

<b>Meeting: Primary Care Commissioning Committee</b>			
<b>Meeting Date</b>	25 November 2020	<b>Action</b>	Receive
<b>Item No.</b>	5	<b>Confidential</b>	No
<b>Title</b>	Covid Vaccination Programme		
<b>Presented By</b>	Amy Lepiorz, Deputy Director of Primary Care and Lesley Jones, Director of Public Health		
<b>Author</b>	Amy Lepiorz, Deputy Director of Primary Care, based on a report produced by Steven Senior, Specialty Registrar in Public Health		
<b>Clinical Lead</b>	Jeffrey Schryer, Clinical Chair		

<b>Executive Summary</b>
This paper is to provide the Primary Care Commissioning Committee with an overview of the recently announced Covid-19 vaccination programme. This a rapidly developing programme and the committee will be given a verbal update at the meeting to give the latest situation.
<b>Recommendations</b>
The Primary Care Commissioning Committee is required to: <ul style="list-style-type: none"> <li>Note the content of the report</li> </ul>

<b>Links to CCG Strategic Objectives</b>	
<b>SO1 People and Place</b> To enable the people of Bury to live in a place where they can co-create their own good health and well-being and to provide good quality care when it is needed to help people return to the best possible quality of life	<input checked="" type="checkbox"/>
<b>SO2 Inclusive Growth</b> To increase the productivity of Bury's economy by enabling all Bury people to contribute to and benefit from growth by accessing good jobs with good career prospects and through commissioning for social value	<input type="checkbox"/>
<b>SO3 Budget</b> To deliver a balanced budget for 2019/20	<input type="checkbox"/>
<b>SO4 Staff Wellbeing</b> To increase the involvement and wellbeing of all staff in scope of the OCO.	<input type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF	

<b>Implications</b>
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Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial Implications?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Programme to be funded via new national funding stream						
Has a Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is a Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Governance and Reporting		
Meeting	Date	Outcome

## **Covid Vaccination Programme**

### **1. Introduction**

- 1.1. This paper is to provide the Primary Care Commissioning Committee with an overview of the recently announced Covid-19 vaccination programme.

### **2. Background**

- 2.1. According to WHO there are currently 47 vaccine candidates in human clinical evaluation. Of these 10 are in stage 3 trials that are the final stage before approval. There are a further 155 vaccine candidates in clinical evaluation. Of these, the two leading candidates for UK roll out are the PfizerBioNTech and Oxford/AstraZeneca vaccines.
- 2.2. On 9 November, Pfizer and BioNTech announced preliminary results of phase 3 clinical trials suggesting that their vaccine is 90% effective at preventing disease. This was based on 94 confirmed cases of COVID-19 from over 43,000 trial participants. The trial will continue until there have been 164 confirmed cases to provide a more accurate estimate of the effectiveness of the vaccine and to provide more safety data.
- 2.3. Less information is available on the Oxford/AstraZeneca vaccine, which is undergoing phase 3 clinical trials in the UK and USA. Press reports suggest that this vaccine may be available in December 2020, but this has been described as a “slim chance” by the chair of the UK’s vaccine task force.
- 2.4. The Joint Committee on Vaccination and Immunisation has released preliminary priority groups for the COVID-19 vaccine. The current priority groups are:
  - older adults’ resident in a care home and care home workers
  - all those 80 years of age and over and health and social care workers<sup>1</sup>
  - all those 75 years of age and over
  - all those 70 years of age and over
  - all those 65 years of age and over
  - high-risk adults under 65 years of age
  - moderate-risk adults under 65 years of age
  - all those 60 years of age and over
  - all those 55 years of age and over
  - all those 50 years of age and over
  - rest of the population (priority to be determined)
- 2.5. Initially, national plans did not include a role for primary care. Initial guidance was to expect initial delivery to priority group 1 in 2020 and local planning began on that assumption. However, national guidance changed at the start of November with a shift to planning for delivery through primary care, (at this stage general practice with a potential role for community pharmacy being discussed) organised by Primary Care Network (PCN) groupings. The government has set an aspiration to deliver to priority groups 1-10 from 1st December 2020 and the end of February 2021. However, the order of delivery within this schedule is likely to follow the priority list above.

