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To:

Chief Executives of all NHS trusts and foundation trusts

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CCG Accountable Officers
Chief Executives of independent sector providers
NHS Regional Directors
Chairs of ICSs and STPs
Chairs of NHS trusts and foundation trusts
Chief Executives of Local Authorities

20 November 2020

Dear Colleague,

COVID-19 vaccination deployment strategy and operational readiness

There are several potential vaccines for COVID-19 in the later stages of phase III trials. If one or more is approved and authorised as safe and effective by the Medicines and Healthcare Regulatory Authority (MHRA), we want to begin vaccination, fully deploying whatever scale of supply may be available.

Latest advice available to us indicates that the very earliest that we will have the first vaccine approved is early December. Conditions for a successful deployment include:

- Vaccinating population cohorts at highest risk guided by the Joint Committee for Vaccinations and Immunisation (JCVI) interim guidance.
- Vaccinating through delivery channels that can ensure patient safety and vaccine integrity, whilst minimising wasted doses.
- Operationally feasible deployment methods that can be used within the set timeframe.

This letter sets out what the NHS and Government will provide nationally, and what we expect the NHS working with local government and other partners locally to deliver. Subject to JCVI and MHRA authorisation, the current expectation is that the first phase of the vaccine deployment will be undertaken by a number of NHS Trusts.

Over the coming days and weeks, we will provide further information and detail as it becomes available. The latest guidance and information will be published on the NHS England and NHS Improvement website [here](#).

Delivery models

We have defined three deployment models:

- a) NHS Trusts.
- b) Large scale vaccination sites.
- c) Community/primary care led.

The supplies, estate and workforce required for each of these models will be published shortly. We are asking local systems working with their regional team to define the most appropriate combination of models required to deliver the vaccine to their local populations based on local need. Local systems should leverage the vital role of local government in community leadership and engaging trusted voices to maximise uptake and reduce health inequalities.

Within your local system, the larger vaccination sites will have already been identified. The lead providers for each of these larger vaccination sites will now be in the process of finalising mobilisation arrangements.

Different vaccines are likely to be better suited to different settings because the vaccines are likely to have different storage, reconstitution and administration requirements. **Given what we currently know about the first expected vaccine, the imperative is that NHS Trusts are ready to start vaccinating from the beginning of December. In the instances where NHS Trusts are the lead providers for large scale vaccination sites - these will also need to be ready.**

All Trusts will need to have a plan to vaccinate their workforce. The preparations that need to be made locally will differ:

- For Trusts who are also a NHS Trust Vaccine Hub (Annex 1) your plans must cover how you will vaccinate your own workforce and how you will support neighbouring trusts to vaccinate their workforce.
- For all other Trusts your plan must cover how you will work with your nearest hub to vaccinate your workforce if required, and how you would deliver the vaccine within your trust should this become possible. We are continuing to explore all available options to safely deliver the first available vaccine to all Trusts.
- It is expected that STPs/ICSs will ensure robust, joined up plans across their system and offer equitable access to the entire NHS healthcare workforce within their local system.

Given the potential time gap required between receiving a flu vaccine and a Covid vaccine, it is vital that NHS trusts have successfully completed their own staff flu vaccination programme by the end of November.

Vaccine allocations

Vaccine allocations will be managed centrally. Allocations will be based on the priority cohorts recommended by the JCVI. The provisional prioritisation for COVID-19 vaccines can be found at <https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-25-september-2020/jcvi-updated-interim-advice-on-priority-groups-for-covid-19-vaccination>.

Workforce and Training

Having appropriately trained and committed staff deployed at the right time and right place is at the heart of our ability to deliver the vaccine safely. This needs to be achieved while managing competing workforce needs across all NHS activities.

A recruitment campaign for the next phase is underway to supplement existing local efforts. It will direct potential candidates to the appropriate host organisation. This will include bank staff; trained vaccinators from NHS Professionals; and a trained volunteer workforce provided by St John Ambulance.

To coordinate local efforts, regions are establishing workforce coordination hubs at STP/ICS level and through designated lead employers/providers. It is expected the workforce hubs will operate 7 days a week and will deliver local training plans and facilitate staff sharing including local deployment processes. They will have a vital role in supporting local health systems to guard against risks of depleting front line staff cohorts in social and home care.

This will ensure supervision and safe staffing protocols are in place. Further information will be shared, including on how to draw down on national supply, staffing models, job descriptions and contact details for your regional workforce coordination hubs.

All Trusts should continue to work with their STP/ ICS partners to ensure sufficient workforce is available at each vaccination site.

Every year the NHS rolls out the annual flu vaccination programme and last year we vaccinated over 15 million people over the winter season. We are now asking the NHS to ramp up its COVID vaccination efforts.

Nationally developed training resources from Public Health England will include training guides, COVID-19 online vaccine specific e-learning content and written guidance to ensure safe administration of the vaccine. Trusts can deliver core immunisation, basic life support, anaphylaxis and statutory/mandatory training to your existing workforce now to prepare them for vaccinating.

The training resources will be based on current information that is known about the vaccines however, it is important to stress that some materials will not be finalised until the product characteristics or equivalent are published by the manufacturers.

