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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	27 May 2021	Agenda Item	2.2
Report Title	Update on the Vaccination Programme		
Report Author	Dorothy Edwards, Interim Vaccine Programme Director		
Report Sponsor	Dr Keith Reid, Director of Public Health		
Presented by	Dr Keith Reid, Director of Public Health		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to provide assurance to Board members on the delivery of the COVID Vaccination Programme in line with the Welsh Government Vaccination Strategy.		
Key Issues	<p>The vaccination programme continues to operate successfully within SBUHB and the Board met the second milestone within the National Vaccination Strategy earlier than originally planned.</p> <p>The national supply has continued to be fluid throughout March and April resulting in continual planning and re-planning of delivery models. To date over 338,000 vaccines have been delivered (first and second doses) and patient engagement with the vaccination programme remains high, albeit with evidence that uptake is diminishing as we vaccinate down the age range. Over 74% of all adults in Swansea Bay have had at least one dose and we remain on course to complete the final milestone which is to vaccinate all adults with at least one dose by the end of July.</p> <p>A significant change occurred in early April when JCVI recommended the use of an alternative vaccine for those aged less than 30 following a review of rare adverse side effects and this remains under review. In early May, this guidance was extended to cover all those under 40 without clinical risk factors.</p> <p>In terms of future planning, discussions continue on the potential delivery of a booster programme in the Autumn and further policy decisions are expected shortly. Scenario planning has begun to scope out issues in respect of re-vaccination.</p>		

	<p>General Practices have now completed first dose vaccinations and are working through second doses. The MVCs continue to operate delivering both first and second doses. The mobile service remains functional and is contributing towards reducing vaccine inequity by focussing on specific groups and/or geographical communities where access may be a barrier.</p> <p>Four community pharmacies are participating in a pathfinder scheme to broaden delivery points.</p> <p>Workforce remains stable and staff retention has been good; further workforce planning is underway in light of the potential booster programme.</p> <p>Patient feedback also remains overwhelmingly positive.</p>			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <ul style="list-style-type: none"> • NOTE progress in delivering the National Vaccination Strategy; • APPROVE the forward plan for milestone three and NOTE forward planning into the Autumn; • NOTE policy decisions made since March 2021; and • APPROVE the high level risks that are currently being managed through the programme and note mitigating actions. 			

UPDATE ON COVID-19 VACCINATION PROGRAMME

1. INTRODUCTION

This paper provides Board members an update on the delivery of the COVID-19 Vaccination Programme and implementing the Welsh Government Vaccination Strategy.

2. BACKGROUND

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

SBUHB began vaccinating on 8th December 2020, and to date has administered over 338,000 doses comprising over 240,000 first doses and around 98,000 second doses (figures as at 12th May 2021).

Swansea Bay is currently making use of two vaccine types, the Pfizer Biontech vaccine (Pfizer), and Oxford-AstraZeneca vaccine (AZ). Each vaccine comprises two doses given at intervals in line with Joint Committee on Vaccination and Immunisation (JCVI) advice and Welsh Government policy direction. A third vaccine, Moderna, has been authorised for use in the UK but is currently only available in two Health Board areas in Wales.

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
- **Milestone two** – by mid-April – groups 5-9
- **Milestone three** – by end July – all adults aged 18-49.

3. PROGRESS

Table 1 below sets out the priority groups and population sizes. As at 5th May, the Health Board has vaccinated 72% of the adult population with a first dose and of those, 39% have been vaccinated with a full course (representing 28% of the total adult population).

The majority of 2nd doses for JCVI categories 1-4 have been undertaken and these will be completed in May, before moving onto 2nd doses for those in JCVI groups 5-9.

Table 1: Priority Groups and Population Sizes (source: WIS 12th May 2021)

Group		Cohort Size	Vaccinated 1 st Dose	Vaccinated 2 nd Dose
Milestone 1: First Doses by mid February (2nd doses ongoing)				
1	Residents in a care home for older adults and their carers (note 1)	6,572	6,147	5,361
2	All those 80 years of age and over and frontline health and social care workers (note 2)	44,543	41,929	37,647
3	All those 75 years of age and over	15,519	14,971	14,418
4	All those 70 years of age and over, clinically extremely vulnerable individuals (excluding pregnant women and those under 16 years of age)	30,161	28,610	26,117
5	All those 65 years of age and over	18,723	17,614	8,076
Milestone 2 : First Doses by mid April (2nd doses not yet due)				
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	44,965	38,481	3,616
7	All those 60 years of age and over	12,804	11,494	460
8	All those 55 years of age and over	15,338	13,348	455
9	All those 50 years of age and over	16,332	13,746	445
Milestone 3: First Doses by end July (2nd doses not yet due)				
10	Rest of Population (aged 18-49)	118,797	53,966	1,280
		323,754	240,306	97,875

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

As previously reported, Swansea Bay met the first milestone in mid February and achieved the second milestone in early April, ahead of the deadline. We remain ahead of schedule and anticipate completing the third milestone ahead of the formal deadline, dependent on vaccine supply and uptake.