### **3. General Practice Enhanced Service**

- 3.1 NHS England has provided guidance on the proposed content of a national Enhanced Service<sup>1</sup> though at the point of writing the final service specification is yet to be published. The current guidance explains that practices are expected to work together to deliver COVID-19 vaccinations in PCN groupings along with commissioners and other providers. A PCN grouping may or may not be the same as an established PCN. Within Bury practices have agreed to work together as if they are one PCN grouping.
- 3.2 PCN groupings were given until the 17 November 2020 to nominate a single site for vaccine delivery, ideally a healthcare setting though alternative sites could be used if no other option. PCN groupings are able to nominate more than one site if of a significant size, ~100k. The CCG was expected to check that these sites meet the requirements of the service specification by Thursday 19 November, with NHS England giving final approval on the 23 November. Sites need to operate 8am to 8pm seven days a week including bank holidays. Each site must be able to deliver at least 975 vaccinations over a seven-day period to be viable. Sites must be prioritised and approval may not be given to all sites as there are likely to be limitations to the national distribution chain.
- 3.3 Practices will need to provide the majority of the required staff from their own workforce, though additional workforce, including volunteers may be available through agreed national frameworks or through any existing local channels.
- 3.4 It is assumed that the vaccine will require a two-dose schedule. There will be a national call and recall system to notify patients that they are eligible for vaccination but practices are also expected to operate their own. Current proposals suggest that patients will be able to book vaccinations either through a PCN grouping site or through a national booking system. The second dose will need to be delivered wherever the first dose was.
- 3.5 At the time of writing this report there are still significant gaps in the information needed to plan on. We do not know which vaccine will be successful. The characteristics of the vaccine, such as requirements for storage at -80°C, its shelf-life once defrosted, and requirements for dilution will influence the feasibility of large-scale delivery through primary care and training requirements. Although we are confident that two doses will be required, the dosing interval will depend on the actual vaccine that is used. We do not know whether to expect delivery within priority groups 1-10 to be prioritised in any way.
- 3.6 Along with the GP service a single mass vaccination site for Greater Manchester has been identified at the Tennis Centre at the Etihad.

### **4.0 Local response**

- 4.1 The OCO has set up a COVID-19 task group. This group meets weekly to coordinate plans for delivering COVID-19 vaccinations across the system. This group includes

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<sup>1</sup> Details including the initial specification can be found at:  
<https://www.england.nhs.uk/coronavirus/publication/preparedness-letters-for-general-practice/>

representatives from Bury Council, CCG, Primary Care (GP and Pharmacy). This meeting established a broad appetite across primary care and other partners in the system to make this work, despite the very substantial challenges involved. There was a consensus among PCN representative that the best model for the patients of Bury would be for practices to work as one PCN grouping and for sites to be selected in each of the 5 neighbourhoods.

- 4.3 Working with partners initial options for vaccination sites in Bury were developed for the PCN grouping to select their preferred choices. Noting the requirements of the sites made this challenging. The Committee will be informed of the selected sites at the meeting along with the prioritisation order.
- 4.4 Bury GP Federation is providing project management support to the PCN grouping to meet the requirements of the enhanced service. Along with support from subgroups that have been set up to identify delivery models for care homes and for housebound people (potentially including people identified as clinically extremely vulnerable to COVID-19).

