



Staff Covid Vaccination Programme

Report to:	Trust Board	
Date of the Meeting:	27 th January 2021	
Agenda Item:	P1-008-21	
Title:	Staff Vaccination Programme Report	
Report prepared by:	Joan Spencer Chief Operating Officer Ian Fearnley: Interim Associate Director for Clinical Governance, Quality and Risk Steve Povey: Emergency Planning Office	
Executive Lead:	Joan Spencer: Chief Operating Officer	
Status of the Report:	Public	Private
	x	

Paper previously considered by:	Not applicable
Date & Decision:	

Purpose of the Paper/Key Points for Discussion:	The purpose of this report is to inform Trust Board of the implementation plan and progress of the Covid vaccine programme at Clatterbridge Cancer Centre (CCC).
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Action Required:	Discuss	
	Approve	
	For Information/Noting	X

Next steps required	
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The paper links to the following strategic priorities (please tick)

Deliver outstanding care locally	x	Collaborative system leadership to deliver better patient care	x
Retain and develop outstanding staff	x	Be enterprising	
Invest in research & innovation to deliver excellent patient care in the future		Maintain excellent quality, operational and financial performance	

The paper relates to the following Board Assurance Framework (BAF) Risks

BAF Risk	Please Tick
1. If we do not optimise quality outcomes we will not be able to provide outstanding care	x
2. If we do not prioritise the costs of the delivering the Transforming Cancer Care Programme we will not be able to maintain our long-term financial strength and make appropriate strategic investments.	
3. If we do not have the right infrastructure (estate, communication & engagement, information and technology) we will be unable to deliver care close to home.	
4. If we do not have the right innovative workforce solutions including education and development, we will not have the right skills, in the right place, at the right time to deliver the outstanding care.	
5. If we do not have an organisational culture that promotes positive staff engagement and excellent health and well-being we will not be able to retain and attract the right workforce.	x
6. If we fail to implement and optimise digital technology we will not deliver optimal patient outcomes and operational effectiveness.	
7. If we fail to position the organisation as a credible research partner we will limit patient access to clinical trials and affect our reputation as a specialist centre delivering excellent patient care in the future.	
8. If we do not retain system-side leadership, for example, SRO for Cancer Alliance and influence the National Cancer Policy, we will not have the right influence on the strategic direction to deliver outstanding cancer services for the population of Cheshire & Merseyside.	
9. If we do not support and invest in entrepreneurial ideas and adapt to changes in national priorities and market conditions we will stifle innovative cancer services for the future.	
10. If we do not continually support, lead and prioritise improved quality, operational and financial performance, we will not provide safe, efficient and effective cancer services.	

Equality & Diversity Impact Assessment		
Are there concerns that the policy/service could have an adverse impact on:	YES	NO
Age		
Disability		
Gender		
Race		
Sexual Orientation		
Gender Reassignment		
Religion/Belief		
Pregnancy and Maternity		

If YES to one or more of the above please add further detail and identify if a full impact assessment is required.

Covid Vaccination Programme

1. Introduction

It has been widely recognised that frontline worker in the healthcare sectors are more likely to be exposed to COVID-19 at work. Healthcare workers and those working in social care (particularly in care homes) are also at a much higher risk of repeated exposure to the infection. With the rates of COVID-19 continuing to rise, it's more important than ever to help stop the spread of coronavirus, to avoid pressure on the NHS and to keep the health and social care workforce healthy.

On 2 December 2020, the Medicines and Healthcare products Regulatory Agency (MHRA) authorised the Pfizer/BioNTech COVID-19 vaccine for widespread use in the UK. This was closely followed by the approval of the Oxford University/AstraZeneca by the MHRA on the 30th Dec 2020.

On 7 January 2021, the MHRA approved the Moderna COVID-19 vaccine; however, doses of this vaccine will not be available in the UK until spring 2021. Other vaccines, such as those manufactured by Novavax and Janssen, are currently in phase III clinical trials.

2. Trust Response

Within Cheshire and Merseyside, three NHS sites were identified as initial vaccination hubs. This included Wirral University Hospital Trust (WUTH) on the Clatterbridge campus, Liverpool University Hospital Foundation Trust (LUHFT) on the Aintree campus and Countess of Chester Hospital (COCH). These sites were selected to deliver the Pfizer vaccine for their own staff, and social care staff initially. Further sites were identified across Cheshire and Merseyside from a centrally controlled plan.

Initially, CCC staff were planned to join the Liverpool University Hospital Foundation Trust (LUHFT) vaccination programme. However, plans were slow to progress and delays were identified for the delivery of vaccine to LUHFT's city centre campus.

An opportunity arose for CCC to become a "mini hub" utilising the Astra Zeneca (Oxford) vaccine which also allowed easier transportation of the vaccine and therefore an ability to reach CCC staff irrespective of their place of work.

The "mini hub" approach was approved centrally on the 7th January 2021, with delivery of the vaccine planned for the following week. The Business Intelligence Team at CCC in partnership with Workforce and Organisational Development Team developed a list of all staff working for CCC to ensure they were offered the vaccination.

