

Regional Clinical Advice Response Service 18/06/21

For any COVID-19 vaccination related queries or to escalate an incident please contact:
england.swcovid19-cars@nhs.net

Please note that going forward and in line with the RVOC and NVOC, RCARS will now operate between the hours of 8am and 6pm over the weekend.

**PLEASE SHARE WITH ALL RELEVANT STAFF INVOLVED WITH THE
VACCINATION PROGRAMME**

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**Acceleration of Second Doses for Cohort 10 (40 to 49 year olds) – Official
Publication approval reference: C1324**

Dear colleagues

In response to [advice](#) from the independent JCVI, the Government has set out that appointments for a second dose of the COVID-19 vaccine will be brought forward from 12 to 8 weeks for the remaining people in cohort 10 (people in their 40s) who have yet to receive their second dose.

This is to ensure priority groups have the strongest possible protection from the Delta variant of the virus at the earliest opportunity possible.

This announcement builds on the previous advice that second doses for cohorts 1-9 should be brought forward from 12 weeks to 8 weeks. All providers are asked to continue to vaccinate priority groups as soon as possible and not to hold on to vaccine supply. Second dose vaccinations should not be offered earlier than 8 weeks except in accordance with the guidance by JCVI and the Green Book.

ACTIONS NOW REQUIRED

From 15 June, functionality on the National Booking Service (NBS) will change so that **anyone** who books their appointments through NBS will be offered their second dose appointment **56 to 84 days after** **their first dose** appointment.

NHS England and NHS Improvement Work is expected to be



completed shortly so that patients that wish to rebook are able to check the level of appointment availability on the NBS before cancelling and rescheduling their existing second dose appointment.

For those in cohort 10 who have already received a first dose of a vaccination and have an appointment booked for a second dose in the next 10 days (up to and including 23 June) **no action is required and appointments should continue as scheduled**. For those in cohort 10 who have their second dose appointment scheduled on or after next Thursday 24 June:

- **Vaccination centres and community pharmacy-led LVS:** every effort needs to be made to ensure all additional capacity for first and second doses is uploaded to the National Booking System (NBS). Vaccination Centres should open up second dose slots from 8 weeks after the first dose where supplies allow.

From 21 June, we will start texting those with bookings more than 10 days out and more than 9 weeks from their first dose, inviting them to rebook.

From 28 June, we will start a more intense reminder service. We will contact people within Cohorts 1-10 who have not yet had their 2nd dose vaccination after 70 days encouraging them to arrange an appointment as soon as possible.

- **PCN-led Local Vaccination Services:** all second dose appointments for those in cohort 10 scheduled on or after 24 June (where that is more than 8 weeks after their first dose) should be brought forward. Plans to do this should include working with your ICS to bring in additional workforce to run additional clinics – we announced last week an additional £20 million to support primary care providers to draw down additional staff through their lead employer to help deliver the COVID-19 vaccination programme between 16 June and 14 July 2021 – read more here. We've also previously offered all PCN groupings an additional payment of £1,000 for rescheduling second dose appointments on or after 25 May 2021. Read more here.

In addition to using the stock already in the network, revised second dose supply delivery schedules will be communicated shortly in the usual way. If PCN sites have exhausted all opportunities to bring forward second doses and still have insufficient capacity to bring forward second dose clinics, they may wish to redirect patients to book via the NBS. From 28 June, we will contact people within Cohorts 1-10 who have not yet had their 2nd dose vaccination after 70 days encouraging them to arrange an appointment as soon as possible.

- **Hospital Hubs:** all second dose appointments for those in cohort 10 scheduled on or after 24 June (where that is more than 8 weeks after their first dose) should be brought forward. For those hospital hubs which are now utilising NBS, every effort needs to be made to ensure all additional capacity for first and second doses is uploaded.

Plans for inviting the remainder of cohort 12 (18-24 year olds) to book their COVID-19 vaccinations

Today, **Tuesday 15 June**, we will send text messages to people **aged 23 and 24** inviting them to book their vaccination appointments through the National Booking Service (on the NHS website or by calling 119).

We expect to then invite the remainder of cohort 12 to book their appointments later this week and will send further communications on timings as soon as possible.

Hospital hub and PCN vaccination services should align with this approach.

