



# ICARS Newsletter

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Issue 74: 4th February 2022

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## Immunisation Clinical Advice Response Service

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### *About this bulletin:*

For any COVID-19 vaccination related queries or to escalate an incident please  
contact: [england.swicars@nhs.net](mailto:england.swicars@nhs.net)

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PLEASE SHARE WITH ALL RELEVANT STAFF INVOLVED WITH THE  
VACCINATION PROGRAMME

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*Please note that ICARS operates from 9am - 5pm Monday to Friday.*

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### Contents:

1. [NEW: Vaccinating 5-11-year olds](#)
2. [NEW: Vaccine Product Updates](#)
3. [NEW: Vaccinating Severely Immunosuppressed People Updates](#)
4. [NEW / REMINDER: Workforce and Operational Support](#)
5. [NEW: Resources](#)

## 1. NEW: Vaccinating 5-11-year olds

### 1a) NEW: PGD and National Protocol for Comirnaty® (10 micrograms/dose) concentrate for Children 5 to 11 years

A [Patient Group Direction](#) (PGD) and [National Protocol](#) for this new vaccine have been published. As with [all the current PGDS and National Protocols](#), these new documents include details about criteria for inclusion and exclusion, cautions, special considerations, dose and frequency, off label use, adverse reactions and storage. All team members who will be using these legal mechanisms to deliver vaccinations to 5 to 11 year olds who are in a risk group must read these documents, take time to understand the detail, and ensure that they are authorised to work to them.

### 1b) NEW: SOPs and information from SPS related to Comirnaty® (10 micrograms/dose) concentrate for Children 5 to 11 years

As part of the assurance process detailed in this [Operational Note](#) and the associated [Appendix A Checklist](#), sites utilising Comirnaty® (10 micrograms/dose) concentrate for Children 5 to 11 years must have reviewed and developed policies and procedures to support the receipt, storage, preparation and administration of the new vaccine. The Specialist Pharmacy Service (SPS) has published new and revised template [Standard Operating Procedures](#) (SOPs) to help incorporate this new vaccine into practice for those sites that will be providing a vaccination service to children aged 5 to 11 years in a risk group.

The assurance process also requires sites to have reviewed and implemented [SPS guidance](#) on handling multiple vaccines. Additionally, SPS have produced a resource to explain the different characteristics of the two currently available Comirnaty® vaccines.

Vaccinating teams must understand these differences to ensure clinical safety. This resource can be found [here](#).

### 1c) NEW: Training and resources for Comirnaty® (10 micrograms/dose) concentrate for Children 5 to 11 years

The assurance process for Comirnaty® (10 micrograms/dose) concentrate for Children 5 to 11 years, as detailed in this [Operational Note](#) and the associated [Appendix A Checklist](#), requires staff who will be involved in vaccinating eligible children to have completed the e-learning module and relevant training, as well as be assessed as competent to use the new vaccine. The new e-learning module and assessment produced by UKHSA is available [here](#).

This training will support staff in understanding key information, including how the vaccine works, which children are eligible, contraindications and precautions, how the vaccine should be stored, prepared and administered and potential adverse reactions. Please note, there are key differences in the storage and handling of this new vaccine, including dilution volumes, volume to be administered, number of doses in the vial and room temperature storage requirements.

Please see the [training requirements for 5-11s vaccinations](#) for information on other training that needs to be completed. Resources available to support staff who vaccinate children include:

- [Great Ormond Street Hospital e-learning module](#) on managing paediatric anxiety during vaccination
- [One-page resource](#) on distraction techniques for children
- [Top tips resource](#) for supporting children and young people during vaccination
- [“Introduction to Level 3 Safeguarding Children \(COVID-19 Vaccination\)”](#) video developed by the NHS England national Safeguarding team
- [“Rights of the child – Gillick competence”](#) video developed by the NHS England national Safeguarding team
- [Guidance for clinical leads](#) on adapting the vaccination environment for children

#### **1d) Comirnaty 10mcg/dose for 5-11-year olds - thawed expiry date guidance**

Concerns have been raised today (3rd February) regarding the expiry date on the Comirnaty 10mcg/dose for 5-11-year olds. We can confirm that the expiry date on the packaging is the 10-week thawed expiry date. The original manufacturers expiry has been covered by a sticker and a 10-week expiry has been added.

