

COVID and Flu Vaccination Support Bulletin

Issued to:

Providers of COVID and Flu Vaccination Programmes

Issue 22: 24 November 2021

Introduction

Welcome to the latest edition of the vaccine bulletin. As we approach the one-year birthday of the vaccination programme, I want to personally thank each and every person who has been involved in the process in any way so far. We know vaccination is having a key impact on reducing hospitalisations and this is thanks to each and every one of your dedication.

As the guidance regarding the COVID vaccination programme continues to evolve on an almost daily basis, we have used this edition to highlight some of the excellent work you are all doing. This includes a summary of vaccination statistics, and some information about vaccine hesitancy and the key role front line staff play in addressing this. We also provide some updates regarding the cold chain.

As always if you have any thoughts on items to include in the bulletin going forwards then please do get in touch.

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COVID VACCINATION

Programme News

The Green Book has again been updated: [COVID-19 Greenbook chapter 14a \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/92822/greenbook-chapter-14a.pdf)

There are several outstanding issues that require additional clarity and we recognise how difficult and frustrating this is for everyone working flat out to keep delivering this programme. Changes are frequent and rapid and, as a result, publication of updated versions of supporting documents (e.g. policy notifications from NHSEI, PGDs/ protocols, 'Information for Health Care Professionals') is therefore not always well-aligned. CARS and the regional team will continue to answer your individual queries – and raise your concerns - but we are waiting for clear and consistent information before attempting to summarise the key points in this bulletin.

Impact

Despite all (many) obstacles, your achievements have been outstanding:

As of 14th November 1st doses:

42,026,301 (86.9%) of all aged 12+ - with the Midlands contribution the largest at 7,785,394

2nd doses:

40,202,543 (90.4%) of all aged 12+ – the Midlands contribution is again the largest at 7,111,274 doses

38,180,280 (85.9%) of over 18s have had 2 doses

% uptake by age band, Midlands:

38.2% of 12-15-year olds, and 63.4% of 16-17-year olds have received a first dose.

First and 2nd dose uptake in 18+ is as follows:

Age (years)	18-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
First dose	70.9	69.7	81.2	86.4	92.1	88.5	95.0	96.8	99.8	96.6	96.7	100	96.2
2nd dose	61.2	61.8	73.8	80.4	87.3	85.2	92.5	94.3	97.8	95.5	96.0	100	95.4

See: [Statistics » COVID-19 Vaccinations \(england.nhs.uk\)](https://www.nhs.uk/statistics/covid-19-vaccinations)

An estimated 261,500 hospitalisations in those aged 45 and above, and 24,144,000 infections and 127,500 deaths have been prevented: [COVID-19 vaccine weekly surveillance reports \(weeks 39 to 46\) - GOV.UK \(www.gov.uk\)](#)

Hospital admission rates are significantly lower in individuals who are vaccinated – even those who have waning protection - than in the unvaccinated. However, even a small decline in protection is important because it is contributing to the increasing number of hospitalisations. The booster programme is therefore very important.

Vaccine Hesitancy

As we all know there are still many individuals who have yet to take up the 'Evergreen' offer of vaccination. The good news is that primary course completion rates are high – once started on a course of vaccine most individuals return for their 2nd dose. There are, of course, people who have resolute opposition to vaccination, but we know from wider immunisation programmes that they are relatively few, whereas having varying degrees of doubt and concern - vaccine hesitancy – is common. We also know that confident, competent health care staff are key to these individuals moving from hesitance to acceptance and, whilst it may at times seem quite disheartening, eligible individuals ARE continuing to come forward to receive their first dose of vaccine, thanks to you. Here are links to some resources that you may find useful to your continued and much appreciated efforts:

PHE (now UKHSA) videos for members of the public:

[COVID-19: Vaccination programme FAQ explainer videos - YouTube](#)

National leaflets, posters, resources: [COVID-19 vaccination programme - GOV.UK \(www.gov.uk\)](#); to order or download: [Search Publications - Health Publications](#); digital: [Publication Assets - Health Publications](#)

This blog explains how data is used to understand the impact of vaccination: [Transparency and data – UKHSA's vaccines report - UK Health Security Agency \(blog.gov.uk\)](#)

The Vaccine Knowledge Project has information about Covid infection, FAQs about the vaccines, and explanations about vaccine preparation and safety: [Vaccine Knowledge | \(ox.ac.uk\)](#)

This blog explains how data is used to understand the impact of vaccination: [Transparency and data – UKHSA's vaccines report - UK Health Security Agency \(blog.gov.uk\)](#)

Oxford University has published a recent study specifically about Covid vaccine hesitancy which is summarised in this blog: [COVID-19 vaccine hesitancy in the UK | University of Oxford](#)

We would be glad to hear from anyone about other resources that we could share with colleagues within the region.

