

Bradford District and Craven COVID-19 Vaccination Programme

Briefing Note

Overview and Scrutiny Committee January 2021

1.0 The Programme

This paper outlines the progress and challenges to delivering a whole population COVID-19 vaccination programme at scale and pace. The Vaccination programme aims are to vaccinate the entire over 50 years old population that are registered with General Practices within the Bradford and Craven district as quickly and safely as possible (by March 2021) and the population over 18 years of age by July 2021. It is important that we do not waste any vaccines so meticulous planning and call and recall systems are imperative.

To aid the rapid deployment of the vaccination programme the government have produced a series of pieces of guidance and directions that have guided the vaccination programme implementation. Due to the changing nature of the national vaccination programme and the requirement of the vaccination centres to be able to respond at very short notice (within hours) to significant changes in cohort prioritisation and vaccine and service delivery, there is a requirement to have separate functions for the operational management and strategic oversight of this programme.

The programme has 4 elements to it and the vaccine delivery sites are spread across the geography to limit the amount of travel for individuals accessing vaccination:

- 3 x Hospital Vaccination Centres (HVC)
- 10 x Primary Care Network Vaccination Centres (PCNVC)
- 2 x Community Vaccination Centres (CVC)
- 1 x Community Pharmacy Vaccination Centres (CPVC)

There are several challenges and risks associated with the delivery of the programme and these include:

- Access to appropriately skilled and available workforce
- Vaccine supply and short notice of vaccine delivery has made scheduling appointments difficult
- Logistics of transporting and storing vaccines
- Communication to population with consistent messaging to addressing evolving concerns in a timely manner
- Frequently changing guidance and requirements for the programme
- Delivery of a programme in a way that is COVID Secure for multiple people at any given time
- Community Site confirmations (Bradford College).
- Changing governance landscape and Lead Provider model

Additionally the Joint Committee on Vaccination and immunisation (JCVI) have produced clear evidence based prioritisation cohorts.

1.1 The Governance

Within Place there are joint SRO's: Nancy O'Neill and Karen Dawber, this is in recognition of the planning required and the necessity to be able to make senior decisions across 7 days per week.

There is a structured process in place that enables tracking of actions, risk mitigation and swift decision making:

Figure 1 – Overarching Roles and Responsibilities:

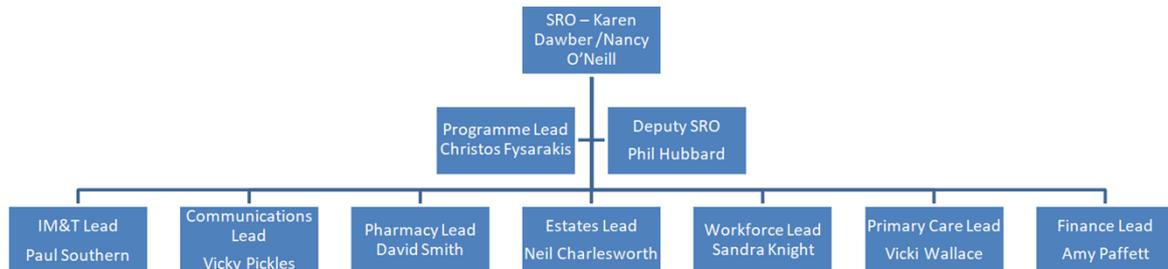
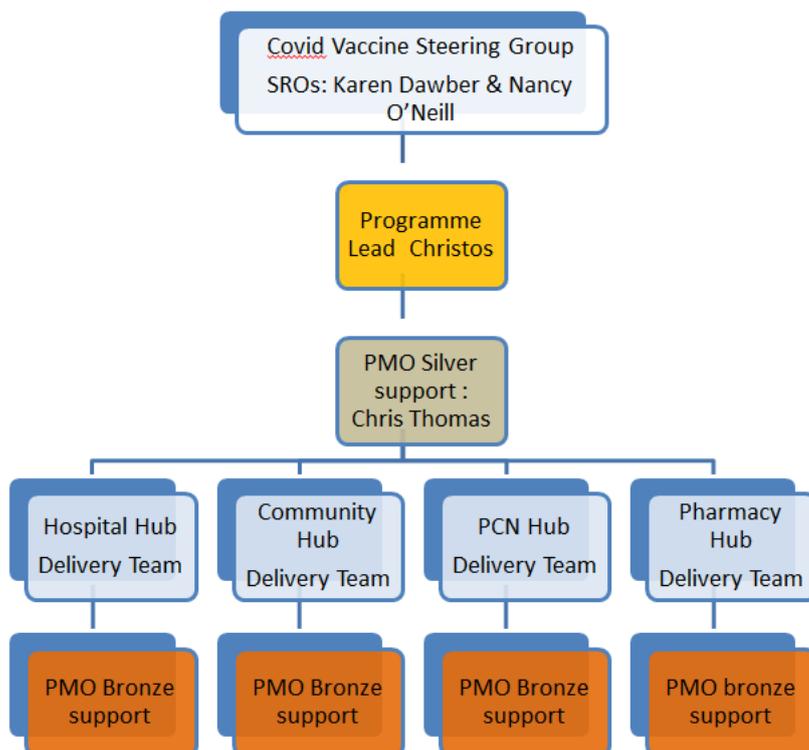


