COVID-19 Hospital Hub Directorate Mobile Clinics for Inpatients Vaccination

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| --- | --- |
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| Executive Director lead : | Chief Medical Director |
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| --- | --- |
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| Mental Health and LD |  |
| Community Health Services |  |

Version Control Summary

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| 1 | 03/2/21 | Claire Mckenna & Jennifer Melville |  |  |
| 2 | 7/12/21 | Roberta Contino | Pfizer, Moderna and Booster doses added |  |
| 3 | 14/09/22 | Roberta Contino | Astra Zeneca removed  Pfizer Bivalent and Moderna Spikevax Bivalent added |  |
| 4 | 06/01/2023 | Alex Webster  Dr Mike O’Hanlon  Roberta Contino  Salimah Dhalla  Janette Clark  Lewis Pope | JAC documented vaccination via non- prescribers using National Protocol or PGD added  Patient and Staff pathways added  Resus checklist added  Responsibilities amendment  Updated EPMA - Appendix 5 |  |
| 5 | 04/09/2023 | Roberta Contino  Alex Webster  Lewis Pope | Moderna and Pfizer 30mcg removed  Comirnaty Original/Omicron BA.4-5 added  Updated Staff and patient pathway  Updated EPMA -Appendix 5 |  |

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# 1. Introduction

* There are a comprehensive list of documents supporting the national COVID-19 vaccination programme. There is also advice in the Roving and Mobile model access, to make sure there are clear protocols in place to control access, both for staff and patients attending vaccinations. This protocol intends to signpost to the key national documents that should be read and followed, as well as provide guidance on the governance arrangements that should be in place with partner organisations such as the PCNs and the LVS sites
* East London NHS Foundation Trust (ELFT) and its staff are committed to the safe, effective and timely provision of COVID-19 vaccines to patients in its care and health and social care staff.

# Related Policies

* Medicines policy
* SOP for Fridge and Clinical room temperature monitoring for safe storage of medicines
* Resuscitation Policy
* Anaphylaxis recognition and treatment policy
* Infection prevention and Control Policy Manual
* Covid-19 IPC Policy
* Cardio-pulmonary resuscitation COVID-19 (Exceptional) SOP
* Mental capacity policy
* Medicines Reconciliation Policy

# 2. Purpose

To outline processes for management of inpatient vaccinations via mobile teams from hospital hub clinics and safe governance and medicines management principles for COVID-19 vaccine use.

# 3. Inpatient prioritisation

* All inpatients who consent will be offered the vaccine as inpatients.

|  |  |
| --- | --- |
| Area | Patient group |
| **Fothergill, Sally Sherman, Cazaubon**  East Ham Care Centre, Shrewsbury Rd, Forest  Gate, London E7 8QP | Older adults  All current inpatients |
| **Leadenhall**  Tower Hamlets Center for Mental Health, Mile End Hospital, E1 4DG | Older adults  All current inpatients |
| **Fountains Court** (Limited numbers due to Covid positive cases)  Merton Road,  Bedfordshire Bedford MK40 3AF | Older adults  All current inpatients |
| **Cedar House**  Bedford Health Village,  3 Kimbolton Road, Bedfordshire MK40 2NT | Mental Health Rehabilitation – care home all current inpatients |
| **Poplars**  Mayer Way, Off Houghton Road, Houghton  Regis, Bedfordshire LU5 5BF | Older adults  All current inpatients |
| **Learning difficulties ward**  John Howard Centre, 12 Kenworthy Rd,  Homerton, London E9 5TD | Older adults  All current inpatients |
| **Inpatient wards**  Wolfson House, Posnanski Court, 311-315  Green Lanes, Finsbury Park, London N4 2ES | Identified at risk patients according to cohort |
| **Inpatient wards**  John Howard Centre, 12 Kenworthy Rd,  Homerton, London E9 5TD | Identified at risk patients according to cohort |
| **All adult mental health** | At risk patients |

# 4. Model – Mobile Vaccinations (see Appendix 1 Patient Pathway and Appendix 2 Staff Pathway)

* Ward MDT is responsible for identifying inpatients eligible for receiving COVID-19 vaccine.
* Mobile vaccinators will be deployed from Mile End Hospital - East London NHS FT on ELFT inpatient wards and premises.
* Vaccinations will occur in an allocated room on the ward, large enough to accommodate up to three roving vaccination team members (1 Vaccination lead RHCP, 1 admin, 1 vaccinator) as well as the patient and ward staff member
* Roving vaccination team must be assigned a member of the ward team to support with escorting patients to the clinic, and summoning support if required (i.e. rapid response team, crash team or emergency services).
* Experienced vaccinators and administration staff will vaccinate eligible inpatients at ward level.
* Authority to administer will be by individual patient prescription or Patient Group Direction (PGD) if the patient is consented by vaccination lead nurse on EPMA or on a paper drug chart (EHCC Fothergill and Sally Sherman only).
* Patients will be provided with information leaflet and vaccination card.
* Administration will be documented on JAC and entered on NIVS
* Mobile vaccine team will follow guidance and SOP on safe transfer of vaccine maintaining the cool chain – see attached SOP Roving and Mobile models



