anaphylaxis Kit Standard  | 2  | Mandatory  |
| Resuscitation Face Shield  | 2  | Optional  |
| Pocket CPR Mask  | 1  | Optional  |
| Heat and moisture exchangers (Viral filter)  | 1  | Optional  |
| Fridge Space to store delivered vaccine  | 1  | Mandatory  |
| Fridge Temperature Data Logger  | 1  | Mandatory  |
|   |   |   |
| **Community Pharmacy MEDIUM (350 - 1000 vaccinations per week) - ON SITE**  |
| **Description**  | **Quantity**  | **MANDATORY / OPTIONAL**  |
| Automated External Defibrillator and carry case  | 1  | Optional  |
| Automated External Defibrillator Starter Kit (Absorbent Towel, Gloves, Razor, Shield and Shears)  | 1  | Optional  |
| Sign indicating location of AED  | 1  | Optional  |
| Anaphylaxis Kit Standard   | 2  | Mandatory  |
| Resuscitation Face Shield  | 2  | Optional  |
| Pocket CPR Mask  | 1  | Optional  |
| Heat and moisture exchangers (Viral filter)  | 1  | Optional  |
| Fridge Space to store delivered vaccine  | 1  | Mandatory  |
| Fridge Temperature Data Logger  | 1  | Mandatory  |
|   |   |   |
| **Community Pharmacy or PCN site LARGE (1000+ vaccinations per week) - ON SITE**  |
| **Description**  | **Quantity**  | **MANDATORY / OPTIONAL**  |
| Automated External Defibrillator and carry case  | 1  | Optional  |
| Automated External Defibrillator Starter Kit (Absorbent Towel, Gloves, Razor, Shield and Shears)  | 1  | Optional  |
| Sign indicating location of AED  | 1  | Optional  |
| Anaphylaxis Kit Standard  | 2  | Mandatory  |
| Spill Kit blood vomit or urine  | 1  | Optional  |
| Clinical Waste Bin (sackholders)  | 1  | Optional  |
| Diagnostic Equipment - Oximeter, Finger Clip Type  | 1  | Optional  |
| Emergency Kit - Blood glucometer device  | 1  | Optional  |
| Emergency Kit - Glucometer test sticks  | 50  | Optional  |
| Emergency Kit - Oral Glucose (Hypostop)  | 2  | Optional  |
| Spill kit vomit or urine refills  | 1  | Optional  |
| Spill kit blood refills  | 1  | Optional  |
| Resuscitation Face Shield  | 2  | Optional  |
| Pocket CPR Mask  | 1  | Optional  |
| Heat and moisture exchangers (Viral filter)  | 1  | Optional  |
| Fridge Space to store delivered vaccine  | 1  | Mandatory  |
| Fridge Temperature Data Logger  | 1  | Mandatory  |
|   |   |   |
|   |   |   |
|   |   |   |
| **Community Pharmacy or PCN site MEDIUM (350 - 1000 vaccinations per week) - OFF SITE**  |
| **Description**  | **Quantity**  | **MANDATORY / OPTIONAL**  |
| Plinth Couch Roll  | 1  | Optional  |
| Automated External Defibrillator and carry case  | 1  | Optional  |
| Automated External Defibrillator Starter Kit (Absorbent Towel, Gloves, Razor, Shield and Shears)  | 1  | Optional  |
| Diagnostics Equipment - Stethoscope  | 1  | Optional  |
| Sign indicating location of AED  | 1  | Optional  |
| Eye wash station  | 1  | Optional  |
| Anaphylaxis Kit Standard  | 2  | Mandatory  |
| Floor stickers to maintain distancing  | 5  | Optional  |
| Spill Kit blood vomit or urine  | 1  | Optional  |
| Wipeable Chairs  | 10  | Optional  |
| Clinical Waste Bin (sackholders)  | 2  | Optional  |
| Lockable Cabinets for Medicines  | 1  | Optional  |
| Diagnostic Equipment - Blood pressure measuring device (Sphygmomanometer)  | 1  | Optional  |
| Diagnostic Equipment - First aid kit  | 1  | Optional  |
| Diagnostic Equipment - Oximeter, Finger Clip Type  | 1  | Optional  |
| Diagnostic Equipment - Thermometer, Digital  | 1  | Optional  |
| Emergency Kit - Blood glucometer device  | 1  | Optional  |
| Emergency Kit - Glucometer test sticks  | 50  | Optional  |
| Emergency Kit - Oral Glucose (Hypostop)  | 2  | Optional  |
| Medical Screen  | 2  | Optional  |
| Plinth-Couch  | 1  | Optional  |
| Tray  | 10  | Optional  |
| Pulp Vomit Bowl  | 100  | Optional  |
| Spill kit vomit or urine refills  | 1  | Optional  |
| Spill kit blood refills  | 1  | Optional  |