On Thursday 14th January 2021, the trust received their first delivery of the Oxford-AstraZeneca covid-19 vaccine. CCC received 900 vaccines to cover both Wirral and Liverpool sites. The Covid-19 vaccination programme went live on Friday 15th January for all priority staff groups. Three hundred and seventy staff received a vaccination on the first day of operation at the Trust. As at 21st January, 1338 staff had been vaccinated.

3. Prioritisation of Staff

In line with government guidance CCC adopted the advice from the Joint Committee on Vaccination and Immunisation (JCVI) that clearly identified staff groups who should be prioritised for vaccination. Staff within CCC were placed into the following cohorts:

Cohort	Staff Grouping	Invitation to Book sent
1A	Bone Marrow Transplant (BMT) Unit Black, Asian and Minority Ethnic (BAME) Clinically Extremely Vulnerable Vaccination team Ward 3 (Red Zone) Ward 5 (BMT).	13.01.21
1B	All other clinical/patient facing staff	14.01.21
2A	Priority non clinical staff: Pharmacy, Physics, Health scientists, Clerical staff	15.01.21
2	All other non-clinical/non patient facing staff	17.01.21

Staff who were shielding were advised to book earlier or later appointments to avoid crowded areas. Any staff enquires are managed via the covid-19 vaccine email address which is monitored between the hours of 08:00am and 20:00pm.

4. Vaccination Team & roll out

Joan Spencer is the Executive Lead for the vaccination programme and is supported by a working group coordinated by the CCC incident room. To avoid duplication of effort, the Vaccination Team adopted and amended existing Standard Operating Procedures (SOP) from the flu vaccination programme.

Two locations to deliver the vaccine were identified; the Teenage and Young Adult (TYA) facility on the fifth floor at CCCL and the Papillion suite at CCCW.

Each location was assessed by the Infection and Prevention Control Team and set up with all the necessary clinical kit, essential consumables and appropriate technology to record the vaccinations and book the second dose.

Thirty-two vaccinators were identified to deliver the vaccine along with eight administration staff who were trained to navigate and utilise the national booking system, "Simply Book" and the National Immunisation Management system (NIMs).

It was agreed at Gold Command that vaccinations would be offered to staff between the hours of 08:00am to 18:00pm Monday to Friday at CCCL and CCCW. To reach CCC staff working at the CCC Aintree who cannot attend CCCL or CCCW an additional vaccination clinic will be opened on Tuesday 26th January, this will be available between 09:00am and 14:00pm.

Further vaccination sessions can be opened if required.

5. Communication with staff

In order for staff to book an appointment for their vaccination, an email was sent to them (including a link to the Simply Book system) advising staff how to book their appointment together with general vaccine information. Each staff member was instructed to download the national consent form, complete the personal details section and bring it to their vaccination appointment. The consent form was then signed at the vaccination appointment.

The administration of the vaccination was completed using the national Patient Group Direction (PGD). All vaccinators have undertaken their PGD training together with other training e-learning modules including anaphylaxis, resuscitation, legal aspects of the vaccine and vaccine information itself. The administration of the vaccine is then recorded on the National Immunisation Management System (NIMS).

6. Data Collection

All of the vaccinations and booking process is recorded electronically. The booking process is managed locally through a national system called Simply Book. Vaccination data is collected within a system called NIMS (National Immunisation Management System). All of the data is collected in real time within the vaccination hubs.

The Trust has access to dashboards provided across Cheshire & Merseyside to provide real time data.

Whilst electronic consent is recorded within the system, completed manual consent forms are stored securely within the incident room and will be scanned into an electronic file in due course

7. Current position.

As at 21st January, 1338 staff within CCC had been vaccinated with a first dose of the Covid-19 vaccine.

Further considerations

In the absence of any national guidance regarding staff who refuse the vaccine, CCC has requested staff download the consent form and complete the "refusal" section. This will be recorded on the national system and stored with all other vaccine consent forms for audit purposes. This will help the vaccination team to identify and target staff who wish to be vaccinated but have yet to receive it.

CCC has been approached by the Regional Team to help deliver the vaccine to staff from other NHS organisations. This has been agreed, however, availability of vaccination appointments will be dependent on demand and availability of vaccinators. The details of this request are to be confirmed.

8. Next Steps

Managers have been provided with the names of staff working in their departments who have not yet received the vaccine.

Managers have been asked to encourage and make time for staff to attend a vaccination appointment.

Vaccination clinic rotas have been extended for 4 weeks to enable flexible availability of vaccinators.

Plans are already being developed to support delivery of the second vaccine across both CCCW and CCCL. This will be delivered at week 12 as per national guidance.

9. Recommendations

This vaccination programme has been a rapidly developing dynamic process requiring delivery at pace and great flexibility dependent on vaccine delivery and availability. Despite uncertainty, the Vaccination Team has risen to the challenge and has been instrumental in the effective delivery of the programme.

Trust Board is asked to;

- Note the content of this report
- Request further a further update/assurance as the second vaccine is rolled out.