* Pharmacy Department – Mile End Hospital will be the only central site within ELFT storing the Covid-19 vaccines
* Movement of stock will be within ELFT directorate premises
* All appropriate measures to prevent contamination of the vials once punctured will be applied. See Appendix 7 for further information.
* Once the ward patients are vaccinated, staff who wish can also have their vaccine

# 5. Workforce

* Ward doctor or Vaccination lead nurse to undertake health questionnaire, obtain patient consent and prescribe vaccine on JAC or paper chart. They will also assist in any medical emergencies.
* Ward pharmacist to advise on governance, undertake clinical screening, offer appropriate advice, and organise supply. A dedicated pharmacist to have responsibility for daily stocktake at each site.
* Ward admin/lead
* Care coordinator
* Roving clinics will have the following staff:
* Registered experienced COVID-19 nurse vaccinator
* Experienced administration staff
* Local vaccinator (training)

Responsibilities:

|  |  |
| --- | --- |
| Ward doctor and/or Vaccination Lead Nurse | Health questionnaire  Patient consent  Prescription/documenting on EPMA |
| Ward doctor | Documentation on RIO  Documentation on discharge notification form (NODF)  Contact GP if needed regarding administration of vaccine  Assist any medical emergencies |
| Ward pharmacist | Vaccine governance  Clinical screening  Clinical advice  Ordering vials for mobile clinic  Stocktake  Screening NODF to ensure details included |
| Ward lead / admin | Ensure second dose added to ward diary Ensure second dose plan included in discharge planning/CPA |
| Care coordinator | Involved to coordinate additional dose planning |
| Mobile team nurse | Preparation vials  Administering dose on EPMA |
| Mobile team admin | Entering data on NIVS |

# 6. Training

COVID-19 specific training, BLS and anaphylaxis

* All registered nursing staff running COVID-19 Clinics and administering COVID-19 vaccines require specific training according to their vaccination experience:
  + Experienced and competent vaccinators who have vaccinated within the past 12 months
  + Registered Health Care Professionals new to, or returning to vaccination after a prolonged period
  + See document to access required training checklist:

<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/969903/Core_competency_assessment_tool_March2021.pdf>

Standard operating procedures (SOPs)

* All nurses undertaking preparation and administration of the vaccine must read and sign that they have understood SOP PCBV3 for Comirnaty® Original/Omicron BA.4-5
* All nurses undertaking stocktake and waste of the vaccine must read and sign that they have understood SOP for Disposal of Damaged, Used or Expired COVID-19 Vaccine at the Hospital hub clinic, SOP PCBV4 Stocktaking and Reconciliation of Comirnaty® Original/Omicron BA.4-5
* Clinic Lead to hold log of vaccinators signed off for above SOPs. Pharmacy team to have oversight of this.

**7. Medicines supply**

# Allocation of vaccine to hospital hub

* Allocations are made via a central mechanism from UKHSA and ICB
* Standard Operating Procedure (SOPs) for stock control, management of waste and reporting structures are required for central teams to manage allocations. Therefore, it is important to keep tight control over these areas.

# Presentation of vaccine

**Comirnaty® Original/Omicron BA.4-5** – (Only from 12 years of age and older)

* This is a multidose vial that contains 6 doses of 0.3 ml each.
* One dose (0.3 mL) contains 15 micrograms of tozinameran and 15 micrograms of famtozinameran, a COVID-19 mRNA Vaccine (embedded in lipid nanoparticles).

Pharmacy Site contact details:

|  |  |  |
| --- | --- | --- |
| City and Hackney Centre for Mental Health | City and Hackney Pharmacy  Office Lead named contact – Susana Fontelo | elft.pharmacycityandhackney@nhs.net |
| Tower Hamlets Centre for Mental Health | Mile End Hospital Pharmacy  Lead named contact – Bhavin Karania, Iffah Salim and Jennifer Clifford | elft.pharmacytowerhamlets@nhs.net |
| Newham Centre for Mental  Health | Newham pharmacy office  Lead named contact - Chinedu Ogbuefi & Veena Shivnath | elft.pharmacynewham@nhs.net |
| Wolfson House (Forensics) | Mile End Hospital Pharmacy  Lead named contact - Bhavin Karania, Iffah Salim and Jennifer Clifford | elft.pharmacytowerhamlets@nhs.net |
| John Howard Centre (Forensics) | Mile End Hospital Pharmacy  Lead named contact - Bhavin Karania, Iffah Salim and Jennifer Clifford | elft.pharmacytowerhamlets@nhs.net |
| Luton Wellbeing Service, Calnwood Court | Luton pharmacy office  Lead named contact - Natasha Patel | elft.pharmacyluton@nhs.net |