Forward Plan

The forward plan for the remainder of this phase of the programme (table 2) remains dependent on vaccine supply, however it is possible that the third milestone in the programme could be delivered earlier than planned – potentially in mid-June dependent on supply and also uptake.

Table 2: Forward Plan to 31st July 2021

Delivery Point	May	June	July
MVC's	Complete 1 st doses for those aged 30-49 and start first doses for 18-29 Complete 2 nd doses for those aged 60-79	Complete first doses for aged 18-29 Complete 2 nd doses for group 6 and earlier cohorts	Complete second doses as they fall due
GPs	Complete 2 nd doses for cohorts 1-4 and start second doses for group 6	Complete 2 nd doses for group 6	Any outstanding second doses
Community Pharmacy	Complete first and second doses for eligible patients		
Immbulance	Outreach into key communities and complete second doses for key vulnerable groups		
Community Outreach	First doses for housebound group 6 patients		Second doses for group 6 housebound patients
Hospital	Continued focus on outstanding second doses and unvaccinated new admissions		
Allergy Clinic	Complete first doses for all allergy patients		Complete second doses for allergy patients when due

Oxford/AstraZeneca Vaccine

On 7th April 2021, JCVI made a statement on the safety of the Oxford/Astra Zeneca vaccine following reports of extremely rare adverse side effect of concurrent thrombosis (blood clots) and thrombocytopenia (low platelet count) following vaccination with a first dose of AstraZeneca vaccine. Data from the MHRA indicated that there have been 242 such events up to 28th April across the UK with 9 occurring in Wales. Local data is not available.

The announcement followed a safety review by the Medicines and Healthcare Regulatory Agency (MHRA) and the European Medicines Agency (EMA). It is important to note that neither regulator imposed age based restrictions on the use of AstraZeneca, however, JCVI recommended that anyone aged 18-29 should now be offered an alternative vaccine as a matter of utmost precaution. On 7th May, JCVI reviewed its advice and now advise that individuals aged under 40 without clinical risk factors should be offered an alternative to the AZ vaccine with immediate effect.

Policy Decisions

A number of policy decisions have been made throughout the lifespan of the programme and these include:

- **February** – a decision to support unpaid carers being vaccinated within Wales which led to the establishment of a local process for identifying unpaid carers working jointly with local Carer's organisations. Over 4,650 carers completed the form locally and were vaccinated via our MVCs or General Practice
- **March** – realignment of the dose interval for both vaccines to around 12 weeks
- **April** – JCVI advised that all household contacts of patients who are immune-suppressed are vaccinated. A national online form was launched and to date nearly 150 people have been identified in Swansea Bay and are currently being scheduled and a further 34 potential contacts being followed up. In addition, contacts of newly diagnosed cancer patients will have information provided at clinic on the process to be followed
- **April** – following a detailed review of evidence arising from widespread use of Moderna and Pfizer vaccines in the US, the Green Book was updated to indicate that all pregnant women should be offered a vaccine. An all Wales standard operating procedure (SOP) has been developed which will inform our local SOP, however, with the support of local midwifery teams we have been offering vaccination to pregnant women at the Bay Field Hospital
- **April** – establishment of a national pathway for complex patients with a history of severe allergic reactions
- **May** – discussions are ongoing on the vaccination of University students and the timing of both first and second doses.
- **May** – change in JCVI guidance to offer either Pfizer or Moderna vaccine to anyone aged under 40.

Vaccine Equity

Public Health Wales have produced three enhanced surveillance reports with the latest report published in mid-April which provides an analysis of vaccine coverage in the over-50 population. The report highlights that there are a number of vaccine equity issues that need to be addressed and Welsh Government published a national Vaccine Equity Strategy in April to provide a framework for Health Boards to implement. Key points to note:

- There remains a disparity between those from a Black, Asian or Minority Ethnic background and those from a white ethnic background in taking up the vaccine. Whilst there are some encouraging signs that the gap has narrowed since the first report was published, it remains a source of concern
- There is a growing gap as vaccination progresses down the age ranges between those from the most and least deprived communities across Wales which is also evident in Swansea Bay
- There is evidence of a growing gender gap with males in their 50s and 60s less likely to take up a vaccine compared to females. This gap appears to widen as we progress through the age range.

In light of the increased focus on vaccine equity, Swansea Bay is now establishing a Vaccine Equity Working group and some dedicated project resource is now in place to support this work. Our work in targeting the 'imbalance' to particular communities is helping to address vaccine equity, but there is further work to do and to date nearly 1,400 people have received a vaccine via this mobile service.

A range of actions are being considered including:

- Further follow up of non attenders to understand the reasons for DNA's
- Consideration of pop-up and drop-in clinics in local settings
- Active marketing of vaccination amongst key groups – eg. employers, leisure industries
- Development of flexible booking options – eg. on line, early evening options for working people.

Engagement with key stakeholders is underway to understand some of the local barriers to access and to inform an action plan. A formal Equality Impact Assessment is also being undertaken to support the work programme.