*Please note the following:*

If the vaccine is received at 2 °C to 8 °C it should be stored at 2 °C to 8 °C. The expiry date on the outer carton should have been updated to reflect the refrigerated expiry date and the original expiry date should have been crossed out.

Once thawed, the vaccine should not be re-frozen. [Comirnaty 10 micrograms/dose concentrate for dispersion for injection Children 5 to 11 years COVID-19 mRNA Vaccine \(nucleoside modified\) - Summary of Product Characteristics \(SmPC\) - \(emc\) \(medicines.org.uk\)](#)

#### **1e) NEW: Children self-assessment checklist**

Following feedback from providers, the Children's Self-Assessment Check List Part A, B and C has been updated and can be found [here](#) along with the

Workforce & Training guidance pack to support child vaccination, which has also been updated and can be found [here](#) to include:

- Volunteers statement has been changed as this has been re-negotiated nationally
- Clearer guidance on DBS information within the checklist

All standards remain the same and for providers who have already used the form to self-assess, there is no requirement to re assess.

#### **1f) NEW: Optimising SJA services – Provision of training and vaccination of children**

St John Ambulance continues to expand its volunteer staff roles and outreach provision to the NHSE/ COVID-19 vaccination programme, and there is a focus on the training of the ~17,000 new recruits that have joined St John Ambulance to support the vaccine programme.

From 24th January, SJA contract has been updated to enable the volunteers to be trained to vaccinate children and, from 1st February, the volunteers who are trained and competent will be able to be deployed as volunteer vaccinators to School Age Immunisation Service providers.

#### **1g) NEW: Vaccine ordering process for Hospital Hubs undertaking the vaccination of at risk 5–11-year-olds**

As we prepare to rollout the vaccination of children aged 5-11s at risk, we wanted to advise you on how to arrange a delivery of Comirnaty 10 microgram/dose, as the ordering and delivery process for this vaccine will differ to that used for ordering Comirnaty 30 microgram/dose, Spikevax and Covid-19 Vaccine AstraZeneca vaccines.

#### ***Requesting an allocation of vaccine***

In line with existing processes, Hospital Hubs (HHs and HH+) undertaking the vaccination of at risk 5-11s, will need to request an allocation of Comirnaty 10microgram/dose through the Supply Planner on Foundry. The pack size for Comirnaty 10microgram/dose is 10 vials per box, equating to 100 doses.

All requests must be submitted in line with the Regional Plans to enable delivery the following week. Regional Plans must be submitted by close of play each Tuesday.

A separate supply plan is now open on the Supply Planner in Foundry for deliveries in the week commencing 7 February. ***In order to receive a delivery in the week of the 7 February, sites will need to have requested an allocation on the Supply Planner no later than close of play Tuesday 1 February.***

Requests should be made directly by HHs/HH+ but Systems may choose to support and do this on behalf of HH/HH+ sites. ***Each site and relevant system will be responsible for ensuring an allocation is put on Supply Planner before the cut-off deadline, failure to do this will mean deliveries will not be made the following week.***

In order to request Comirnaty 10 microgram/dose through the Supply Planner and eventually place orders via the Ordering Platform, HHs/HH+ sites will need to ensure relevant colleagues have access to Foundry. Details on how to gain access to Foundry are provided below. We would strongly encourage colleagues who need access to begin this process as soon as possible to avoid future delays to ordering.

Should you have any difficulties requesting an allocation for Comirnaty 10 microgram/dose on the Supply Planner please contact the Foundry Helpdesk in the first instance: [foundry.support@england.nhs.uk](mailto:foundry.support@england.nhs.uk). If they are unable to help, please contact your SVOC.

### ***Ordering and delivery of Comirnaty 10 microgram/dose vaccine***

Initially, the National Programme team will automatically convert allocations requested on Supply Planner into orders, which will then be sent to our Specialist Pharmaceutical Logistics Partners (SPLs) to deliver direct to HHs/HH+.

Orders will not be processed until the Children's Self-Assessment Checklist and the vaccine assurance checklist have been completed and confirmed by the Regional Chief Pharmacist to the national team.

