

Reduction in vaccine supply in April 2021 – guidance and FAQs for community pharmacy LVS sites

Introduction

Dr Emily Lawson, SRO for the Vaccine Programme, and Dr Nikki Kanani, Medical Director for Primary Care, wrote to all named lead contacts for COVID-19 vaccination sites and local systems on 17 March about vaccine deployment, in particular around the reduced vaccine supply in April. You can read the letter [here](#).

The implications for Community Pharmacy sites is as follows:

Waves 6-13

1. Wave 6-13 community pharmacy site leads will have received an email on 25 March with their confirmed vaccine volume allocation and delivery schedule for first and second doses for w/c 29 March, 5 April and their second dose schedule for 12 April.
2. Please follow the guidance outlined in the email, liaising with your RVOC and nbsonboarding@nhs.net for support as necessary to revise calendars. We do not have additional vaccine supply available: you must ensure that all appointments you make available on NBS can be covered by the supply you already have plus any confirmed deliveries.

To assist with accurate allocations, and payment, it is important that all vaccine events are recorded in Pinnacle on the day of vaccination. All sites should use the web form (ppds.palantirfoundry.co.uk) to record their stock position on a weekly basis and record any wastage. Each site should complete the web form on a Monday morning to reflect stock held at close of day on the Sunday preceding and recording wastage during the previous 7 days. This will help ensure all allocations are based on the correct data and will assist in managing vaccines supplies if there are any changes in the amount available.

This form must be completed on Monday 29 March. Failure to do so will mean we may not be able to open NBS for your site for bookings from 5 April onwards.

Wave 14

1. We plan to take a phased approach to mobilising Wave 14 community pharmacy sites. A small number of priority sites are going live in early April, following an initial vaccine delivery on Thursday 1 April. Priority sites' NBS calendars will automatically be unblocked so that they can add first dose appointments to use up the initial vaccine supply. You will not be able to order additional vaccine and therefore you should therefore only plan appointments in line with the confirmed allocations for your site.

2. The majority of wave 14 and 15 sites will be mobilised in late April/early May – regional teams will confirm the specific timeframe for individual sites.
3. Some priority sites may receive a further allocation of vaccine in w/c 5 April - and this has been confirmed. If you are scheduled to receive an allocation, please talk to your regional team to seek approval for your NBS calendar to be temporarily unblocked in order to add new first dose appointments in April. You should do this by contacting your RVOC in the first instance.
4. In the weeks commencing 12, 19 and 26 April, some priority sites in areas where there is relatively low priority cohort penetration may be supplied with limited vaccine for first doses.
If your site is notified in due course that this applies to you, please talk to your regional team to seek approval for your NBS calendar to be temporarily unblocked as above.

Further guidance for all sites

We have produced this guidance and Q&A to provide further information on next steps for community pharmacy LVS sites both in relation to NBS calendars and the potential, temporary pause in your site's operations.

1. Why has the supply been impacted?

Supply schedules have moved up and down throughout the vaccine rollout. The Secretary of State has confirmed that this is due to a need to retest 1.3m doses and also a delay in the arrival of some stock from abroad.

2. Has this got anything to do with some European countries halting their use of the AstraZeneca vaccine?

This supply issue is completely unrelated to the adverse events that some European countries attributed to the AstraZeneca vaccine.

The Medicines and Healthcare products Regulatory Agency (MHRA) has said the available evidence does not suggest that blood clots in veins (venous thromboembolism) are caused by the COVID-19 Vaccine AstraZeneca. This follows a detailed review of report cases as well as data from hospital admissions and GP records. This has been confirmed by the Government's independent advisory group, the Commission on Human Medicines, whose expert scientists and clinicians have also reviewed the available data.

A further detailed review into five UK reports of a very rare and specific type of blood clot in the cerebral veins (sinus vein thrombosis) occurring together with lowered platelets (thrombocytopenia) is ongoing. This has been reported **in fewer than 1 in a**

million people vaccinated so far in the UK and can also occur naturally – a causal association with the vaccine has not been established.

The MHRA's advice remains that the benefits of being vaccinated continue to outweigh any risks and that the public should continue to get their vaccine when invited to do so.

The European Medicines Agency has concluded their review and stated that the benefits of vaccination still outweigh the risks despite a possible link to rare cerebral blood clots with low blood platelets. A review into whether the vaccine could be the cause of this rare type of cerebral blood clot alongside low blood platelets is ongoing and the EMA, working alongside the MHRA, will continue to investigate this.

3. I have first dose bookings for April, but I don't have enough vaccine to cover them.

Your regional team have been working on a plan for your area and have visibility of the number of appointments that have already been made. They will communicate with you (via your RVOC) to let you know how bookings will be handled for your site. Appointments should not be cancelled.

4. My existing bookings for April are spread across a number of different clinics, none of which are near to full. How can I rearrange these appointments to ensure more efficient use of my workforce and facilities?

