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Swansea Bay University  
Health Board



<b>Meeting Date</b>	<b>25 March 2021</b>	<b>Agenda Item</b>	<b>2.2</b>
<b>Report Title</b>	<b>Update on the Vaccination Programme</b>		
<b>Report Author</b>	Dorothy Edwards, Interim Vaccine Programme Director		
<b>Report Sponsor</b>	Dr Keith Reid, Director of Public Health		
<b>Presented by</b>	Dr Keith Reid, Director of Public Health		
<b>Freedom of Information</b>	Open		
<b>Purpose of the Report</b>	The purpose of this report is to provide assurance to Board members on the delivery of our COVID Vaccination Programme, vaccinating priority groups 1-9 in line with the Welsh Vaccination Strategy.		
<b>Key Issues</b>	<p>The vaccination programme continues to operate successfully within SBUHB and the first milestone of the national vaccination strategy has been achieved. As of 15<sup>th</sup> March 2021, around 170,000 people have been vaccinated since the start of December and the Board is on track to deliver against the second milestone of vaccinating all those in groups 1-9 by mid April including offering second doses when due.</p> <p>The national supply schedule was fluid in February, however, has stabilised for March and April 2021. While a 9-week plan is in place, considerable detailed operational planning is required week on week to ensure that vaccine supply is balanced against physical and workforce capacity to optimise delivery.</p> <p>The programme continues to be actively supported by General Practice. Plans are also in place to engage community pharmacies in line with WG direction.</p> <p>A recruitment pipeline has delivered a core workforce model which is supplemented by temporary labour sourced via bank and agency when needed.</p> <p>A mobile vaccination service (“immbulance”) launched in February 2021 to support the overall programme in addressing hard to reach groups or communities.</p> <p>A key focus in this phase of the programme is vaccinating those with underlying health conditions and also unpaid</p>		

	carers. Wales has adopted an inclusive approach and this has been welcomed within the wider community. We will continue to operate a 'leave no-one behind' campaign as we progress through each cohort to ensure that vaccination remains accessible to all eligible individuals living in Swansea Bay.			
<b>Specific Action Required</b> <i>(please choose one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• <b>NOTE</b> progress in vaccinating individuals identified within priority groups 1-4 and <b>approve</b> the forward plan to vaccinate individuals within priority groups 5-9 in line with the national Vaccination Strategy.</li> <li>• <b>RATIFY</b> Chair's action in commissioning the PCCIS scheme for cohort 6 from General Practice</li> <li>• <b>NOTE</b> the forward plan for milestone three</li> <li>• <b>NOTE</b> the development of community pharmacy as a delivery point for vaccination of individuals within priority group 6.</li> <li>• <b>APPROVE</b> the high level risks that are currently being managed through the programme, and the mitigating actions.</li> </ul>			

## UPDATE ON COVID-19 VACCINATION PROGRAMME

### 1. INTRODUCTION

This paper provides Board members an update on the delivery of our COVID-19 Vaccination Programme, vaccinating individuals within priority groups 1-9 in line with the National Vaccination Strategy.

### 2. BACKGROUND

The Board received an update on the programme in January 2021.

SBUHB began vaccinating on 8th December 2020, and to date has administered 134,000 first doses and nearly 35,000 2<sup>nd</sup> doses (figures as at 15th March 2021). Swansea Bay is currently making use of two vaccine types, the Pfizer Biontech vaccine (Pfizer), and Oxford-AstraZeneca vaccine (Oxford). Each vaccine comprises two doses given at different intervals in line with Joint Committee on Vaccination and Immunisation (JCVI) advice and national policy direction.

The programme is being rolled out in line with the priorities identified by the United Kingdom's JCVI updated in December 2020 which identifies age as being the single biggest risk of mortality from COVID.

The following table sets out the priority groups and cohort sizes for SBUHB. It should be noted that cohort sizes change regularly and that the size of priority group 6 will increase with the inclusion of unpaid carers.

**Table 1: Priority Groups and Population Sizes (source: WIS 15<sup>th</sup> March 2021)**

Group		Cohort Size	Vaccinated
1	Residents in a care home for older adults and their carers (note 1)	6,516	5,869
2	All those 80 years of age and over and frontline health and social care workers (note 2)	44,710	40,920
3	All those 75 years of age and over	15,527	14,792
4	All those 70 years of age and over, clinically extremely vulnerable individuals (excluding pregnant women and those under 16 years of age)	30,130	27,845
5	All those 65 years of age and over	18,656	17,286
<b>Cohorts below are still being vaccinated at time of writing</b>			
6	All individuals aged 16 years to 64 years with underlying health conditions which put them at higher risk of serious disease and mortality and relevant unpaid carers	42,964	19,924
7	All those 60 years of age and over	12,810	5,676
8	All those 55 years of age and over	15,358	802
9	All those 50 years of age and over	16,344	716
10	Rest of Population	3,378	1,881
		206,393	135,716