Estates

Over the next two weeks, we expect the NHS to work with system partners, especially local government and local resilience forums, to identify and lock in accessible premises that are being designated to deliver community/primary care led vaccinations (these should not displace or disrupt sites currently being used for Test and Trace). Considerations should include accessibility for all citizens, coverage of both rural and urban areas, hosting of roving models, utilisation of existing infrastructure and appropriate deployment models for staff.

Vaccine Supply Chain & Consumables

A national distribution service will purchase and deliver all necessary supplies, including PPE and critical clinical and non-clinical consumables, to vaccination sites across the country.

This integrated logistics and supply chain will ensure each site has PPE, syringes and disposables to offer vaccinations 7 days a week, 12 hours per day, including bank holidays. The list of products included within scope will be provided, local procurement of supplies not specified should continue as normal.

To support the operation of the supply chain a single national data platform will be used by vaccination sites to secure sufficient vaccine, consumables, and PPE. Vaccination sites will need to use the data platform to confirm receipt of their allocations at the end of the supply chains, verify inventory and provide updates on consumption.

Monitoring & Recording

To ensure patient safety and surveillance, comprehensive data collection will be required at all vaccination sites. For Trust Staff, the National Immunisation Vaccination System webapp or National Immunisation Management System webapp are the required tools to collect vaccination information. The NIVS system allows for both real time input on an individual basis or for bulk upload from existing recording mechanisms and will help every part of the system reduce risk of interaction between flu and COVID vaccines, as well as ensure patients receive both doses in the correct timeframe.

A national call/recall system is being established. This National Booking System will be used in large scale vaccination centres for call and recall, while existing tools in trusts and primary care will be utilised.

Financial arrangements

We have allocated mobilisation funding via regional teams to support deployment for the period up to December. This provides the resources required to deliver the immediate priorities, such as specific estate requirements and workforce recruitment.

Funding for vaccine deployment is for additional costs over and above those already funded through other routes.

We recognise that this is an unprecedented year for the NHS. We realise just how hard you continue to work coping with winter, COVID-19 and recovering from delayed activity. We are asking the NHS to step-up once again to deliver what will be the largest vaccination programme this country has ever seen.

Thank you for your continued efforts and please accept our thanks for all you are doing.

Emily Lawson

Chief Commercial Officer and SRO for Covid-19 Vaccine Deployment NHS England and NHS Improvement

Sue Harriman

Chief Operating Officer

Covid-19 Vaccination Deployment Programme

Annex 1 – NHS Trust Vaccine Hubs

Blackpool Teaching Hospitals NHS Foundation Trust
Brighton and Sussex University Hospitals NHS Trust
Cambridge University Hospitals NHS Foundation Trust
Chesterfield Royal Hospital NHS Foundation Trust
Countess of Chester Hospital NHS Foundation Trust
Croydon University Hospital NHS Trust
Dartford & Gravesham NHS Trust
Dorset County Hospitals NHS Foundation Trust
East and North Hertfordshire NHS Trust
East Kent Hospitals NHS Foundation Trust
East Suffolk and North Essex NHS Foundation Trust (Colchester Hospital)
Frimley Health NHS Foundation Trust
Gloucestershire Hospitals NHS Foundation Trust
Great Western Hospitals NHS Foundation Trust
Guys & St Thomas NHS Trust
James Paget University Hospitals NHS Foundation Trust
Kings College Hospital NHS Foundation Trust
Kings College Hospital - Princess Royal University Hospital
Lancashire Teaching Hospital Trust
Leeds Teaching Hospitals NHS Foundation Trust
Leicester Partnership NHS Trust
Liverpool University Hospitals NHS Foundation Trust
Medway NHS Foundation Trust
Mid and South Essex Hospitals Trust
Milton Keynes University Hospital
Norfolk and Norwich University Hospital
Northampton General Hospital NHS Trust
North Bristol NHS Foundation Trust
North West Anglia Foundation Trust
Nottingham University Hospitals NHS Trust
Oxford Health NHS Foundation Trust
Portsmouth Hospital University Trust
Royal Cornwall Hospitals NHS Trust
Royal Free London NHS Foundation Trust
Salford Royal NHS Foundation Trust
Sheffield Teaching Hospitals NHS Foundation Trust
Sherwood Forest Hospitals NHS Foundation Trust
Shrewsbury and Telford NHS Trust
Stockport NHS Foundation Trust
St George's University Hospitals NHS FT
The Newcastle upon Tyne Hospitals NHS Foundation Trust
University College Hospitals Trust
University Hospitals Birmingham NHS Foundation Trust
University Hospital Coventry & Warwickshire
University Hospitals Derby Burton NHS FT
University Hospitals of North Midlands NHS Trust
University Hospitals Plymouth NHS Trust
United Lincolnshire Hospitals NHS Trust
Walsall Healthcare NHS Trust
West Hertfordshire Hospitals NHS Trust
Wirral University Teaching Hospital
Worcestershire Acute Hospitals NHS Trust
Yeovil District Hospital NHS Foundation Trust