Figure 2 – Overarching Governance:



2.0 The Vaccine

COVID vaccines are being progressed at an expedited rate, the vaccines are still subject to MHRA approval and conditions of licence, this brings with it additional complexities that need to be considered depending on the vaccine being rolled out or the changing nature of the guidance.

2.1 The Joint Committee on Vaccination and Immunisation (JCVI) priority cohorts for vaccination

In line with the National and regional systems West Yorkshire and the Bradford vaccination programmes have started to vaccinate people in the following priority order as recommended by the JCVI:

1. residents in a care home for older adults and their carers
2. all those 80 years of age and over and frontline health and social care workers
3. all those 75 years of age and over
4. all those 70 years of age and over and clinically extremely vulnerable individuals those 65 years of age and over
5. all individuals aged 16 years to 64 years with underlying health conditions which put them at higher risk of serious disease and mortality
6. all those 60 years of age and over
7. all those 55 years of age and over
8. all those 50 years of age and over

It is estimated that taken together, these groups represent around 99% of preventable mortality from COVID-19.

2.2 The available vaccines

There are currently three vaccines licensed for use in the UK: Pfizer, AstraZeneca and Moderna.

2.2.1 The Pfizer/Biontech mRNA (PV)

The Pfizer/Biontech vaccine was approved by the MHRA for use in adults over 18 years old on 2nd December 2020. This vaccine has very specific requirements in terms of storage and reconstitution which in turn has an impact on the arrangements for delivery and staffing of vaccination centres. Once the vaccine had been approved it was delivered into COVID vaccination sites in batches of 975 vaccines, in a phased approach; Bradford became the second place in West Yorkshire to start vaccinating with a COVID-19 vaccination.

There are some specific clinical and logistic points to note relating to the administration of the Pfizer vaccine:

- It could not be transported again once it has been delivered by PHE/wholesaler to a site
- It must be delivered to patients/ people on that site and ideally with as little movement as possible
- The vaccine must be stored on the site at -70 for a number of months, or refrigerated at 2-8 degrees for 5 days
- Initially the minimum delivery was 975 vaccines but from 28th December 2020 batches of 75 vaccines were made available for use in larger care homes
- The second vaccine must be a minimum of 21 days after the first vaccine has been administered – this has been revised and current national directive is to delay second doses for up to 12 weeks.

2.2.2 The AstraZeneca/Oxford vaccine (AZV)

The AstraZeneca/ Oxford vaccine was approved in late December 2020 by the MHRA for use in adults over 18 years old. This vaccine began being distributed to covid vaccination sites from the week commencing 4th January 2021. The first AZV arrived in Bradford PCNs on the 7th January 2021.

