

ICARS Newsletter

Issue 76: 18th February 2022

Immunisation Clinical Advice Response Service

About this bulletin:

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

PLEASE SHARE WITH ALL RELEVANT STAFF INVOLVED WITH THE VACCINATION PROGRAMME

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

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1. NEW: Booster Doses Updates

1a) REMINDER: JCVI booster dose recommendations

The JCVI have advised that either Comirnaty (30micrograms/dose) concentrate for Adults & Adolescents or a half dose (50micrograms) of Spikevax® COVID-19 mRNA vaccine should be offered for boosting irrespective of the vaccine used for the primary course. Both vaccines are suitable for boosting adults aged 18 years or over, with Comirnaty® preferred for those aged under 18 years. Both vaccines have been shown to give good immune responses. (Munro et al, 2021, Choi et al, 2021). The half dose of Spikevax® is expected to have a lower rate of side effects (including myocarditis) than a full dose.

1b) NEW: Supporting severely immunosuppressed individuals to receive their booster (4th dose) vaccinations

GPs and hospital specialists should continue to invite their severely immunosuppressed patients for a booster (fourth) dose 91 days after their third primary dose.

Individuals are required to provide at their appointment a letter from their GP or specialist confirming their eligibility and the optimal timing of their booster as per JCVI advice.

We ask site leads to remind staff, including front-of-house and volunteers, about the processes which should be in place to identify severely immunosuppressed people arriving for their booster (fourth) dose on arrival and direct them as appropriate. An operational note with further guidance for sites has been issued.

Sites are also reminded that booster (fourth) doses should be recorded as a second booster in point of care systems. Systems such as Pinnacle support the recording of multiple boosters. Therefore, third primary doses recorded as 'booster' should not be over-written with the fourth dose. All doses appear individually in the individual's vaccination history and are recorded in NIMS and the GP Record.

2. NEW: Extending post-thaw expiry dates

Recent communications, as summarised in the Clinical Bulletin dated 21st January, have detailed that for specific batches of unpunctured and undamaged Comirnaty® 30microgram/dose Concentrate for Adults and Adolescents, the post-thaw expiry date can be extended by 14 days (from 31 days to 45 days) from the date of removal from ultra-low temperature (ULT) storage. Similarly this system letter details that for specific batches of Spikevax® vaccine, the post-thaw expiry dates of unpunctured and undamaged vials may be extended from 30 days to 60 days.

This post-thaw expiry extension only applies to the specific batches listed in the system letters and the SOPs, and only if they have been stored in accordance with the Summary of Product Characteristics.

This does include those vials of the specified batches yet to be removed from ULT storage for thawing. For these vials, at the point of removal from ULT storage, the regular post-thaw expiry date should be applied (i.e. 31 days for Comirnaty® 30microgram/dose Concentrate for Adults and Adolescents and for Spikevax® it would be 30 days). If at the end of the standard post-thaw expiry period this product meets the criteria for the post-thaw expiry extension, in particular that it has not been subject to a temperature excursion, then the relevant extension can be applied, as described in the Specialist Pharmacy Service SOPs:

- Extending the post thaw expiry of Comirnaty (30 microgram/dose) concentrate for Adults and Adolescents at PCN designated sites or in Trusts / Vaccination Centres
- Extending the post thaw expiry of Moderna (Spikevax) COVID-19 vaccine in PCN designated sites or in Trusts / Vaccination Centres

3. NEW: Responsible Pharmacist COVID Vaccine Mutual Aid Assurances

Please be aware that Responsible Pharmacists as signatories of donating or receiving mutual aid of COVID Vaccinations should assure themselves of COVID vaccination integrity and cold chain storage, in line with National advice and guidance. Pharmacists may ask for specific information to support this assurance process. Please support them in their requests for reasonable information to facilitate mutual aid requests of COVID vaccinations and relevant links below for information:

- https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2021/01/C1424-mutual-aid-and-the-transfer-of-covid-19-vaccines-between-nhs-vaccination-sites-v2.pdf
- https://www.sps.nhs.uk/articles/facilitating-pharmaceutical-support-to-pcn-designated-sites-for-covid-19-vaccinations/

- https://www.sps.nhs.uk/articles/using-fridges-appropriately-to-store-covid-19-vaccines/
- https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/12/C0945-Governance-handling-and-preparation-of-vaccines-by-GP-led-local-vaccination-centres-PCN-designated-sites.pdf

4. NEW: At-risk 5-11 year-olds - top tips for obtaining appropriate consent

The inclusion of at-risk 5-11 year-olds into the eligible cohorts has prompted providers to review their consent process and we have been asked to reiterate our guidance on consent.