# How to order from your pharmacy team

* Teams need to liaise with pharmacy in advance to ensure vaccinations are prescribed for allocated roving clinic day
* Pharmacy staff to prepare and issue number of doses required for the mobile clinic.
* Nursing staff to collect consumables and cool box containing the vaccines from pharmacy team

# Collecting stock from Pharmacy at the Vaccination Centre and receiving stock in clinic

* Pharmacy will prepare the cool box to hold the vials requested for transport to inpatient ward.
* Pharmacy will issue the administrations logs for each vial
* Pharmacy will supply 6 syringes for 6 dose vials for Comirnaty® Original/Omicron BA.4-5: 6 syringes
* Pharmacy will supply Patient Information Leaflets and Vaccination record cards for the number of doses issued.
* Cold chain to be maintained 2-8oC for non-punctured vials of Comirnaty® Original/Omicron BA.4-5
* After first dose withdrawal, use the vial as soon as practically possible and within 12 hours (stored at temperature of 8⁰C to 30⁰C).
* Follow the trust SOP on fridge and room temperature management
* Once at the clinic, cool box should be opened as close to the fridge as possible, and vials placed in the fridge. NB Vials need to be kept in the original manufacturer packaging.
* Should not be stacked more than two boxes high

# Cool boxes

• See best practice for cool boxes <https://www.sps.nhs.uk/wp-content/uploads/2021/03/Cool-boxes-for-Covid-19-vaccine-quick-reference-guide-08.06.22-v3.pdf>

# Stock remaining at end of clinic

* Ideally all doses should be used from vials issued that day.
* All remaining partially used or unused vials needs to be returned to pharmacy, only if the cold chain has been maintained
* Implement a temperature monitoring remote system that ensures cold chain and alerts pharmacy team that excursion has occurred.
* For Comirnaty® Original/Omicron BA.4-5: See SOP PCBV4 Stocktaking and reconciliation of vials

# 8. At admission

•At admission, the patient must have a medicines reconciliation by a pharmacist/pharmacy technician which states whether the patient has received the COVID-19 vaccine already or not (ward doctor at weekends) this will be communicated to the MDT.

# 9. Prescribing

* The ward doctor or vaccination lead nurse will be responsible for prescribing or consenting using a PSD or PGD Comirnaty®Original/Omicron BA.4-5 (for 12yrs+) to inpatients on the relevant site.
* National protocols for vaccinations can found; https://www.england.nhs.uk/coronavirus/covid-19-vaccination-programme/legal-mechanisms/national-protocols-for-covid-19-vaccines/
* The prescription needs to be written for administration on the agreed roving clinic day or patients can be consented by the roving vaccination lead nurse on arrival to ward.
* Up to date information on the vaccine can be found:The green book, chapter 14a [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/955548/Greenbook_chapter_14a_v6.pdf)

[\_data/file/955548/Greenbook\_chapter\_14a\_v6.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/955548/Greenbook_chapter_14a_v6.pdf)

COVID-19 Vaccination information for healthcare practitioners [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/951155/COVID-19_vaccination_programme_guidance_for_healthcare_workers_11_January_2021_V3.1.pdf)

[\_data/file/951155/COVID-](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/951155/COVID-19_vaccination_programme_guidance_for_healthcare_workers_11_January_2021_V3.1.pdf)

[19\_vaccination\_programme\_guidance\_for\_healthcare\_workers\_11\_January\_2021\_V3.1.pd f](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/951155/COVID-19_vaccination_programme_guidance_for_healthcare_workers_11_January_2021_V3.1.pdf)

* The prescription will be made on JAC - See Appendix 5
* For Fothergill, Sally Sherman, Archer unit and for SMI community prescribe on an inpatient drug chart in the once only section:
* At the time of the first prescription the second dose should be added as a place holder on EPMA (see Appendix 5) and the date added to the ward diary.
* The ward doctor or vaccination lead nurse will undertake health assessment for eligibility of COVID-19 vaccine and consent the patient. This will be documented in the patient RIO progress notes
* Inpatients only who meet eligibility and are within recommended JVCI cohorts should be vaccinated.