- This vaccine is more stable than the Pfizer vaccine and is easier to handle and transport
- It does not need to be stored frozen at -70 and can be stored for longer periods in a refrigerator
- The second vaccine must be a minimum of 28 days after the first vaccine has been administered - this has been revised and current national directive is to delay second doses for up to 12 weeks.

2.2.3 The Moderna (MV)

The Moderna vaccine was approved on the 8th January 2021 by the MHRA for use in adults over 18 years old. We are still waiting for confirmation about when this vaccine will begin to be delivered into the Bradford District and for the details about the specifics for the vaccines safe storage and delivery.

- This vaccine can be stored frozen at -20 for 6 months
- The second vaccine must be a minimum of 28 days after the first vaccine has been administered – we are waiting for clarification if this will also be revised and the same current national directive will to delay second doses for up to 12 weeks as with the other two approved vaccines.

2.3 Commonality of all three vaccines

- All vaccines require 2 vaccinations and the latest guidance is that the vaccinations should be 12 weeks apart
- All vaccines need to be from the same make of vaccine (cannot switch between the two manufacturers)
- Both PV and AZV vaccines need to be used within 5 hours of the vial being punctured – we are waiting for more information about the MV
- Neither PV or AZV vaccine can be given until at least 7 days after a flu vaccination
- Neither PV or AZV vaccine should be given to someone who has previously suffered from anaphylaxis
- Neither PV or AZV vaccine contains animal products
- Neither PV or AZV vaccine should be given to someone who has tested positive for covid in the previous 28 days
- Vaccination centres will need to liaise with public health to agree the best approach to vaccinating care homes during or after an outbreak before the residents and staff in the home are vaccinated
- None are licensed for use in children or pregnant women

3.0 Total Numbers to be vaccinated

Total people				Number of vaccine required per week
Cohort	Total	Take up	Vaccinations	
Care Homes	10,416	75%	15,624	
Over 80s	22,539	75%	33,809	
Health/social workers	31,022	75%	46,533	
50-79	181,498	75%	272,247	
18-49	189,598	75%	284,397	
Already vaccinated	-14,380			
TOTAL	435,073		638,230	25,530

3.1 The vaccination roll out timescale, site and cohorts

Vaccination start date	Vaccination site	Cohorts
14 th December 2020	Bradford Teaching Hospital (BTHFT)	Priority 1& 2 (front line health and social care staff) – With over 80's in week 1. Plan to roll out all health and social care staff
15 th December 2020	3 x PCNs	Priority 1& 2 (over 80's first and care home staff and residents)
19 th December	3 x PCNs	Priority 1& 2 (over 80's first and care home staff and residents)
22 nd December	1 x PCN	Priority 1& 2 (over 80's first and care home staff and residents)
6 th January 2021	1 x PCN	Priority 1& 2 (over 80's first and care home staff and residents)
7 th January 2021	1 x PCN	Priority 1& 2 (over 80's first and care home staff and residents)
8 th January 2021	1 x PCN	Priority 1& 2 (over 80's first and care home staff and residents)
8 th January 2021 to April 2021	10 x PCNs	Priority 1- 8 (working through each priority group starting at one through to 8)
11 th January 2021	Airedale Hospital	Priority 1 & 2 including front line health and social care YAS, Hospice, independent sector
12 th January 2021	Lynfield Mount Hospital	Priority 1& 2, inpatients and out patients, front line health and social care staff and LD services
25 th January 2021	Rimmingtons community pharmacy	18 to 49 year olds
1 st February 2021	Jacobs Well	18 to 49 year olds
TBC	2 nd Community Vaccination site	18 to 49 year olds (if additional capacity required)
1 st April 2021 to	All Vaccination centres	All cohorts 2 nd Vaccinations