Note 1 further data quality work and reconciliation with national figures is underway

Note 2 care should be taken in interpreting staff figures as these reflect people captured in WIS who are not necessarily front line staff

Welsh Government published its revised National Vaccination Strategy (WGVS) in mid-February 2021, which set out a number of milestones for organisations in Wales to deliver:

- **Milestone one** – by mid-February – groups 1-4 (90,000 people in Swansea Bay)
- **Milestone two** – by mid April – groups 5-9 (circa 115,000 people in Swansea Bay)
- **Milestone three** – by end July – all eligible adults (80-100,000 people depending on extent of overlap with other groups in Swansea Bay).

The plan also set out a number of markers:

- All Welsh Ambulance Service staff to be vaccinated by 18th January 2021,
- All Care Homes residents to be vaccinated by the end of January 2021,
- GP surgeries to increase from 100 to 250 by the end of January 2021, providing vaccine to the vulnerable closer to their homes as availability of the Oxford vaccine increases.

SBUHB achieved milestone one by 13<sup>th</sup> February 2021, offering a vaccination to all those in priority groups 1-4. Coverage has been very high and in some cohorts has exceeded national levels, particularly for the most vulnerable people resident in care homes.

## Forward Plan

A forward plan for delivering vaccine to groups 5-9 was submitted to Welsh Government in March 2021 and the plan remains 'live' as updated vaccine supply information is received.

The forward plan outlines the following:

- Administration of first doses to priority group 5 by 8<sup>th</sup> March 2021 (achieved),
- Administration of second doses Pfizer to priority groups 1-4 by 29<sup>th</sup> March 2021 (on track)
- Administration of first doses to priority groups 7-9 by 19<sup>th</sup> April 2021 (ahead of schedule).

Diagram 1: Forward plan for Health Board activity to 19<sup>th</sup> April

Date	15-Feb	22-Feb	01-Mar	08-Mar	15-Mar	22-Mar	29-Mar	05-Apr	12-Apr	19-Apr
<b>Health Board</b>										
MVC (1st dose)		Group 5			Group 6	Group 7		Group 8	Group 9	Mop-up
MVC (2nd dose)			Groups 1-4							
Immunisation			Groups 5, 7, 8, and 9							

As at 11<sup>th</sup> March 2021, the Health Board has completed cohort 5 and is now vaccinating those in cohort 6, 7 and 8. In addition, 70% of second doses Pfizer vaccines due in this period have been given. The overall proportion of vaccination via General Practice and directly by the Board is around 1/3<sup>rd</sup> to 2/3<sup>rd</sup> which means that we are utilising capacity effectively across the system.

## Vaccine Supply

The vaccine supply situation has remained fluid throughout February with a dip in supplies across the UK in late February 2021. Additional supplies of Oxford vaccine have been made available in mid-March 2021 with an influx of short dated stock. The latest supply information confirms that the Board should receive sufficient vaccine over the period up to mid-April 2021 to achieve milestone 2 of the WGVS and complete the first dose vaccination programme for groups 5-9 as well as vaccinating those who are due to receive their 2<sup>nd</sup> dose from the initial cohort.

The table below sets out the numbers of people vaccinated in each cohort with a first and second dose

**Table 2: Vaccination of priority groups in Swansea Bay (as of 11<sup>th</sup> March 2021)**

Group	First dose	Second dose
1	5,869	4,076
2	40,920	17,622
3	14,792	10,721
4	27,845	1,001
5	17,286	85
6	19,924	596
7	5,676	77
8	802	110
9	716	100
10 (rest of population)	1,881	416
Total		34,800

## Vaccination of those aged 16 to 64 years of age with underlying health conditions (cohort 6)

In February 2021, the Health Board has formally commissioned General Practices to vaccinate individuals identified as being clinically vulnerably due to an underlying health condition.

The Primary Care COVID Immunisation Scheme (PCCIS) provides a Welsh framework and pricing structure to enable primary care to contribute to the programme. Under this scheme, an upper estimated cost of £1,557,600 has been estimated. The Health Board approved, via Chair's Action, a total spend in General Practice via the PCCIS, of between £1,038m and £1,557m. Some of the cost of vaccinating during this period will fall into 2021/22.