This cohort introduces a new dynamic to the programme. A significant number of children will not have the necessary Gillick competence and the need for parental consent will be encountered more frequently.

- Providers will need to be mindful that the accompanying adult may not have the legal authority to consent for the child. It may be helpful to invite the child to identify the adult accompanying them such as "who are you here with today?" The standard within Checklist A, B & C states that Providers will need to have procedures in place to ensure consent is obtained from a person who also has the legal authority to consent on behalf of the child prior to vaccination. The standards are available here.
- The registered professional obtaining consent will need to be satisfied the parent has the competence to give consent (here). The standards within checklist A, B & C asks for providers to have a process/agreement in place that enables them to access further support in assisting with complex situations regarding consent.
- The law and foster parents is complex and the standards in checklist A, B & C asks for vaccinators and those obtaining consent to ensure they understand the law regarding consent and foster (LAC) children in this situation. Guidance is available here
- Equally, the rights of the child also need to be protected and a Gillick competent child is still able to consent for their own treatment.
- If a free text box is available in the Point of Care system, then this can be used to record any appropriate intervention on consent.
- Providers are specifically asked to electronically record any incidents regarding consent and if able, to consider recording who attended with the patient on the system.
- Providers are invited to escalate any shared learning to the national team for wider dissemination across the programme.

5. SUMMARY: Comirnaty concentrate 10micrograms/dose for SAIS teams

- Further to conversations with regional teams about access to vaccine for SAIS providers over the course of week commencing the 07 February 2022, please note the summary below to support:
- The preferred model of supply of Comirnaty® concentrate 10microgram/dose for 5-11 year olds and 30microgram/dose vaccine for 12-17 year olds is via the chosen EECL Supply Chain to SAIS teams or other contracted provider
- Where supplies of vaccine cannot meet immediate needs, Mutual Aid is allowed under existing Policy and may be used by systems to move vaccine within and between pillars to SAIS teams
- Note that Mutual Aid applies only at the end of the supply chain from a site holding 'excess' vaccine to another site which:
  - has an urgent unplanned need and can't get it through usual supply routes, or
  - is confident of being able to use vaccine nearing the end of its shelf-life which will otherwise be wasted
- In circumstances where the Hospital Hub or Vaccination Centre and relevant SAIS teams are not part of the same legal entity, the Technical Agreement used last year will apply and has been updated to specify that it now also covers Comirnaty® concentrate 10microgram/dose for 5-11 year olds
- In all circumstances, the lead pharmacist for the supplying site is responsible for ensuring that Mutual Aid supply occurs only if they are assured that it is in every respect safe and secure and in compliance with relevant guidance and SOPs.

Thank you for all your ongoing support.

6. NEW: Office for National Statistics (ONS) vaccine publications

The Office for National Statistics (ONS) have published a variety of documents on COVID-19 vaccine uptake in multiple cohorts, including analysis of uptake in school aged children, sentiment analysis of parent and pupil surveys and vaccine uptake aged 18-64:

- Coronavirus and vaccination rates in people aged 18 to 64 years by occupation, England - Office for National Statistics
- Coronavirus (COVID-19) vaccination uptake in school pupils aged 12 to 17 years attending state-funded schools

- COVID-19 Schools Infection Survey, England: attitudes to vaccines and preventative measures, November to December 2021

7. UPDATE: Vaccination as a condition of deployment (VCOD) for all healthcare workers

As you will be aware, the government has announced it is not going to proceed with the legislation that was due to come in from 1 April requiring vaccination as a condition of deployment (VCOD), subject to parliamentary process.

Further to its letter sent to the system on 31 January, NHS England and NHS Improvement has now shared some frequently asked questions to support HR directors and organisations in this interim period.