3.2 Trajectories:

Figure 1 – Total number of vaccines by site by week

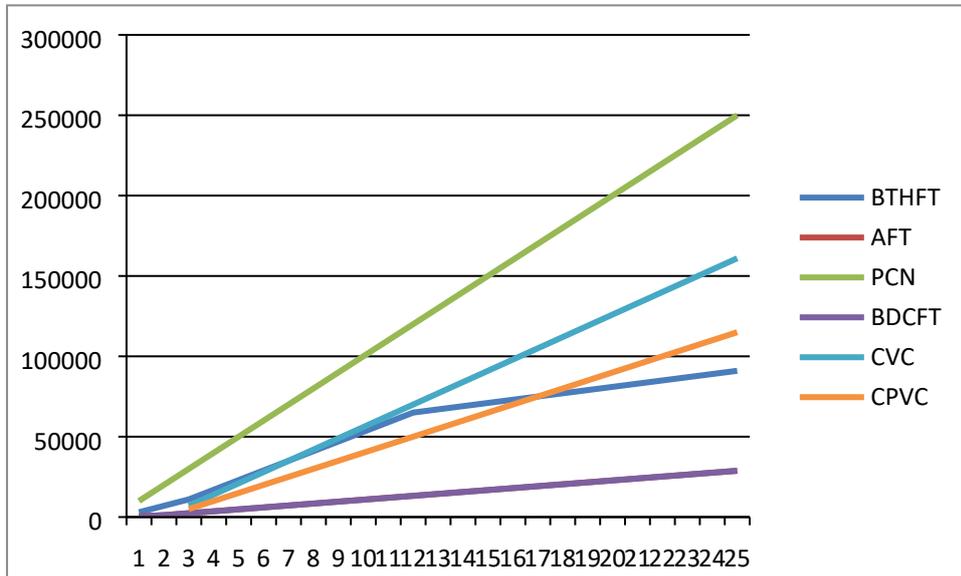


Figure 2 – Total number of vaccines by site by date including grand total

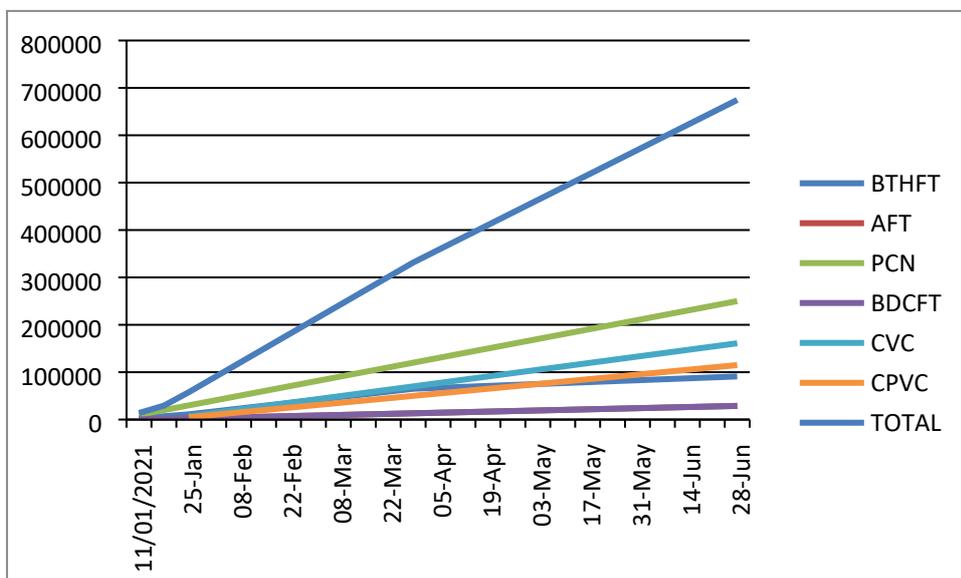


Figure 1 & 2 assumptions –

- Vaccine delivery is stable and readily available
- Each person requires 2 x Vaccines 12 weeks apart, 75% uptake
- Working over 7 days a week
- BTHFT Capacity reduces at end of March (**closure of SLT**)
- PCNs deliver 10,000 per week
- Community Pharmacy (CPVC) deliver 5000 per week
- Community Vaccine Centre (CVC) delivers 7000 per week
- AFT / BDCFT deliver 1200 per week