Of the 49 practices within Swansea and Neath Port Talbot, 38 have agreed to complete vaccination of priority group 6. Four practices have agreed to partly vaccinate the group, and seven have declined. The anticipated spend based on the number of practices who are participating in the scheme and the size of the cohort is likely to be between the estimates set out above.

The Health Board will take responsibility for vaccinating individuals who are registered with a GP Practice which is not participating in the scheme. The majority of patients will be invited to receive vaccination at a Mass Vaccination Centre (MVC), or by attending the Mobile Vaccination Unit (MVU). If necessary, housebound individuals within this group will be vaccinated by an in-reach team; work is underway with General Practice to identify those which are housebound.

Group 6 also includes unpaid carers. While General Practice maintain a register of unpaid carers, it is considered that the true number of individuals that qualify for this group will exceed the numbers formally registered.

In response to Welsh guidance, the Health Board has invited unpaid carers to self identify and be vaccinated. This has been widely publicised through our communication channels and to date, over 2,500 unpaid carers have registered on the system.

The forward plan accounts for 10,000 additional individuals within group 6, qualifying as unpaid carers. Based on the number of people who have self-identified, this is likely to be an over-estimate.

Diagram 2: Forward plan for Primary Care activity to 19<sup>th</sup> April 2021

Date	15-Feb	22-Feb	01-Mar	08-Mar	15-Mar	22-Mar	29-Mar	05-Apr	12-Apr	19-Apr
<b>Primary Care</b>										
GP (1st dose)	Group 6 (80%)						Group 6 (20%)			Mop-up
GP (2nd dose)			Group 1				Groups 2 and 4			
Community Pharmacy				Group 6, 7, 8, and 9						

### Vaccination via Community Pharmacy

Under the terms of the Primary Care COVID Immunisation Scheme (PCCIS), community pharmacists can be commissioned to deliver vaccinations.

However, this is not a universal right, but needs to be considered in light of the Board's mass vaccination plan to ensure that the overall plan remains cohesive and focussed on delivering within the JCVI guidance and within the timeframes set out under the Welsh Government's COVID Vaccination Strategy. The timing and availability of vaccines is a key driver of the overall programme, as well as the logistical considerations in line with the specific product characteristics.

Expressions of interest were sought from community pharmacies in January. In total, over 35 numbers of EOI's were received.

A working group including representatives from Community Pharmacy Wales (CPW) has met to consider the requirements of the programme and has discussed the broad approach and criteria for selecting providers was agreed.

SBUHB has now identified its particular needs for phase 2 of the programme (groups 5-9) and will seeking to commission 4 pathfinder sites to support vaccination of those in cohort 6.

Table 3: Community Pharmacy Pathfinder Areas

Cluster area	Potential Solution	Volume to be commissioned
Penderi	Medium size pathfinder	200 per week
City Health	Small size pathfinder	100 per week
City Health	Large size pathfinder	Up to 1,000 per week
Bay Health	Medium size pathfinder	200 per week

After this stage has been completed, the Health Board will assess its requirements for phase 3 and the supporting role that community pharmacy will play, and will undergo a further assessment of providers who are able to support. Governance and oversight of delivery via Primary Care contractors, including community pharmacies, is maintained via the programme office, with contractors returning a checklist of assurance covering documentation, training, and workforce. Contracting is via the PCCIS which provides a standard costing framework. Claims are made on a monthly basis and automated via WIS. Costs are paid via the primary care mechanism and recharged back to the overall cost of the programme which is funded by WG. To date, all costs submitted by SBUHB have been paid by Government and are contained within the overall cost envelope agreed at the start of the programme.

### Forward planning for Milestone Three (WGVs)

Milestone three within the national Vaccination Strategy outlines the intention to vaccinate all eligible adults by 31<sup>st</sup> July 2021.

The programme team is planning for vaccinating by age groups, from those 49 years old and younger. This is based on JCVI interim guidance that age remains the key risk factor. It is expected that all those aged 18 years old and over will be offered a vaccination but further JCVI guidance is expected on how those aged below 50 will be grouped is expected.

The forward plan outlines the following but is subject to vaccine supply and confirmation of any further milestone dates:

- Administration of first doses to ages 40-49 years old, by mid-May 2021,
- Administration of first doses to ages 39-30 years old, by mid-June 2021,
- Administration of first doses to ages 18-29 years old, by end July 2021,
- Administration of second doses due from cohorts 1-9 by end July 2021.

It is then expected that second doses will be administered by end October (subject to confirmation of 2<sup>nd</sup> dose interval).