Deliveries of Comirnaty 10 microgram/dose by our SPLs will be made via a fixed delivery schedule, with each HH/HH+ being allocated a fixed day of the week. This schedule will be fixed for the duration of this cohort so HH/HH+ sites should reflect this in their capacity planning and scheduling. The schedule outlining each HHs/HH+ site's fixed delivery day will be released to sites as soon as possible this week. Sites should avoid scheduling any clinics until the day after their fixed day, as delivery times are between 8am and 6pm.

Vaccine consumables including Patient Information Leaflets and relevant needles and syringes will also be delivered by the SPLs alongside the vaccine.

### ***Migrating over to the Ordering Platform***

To enable HHs to be able to "pull" their orders they will be migrated over to the Ordering Platform to place orders for Comirnaty 10 microgram/dose, however, this will not happen until all sites have been fully trained. Currently training is expected to take place 9 February and sites will be contacted with further information on how to access this training later this week.

The ordering process for Comirnaty 30 microgram/dose, Spikevax and Covid-19 Vaccine AstraZeneca has not changed and HHs will continue drawing supplies

down through their immform accounts.

### ***How to access Foundry***

If a site users does not already have access to Foundry, you must complete the two steps below

#### ***Step 1 – Apply for an Okta account - <https://apps.model.nhs.uk/register>***

- Before doing this step, you can check if you already have an account by logging in [here](#) and see if you have Foundry under your available applications – if you have an Okta account but not Foundry applied to it, contact the [Foundry.Support@england.nhs.uk](mailto:Foundry.Support@england.nhs.uk) helpdesk.
- 1. Enter your personal details
- 2. Your email address needs to be a professional email such as @nhs.net (yahoo, hotmail, gmail etc will not be accepted) and not a shared email such as [pharmacy@pharmacy.co.uk](mailto:pharmacy@pharmacy.co.uk).
- 3. Enter your job role.
- 4. Select your organisation type
  - a. for Hospital Hub or Vaccination Centre users – select NHS Trust that your organisation is under.
- 5. Enter the name of your Trust name

#### ***Step 2 – Complete the [Vaccine Workspaces eform](#)***

1. Select your NHS Organisation type:
  - a. If you are a Hospital Hub, you need to select Acute Trust / Independent Service Provider / Mental Health Trust
2. You will then need to ***select your region***
3. Select your Organisation:
  - a. If you are a Hospital Hub or Vaccination Centre, you need to select your Trust name.
4. On I require access to:
  - If you are a Hospital Hub or Vaccination Centre Users, select Vaccine Supply Chain.
5. Fill out your personal details (ensure the email address you use is the same as the one for your Okta account).
6. For Justification for Access put “Access required for Supply Planner”
7. Please note you will need to complete a copy of this form for each site you require access to. This form does not provide instant access – we advise

that access approvals can take up to 48 hrs. Please do not complete multiple versions of this form for the same site. Once your request has been approved, the following day you will receive onboarding instructions to Foundry from the [Foundry.Support@england.nhs.uk](mailto:Foundry.Support@england.nhs.uk) helpdesk.

***To note: only those sites that have been assured will be able to order.***

## **2. NEW: Vaccine Product Updates**

### **2a) REMINDER: Longer than recommended interval left between doses**

Following on from feedback from providers requiring advice from ICARS regarding vaccinating patients who have experienced a longer than the recommended interval between their COVID-19 doses, please see below the current guidance on this from page 44 of the [COVID-19 vaccination programme guidance for healthcare workers](#):

#### ***Longer than recommended interval left between doses***

*If the vaccine is inadvertently or unavoidably delayed beyond the recommended interval, for example because an individual is unable to attend their vaccination appointment, it is likely that their response to this second dose and their longer term protection **will not** be adversely affected.*

*Data from clinical trials shows that the efficacy of the AstraZeneca vaccine was higher when the second dose was given at, or after 12 weeks, and a study of people aged over 80 years found that extending the second dose interval to 12 weeks for the Pfizer BioNTech vaccine markedly increased the peak spike-specific antibody response by 3 and a half times compared to those who had their second vaccine at 3 weeks.*

*If an interval longer than that recommended is left between doses, there is no need to restart the course and the second dose should be given as soon as it can be arranged (preferably using the same vaccine to complete the course if no contraindications). Individuals should be encouraged to receive their second dose on time as this will significantly boost their protection and prevent further hospitalisations and deaths. Timely administration of the second dose is especially important when COVID-19 community infection rates are high or increasing, although deferral after COVID-19 infection is advised (see Vaccination of individuals with a current or previous history of COVID-19 disease above)*