8. NEW: Operational Updates and Materials

8a) UPDATE: Clinical safety checklist

The safety checklist has been updated to reflect further changes to the vaccine programme – extension of the booster programme to children aged 5-11 years in certain risk groups and the continuing suspension of the 15 minute wait after vaccination, for those without risk factors specified in the Green Book. The checklist is designed to be used at all sites at the start of each vaccine session. We will continue to keep it updated so please continue to send us your comments or suggestions for improvement.

8b) UPDATE: Cohort eligibility and operational status

This resource has been reviewed and has small updates this week. The resource summarises which cohorts are eligible for vaccination, under what parameters, and how they can access the offer. 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.

8c) NEW: COVID-19 publication materials – maintaining up-to-date supplies

All COVID-19 publication materials must be available with up-to-date versions accessible to people attending for vaccinations, particularly those who have set relevant National Booking Service (NBS) accessibility attributes on Q-Flow to

'TRUE'. For example, if your site has switched on the Braille accessibility and/or sign language attribute to TRUE, you must ensure your site has the latest Braille publications and/or sign language video downloaded on site. The latest versions of publications are available here and can be ordered by accessing the publications portal or by telephone. Delivery is free and takes between 5-7 days. BSL video versions of various publications can be downloaded from the same link.

· ***Publications Portal:***- https://www.healthpublications.gov.uk/Home.html

The Portal should be reviewed regularly to ensure you have the latest version of all publications

· ***Telephone*** : 0300 123 1002 (leaflets can be ordered Monday to Friday 8am-6pm)

How to set up accessibility attributes on Q-Flow:

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.

8d) REMINDER: Post payment verification (PPV) – message from NHSBSA

Post payment verification is one of the ways we provide assurance to PCNs, Community Pharmacies, NHS England and NHS Improvement that claims for payment are submitted and processed accurately. If any PCN or Community Pharmacy feels that it has received an incorrect payment, please contact us (at the email addresses below) and your payments will be scheduled for review. We'll work on your behalf to review your records and may ask you to supply information or evidence to support this, including a self-assessment of any identified duplicate payments.

If any PCN or Community Pharmacy has unclaimed payments because the claiming window, for the months of April to August 2021, is now closed, they can also contact us to raise this for inclusion in a post-payment review. **They will need to contact us about this by 28 February 2022 for any queries relating to the period April 2021 to August 2021.**

PCNs can contact us on nhsbsa.gpsupport@nhs.net

Community Pharmacies can contact us on nhsbsa.pharmacysupport@nhs.net

9. NEW: Vaccination Recording Resources

9a) NEW: Overseas Vaccine Record Validation Service

The following communication outlines a change to the eligibility criteria to access the overseas vaccine record validation service at designated vaccination centres and hospital hub plus. The notice also includes updates on service changes in the future, for which separate communications will be issued at the appropriate time.

From 10 February 2022, changes will be made to the National Booking Service (NBS) to allow those **aged 16 years** and above to book and attend in person, an appointment to have their identity verified and vaccine records from overseas validated.

Those aged between 16 and 17 years of age will not be required to have a parent, carer or guardian attend the appointment with them.

The current eligibility criteria to have overseas vaccine records validated has been set by the DHSC as listed below.

Individuals to:

- have received one of the currently recognised Medicines and Healthcare Products Regulatory Agency (MHRA) approved vaccine types for use in England: AstraZeneca **(Vaxzevria)** / Pfizer/BioNTech **(Comirnaty)** / Johnson & Johnson **(Janssen)** / Moderna **(Spikevax)** or Novavax **(Nuvaxovid)**
- be registered with a GP in England. Individuals can register with a GP if they do not have one;
- be able to attend the face-to-face appointment with photographic ID (Passport or UK Driving Licence) and evidence of overseas vaccination records. **Evidence Validation and Administration of Vaccines**A change in the vaccine types accepted by the service is imminent. We are awaiting guidance from UKHSA and PHE and will update sites as soon as the new guidance is published.

Appointment Duration

Following feedback from sites, as part of the changes deployed on 10 February 2022, QFlow appointment duration is being reduced from 15 minutes to 10 minutes.

For information:

Under 16s

This group are currently eligible for vaccination in line with the latest guidance which can be found here. We are however working towards enabling eligible under 16s to have their overseas vaccine records validated through a

parent/guardian attending the appointment on the child's behalf. A further update will be shared when a deployment date is confirmed.