# Consent

* Consent must be obtained from inpatients prior to prescribing and documented on RIO. Where a patient lacks capacity to provide informed consent to vaccination a best interest decision will need to be determined and decision fully documented on RIO.
* The Consultant doctor is responsible for best interest decisions and these must be documented.
* Where appropriate, the person’s advocates or those with power of attorney should be consulted, and if there is a deputy or attorney with relevant authority then consent must be sought from them to be able to make a decision on the person’s behalf to receive the vaccination.
* See Government guidance [https://www.gov.uk/government/publications/coronaviruscovid-19-looking-after-people-who-lack-mental-capacity/the-mental-capacity-act-2005mca-and-deprivation-of-liberty-safeguards-dols-during-the-coronavirus-covid-19-pandemicadditional-guidancea](https://www.gov.uk/government/publications/coronavirus-covid-19-looking-after-people-who-lack-mental-capacity/the-mental-capacity-act-2005-mca-and-deprivation-of-liberty-safeguards-dols-during-the-coronavirus-covid-19-pandemic-additional-guidancea)
* Useful reading and guidance on capacity and COVID-19 vaccinations can be found:

Obtaining consent is discussed in Chapter 2 of “Immunisation against infection disease” (the Green Book). [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment \_data/file/144250/Green-Book-Chapter-2-Consent-PDF-77K.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/144250/Green-Book-Chapter-2-Consent-PDF-77K.pdf)

[https://www.mentalcapacitylawandpolicy.org.uk/covid-19-vaccination-and-the-mca-thefirst-court-of-protection-judgment/](https://www.mentalcapacitylawandpolicy.org.uk/covid-19-vaccination-and-the-mca-the-first-court-of-protection-judgment/)

[https://1f2ca7mxjow42e65q49871m1-wpengine.netdna-ssl.com/wpcontent/uploads/2020/12/Mental-Capacity-Guidance-Note-COVID-19-vaccination-andcapacity-v3.pdf](https://1f2ca7mxjow42e65q49871m1-wpengine.netdna-ssl.com/wp-content/uploads/2020/12/Mental-Capacity-Guidance-Note-COVID-19-vaccination-and-capacity-v3.pdf)

# 10. Preparation and administration

* Ensure the Comirnaty® Original/Omicron BA.4-5 vaccine has been prescribed correctly on EPMA for either 1st, 2nd dose or booster dose and vaccinator is satisfied that the prescription is safe.
* Ensure preparation checklist is complete before each vaccine session.
* Ensure the Lateral Flow Test has been done before each administration
* Prepare and administer vaccine according to SOP PCBV3 for Comirnaty® Original/Omicron BA.4-5
* Each vial contains at least the number of 6 doses stated. It is normal for liquid to remain in the vial after withdrawing the final dose. Where a full 0.3ml dose cannot be extracted, the remaining volume should be discarded.
* Complete sign out sheet (Appendix 4) for each vial taken out of the cool box, these must be returned to the pharmacist/pharmacy at the end of each day.
* Administration and administering nurse to complete the NIVS entry including repeating the health questionnaire with the patient.
* Patient information leaflet should be provided to the patient post dose. See Public Health England Covid-19 Vaccination, ‘ What to expect after your vaccination patient information leaflet:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_ data/file/951769/PHE\_COVID-](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/951769/PHE_COVID-19_vaccination_guide_what_to_expect_after_your_vaccination_English_v2.pdf)

[19\_vaccination\_guide\_what\_to\_expect\_after\_your\_vaccination\_English\_v2.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/951769/PHE_COVID-19_vaccination_guide_what_to_expect_after_your_vaccination_English_v2.pdf)

* Information on the Comirnaty®Original/Omicron BA.4-5 Covid-19 vaccine can be found in the Green Book

# 11. Incident reporting and Adverse drug reactions

* *DATIX Reporting* –All incidents and near misses relating to any aspect of the process of end to end deployment of COVID-19 vaccines must be reported on the DATIX system. Within the ‘incident description’ section, the keyword “COVIDVACC” must be included.

* *Adverse Drug Reaction* reporting - Suspected adverse reactions following administration of COVID-19 vaccine should be reported on the DATIX (if uncommon, serious or significant) and to the MHRA using the specially established Coronavirus Yellow Card reporting scheme [(**https://coronavirus-yellowcard.mhra.gov.uk/**o](https://coronavirus-yellowcard.mhra.gov.uk/)r call 0800 731 6789). As a new vaccine product, MHRA have a specific interest in the reporting of adverse drug reactions for the new COVID-19 vaccines.

* + - **Common/minor** side effects – DO NOT report on DATIX. You can report these to the MHRA via the Coronavirus Yellow Card reporting scheme.

* + - **Uncommon/Serious/Significant** side effects - Report on DATIX and to the MHRA via the Coronavirus Yellow Card reporting scheme.

* Adverse Drug Reactions:

Very common side effects include:

* + Having a painful, heavy feeling and tenderness in the arm where you had the injection.