*Current guidance indicates that individuals who receive their 2nd primary dose past the recommended interval do not need to repeat a dose. As this patient has received 2 primary doses, they should continue as per the UK schedule and receive a booster dose at the appropriate interval.*



If you have any further queries on this issue, please email [england.swicars@nhs.net](mailto:england.swicars@nhs.net)

**2b) UPDATE: PGD and National Protocol for Comirnaty® (10 micrograms/dose) COVID-19 mRNA vaccine V01.00**

Please find the updated PGD and National Protocol for Comirnaty® (10 micrograms/dose) COVID-19 mRNA vaccine [here](#).

**2c) NEW: Extending the post-thaw expiry date of specific batches of Spikevax® (also known as COVID-19 vaccine Moderna) for adults**

We are writing to notify you that after discussions with Moderna Biotech Spain, S.L. (Moderna) and the Medicines and Healthcare products Regulatory Agency (MHRA), certain post-thaw expiry dates of unpunctured and undamaged Spikevax® vials as detailed in this letter may be extended from 30 days to 60 days.

For vials produced within the batches listed in Appendix 1 to this letter only, Moderna has assessed available data and can confirm that their stability assessments indicate no impact to product quality through extending the post-thaw expiry period of thawed product from 30 days to 60 days, when stored at 2-8°C, independent of the shelf life printed on the vial.

The MHRA is reassured therefore that there is no detrimental impact on the safety, quality or efficacy of the specified batches of vaccine and has no objection to the proposal of using these identified stocks of Spikevax® beyond their authorised expiry dates up to and including a maximum of 60 days when stored at 2-8°C.

We are asking those clinical colleagues responsible for the safe storage and handling of Spikevax® vaccines in their possession, to amend the post-thaw expiry dates accordingly for the batches identified in this letter. This extended shelf life will enable more patients to access these critical and life-saving vaccines over the coming days.

The NHS Specialist Pharmacy Service has developed a Standard Operating Procedure (SOP) which accompanies this letter and which NHS vaccine administration sites are expected to follow. Updates to this SOP will be made available [here](#) (for Hospital Hubs and Vaccination Centres) and [here](#) (for PCN designated sites).

The UK Health Security Agency (UKHSA), the Department of Health and Social Care (DHSC) and NHS England and Improvement have reviewed the Patient Group Direction and National Protocol supporting administration of the Spikevax® vaccine. They have jointly agreed that use of the batches identified in this letter, following formal notification of post-thaw expiry extension based on



company data, would be reasonable and is therefore within the National Protocol and the Patient Group Direction.

As per normal clinical practice, please prioritise stocks which are nearing expiry.

***Appendix 1***

Spikevax® batches in scope:

***Batch Ref:***

3004732

3004737

3005237

3005287

3005686

3005688

3005889

3006325

000014A

000022A

000029A

000040A

000050A

000059A

000071A

000074A

000084A

000089A

000123A

000124A

**Message from Dave Thompson, the Programme Manager for the COVID-19 Vaccination Programme in the South West Region following this guidance:**

Given the above recent guidance cascaded, can I please request the following actions are taken.

***National Team Guidance:***

The guidance has been reversed and the ask is now to deliver as many Moderna boosters and 1st doses as possible and only use Pfizer for Pfizer 2nd doses wherever possible. There are a large number of sites that are not assured for Moderna, where this will not be possible, but please use Moderna wherever possible.

In order to enable this, please let me know if more Moderna is required and we'll support mutual aid.

***Week Commencing 7 Feb:***

The ***week commencing 7 February, please can I ask that Foundry plans are updated by 1200 Thursday 3 February.*** This will enable all changes to be made prior to the ordering deadline.

***Stock:***

Robin will send out direction on stock to ensure we have an accurate picture Moderna is in the region.

***IMMFORM:***

It's possible the National Team will keep IMMFORM frozen. Please let me know if any specific IMMFORM balances need to be unfrozen.

***Somerset:***

Please can you confirm if the 4x Pfizer boxes are still required.