## **5. Recommendations**

- 5.1 The Primary Care Commissioning Committee is required to:
- Note the content of the report

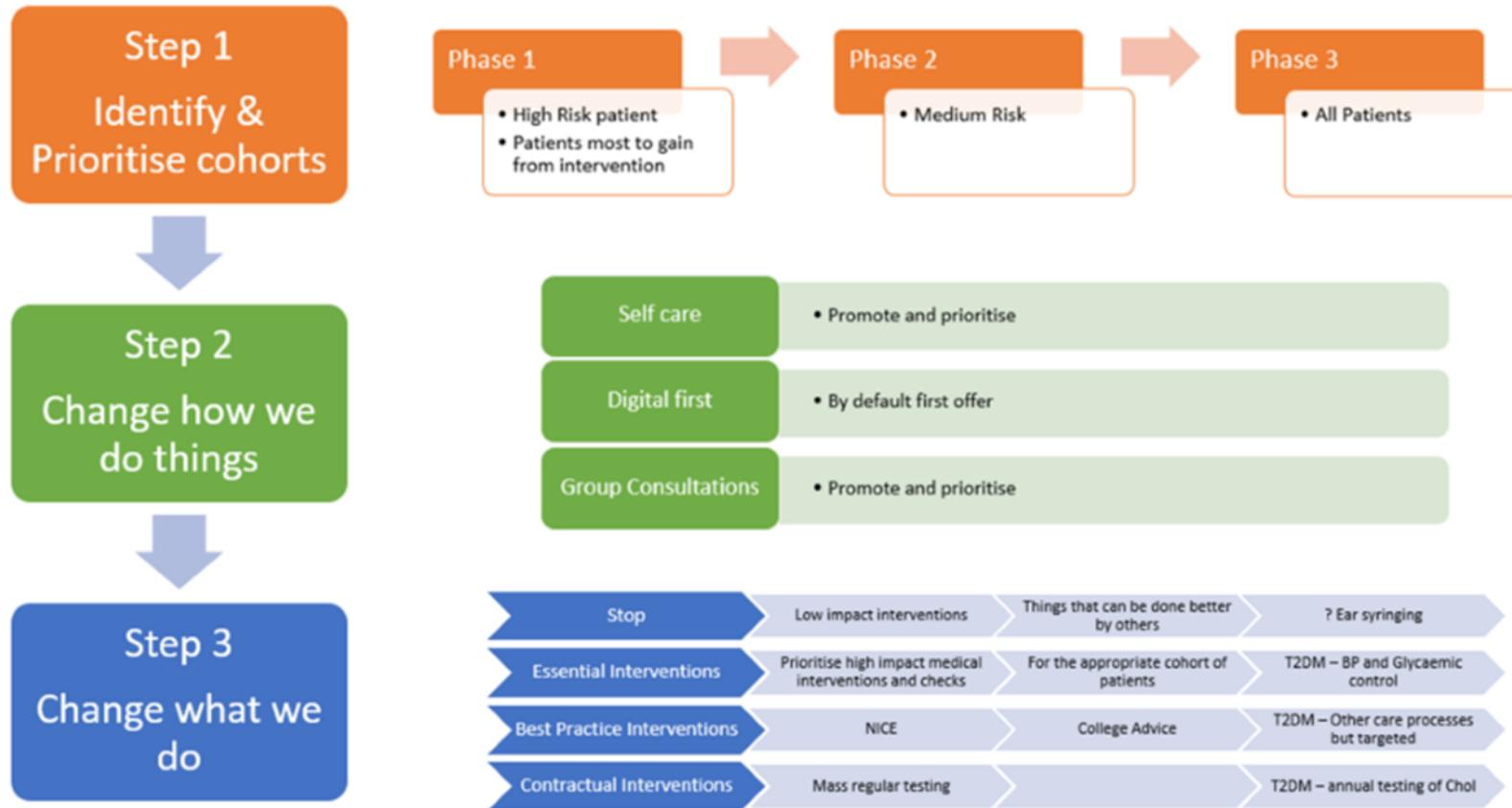
**Amy Lepiorz**

Deputy Director of Primary Care

November 2020

Appendix One-

Model for consideration of prioritisation of interventions



Appendix Two-

Step-wise approach to recovery