4.0 Delivery Models

There are a number of delivery models in place including Hospital Vaccination Centres; Community Vaccination Centres; Community Pharmacy hub and PCN's

4.1 Hospital Vaccination Centres

Bradford Teaching Hospital Foundation trust (BTHFT) commenced vaccinating with the Pfizer vaccine on the 14th December 2020. This centre has focussed on delivering vaccinations to front line health and social care staff.

In the first week, 975 doses (1 tray of vaccine) were delivered over 5 days, through 4 vaccination stations. For the subsequent weeks a full tray has been administered, albeit over a reduced number of days during the Christmas period, which has been possible due to more efficient use of the existing resource. The capacity has been increased to 2 trays (2340 doses – now getting 6 doses from each vial rather than 5) from week commencing 4 January 2021, which has required the establishment of 2 additional vaccination stations. There is an expectation that this be increased further, to at least 3 trays by the end of January. The activity will reduce from 31st March 2021 from 6,000 per week to 2,000 per week to allow the use of the lecture theatre.

Bradford District Care Foundation Trust (BDCFT) commenced vaccinating from Lynfield Mount Hospital on the 12th January 2021 using the AstraZeneca vaccine. Like BTHFT they also focus on delivery of vaccines to front line health and social care staff (including independent sector) but will also begin vaccinating inpatients and outpatients at Lynfield Mount Hospital. The centre initially started with 4 vaccination stations but this could be increased if required to a maximum of 9 (staff and vaccine supply permitting). The BDCFT centre will operate 7 days per week and assumes that the AZ vaccine supply is available. BDCFT are using the AstraZeneca and this enables greater flexibility and movement of vaccine and a move away from a fixed vaccination centre model.

Airedale Foundation Trust (AFT) commenced vaccinating from Airedale Hospital on the 11th January 2021 using the AstraZeneca vaccine. They also focus on delivery of vaccines to front line health and social care staff. The centre will initially commence with 4 vaccination stations and are planning to deliver up to 2000 vaccines per week. The centre will be open 5 days per week for 8 hours per day. If vaccine supply is available this can be increased to a 7 day per week service. AFT are using the AstraZeneca and this enables greater flexibility and movement of vaccine and a move away from a fixed vaccination centre model.

4.2 Primary Care Network Vaccination Centres (PCNVC)

Ten PCNs across the district have been designated as Vaccination Centres. They have focussed on the delivery of vaccinations to the over 80 year olds and care home staff in the first instance. The PCNVCs began delivering vaccinations on the 29th December 2020 to all residents in the larger care homes in their geography because the Pfizer vaccine became available in smaller packs of 75 vaccines and revised guidance provided the ability to safely transport these smaller packs. Unfortunately, since the vaccine could only be transported once, to avoid vaccine wastage, it was not possible to go into smaller care homes. From the 6th January the AZV started to be delivered to the PCNVCs and this has enabled the PCNs to start delivering vaccines to residents in the smaller care homes within their locality. The PCNs plan to give the first vaccine to all care home residents that are willing and clinically able to have the vaccine by the end of January 2021.

4.3 Community Vaccination Centres (CVCs)

Even with the 3 HVCs and 10 PCNVCs working at full capacity it is not likely that all individuals in each cohort would be able to receive two vaccinations by September 2021. We have therefore commissioned a CVC located on Jacobs Well car park. The porta cabins were delivered on the site on the 4th January 2021 and are expected to commence functioning as a vaccination centre week commencing 1st February 2021.

We are in the process of negotiating for a second site but this is not yet confirmed and we are waiting for the building owner to send a lease agreement for approval.

Any site that is not on NHS premises provides additional challenges in getting the correct information technology (IT) accessibility and our IT teams are working together to ensure that the CVC sites have access to the necessary IT solutions.