Management of Cold Chain Breaches

The management and reporting of temperature deviations is an important safety aspect of the vaccine programme. It is advisable to involve the site lead pharmacist when assessing whether a vaccine(s) is suitable for use. If an incident occurs where it is believed that more than 100 doses may need to be discarded, or where the temperature excursion may be ambiguous, this must be urgently escalated to national level via CARS for a decision to be made where national authorisation through NVOC is required. This is to minimise any potential vaccine wastage, as further information may be available at a national level or special dispensation may be granted in particular circumstances in conjunction with manufacturers and technical experts.

- While awaiting a national decision the vaccine must be quarantined in accordance with the storage requirements.
- The national SOP requires completion (by the provider) of the standard SPS form.
- CARS will then liaise with SPS and, if the advice is to discard the vaccine, with regional pharmacists, and the national clinical cell, before providing a final answer.
- Please also follow your employer's/system's reporting processes. CARS will notify the SVOC regarding any reported incidents that are directly to them so that the STP/ICS can fulfil its support and assurance role.
- It is important that any vaccine that is discarded is also reported within the site stock manager on Foundry so that site and systems stock levels are accurate.

[Coronavirus » Standard operating procedure: Management of COVID-19 vaccination clinical incidents and enquiries \(england.nhs.uk\)](#).

Graeme Hood, Regional Pharmacy Lead for Vaccination Programmes and Winter Preparedness.

Q. What if affected vaccine has already been administered?

A. In all cases of storage or handling issues, CARS will ask whether vaccine has been administered and, if so, will seek advice about possible revaccination (from UKHSA). Additional details – number of patients, their ages and reason for vaccination/ clinical vulnerabilities, and whether a 1st/2nd/3rd primary or booster dose was given – may be required so that UKHSA can provide tailored advice.

- **IF AFFECTED VACCINE HAS BEEN GIVEN, WE STRONGLY ADVISE NOT CONTACTING PATIENTS UNTIL WE KNOW WHAT THE UKHSA ADVICE IS – CARS and regional colleagues will work with the local system to provide support.**

To minimise delays please provide any information requested as soon as possible. If you wish, you can complete and submit the SPS form at the time of notification rather than waiting for CARs to send you a copy:

<https://www.sps.nhs.uk/wp-content/uploads/2021/05/Temperature-excursion-reporting-checklist-v1.1.docx>

FLU VACCINATION

The Vaccine Update flu special has been published, bringing together key information and links (for professionals and to share with the public) in one document: [Vaccine update: issue 324, November 2021, flu special edition - GOV.UK \(www.gov.uk\)](#).

Flu uptake summary

Good progress is being made in the delivery of this year's flu programme, with overall uptake generally equal to or above what had been achieved by the same time last year for all groups except 2- and 3- year olds. As always, increasing uptake in those in clinical risk groups or who are pregnant is challenging, and in some cases is currently less than this time in 2020/2021. The larger number of available providers is having an impact, with an increase in the proportion of eligible individuals choosing to receive their vaccine in a community pharmacy, particularly those in the '50-64 year old but not in a risk group' cohort, although general practice remains the main provider. [Summary of Week 45 England data]

Huge thanks to everyone for their continued hard work in support of this programme.

Contributions Welcome

We are keen to include more contributions from staff working within the region: good practice and good news as well as case studies, top tips, and learning from those times when things didn't go according to plan. We will anonymise the content and, unless you would like to be contacted, will not publish contributors' details. We're publishing fortnightly and our contact details are at the end.

Contact us

If you would like to contribute to future bulletins and have any insights to share, please contact us at:

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Disclaimer: While the information in this document is considered correct at the date of publication, changes in circumstances after the time of publication may impact on the accuracy of this information

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