Community Pharmacy and PCN-led sites should continue to work with their local commissioners to establish temporary vaccination clinics where this will help increase uptake. Further detail can be found [here](#).

System capacity

These changes, while challenging, offer us all an opportunity to turbo-charge delivery of our life-saving programme. Additional support to deliver at every level of the system is available including:

- The workforce offer for PCNs and community pharmacies described above as well as the existing lead employer ICS-level support for VCs and Hospital Hubs;
- ICS-level funding support for outreach to specific communities and in areas of low uptake, including for communications and engagement. This should be developed in partnership with local authorities;
- ICS-level capacity support to increase coverage, in particular by bringing on more community pharmacy sites and re-engaging with PCNs who are not currently engaged in phase 2.

We will also be doing more national-level comms to increase engagement and excitement about this final 'sprint' of the vaccination offer to all adults. We expect that the chance to invite all adults will help local systems go full tilt at delivery across all communities and cohorts.

Discussion

Finally, a webinar will be held for all key partners involved in COVID-19 vaccine deployment on 16 June at 6.15pm-7.00pm. This will provide an opportunity to celebrate the achievements of the NHS Covid-19 vaccination programme over the last six months and recognise the hard work of the NHS staff, volunteers and key partners in delivering the vaccine to over 60 million people. We will also use the time to discuss the new developments outlined above and ensure every site and every system has what they need to deliver against our challenging and life-saving goals. Please [register](#) to attend before 4.30pm on the day of the event.

Thank you for your continued leadership on this vital programme.



Emily Lawson
SRO Vaccine Deployment
Chief Commercial Officer
NHS England and NHS Improvement



Dr Nikki Kanani
Medical Director for Primary Care
NHS England and NHS
Improvement

Pfizer BioNTech Vaccinations at CP sites for 16–17 year olds in cohorts 4 and 6

Patients who are 16–17 years of age and in cohort 4 (clinically extremely vulnerable) and cohort 6 (an at-risk group) are eligible for vaccination and should receive Pfizer BioNTech as soon as possible.

Currently these patients cannot make an appointment on NBS unless they are a social care or healthcare worker (self-declared) and would normally be vaccinated by their PCN vaccination site. In areas where the PCN site is no longer providing the COVID-19 vaccination service, community pharmacy sites who are assured for Pfizer BioNTech should vaccinate these individuals, making local arrangements for patients to be referred to them directly rather than through NBS.

Sites who are not assured for Pfizer BioNTech should ensure that they are able to signpost patients efficiently to a site who will be able to assist.

Clarification: Under 40s and AZ Vaccine

On 2 June, a communication was distributed regarding vaccination of under 40s and a request for individuals to re-book if they have a 1st dose appointment of the AstraZeneca vaccine. We have received some queries around this, so we want to provide further clarity.

We can confirm that there is no further change to the existing JCVI guidance on vaccinations of adults under 40 years, that was published on 7 May:

<https://www.gov.uk/government/publications/use-of-the-astrazeneca-covid-19-vaccine-jcvi-statement-7-may-2021/use-of-the-astrazeneca-covid-19-azd1222-vaccine-updated-jcvi-statement-7-may-2021> which states:

‘Unvaccinated adults aged 30 to 39 years who are not in a clinical priority group at higher risk of severe COVID-19 disease, should be preferentially offered an alternative to the AstraZeneca COVID-19 (AZD1222) vaccine’

This guidance is also highlighted in [Chapter 14a of the Green Book](#).

The NBS functionality has been amended to offer Pfizer or Moderna appointments only for 1st dose vaccination for anyone under 40. A small number of people in this category that had first dose AstraZeneca appointments booked have had their appointments cancelled and have been contacted with advice on how to rebook through NBS.

Following JCVI guidance:

‘Everybody who has already had a first dose of the Oxford/AstraZeneca vaccine should receive a second dose of the same jab, irrespective of age, except for the very small number of people who experienced blood clots with low platelet counts from their first vaccination.’