4.4 Community Pharmacy Vaccination Centres (CPVC)

NHS England has commissioned Rimmingtons pharmacy in Bradford city centre to provide 5,000 vaccinations per week from the 25th January 2021. NHSE are considering the possibility of commissioning an additional 3 CPVCs in the district but we do not have a timescale for when a decision is to be made on taking these new community pharmacy sites forward.

5.0 Workforce:

The vaccination programme is additional work for the local NHS that has already managed through two waves of COVID-19 and continues to provide care and treatment to people with conditions other than COVID-19.

Whilst it has been necessary to utilise existing operational and clinical staff to establish the BTHFT hub, this is not sustainable going forward as it is having a significant impact on the substantive roles of a significant number of individuals involved. The ongoing management of the BTHFT vaccination centre requires a significant management presence both to react to changing national expectations and requirements, as well as troubleshooting day to day operational problems. It is therefore proposed to implement a sustainable model that identifies specific roles and responsibilities that will form the basis for implementation across other HVCs and the community vaccination site(s). It is recommended that some of these key roles are filled via secondments/temporary staff or acting arrangements, rather than on an ad hoc basis.

At first, with just BTHFT HVC delivering vaccinations, the 3 NHS trusts in the district were able to provide enough staff to meet the staffing levels required to deliver the available vaccinations but these staff will inevitably be required to go back into their employing organisations to support their own vaccination centre activity. Meanwhile the PCNs have utilised staff from their own practices to deliver vaccinations in their sites and into care homes and this may not be sustainable in the longer term. However, this will not be sustainable going forward, the whole of the NHS is under pressure and the work load is immense, some staff are isolating and others off sick so it will not be possible to staff all of the future vaccination Centres without the availability of additional staff.

- We have identified the required numbers of the following staff groups and how many of each group we have available from the current workforce.
 - Vaccinators
 - Administrations
 - Clinical supervisors
 - Stewards

- National and local recruitment campaigns are underway and will provide additional staff to bridge the workforce gap. We are utilising a variety of recruitment routes including Skills House, contacting recent retirees and those who have recently left the NHS for other reasons, NHS Providers, Bradford College and the CBMDC Covid and community engagement teams.
- National on line training is provided
 - COVID specific training for people already experienced in vaccinating
 - Vaccination training for people new to vaccinating
 - Clinical supervision for people over seeing newly trained
 - Anaphylaxis training for all involved
 - Site manager training for CVCs

6.0 Communications

- The WY ICS are leading on communications
- Vicky Pickles (ANHSFT) is the vaccine communications lead and is liaising with the ICS communications team as well as the local system communications team
- Prof Dinesh Saralya has produced short videos promoting the safety and efficacy of the vaccine
- Council of Mosques are actively involved in communications
- We need a clear communications strategy developing
- We are working closely with the mass covid testing team and community engagement teams in CBMDC to share resources, skills, knowledge, expertise and approaches

7.0 Equality Impact Assessment

We are working closely across West Yorkshire and more locally with our communities to understand the impact on our community and how we can best maximise the impact of the vaccination programme. We are acutely aware of health inequalities across the city and the impact of covid in different communities and are mindful of these when we are modelling provision.

8.0 Conclusions

We believe we have the infrastructure in place to deliver a mass vaccination programme within Bradford District and Craven. This is based on modelling of cohorts and prioritisation as per the JCVI document.

This programme is not without its risks and there remain a number of unknowns and tight schedules to meet to deliver by the end of June 2021. However, we have a small but proven track record of delivering at pace within PCN's and within hospital centres. We believe the lessons learnt from the initial 3 weeks and the roll out of the more stable AZ vaccine will enable continued success.

9.0 Recommendations

Members are asked to note the update provided, the proposed trajectories and the ambitious timescales

Nancy O'Neill and Karen Dawber, Joint SROs Bradford Covid Vaccination Programme