Diagram 3: Initial Forward plan for first doses to ages 16-49 years old

Date	26-Apr	03-May	10-May	17-May	24-May	31-May	07-Jun	14-Jun	21-Jun	28-Jun	05-Jul	12-Jul	19-Jul	26-Jul	
Health Board															
MVC (1st dose)	Ages 40-49			Ages 30-39				Ages 16-29						Mop-up	
MVC (2nd dose)		Group 5				Group 6	Group 7	Group 8		Group 9	Ages 40-49				
Immunisation		Groups 5, 7, 8, and 9													

If vaccination of those aged 18-49 years old was to be delivered at the MVCs, at the current rate of vaccination, the Health Board would complete all first doses by 31<sup>st</sup> July. Utilising the extended footprint of the Bay Field Hospital vaccination centre, and potential for greater through-put for the Oxford vaccine,



there is capacity for accelerating these plans; however, the rate limiter remains the supply of vaccine.

### **Operational Delivery**

Due to emerging variants of COVID-19 entering into the population, such as the Kent, South African, and Brazilian variants, it is understood there may be a need for a booster programme in the Autumn and potentially a longer term annual programme.

The programme team is working with military planners, to develop an operational plan for the vaccine programme post-July 2021. An informal debrief of phase one of the vaccination programme, held on 4<sup>th</sup> March, highlighted learning that public health vaccination must remain a priority for the Health Board, and may need to be formally supported by substantive operational team. This will need further consideration and will be considered in April as emerging information on the need for a booster vaccine becomes available. There is no clarity on resourcing and this would require further discussion with Welsh Government as part of the annual planning cycle.

### **Workforce**

Sufficient workforce is in place to vaccinate in line with the proposed plan with a combination of fixed term appointments and temporary labour supply. The Health Board is still benefiting from military support via a Wales MACA that is in place until 30<sup>th</sup> April 2021. The programme office are undertaking a detailed review of plans for milestone three of the WGVs, to inform decisions about potential extension to current fixed term appointments.

### **Vaccine Equity**

There is an increasing national and local focus on ensuring that the programme is available to all, and delivered in a way that maximises uptake across all groups, including those who may experience barriers to access. Local work is underway to address vaccine equity issues and specific solutions are being identified to ensure equitable access by utilising our mobile vaccination vehicle and /or adjusting our vaccine arrangements to ensure that we are addressing key barriers. A communication programme is underway to focus specifically on addressing vaccine hesitancy amongst those from a Black, Asian or Minority Ethnic (BAME) background. Local and national data is being used to understand patterns of uptake to inform targeted initiatives.

### **Pathways**

A number of pathways are under development to ensure that specific groups of individuals are treated according to need. These are maintained in a central programme register and adopted formally through Immunisation Silver meetings to ensure appropriate governance.



### 3. GOVERNANCE AND RISK ISSUES

The senior responsible owner for the programme is Dr Keith Reid, Director for Public Health. The programme is governed through the Health Board's overarching command and control arrangements for COVID and report through Gold.

SBUHB has established an Immunisation Silver Command Group. The scope of this group is to set the strategic direction and oversee the implementation of a mass vaccination programme in SBUHB in line with Welsh Government and PHW-issued guidance.

Financial controls for operation of the programme and operations will be managed through delegated limits issued to the Immunisation Silver Command Group. Delivery of the programme is being controlled in management stages, using best-practice programme and project management processes.

A standard operating procedure (SOP) library has been developed to cover all aspects of operational processes across the vaccination delivery points, including mass vaccination centres, and Primary Care deployment and these are under review now that the programme has been operational for a number of months.

The risk management procedure for the project is in line with the SBUHB Risk Management Strategy, and the risk management plan. A formal risk register is maintained by the programme team, with oversight from Silver. There are currently 3 risks rated as 'high' (score of 15). These are:

<b>Risk</b>	<b>Description</b>	<b>Mitigation</b>
<b>Security</b>	Security at vaccination centres may be compromised, with risk to vaccine supply and equipment.	Site-specific standard operating procedures for security have been developed, with support of South Wales Police and military planning...
<b>Vaccine supply</b>	Short-term supply schedule is known, but medium-term information is not available.	Demand and capacity modelling supports forecasting beyond the immediate supply schedule.
<b>Vaccination centre tenure</b>	If deployment plans extend beyond the current milestones, tenure at the sites may not cover delivery period.	A review of lease and licence arrangements is underway and following this review, the risk score may be reduced.

In light of a recent incident that is being investigated, a new risk will be added to cover the risk of incorrect categorisation of patients on WIS leading to increased risk of error.

### 4. FINANCIAL IMPLICATIONS

A forecast for April 2021-September 2021 estimates a total pay and non-pay cost of £8,035,438 for the programme.