Vaccine Supply

The vaccine supply situation has remained fluid throughout with a dip in supplies across the UK in late February 2021. However, sufficient supplies were available to ensure that we met milestone two date ahead of schedule and significant efforts were made to ensure full utilisation of short dated stock that arrived in March. During March and April, supplies have continued to be variable, although Pfizer supplies have settled. There has been limited first dose AZ supply during April but the outlook for May suggests that further supplies will be available.

Vaccination via Community Pharmacy

Following the last Board meeting, four community pathfinder sites have been commissioned which are located in areas where a geographical need has been identified. To date, over 1,000 vaccines have been delivered across three pharmacies; a fourth will come on line in early May. There has been positive patient feedback. Decisions on commissioning further community pharmacy will be informed by supply and considered in light of the vaccine equity work being undertaken across the Board.

Hospital Inpatients

Each Service Group continues to vaccinate inpatients with a rolling programme now in place to target both first and second doses.

High Risk Allergy Pathway

A high risk clinic for complex patients including those with a history of anaphylactic reactions has been established at Morriston Hospital and is now

in its fourth week of operation. The pathway for this clinic is aligned with the national pathway.

Booster Programme

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.

A planning session took place to map out potential scenarios and to inform future decisions on workforce and vaccine delivery points. This will be discussed via Health Board Gold in May.

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 MACA that deployed military assistance via the Vaccination Support Force ended on 30th April 2021 and has now ceased. In light of the potential booster programme, fixed term contracts for all staff employed in the programme have now been extended until September and the position will be reviewed in July.

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. A review of SOPs and development of a clear matrix of responsibility and accountability for operational delivery is close to finalisation.

Coverage

Coverage of the population groups remains good and for most age groups, national data suggests that we are above the Wales average. However, it is noticeable that as the programme has progressed through to lower age ranges, the number of DNAs has increased. This has led to a national policy on DNAs that Health Boards will make a minimum of three offers of a vaccination. This may not mean necessarily auto-scheduling but a combination of approaches. The DNA rate for first doses in Swansea Bay is running at approximately 9.5% and just around 1% for 2nd doses at the current time. However, on first doses, the pattern suggests that DNAs have increased particularly evident as we started vaccinating those aged below 50.

To combat the growing number of did not attends (DNA), the Health Board developed and released a reserve list, allowing members of the public to complete an online form and express their interest in receiving a vaccine at very short notice. The reserve list is open to anyone aged 18 and over, and as

well as enabling the booking team to form a list on individuals to contact, also supports with the mop-up over those aged 40 and over, as part of our 'no one left behind' approach. It is important to note, that even with a growing number of DNAs no capacity is lost; slots are always backfilled and the overall % of vaccine wastage in Wales is extremely low.

To date, over 24,500 individuals have completed the form, and the reserve list now forms a crucial element of responding to DNAs, with the booking team already having vaccinated over 5,000 using the reserve list.

4. 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 5 risks rated as 'high' (score of 15) post mitigation. These are:

Risk	Description	Mitigation
Security	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.
Vaccine supply	Short-term supply schedule is known, but medium-term information is not available.	Demand and capacity modelling supports forecasting beyond the immediate supply schedule.
Vaccination centre tenure	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.
Vaccine Equity	Ensuring fair access to vaccination	Vaccine Equity group being established, EQiA underway and detailed action plan to be developed
DNA's	High number of DNAs leading to operational challenges and risk of vaccine wastage	Action plan in place with mitigating action including over-scheduling to mitigate impact of DNAs

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. Incidents are monitored on a fortnightly basis via Immunisation Silver and follow Health Board procedures.

5. FINANCIAL IMPLICATIONS

The cost of the vaccination programme in 2020/21 was £3.787m which was in line with forecast and fully funded by Welsh Government. The Board is forecasting a spend of £8.854m between April and October 2021, however this is subject to ongoing detailed review.

Detailed returns on spend are submitted to the NHS Wales Delivery Unit, and Welsh Government on a monthly basis and we are now currently forecasting to the end of September 2021 excluding any assumptions about delivery of the booster programme.

6. RECOMMENDATION

Members are asked to:

- **NOTE** progress in delivering the National Vaccination Strategy;
- **APPROVE** the forward plan for milestone three and **NOTE** forward planning into the Autumn;
- **NOTE** policy decisions made since March 2021; and
- **APPROVE** the high level risks that are currently being managed through the programme and note mitigating actions.

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	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"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	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"/>
Health and Care Standards		
(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"/>
Quality, Safety and Patient Experience		
<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>		
Financial Implications		
<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. Welsh Government have fully funded the cost of the programme for 2020/21 and detailed monthly forecasts are submitted to the Finance Delivery Unit.</p>		
Legal Implications (including equality and diversity assessment)		
<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>		
Staffing Implications		
<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 a weekly basis. A review of the requirements to deliver milestone three is being undertaken.</p>		

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	<ul style="list-style-type: none"> • Board meeting January 2021 • Board meeting March 2021
Appendices	None