Service capacity

Many Vaccination Centres have increased the availability of overseas vaccine record validation service during January 2022. NHS regional leads are reminded to work in collaboration with System Leaders to maximise opportunities for staff to be trained in running the service. This will enable localities to respond rapidly to peaks and troughs in demand.

During February, a national social media campaign will promote the service and the benefits of recording of overseas vaccinations on an individual's healthcare records.

Regions are also asked to promote service and site availability to those local employers with a large cohort of overseas staff, and those educational establishments whose student population is over 16 years of age.

Resources

Please note that there are several new tools and resources available to support regions and site managers on service onboarding and day to day operational management. These can be found on FuturesNHS here, along with more information on service access for NHS Trust staff. The same link can used to view the calendar for webinars on topics such as onboarding, staff training, workforce modelling, capacity management, secure inbox issue resolutions and the vaccine date resolution service.

Immediate actions for regions

1. Share this communication with systems and those VCs and HH+ currently offering the overseas validation service.
2. Ensure overseas sites with vaccination capacity are training staff in the associated processes of record validation, to respond to peaks in demand
3. Encourage Local Authority commissioners to notify social care, care homes and domiciliary providers of the service so that eligible overseas staff can ensure vaccination records are up to date. If you do have queries in relation to this cascade, please email england.overseas@nhs.net.

9b) NEW: COVID-19 Vaccination for 12-15-year olds – National Booking System (NBS) calendar capacity and National Walk-In Site Finder capacity

As we approach the February half term, we are asking all providers assured to vaccinate eligible children and young people aged 12 to 15-years old to increase National Booking System (NBS) calendar capacity and National Walk-in Site Finder capacity to support uptake in this cohort. **Sites opting in to provide 12-15s coverage without open NBS calendars should be requested to open**

NBS calendars. Regions are responsible for ensuring sites deliver minimum contractual requirements.

Current Joint Committee of Vaccination and Immunisation (JCVI) advice for children and young people aged 12 to 15 years old is:

Cohort Description	Recommended Doses	Recommended interval from proceeding dose	NBS booking option
12 – 15 years in a risk group (either clinical risk OR household contacts of immunocompromised)	Primary Course Dose 1	N/A	Yes
	Primary Course Dose 2	8 weeks	Yes but from 12 weeks
	Booster dose	91 days	No
12 – 15 years and severely immunosuppressed at time of 1st or 2nd dose	Primary Course Dose 1	N/A	Yes
	Primary Course Dose 2	8 weeks	Yes but from 12 weeks
	Primary Course Dose 3	8 weeks	No
	Booster dose	91 days	No
12 – 15 years not in a risk group	Primary Course Dose 1	N/A	Yes
	Primary Course Dose 2	12 weeks	Yes

Current NBS functionality does not support booster bookings for all recommended cohorts at recommended intervals. Please ensure site level capacity allows for walk-ins for those presenting with a letter of eligibility.

10. NEW: Weekly Workforce and Training Updates

10a) NEW: COVID-19 Vaccination Programme: Support and Training Materials for IT Systems

For ease of access and to keep you updated, please see the table below as a quick reference guide on how to access training materials and helpdesk contacts for different IT systems. To further support sites, the national team host live drop-in sessions every Monday, Wednesday and Friday from 13:30-14:00hrs to problem solve issues. The joining link for these sessions is available here.

IT System	Explanatory Notes and Links

Supply Planner	• Video overview for site users can be accessed here
	• Site user guide can be accessed here
	• Helpdesk Contacts:
	  ○ Technical issues to be directed to Foundry.Support@england.nhs.uk
	  ○ Non Vaccine queries (i.e. I need to cancel my consumables order) to be directed to cs@nhsvaccinesupport.com

National Booking Service (NBS) & Q-Flow	• Guidance and Training can be accessed here
	• You Tube Video Tutorials
	  ○ How to create a calendar in Q-Flow
	  ○ How to update site details in Q-Flow
	  ○ How to create a user in Q-Flow
	• Helpdesk Contact:
	○ Service desk contact number 0300 200 1000 and email vaccineservicedesk@england.nhs.uk (open 6am to 10pm every day, including bank holidays)