This tends to be worst around 1-2 days after the vaccine

o Feeling tired

* + Headache
  + General aches or mild flu like symptoms

Although feeling feverish is not uncommon for 2-3 days, a high temperature is unusual and may indicate you have COVID-19 or another infection. Advise the person the normal dose of paracetamol (follow the advice in the packaging) to help with common side effects. These side effects usually last less than a week.

# 12. Medical emergencies

* All staff will have BLS and anaphylaxis training
* The Roving vaccination team will supply:
* 2 x Anaphylaxis Kit.
* 3 x Glucose 40% Oral Gel 25g tube.

(The ward must have the equipment noted in Appendix 3. The vaccination team may be able to provide some equipment if prior notice is given)

* As much as possible the team on the ward where the patient is vaccinated should be prepared for possible adverse events. There should be at least 2 registered nurses on duty when the vaccine is given, at least one of whom should have completed Immediate Life Support and is available to support the patient if adverse event occurs. In the event of a medical emergency, additional support should be provided by the Duty Senior Nurse, Rapid Response Team/Emergency Nursing Team and Duty Doctor.
* Anaphylaxis – See Appendix 6 and Resus Council Guidance

<https://www.resus.org.uk/about-us/news-and-events/anaphylaxis-guidance-vaccination-settings>

* Dial 999 for medical emergencies, or 2222 if applies to site.

# 13. Documentation

* Documentation of administration is completed in the National Immunisation Vaccination System (NIVS)
* JAC EPMA see Appendix 5.
* Ward nurse in charge responsible for documenting on RIO progress notes and specify whether it is first, second or booster dose.
* All vaccine administration information and plans for second doses must be included in the Discharge notification to the GP (NODF)

# 14. Stocktake

* Clinic and pharmacy staff to be involved in daily stocktake
* For Comirnaty® Original/Omicron BA.4-5: Follow SOP PCBV4 Stocktaking and reconciliation of vials

# 15. At discharge

* Information must be included in the discharge notification
* If the patient has not received the second dose, and the patient is due for discharge before the 8-week interval, review to administer second dose prior to leaving hospital
* If this is not possible, co-ordination with the GP directly is required, in particular with regard to receiving the Comirnaty® Original/Omicron BA.4-5

**Where can I find more information?**

As information is constantly being reviewed and updated nationally as more information is identified, staff are advised to look at the latest information on the gov.uk websites

See the Green book, chapter 14a, COVID-19 Vaccines

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file /948757/Greenbook\_chapter\_14a\_v4.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/948757/Greenbook_chapter_14a_v4.pdf)

See the Green book, chapter 8, Vaccine safety and the management of adverse events following immunisation [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file /147868/Green-Book-Chapter-8-v4\_0.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/147868/Green-Book-Chapter-8-v4_0.pdf)

See the National Protocol for Comirnaty® Original/Omicron BA.4-5 (for 12yrs+)

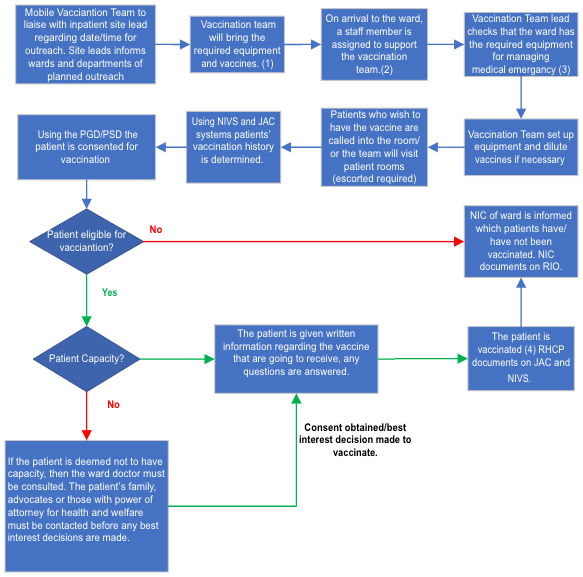
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See the National PGD for Comirnaty® Original/Omicron BA.4-5 (for 12yrs+)



**Appendix 1**

**Pathway 1: Mobile Vaccination Outreach Patient COVID and Flu Vaccination Pathway**



*1: The vaccination team will bring:*

* *Vaccines stored in cool box and temperatures checked hourly.*
* *Spare Ice packs.*
* *Syringes, needles, plasters, alcohol gel, alcohol swaps, cotton buds.*
* *Dilution packs.*
* *Information Leaflets and vaccination cards.*

*2: Support required from the ward staff member assigned to the vaccination team:*

* *Escorting patient to the clinic.*
* *Escorting vaccine staff to patient rooms if required.*
* *Summoning support if required (rapid response team, crash team or emergency services).*