Many thanks all

**2d) NEW: Spikevax ® (Moderna) second dose vaccine after Comirnaty ® (Pfizer) first dose**

There have been a number of queries from sites whether it is acceptable to administer a Spikevax ® (Moderna) second dose vaccine after Comirnaty ® (Pfizer) first dose of COVID-19 vaccine. The Green Book advises:

For individuals who started the schedule and who attend for vaccination where the same vaccine is not available or suitable, or if the first product received is unknown or not available, one dose of the locally available product should be given to complete the primary course. Individuals who experienced severe expected reactions after a first dose of AstraZeneca or Pfizer BioNTech vaccines should be informed about the higher rate of such reactions when they receive a second dose of an alternate vaccine.

To note that administering a different 2nd dose vaccine to the first would be considered as off licence, but within the PGD or National Protocol. To also note that there is some evidence that administering a Spikevax ® (Moderna) second dose vaccine after Comirnaty ® (Pfizer) first dose of COVID-19 vaccine may lead

to a higher incidence of myocarditis/pericarditis (Buchan et al 2021), evidence is available [here](#). It is recommended that such administration should only be undertaken following senior clinical advice, on an individual case basis and where the benefits outweigh the risks. The reasoning for administration are to be documented in the Point of Care IT system.

## **2e) NEW: Naming convention for the two Comirnaty® vaccines**

In order to manage the risk associated with two vaccines that have the same brand name, the Programme will be referring to the vaccines as follows:

- Comirnaty® (10 micrograms/dose) concentrate for Children 5 to 11 years
- Comirnaty® (30 micrograms/dose) concentrate for Adults and Adolescents

When writing the units, 'micrograms' should not be abbreviated. This is good practice to reduce errors associated with incorrect dosing.

## **2f) UPDATE: Temporary suspension of the 15-minute observation period following vaccination with COVID-19 mRNA vaccine**

The MHRA, with expert advice from the Commission on Human Medicines and the COVID-19 Vaccines Benefit Risk Expert Working Group, is keeping the advice on the temporary suspension of the 15-minute observation time under close and regular review.

Currently the temporary suspension remains in place for the majority of individuals while the accelerated vaccination programme continues. No additional safety concerns have been identified during this suspension. This advice applies to all age groups eligible for vaccination.

The Commission on Human Medicine and MHRA will issue a statement if there are safety concerns that change the advice.

## **2g) UPDATE: Cohort Eligibility and Operational Status**

[This resource](#) has been updated, summarising which cohorts are eligible for vaccination, under what parameters, and how they can access the offer. This week's version includes further signposting to resources relating to vaccination for 5 to 11 year olds in a risk group, for whom vaccinations will begin next week. We recommend that teams avoid printing the document as it will rapidly become out of date. You are advised to save the [hyperlink](#) where the revised version will be uploaded weekly.

We have also updated our poster showing main information about who is eligible, which is saved on the workspace [here](#). This will be updated regularly in the folder for public-facing [Communications Resources](#).

### 3. NEW: Vaccinating Severely Immunosuppressed People Updates

#### **3a) NEW: NBS booking pathway for boosters (fourth dose) enabled to support severely immunosuppressed people**

The National Booking System has been updated to enable the booking of boosters (fourth dose) for severely immunosuppressed people aged 16 and over and people are able to attend appointments from 1 February. This will be supported by public-facing communications, including updates to the NBS website and 119 scripts which will highlight the evidence patients need to bring with them to their appointment.

Severely immunosuppressed individuals will be required to provide at their appointment a referral letter from their GP or specialist confirming their eligibility and the optimal timing of their booster as per [JCVI advice](#). Those aged 16 and 17 years old will be directed by the NBS to sites that have been approved and assured to vaccinate this cohort as outlined in [checklist A](#).

We ask site leads to inform staff, including front-of-house and volunteers about this NBS update. Processes should be in place to identify severely immunosuppressed people who have booked their booster dose (fourth dose) on the NBS on arrival and direct them to the appropriate pathway to receive their booster dose. We have issued Operational Guidance with further instructions for sites available [here](#).

#### **3b) NEW: National call/recall invitation letter for boosters for severely immunosuppressed people aged 12 years and above to land this week**

This week, we will send national invitation letters and emails to severely immunosuppressed people (or their responsible adults) aged 12 years and above who, according to our records, may be eligible for a booster (their fourth) dose. This national call/recall activity is in addition to the request to GPs and hospital specialists to identify and invite people for their booster (fourth) dose.