| Clinical trolleys with drawers  | 1  | Optional  |
| Resuscitation Face Shield  | 2  | Optional  |
| Pocket CPR Mask  | 1  | Optional  |
| Heat and moisture exchangers (Viral filter)  | 1  | Optional  |
| Clinical Fridge to store delivered vaccine  | 1  | Mandatory  |
| Fridge Temperature Data Logger  | 1  | Mandatory  |
|   |   |   |
| **Community Pharmacy or PCN site LARGE (1000+ vaccinations per week) - OFF SITE**  |
| **Description**  | **Quantity**  | **MANDATORY / OPTIONAL**  |
| Plinth Couch Roll  | 1  | Optional  |
| Automated External Defibrillator and carry case  | 1  | Optional  |
| Automated External Defibrillator Starter Kit (Absorbent Towel, Gloves, Razor, Shield and Shears)  | 1  | Optional  |
| Diagnostics Equipment - Stethoscope  | 1  | Optional  |
| Sign indicating location of AED  | 1  | Optional  |
| Eye wash station  | 1  | Optional  |
| Anaphylaxis Kit Standard  | 2  | Mandatory  |
| Floor stickers to maintain distancing  | 5  | Optional  |
| Spill Kit blood vomit or urine  | 1  | Optional  |
| Wipeable Chairs  | 20  | Optional  |
| Clinical Waste Bin (sackholders)  | 2  | Optional  |
| Lockable Cabinets for Medicines  | 1  | Optional  |
| Diagnostic Equipment - Blood pressure measuring device (Sphygmomanometer)  | 1  | Optional  |
| Diagnostic Equipment - First aid kit  | 1  | Optional  |
| Diagnostic Equipment - Oximeter, Finger Clip Type  | 1  | Optional  |
| Diagnostic Equipment - Thermometer, Digital  | 1  | Optional  |
| Emergency Kit - Blood glucometer device  | 1  | Optional  |
| Emergency Kit - Glucometer test sticks  | 50  | Optional  |
| Emergency Kit - Oral Glucose (Hypostop)  | 2  | Optional  |
| Medical Screen  | 2  | Optional  |
| Plinth-Couch  | 1  | Optional  |
| Tray  | 10  | Optional  |
| Pulp Vomit Bowl  | 100  | Optional  |
| Spill kit vomit or urine refills  | 1  | Optional  |
| Spill kit blood refills  | 1  | Optional  |
| Clinical trolleys with drawers  | 1  | Optional  |
| Resuscitation Face Shield  | 2  | Optional  |
| Pocket CPR Mask  | 1  | Optional  |
| Heat and moisture exchangers (Viral filter)  | 1  | Optional  |
| Clinical Fridge to store delivered vaccine  | 1  | Mandatory  |
| Fridge Temperature Data Logger  | 1  | Mandatory  |
| Plinth Couch Roll  | 1  | Optional  |
|   |   |   |
|   |   |   |
| **ROVING**  |
|   |   |   |
| Clinical Cool Box (refrigeration) & Gelpacks  | 1  | Mandatory  |
| Automated External Defibrillator and carry case   | 1  | Optional  |
| Automated External Defibrillator Starter Kit (Absorbent Towel, Gloves, Razor, Shield and Shears)   | 1  | Optional  |
| Freezers (-20C) for cooling gel packs in cool boxes  | 1  | Optional  |
| Anaphylaxis Kit Standard (Adrenaline + Chlorphenamine + Hydrocortisone)  | 1  | Mandatory  |
| Clip board  | 1  | Optional  |
| Clinical Waste Containers (Transfer)  | 1  | Optional  |
| Diagnostic Equipment - Blood pressure measuring device (Sphygmomanometer)  | 1  | Optional  |
| Diagnostic Equipment - First aid kit  | 1  | Optional  |
| Diagnostic Equipment - Oximeter, Finger Clip Type  | 1  | Optional  |
| Diagnostic Equipment - Thermometer, Digital  | 1  | Optional  |
| Emergency Kit - Blood glucometer device  | 1  | Optional  |
| Emergency Kit - Glucometer test sticks  | 50  | Optional  |
| Emergency Kit - Oral Glucose (Hypostop)  | 2  | Optional  |
| Transfer containers (e.g., Curver boxes)  | 1  | Optional  |
| Tray  | 5  | Optional  |
| Resuscitation Face Shield  | 2  | Optional  |
| Pocket CPR Mask  | 1  | Optional  |
| Heat and moisture exchangers (Viral filter)  | 1  | Optional  |

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| NHS EnglandWellington House133-155 Waterloo RoadLondonSE1 8UGThis publication can be made available in a number of alternative formats on request. |
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