*3: The vaccination team will supply:*

* *2 x Anaphylaxis Kit.*
* *3 x Glucose 40% Oral Gel 25g tube.*

*The ward must have the equipment noted in appendix. The vaccination team may be able to provide some equipment if prior notice is given.*

*4: The vaccination team will be responsible for any post vaccination monitoring if required. In the event of an adverse reaction the ward team may be required to assist.*

**Appendix 2**

**Pathway 2: Mobile Vaccination Outreach Staff COVID and Flu Vaccination Pathway**

A flowchart of vaccinations

Description automatically generated

*1: The vaccination team will bring:*

* *Vaccines stored in cool box and temperatures checked hourly.*
* *Spare Ice packs.*
* *Syringes, needles, plasters, alcohol gel, alcohol swaps, cotton buds.*
* *Dilution packs.*
* *Information Leaflets and vaccination cards.*

*2: The vaccination team will supply:*

* *2 x Anaphylaxis Kit.*
* *3 x Glucose 40% Oral Gel 25g tube.*

*The ward must have the equipment noted in appendix. The vaccination team may be able to provide some equipment if prior notice is given.*

*3. The vaccination team will be responsible for any post vaccination monitoring if required. In the event of an adverse reactions the ward team may be required to assist.*

**Appendix 3: RESUSCITATION EQUIPEMENT. ROVING TEAM**

Roving vaccination team will bring; he vaccination team will supply:

2 x Anaphylaxis Kit.

3 x Glucose 40% Oral Gel 25g tube.

The ward must have the equipment noted in appendix. The vaccination team may be able to provide some equipment if prior notice is given.

Vaccination Team lead checks that the ward had the required equipment for managing a medical emergency.

|  |  |
| --- | --- |
| No. | Ward stock |
|  |  |
| 1 | Defibrillator (AED) - pads pre-attached |
| 1 | Spare Hands Free Defibrillator Pads in AED case lid (compatible with AED) |
| 1 | Spare defibrillator battery in AED case lid (compatible with AED) |
| 1 | AED Starter Kit (prep-kit) |
| 1 | Sharps Bin (empty) |
| 1 | Pocket Mask |
| 1 | Oxygen Cylinder (minimum 3/4 full, seals removed, main valve opened) |
| 1 | Stethoscope |
| 1 | Fingertip pulse oximeter |
| 1 | Large First Aid (Please complete separate audit) |
| 1 | Pen torch |
| 1 | Blood Glucose Monitor |
| 1 | Blood Glucose Test Strips |
| 5 | Lancets |
| 1 | Electronic Blood Pressure Machine (Batteries installed and working) |
| 1 | Infrared Thermometer |
| 2 | Adult non-rebreathe mask |
| 1 | Adult Bag Valve Mask. |
|  |  |
|  | Roving Vaccination Team |
|  |  |
| 2 | Anaphylactic Shock Kit |
| 3 | Glucose 40% Oral Gel 25g tube |

**Appendix 4:**

This can be used for Comirnaty® Original/Omicron BA.4-5 Vaccine

*(ONLY for 12yrs+)*

**6 DOSE VIAL Comirnaty®Original/Omicron BA.4-5 Vaccine Log** (use a separate log for each vial)

Only have 1 vial in use at any time. After first dose withdrawal, the vial can be used for up to 12 hours (stored at 8⁰C to 30⁰C).

Date:

Ward mobile clinic:

Vial batch Number:

Time vial taken out of fridge:

Expiry Time (12hours):