You should contact your regional team (via your RVOC) to discuss options for rearranging patient bookings. If you have vaccine available in w/c 29 March due to cancellations or patients not attending the clinic then you may wish to contact patients in cohorts 1-9 who have booked appointments in April with an offer to bring forward their vaccination.

5. What should I do if my site still has remaining vaccine in stock even after making additional appointments available on NBS in April?

Please work with your regional team to agree a mutual aid solution, or work with the regional team and local community to ensure that it can be used to vaccinate people in cohorts 1-9 who have not yet received a first dose. This is particularly important where the remaining vaccine is short-dated or close to expiry and you should alert the regional team as soon as possible. You should do this by contacting your RVOC or SVOC (depending on region) in the first instance.

6. Do I have to return any remaining vaccine that I have in stock?

Vaccine stock remains the property of Public Health England. Please discuss any remaining stock with your regional team by contacting RVOC or SVOC (depending on region) who will advise on the plan for your site. Some sites may be required to support the movement of vaccine to be used elsewhere through mutual aid. This is particularly important where the remaining vaccine is short-dated or close to expiry and you should alert the regional team (via your RVOC or SVOC) as soon as possible.

7. I have a number of people in cohorts 1-9 contacting me at my premises but I don't have any vaccine for first doses, what should I do?

Please let your regional team know that this is happening and advise patients to contact their GP or 119.

8. I don't think I am getting sufficient allocations to cover my booked second doses, what should I do?

You should contact your RVOC if your second dose allocations are not sufficient.

9. I have workforce committed and cannot stand them down at short notice, what can I do?

Please let your regional team know that you potentially have workforce available to support outreach or other vaccination activities, working together with other vaccination providers in the area. Community pharmacy contractors could also contact their ICS-designated Workforce Lead Employer who acts as an operational workforce hub for all the vaccination providers in the local area. Again, this would be to let the Lead Employer know that you potentially have workforce available to support other vaccination activities.

Guidance has been issued to LVS sites who need to temporarily pause their operations and incur unavoidable financial costs as a result.

10. I have committed to lease costs for April, what can I do?

If your site is already mobilised (i.e. has already started to vaccinate patients), these will be covered under 'Additional reasonable costs' in the same way as lease costs are reimbursed for a site that is operating services.

For sites that are yet to mobilise (i.e. the majority of wave 14 sites), any costs associated with becoming an LVS site must be agreed with your regional team in advance, including those that may start to be incurred before your site goes live.

Please refer to the [mobilisation guide](#) on the FutureNHS workspace for more information.

11. Will you continue to reimburse costs incurred during the period when our site will not be delivering vaccinations?

Yes, sites paused during April can continue to claim On-going Reasonable Additional Costs.

12. The bookings in April are spread during the day- will it be possible to consolidate these to certain days of the week or times of day as vaccinators will be sitting around otherwise. The NBS system has been locked for April which limits us from rescheduling 2nd dose appointments to different times of day or change the day, how will we get around this?

You can consolidate appointments to certain days of the week or time of day if you wish. We acknowledge that the current block on April calendars limits the rescheduling of these appointments - we will release further communication on how to respond to such scenarios shortly.

13. What is happening with indemnity after 31 March?

State indemnity is provided until 30 June 2021 to those working under the terms of the LES. A letter of indemnity was sent to all Designated Contractors, please contact your RVOC if you require a copy.

14. How does the National Booking Service (NBS) work if we have spare doses left or cancellations?

The LES allows you to work locally with permission from your regional team. Please discuss with your regional team how you can support your local population to come forward for a vaccination. These patients can be vaccinated and added manually to the Outcomes4Health/Pinnacle Point of Care system. Within 2-3 days of that record being created the patient will then be able to book their second dose appointment via the NBS in the same way as any other patient. NBS will display available appointments within a 77-84 day window at nearby sites. If your site does not have any available appointments within their 77-84 day window, they will not be able to book their second dose with you. Please remember we are only currently vaccinating people in cohorts 1-9.

15.What is the policy on the distribution of vaccines to both PCN and Pharmacy led sites?

Allocations for first dose supplies for all delivery models are going to areas where there is the greatest need for people to receive their first dose vaccinations within eligible cohorts 1-9.

16.Can first doses be booked for April?

No. With calendars locked it is currently not possible for the public to book any new appointments after April 4. Please follow the guidance outlined in the email sent on 25 March, liaising with your RVOC and nbsonboarding@nhs.net for support as necessary to revise calendars according to the vaccines you have in stock or have been advised that you have been allocated.

17.There is still an issue regarding patients who have received their first dose and are unable to book their second.

If patients have had their first dose as Oxford Astra Zeneca and have not booked their second appointment, they will be able to book their second dose via NBS 24 hours after vaccination. If you or patients encounter difficulties with this, please contact 119 who will be able to support in the booking process.

18.Why does releasing same day appointments on NBS allow patients to book in on some days, but on other days new bookings are frozen?