IM Injection Technique for Intramuscular Injection to the Deltoid Muscle

Colleagues are reminded that whilst injection technique can be influenced by personal experience and working with others, vaccinators need to ensure that their IM technique for vaccinations remains in line with the Public Health England (PHE) training and guidance on intramuscular injection technique for COVID-19 vaccinations into the deltoid muscle. The

Green Book states that IM injections should be given with the needle at a 90° angle to the skin and the skin should be *stretched, not bunched*. It is not necessary to aspirate the syringe after the needle is introduced into the muscle.

Further information from the RCN can be found here:

Royal College of Nursing guidance on vaccine administration <https://www.rcn.org.uk/clinical-topics/public-health/immunisation/practical-and-clinical-guidance-for-vaccine-administration>

MHRA Review: Reports of Menstrual Disorders and Unexpected Vaginal Bleeding Following COVID-19 Vaccination

The MHRA has reviewed reports of menstrual disorders and unexpected vaginal bleeding suspected as adverse reactions to vaccination with the three COVID-19 vaccines currently being used in the UK: Pfizer/BioNTech, COVID-19 Vaccine AstraZeneca and COVID-19 Vaccine Moderna. These reports have also been reviewed by independent experts of the Commission on Human Medicines' COVID-19 Vaccines Benefit Risk Expert Working Group and members of its Medicines for Women's Health Expert Advisory Group.

A range of menstrual disorders has been reported as suspected adverse reactions after all three of these COVID-19 vaccines including heavy bleeding, delayed periods and unexpected vaginal bleeding. The number of reports of menstrual disorders and vaginal bleeding is low in relation to both the number of females who have received COVID-19 vaccines to date and the background rate of menstrual disorders generally. **The current evidence does not suggest an increased risk of either menstrual disorders or unexpected vaginal bleeding following vaccination with the vaccines reviewed (Pfizer/BioNTech, COVID-19 Vaccine AstraZeneca or COVID-19 Vaccine Moderna).** MHRA advice remains that the benefits of the vaccine outweigh the risks for most people. The MHRA will continue to closely monitor reports of suspected menstrual disorders and vaginal bleeding with COVID-19 vaccines.

Healthcare professionals are advised that anyone presenting with menstrual disorders and/or unexpected vaginal bleeding following COVID-19 vaccination should be treated according to clinical guidelines for these conditions, as usual.

As with any suspected side effects from the COVID-19 vaccines, including those in relation to menstrual disorders, please continue to report via the Yellow Card scheme [here](#).

Black Particles

Colleagues are reminded of the procedure to follow if black particles are seen in any vaccine vials. Please follow the advice below, which can also be found on the Specialist Pharmacy Service website, under the 'Reporting defective vaccines' section (<https://www.sps.nhs.uk/articles/reporting-suspected-covid-19-vaccine-side-effects-product-defects-and-counterfeit-products/>)

- Do not use the vial for vaccinations.
- Do not discard the vial as further investigation may be required.
- Instead, keep it aside in a secure place where the vial cannot inadvertently be used for vaccination.
- Take a photo of any visible defects if possible.

- Complete a Defective Product Yellow Card report (<https://yellowcard.mhra.gov.uk/defective-products/>) or contact the MHRA Defective Medicines Centre directly (DMRC@mhra.gov.uk).
- For Pfizer-BioNTech vaccine defects, contact Pfizer's Medical Information (<https://www.pfizermedicalinformation.co.uk/en-gb>) who may advise that you either discard the vials or support their investigation by sending samples to "Pfizer Freepost 002", quoting PR#5510321 on the front of the packaging.
- For AstraZeneca vaccine defects contact AstraZeneca's Medical Information by phone 0800 0541028 or online (<http://contactazmedical.astrazeneca.com/>).
- Record the defective vial in your stock management system.

Where the defect is noticed after the vaccine has been administered to patients, please seek advice from the regional clinical team in the first instance.

RCM Webinar recording: pregnancy and vaccination

Last week, Jennie Hall, Director of Nursing and Clinical Delivery on the COVID-19 Vaccination Programme, participated in a webinar hosted by the RCM. The webinar addressed key areas of concern for midwives and maternity support workers, including issues about being vaccinated themselves and in relation to talking to women about whether to be vaccinated during pregnancy or while breastfeeding. See the recording [here](#).

You can also view the recording of a webinar in which Jacqueline Dunkley-Bent discusses issues around pregnancy, breastfeeding and vaccination, with the NCT [here](#).

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