We advise all people who may be eligible either due to their condition or treatment and have not been contacted before by their GP or hospital specialist to get in touch with their responsible clinician.

For the booster dose, the responsible clinician should advise about the best timing in relation to the patient's condition or treatment in line with JCVI advice. For further information please also see the [Green Book Chapter 14a](#).

Individuals who have received a referral letter confirming eligibility for their booster dose, and information on its appropriate timing can now also book their booster on the NBS if they are aged 16 (see our Ops Note [here](#)) or above, or can attend a walk-in vaccination site.

Please note that the supplementary payment for PCN and CP-led vaccinations of severely immunosuppressed individuals of £10 has been extended to 31 March 2022.

### **3c) NEW: Extension to supplementary payments for vaccinations of severely immunosuppressed individuals**

Supplementary payments for PCN and CP-led vaccinations of severely immunosuppressed individuals of £10 have been extended to 31 March 2022. The [Local Enhanced Service](#) for community pharmacy has been updated and the [Enhanced Service Specification](#) for general practice will shortly be updated.

## **4. NEW / REMINDER: Workforce and Operational Support**

### **4a) REMINDER: Payments changes**

A reminder is available [here](#) of the temporary increases in Item of Service fees and supplementary payments prompted by the Omicron variant and the processes that we plan to use to make such payments.

***In particular, we wish to draw your attention to the fact that we plan to make the additional payments based on activity declared (that attracts the increased fee) at three points:***

- ***activity declared up to and including the February declaration window***
- ***any activity declared in the March declaration window***
- ***any activity declared in the May declaration window (but taking account of both April and May declarations) These payments will be made separately from those payments for which you have made claims for the standard IoS fee of £12.58 or standard supplementary payment of £10.00. Such claims for standard fees and payments will be made in the normal way at the usual times.***

The changes are summarised in a table, available [here](#).

### **4b) NEW: Retention toolkit update**

The COVID-19 Local Retention Guide for Unregistered Guide is currently being updated to reflect developments in the programme since it was last published in summer 2021.

Key updates to the employer Guide will include:

- information on the national retention chatbot which is free and available for all Lead Employers to utilise
- information and guidance on establishing a Reservists model
- additional case studies and local examples of retention initiatives (e.g. surveys, careers fairs and webinars, and development opportunities)
- resources relating to the Healthcare Support Worker (HCSW) programme. The Candidate Information Pack (which contains materials that Lead Employers may lift, adapt, rebrand and use in local materials given to candidates) is also being updated to include information on what a Reservist role looks like; and more information on training and career progression for HCSWs. The updated toolkit will be published within the next week and the link will be shared in next week's bulletin. If you have any examples of retention work being undertaken in your area and are happy for it to be included as a case study, please reach out to Lucy Holmes ([national.wfdeployment@nhs.net](mailto:national.wfdeployment@nhs.net))

#### **4c) NEW: Retention chatbot**

The COVID-19 retention chatbot is an innovative technology, available to lead employers, which contacts candidates to ask their interest in roles within health and care outside of the vaccination programme to drive retention. The technology has been procured nationally and is free for all Lead Employers to use as a standardised script, to contact any staff recruited to the COVID-19 vaccination programme (deployer or undeployed). Responses are collated automatically and shared back with Lead Employers to act on. The process for Lead Employers to get setup with the chatbot is very straightforward and data is shared via a secure Sharepoint folder.

To date 29 Lead Employers have opted-in to using the chatbot. If you would like further information or a demo of the chatbot, please reach out to Lucy Holmes ([national.wfdeployment@nhs.net](mailto:national.wfdeployment@nhs.net))

#### **4d) NEW: Operational Notes**

You can view the latest Operational Notes [here](#) which includes:

- NBS Booster appointments enabled for severely immunosuppressed people aged 16 or over

#### **4e) REMINDER: Help improve the vaccination booking experience**

The NHS Vaccinations Programme needs your help to understand your experience of managing vaccination bookings. We are conducting research with site staff to help us understand how we might improve the way that vaccination



bookings are managed for both site staff and citizens. We're looking to conduct interviews over the coming weeks.