NBS is not designed to take same day bookings. There have been a small number of isolated bookings that have occurred on the same day - however, this has been investigated and believed to be resolved. If you are seeing incidents of individuals booking on the same day, please report this to the IT Service Desk so they can track the issue.

19.If we contact patients to rebook appointments in April to streamline our work schedule how can NBS help us to achieve this? With our calendar being locked how can they rebook?

We acknowledge that the current block on April calendars limits the rescheduling of appointments within the month. We will release further communication on how to respond to such scenarios shortly.

20. If we are unable to complete a first dose appointment do we do this as a cancellation through Q-Flow? What direction will the patient receive regarding how to rebook?

There has been no change to the way NBS approaches cancellations. Sites can cancel individual appointments through Q-flow, with patients continuing to receive notification of the cancellation via text or email. Cancellation notifications include prompts for patients to rebook their appointments. Please see guidance below on how to cancel an appointment:

<https://digital.nhs.uk/coronavirus/vaccinations/q-flow-guidance/manage-appointments#cancel-an-appointment>

21. We have moved site since many patients first dose appointments, will NBS inform all those patients about the new address before their second dose?

Patients will receive notification of their upcoming appointment 3 days prior. Email notifications will include any updated site addresses in NBS. However, there is a risk that patients will not read these notifications and turn up at your previous site - we therefore recommend you put additional measures in place to inform patients.

22. What about end of day doses through April? Are we allowed to use second dose batches in April for first doses if we have spare at the end of the day?

Where this arises, we would encourage you to offer first dose vaccinations to people in cohorts 1-9. You can only do this if you are completely confident that they have not yet received a first dose.

23. Can patients mark if their dose is first or second on NBS?

NBS registers whether the appointment is a patient's first or second dose. The patient cannot change this data.

24. Is it correct that if a patient is not checked-in for their first appointment, their second one is automatically cancelled?

This is not correct. A patient being marked as DNA for their first dose is insufficient evidence that they have not had the first dose - many sites have been inconsistent in their use of the check-in app. Patients will receive a reminder text/email 3 days before their second dose appointment. For patients that received their first dose this will continue as planned. For those who did not attend their first dose this will act as a prompt and provide a link to cancel this appointment.

25. Is there a way to check if booked appointments are first or second doses?

There are multiple ways to check if booked appointments are first or second doses;

- Unit Appointments List Report
- Calendar print
- Viewing appointment details
- Confirmation following the use of the Check in app

The NBS technical team are also building a report that will give sites further insight to their bookings and enable them to identify whether bookings within a period are first or second dose. This is currently in the testing phase and due to be released imminently - keep an eye out for communications when it's ready.

26. We have some random appointments showing up as locked highlighted in red in the next few days. Can you advise us how to unlock them?

Appointments showing 'Locked' and highlighted red is a recent change to resolve issues of booking contention. When members of the public now go to book an appointment, it will be 'locked' for 10 minutes. If the patients complete the booking process, then the slot will become booked and turn green. If a patient does not complete the booking process, the slot will unlock after 10 minutes and be available for other members of the public to book.

27. How do we differentiate supply as first or second doses?

When setting up your calendar, appointment slots within time segments can be differentiated as first or second dose slots. Please see guidance available on NHS Digital:

<https://digital.nhs.uk/coronavirus/vaccinations/q-flow-guidance/create-appointment-slots#choose-appointment-types>

28. Can the ID form be put on the confirmation email / message?

All Health and Social Care Workers are prompted to bring proof of identification, both in the booking journey and in their booking confirmation. Sites are **not** requested to see proof of unpaid carers' eligibility though their status as a carer should be confirmed when they attend.

29. Unconfirmed appointments are a huge issue - patients attending with screenshots thinking they are booked but are actually unconfirmed as they have not concluded the booking.

The NBS technical team are aware of this and have implemented an additional fix for which they are assessing the impact. The team will continue to monitor and make changes to the system to support ease of booking.

30. My appointments after 15 April are second dose. Can I open these up for first and second dose if supply becomes available?

Yes, if supply becomes available it is possible to change your appointment slots to make both doses allowed. Please see NHS Digital guidance on how to do this:

<https://digital.nhs.uk/coronavirus/vaccinations/q-flow-guidance/create-appointment-slots#choose-appointment-types>

31. Lots of our patients can't book their second appointments with us despite the calendar being open.

Please check that you have second dose appointments open 77 – 84 days after your open first dose appointments. If this is the case, then specific queries such as this require more information for us to be able to investigate. Please contact nbsonboarding@nhs.net with information providing;

- site name
- dates patients are trying to book within
- when they had their first dose
-

32. What assurance can you give this supply issue will not happen again in future?

We understand these supply fluctuations make the operations of a vaccination centre very difficult, particularly in planning workforce. Unfortunately, no guarantee can be given and as much notice will be given as possible.