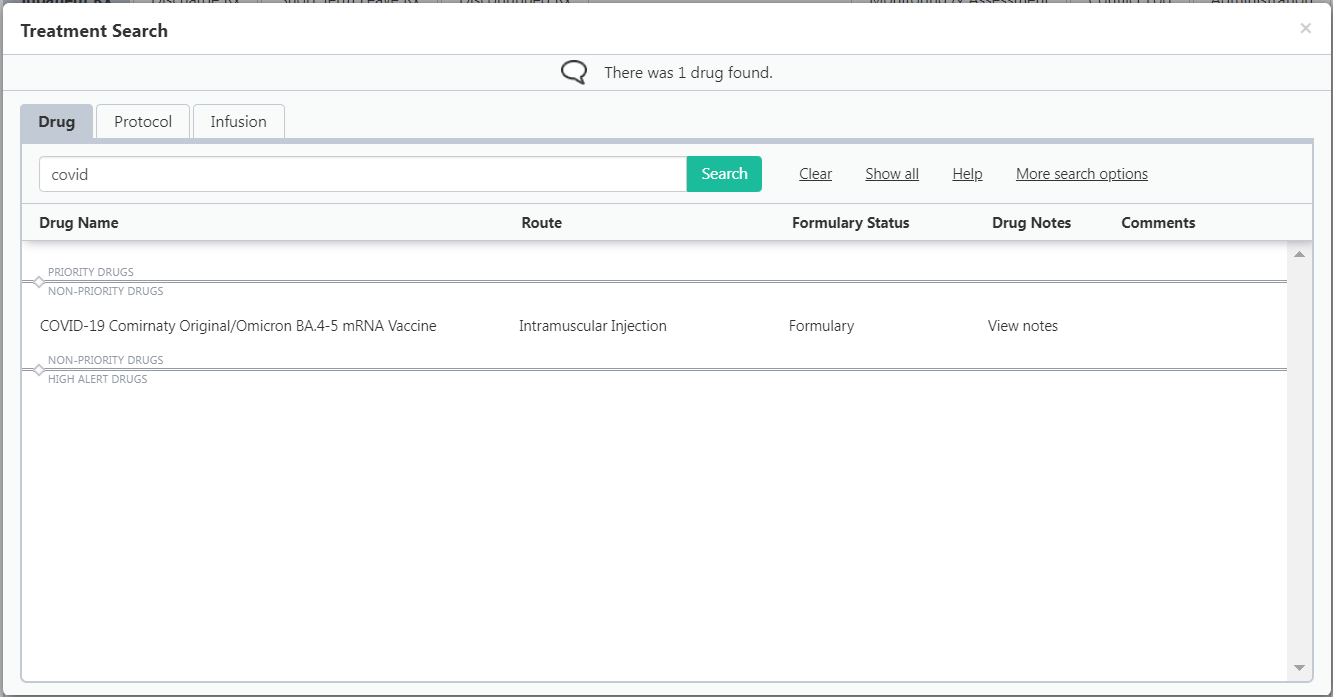
|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dose withdrawn | Volume drawn up | Time drawn up | Drawn up by | Checked by  (if applicable) |
| 1 | 0.3ml |  |  |  |
| 2 | 0.3ml |  |  |  |
| 3 | 0.3ml |  |  |  |
| 4 | 0.3ml |  |  |  |
| 5 | 0.3ml |  |  |  |
| 6 | 0.3ml |  |  |  |

**Please scan and RETURN this Vaccine log to PHARMACY email address at the end of clinic**

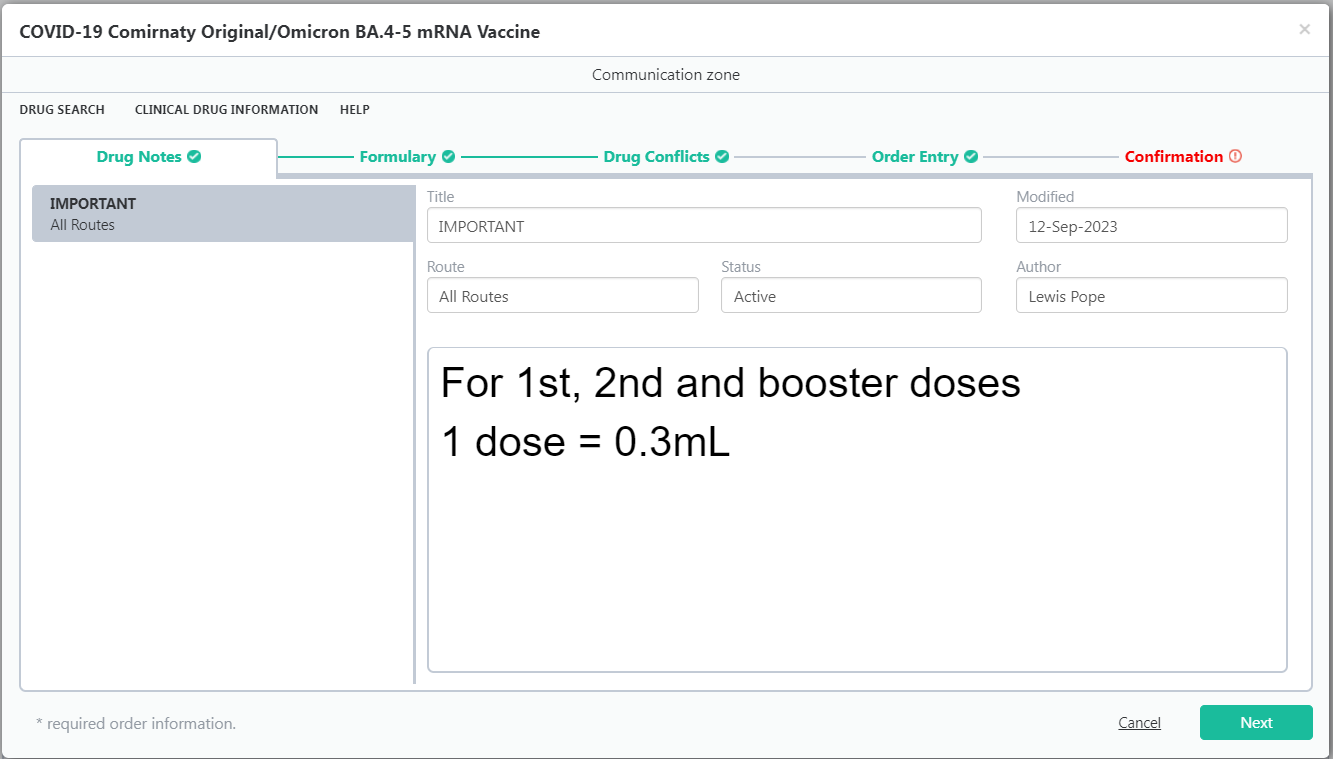
**Appendix 5: How to prescribe COVID-19 vaccine on JAC**