***Interested in taking part?*** Please complete this [survey](#) and we will get in touch to arrange a convenient time.

**4f) REMINDER: Vaccination Operational Support Teams (VOST) are available to support vaccinations (COVID-19 and Flu) and 12–17-year-olds**

See below for teams that are currently available for deployment, along with areas where teams can be deployed for the week commencing 31st January 2022.

Please contact your [lead employer](#) for the latest deployment details and availability within your area.

WC 31/01/2022	Not deployed and are available		Deployed VOST teams	
	Lead Employer	Location	Lead Employer	Location
<b>North West</b>	East Lancs Hospital NHS Trust	Lancaster Ulverston	St Helens and Knowlesly (Cheshire and Merseyside) Newcastle Upon Tyne Hospital Trust	The Oval  Darlington Middlesbrough
<b>North East &amp; Yorkshire</b>	South Yorkshire and Bassetlaw	Sheffield		
<b>South East</b>			Kent and Medway	Pentagon
<b>South West</b>	Dorset  Devon	Nuffield Ind Estate Torbay Barnstable	Somerset	Gateway
<b>London</b>			East London Health and Care Partnership	Westfield Stratford
<b>Midlands</b>	Staffordshire and Stoke on Trent	Various	Coventry and Warwickshire	Various

VOST teams are trained and ready to support COVID-19 and flu vaccinations, including 12-17 year olds and can often be deployed at pace. They are made up of an equal number of Registered Healthcare Professionals and Unregistered Vaccinators as outlined below:

**Team of 6** -1 x Clinical Supervisor, 2 x Registered Healthcare Professionals & 3 x unregistered Vaccinators

## 5. NEW: Resources

### 5a) NEW: Make every contact count: Vaccine in pregnancy resources

We [wrote to healthcare professionals](#) this week asking them to 'make every contact count' this winter with pregnant women, and those planning pregnancy, to advise them of the benefits of COVID-19 and flu vaccination. Materials and links are available for healthcare professionals and can also be used to signpost acute physicians to best practice guidance on the management of COVID-19 infection in pregnancy.

There is still more to do to make sure every woman has access to vaccination both before and during pregnancy. Specifically, we ask for continued collaboration and leadership between maternity and vaccine leads to routinely hold vaccine confidence conversations and inform pregnant women where they can go, co-locating walk-in vaccination and maternity services wherever possible, so that it is as easy as possible to get vaccinated at any point in the maternity pathway.

Available resources:

- [UKHSA leaflet](#) for all women of childbearing age, pregnant or breastfeeding
- Royal College of Gynaecologists (RCOG)/Royal College of Midwives (RCM) information [leaflet and decision aid](#)
- RCOG [website](#)
- NHS COVID-19 & pregnancy [toolkit](#)
- FutureNHS Vaccine Equalities [Area for Pregnancy & Fertility Vaccination uptake](#)
- [Case studies](#) about vaccine uptake in pregnancy
- British Journal of Midwifery [article](#)
- Royal College of General Practitioners (RCGP) Vaccines in pregnancy [screencast](#)

### 5b) NEW: Daily vaccine confidence sessions hosted by clinical professionals

NHS England and NHS Improvement will be running daily drop-in Vaccine confidence Q&A sessions from Wednesday 26 January 2022 to February 3, 2022. These sessions are for all NHS staff to attend and will offer an opportunity to ask any specific questions you might have regarding COVID-19 vaccines.

Each of these drops-in sessions will be tailored towards a specific audience and hosted by a relevant clinical professional who will answer any questions and

signpost you to any additional information. These sessions will provide a safe and supportive environment for you to ask any questions you may have about the COVID-19 vaccines. Dates and themes are:

- Saturday 29 January: 7:00pm – 8:00 pm - Vaccines and Your Faith
- Sunday 30 January: 7:00pm - 8:00pm - Vaccines and Your Faith
- Monday 31 January: 12:00 pm – 1:00 pm - Vaccines for Nursing and Midwifery Staff
- Tuesday 1 February: 1:00 pm – 2:00 pm - Vaccines and Fertility
- Wednesday 2 February: 12:00 pm – 1:00 pm - Vaccines for Healthcare Students
- Thursday 3 February: 4:00 pm – 5:00 pm - Vaccines and the Science

Register for a session [here](#).