Point of Care Systems i.e., Outcomes4Health, Sonar	• Guidance and Training (all systems) can be accessed here • Pinnacle (adding additional users) can be accessed here • Helpdesk Contact: vaccineservicedesk@england.nhs.uk
NHS Foundry LVS Site 360	• User guides are available via the NHS Foundry LVS Site 360 can be accessed via the Home page here • Helpdesk Contact: Foundry.Support@england.nhs.uk

If you have any queries, please contact england.pccovidvaccine@nhs.net

10b) UPDATE: Optimising the Royal Voluntary Service

Royal Voluntary Service (RVS) steward volunteer shift fulfilment rates consistently exceeded 90% nationally in December and early January, and currently remain above 80% (82% reported last week). In addition to the 24,615 active RVS volunteers, who completed shifts in the last 12 weeks, there are a further 34,790 recently recruited across all areas, who have not yet completed shifts. To encourage them to remain registered and available to the programme, we would appreciate your engagement to maximise the utilisation of RVS volunteer stewards across all sites in your respective areas, while reducing dependencies on paid stewards. We are supporting this with communications to all those who have registered for stewarding duties and also to community pharmacies networks to encourage RVS steward utilisation.

In summary, Lead Employers and sites may recharge to the programme the costs for utilisation of paid stewards only where RVS volunteer steward shift fulfilment falls below 80% for three consecutive weeks, where there is a specific need to rapidly increase vaccine delivery, or where pre-existing contracts cannot be cancelled without continuing financial commitment. Criteria for the deployment of paid stewards must in all cases be discussed with the Mobilisation Team and recharges to the programme, pre-approved by the national programme team. Where lead employers and sites believe there is a case for the continued utilisation of paid stewards, this should be highlighted to the Mobilisation Team Regional Leads and RVS Regional Coordinators, who will work with your systems to find available volunteers.

10c) UPDATE: SJA offers of support

To increase their utility and reduce pressures on NHS registered staff, St John Ambulance now trains all its new volunteers as vaccinators, capable of covering all SJA roles (patient advocate, volunteer vaccinator, post-vaccination observer). Existing non-vaccinator volunteers are also being encouraged to upgrade to vaccinator status. While SJA volunteers are already active across all delivery pillars, SJA support to the vaccination of children (aged 5 and above), including their availability to support School Age Immunisation Service providers, was also introduced from 1st February.

SJA's mobile services, responding to surge requirements, vaccinating adult care-home residents, assisting and housebound patients and conducting outreach to homeless communities, saw high uptake in the Autumn. Excess capacity now exists across all these mobile services (including deployment of mobile treatment centres and other SJA vehicles) and we encourage systems to actively increase their utilisation as we seek to continue the reach of the programme.

Further imaginative services are also being offered by SJA to increase outreach to the 'underserved' and we encourage all systems to engage their SJA Regional Coordinators and Mobilisation Team Regional Leads to explore these opportunities. These may include utilisation of mobile SJA advocacy teams and vaccination clinics at major public events (at which SJA are already represented), deployment of 'street teams' in town centres and to the night-time economy, to specific communities and in other creative ways. Please invite your SJA Regional Coordinators and ask for SJA national programme representatives to join your conversations to inform planning for the scheduling and use of these offers.

10d) NEW: Case studies

The COVID-19 Vaccination Programme Improvement Hub has published a number of case studies to share learning and improvement work across the programme.

Two new case studies are available sharing how Kirklees CCG and stakeholders have supported children with Special Educational Needs; and how they also worked with schools to plan and co-ordinate vaccination sessions.

Please email, c6.cag@nhs.net, if you have an improvement or shared learning case study to share.

10e) NEW: Webinars

Vaccination programme shared learning community webinar

The recording of the shared learning webinar held on Wednesday 9 February, training on 'Failure Mode and Effects Analysis (FMEA)' quality improvement methodology, is available on the Improvement Hub to view.

Future webinars will take place on Wednesday 23rd February at 2pm, with the topic and registration details to be shared shortly, please see the Improvement hub calendar for details.

10f) REMINDER: Useful Links

General queries email: 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

- 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

COVID-19 Vaccination Improvement Hub