The funding stream for delivering the mass vaccination programme has not been confirmed and this requires clarity, which has been sought from the national team. Changes in the timing and availability of vaccine delivery, available workforce, the capacity within Primary Care to support vaccine delivery and agreement as to the fees required, are all expected to influence the financial forecast. The costs due to be incurred have been considered carefully, with prudent health care in mind.

Detailed returns on spend are submitted to the NHS Wales Delivery Unit, and Welsh Government on a monthly basis

## 5. RECOMMENDATION

Members are asked to:

- **NOTE** progress in vaccinating individuals identified within priority groups 1-4 and **approve** the forward plan to vaccinate individuals within priority groups 5-9 in line with the national Vaccination Strategy.
- **RATIFY** Chair's action in commissioning the PCCIS scheme for cohort 6 from General Practice
- **NOTE** the forward plan for milestone three
- **NOTE** the development of community pharmacy as a delivery point for vaccination of individuals within priority group 6.
- **APPROVE** the high level risks that are currently being managed through the programme, and the mitigating actions.

<b>Governance and Assurance</b>		
<b>Link to Enabling Objectives</b> (please choose)	<b>Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities</b>	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	<b>Deliver better care through excellent health and care services achieving the outcomes that matter most to people</b>	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
<b>Health and Care Standards</b>		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
	Staff and Resources	<input checked="" type="checkbox"/>
<b>Quality, Safety and Patient Experience</b>		
<p>There is a need to consider the importance of quality of care, and patient and staff safety when considering deployment of the vaccine delivery points. There is an increasing national and local focus on ensuring vaccine equity, maximising uptake across all groups, including those who may experience barriers to access. A community in-reach model has been developed which will be crucial in reaching BAME communities, those unable to travel, and typically hard-to-reach groups.</p>		
<b>Financial Implications</b>		
<p>The costs due to be incurred have been considered carefully, with prudent health care in mind. Utilisation of the Bay Field Hospital, and partnership working with local authorities to scope and develop vaccination sites, which has minimised costs involved in setting up vaccination centres. A funding stream for the full revenue cost of the programme is yet to be identified, but a costing model with a total cost of £10 million has been developed. The Finance lead for the programme is in continuous discussion with the Delivery Unit on estimated and actual costs.</p>		
<b>Legal Implications (including equality and diversity assessment)</b>		
<p>Incident reporting follows the Health Board reporting policy. Record-keeping into electronic patient record, follows the Health Board policy on record-keeping. The vaccination delivery model has been developed respecting equal and fair accessibility, and ensures the service also caters for those whose first language is not English.</p>		
<b>Staffing Implications</b>		
<p>A workforce model has been developed for each vaccination delivery point, which is scalable, and managed by a Workforce Planning Group within the programme governance structure. A workforce pipeline has been identified to staff the model in line with forward planning; a summary of the pipeline position is delivered to Silver on</p>		

a weekly basis. A review of the requirements to deliver milestone three is being undertaken.

**Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)**

The Well-Being of Future Generations (Wales) Act (2015) will be assessed as part of the Board's approach to Recovery.

**Report History**

This is the second detailed report on the programme, with vaccination covered as a regular issue in board reports on the following dates:

- Board Meeting, 30<sup>th</sup> April 2020
- Board Meeting, 28<sup>th</sup> May 2020
- Board Meeting, 25<sup>th</sup> June 2020
- Board Meeting, 30<sup>th</sup> July 2020
- Board Meeting, 24<sup>th</sup> September 2020
- Board Meeting, 26<sup>th</sup> November 2020
- Board Meeting, 28<sup>th</sup> January 2021

**Appendices**

- Chair's Action Decision Form

### Chair's Action Decision Form

Date	Subject	Reasons why chair's action is required	Lead executive	Discussed with the following Independent Members	Date to be ratified by the board
25/02/2021	<b>Chair's Action to approve Commissioning of Oxford/Astra Zeneca Vaccine Delivery in Primary Care</b>	The Health Board has a vaccine delivery programme which is operating under the Board's emergency planning and response framework. The programme is successfully delivering the Pfizer/BioNTech vaccine and following the approval of the Oxford/Astra Zeneca vaccine on 30 <sup>th</sup> December 2020 need to mobilise our use of this vaccine.	Darren Griffiths, Director of Finance and Performance	Jackie Davies Mark Child Martyn Waygood Nuria Zolle Stephen Spill Reena Owen	25/03/2021

<p><b>Signed:</b> </p> <p><b>Date: 25/02/2021</b></p> <p><b>Emma Woollett</b> Chair</p>	<p><b>Signed:</b> </p> <p><b>Date: 25/02/2021</b></p> <p><b>Mark Hackett</b> Chief Executive</p>
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