#### **5c) NEW: Staff engagement vaccine equalities webinar available on demand**

A [recording](#) of the last Vaccine Equalities Connect and Exchange webinar about engaging with staff to improve vaccine confidence and health and wellbeing is available [on demand](#). Future events sharing local practice and learning are now open for booking, via our [website](#) and [COVID-19 Vaccine Equalities Connect and Exchange Hub](#):

- Thursday 3 February; 1.30pm to 3pm: [Bridging the uptake gap in areas of multiple deprivation](#)
- Thursday 17 February, 1.30pm to 3pm: [Ensuring vaccinations are accessible to paid and unpaid carers and people with long term conditions](#)
- Thursday 3 March, 1.30pm to 3pm: [Vaccinating the under 30s from underserved communities](#)

#### **5d) NEW: Case studies**

The COVID-19 Vaccination Programme Improvement Hub publishes case studies to share learning and improvement work across the programme. A new case study is available sharing how Barking and Dagenham GP Federation identified and supported people with learning disabilities or severe mental illness to encourage them to be vaccinated.

Please see the full case study [here](#). Please email, [c6.cag@nhs.net](mailto:c6.cag@nhs.net), if you have an improvement or shared learning case study to share.

Various good ideas and case studies have been collected over the last few weeks from different regions via the weekly Regional calls with the National team. They cover a multitude of topics and will help both Regions and Systems in their

efforts to maximise vaccinations. You can find a list of new case studies which may be useful [here](#).

Best practice will continue to be collated and shared across the programme via email and other channels, with a view to further development of some case studies for upload to the [Improvement Hub](#) on FutureNHS.

## **5e) NEW: Useful Links**

General queries email: [england.pccovidvaccine@nhs.net](mailto:england.pccovidvaccine@nhs.net)

### ***LVS and Roving SOP Publications:***

- Standard Operating Procedure for mobile and roving models (updated 7 October 2021) [here](#)
- Standard Operating Procedure for Local Vaccination Services (updated 8 October 2021) [here](#)

### ***Phase 3 FAQs:***

- [Phase 3 FAQs for GPs / PCN-led sites](#)
- [FAQs Pharmacy-led Phase 3 LVS](#)
- Press notice: [Press notice: JCVI issues advice on third vaccination for severely immunosuppressed](#)
- JCVI full advice: [JCVI advice on third dose for severely immunosuppressed](#)
- Clinical updates: you can find all clinical updates [here](#)
- [Coronavirus vaccinations](#): NHS Digital helps you access up-to-date information, training and onboarding guides related to the tech and data solutions that are supporting the COVID-19 and seasonal flu vaccination programmes.
- [COVID-19 Vaccination Programme workspace](#) provides members with access to key documents, resources, webinar recordings, case studies and past copies of the LVS Updates. There is also a discussion forum for members. If you are not already a member, please email: [P\\_C\\_N-manager@future.nhs.uk](mailto:P_C_N-manager@future.nhs.uk)
- [COVID-19 Vaccine Equalities Connect and Exchange Hub](#) is a community of practices on the Future NHS platform. NHS, local authority, public and voluntary sector staff working to increase vaccine uptake, share ideas, evidence, resources, case studies and blueprints to increase uptake of the COVID19 vaccine within all communities. Members also have access to peer-to-peer support and a programme of regular lunch and learn webinars and live discussion forums. To join, please [register for an account](#) and once registered you can [join the Hub](#).

- [Supply and Delivery Hub](#) helps you access key information in a timely way and help support you to deliver your local vaccination service. Here you will find the latest delivery information (vaccine and vaccine consumables as well as non-vaccine consumables, equipment and PPE), alongside the latest supply chain and customer service FAQs and other helpful information.

***National Workforce Support Offer – more details:***

- [National Workforce Support Offer Toolkit](#) provides more detail about the National Workforce Support Offer and is a practical guide for local vaccination service leads.
  - Contact your [Lead Employer](#) to access the National Offer and additional staff and vaccinators, as well as support with your workforce needs.
  - For more details, please see our Futures NHS pages [LVS Workforce](#) and [case studies/FAQs](#) and recently guidance for [PCN groupings](#) and [community pharmacy](#)
  - Contact the national workforce team direct via [PCNCP.workforceescalation@nhs.net](mailto:PCNCP.workforceescalation@nhs.net)
- 
- [COVID-19 Vaccination Improvement Hub](#)