# Prescribing a COVID-19 Comirnaty Original/Omicron BA.4-5 mRNA Vaccine (for 1st, 2nd and/or Booster dose)

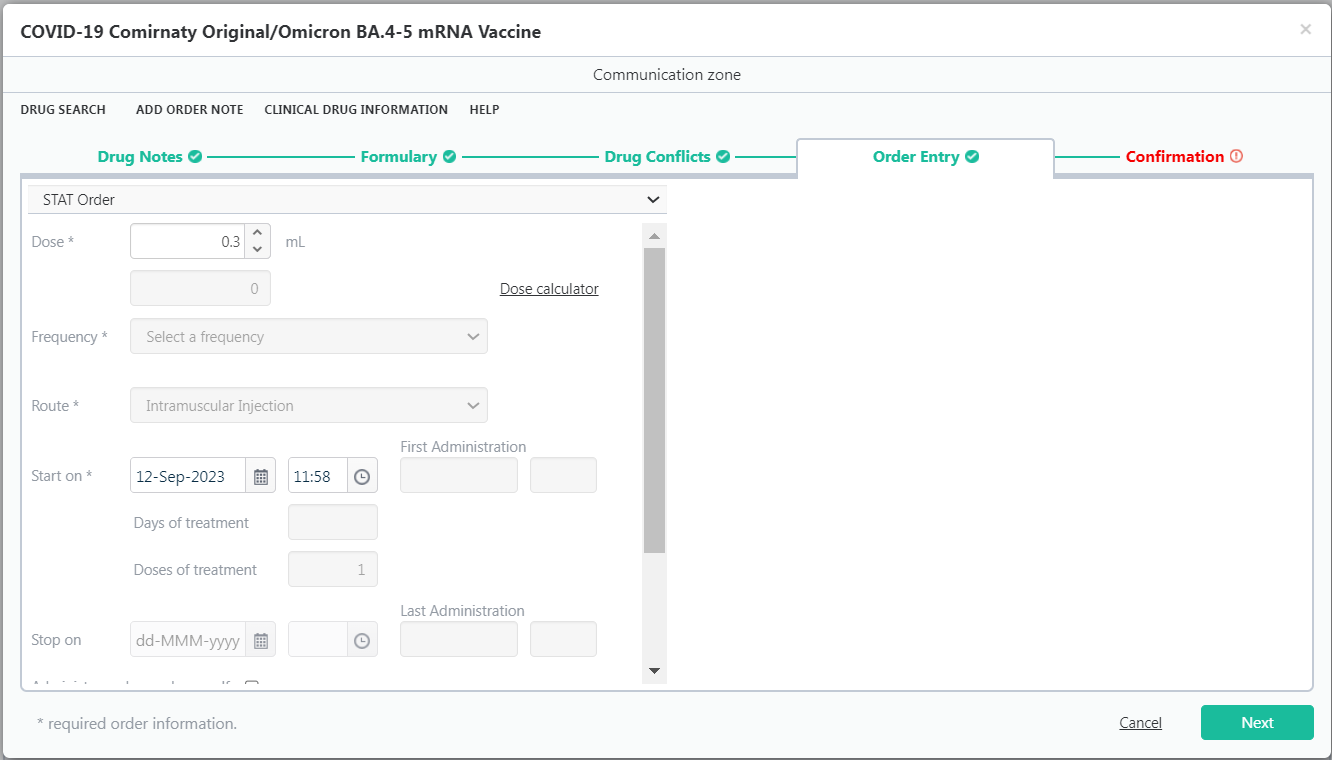
1. Select ‘Add Drug’ and search for ‘COVID-19’. Select ‘COVID-19 Comirnaty Original/Omicron BA.4-5 mRNA Vaccine’.



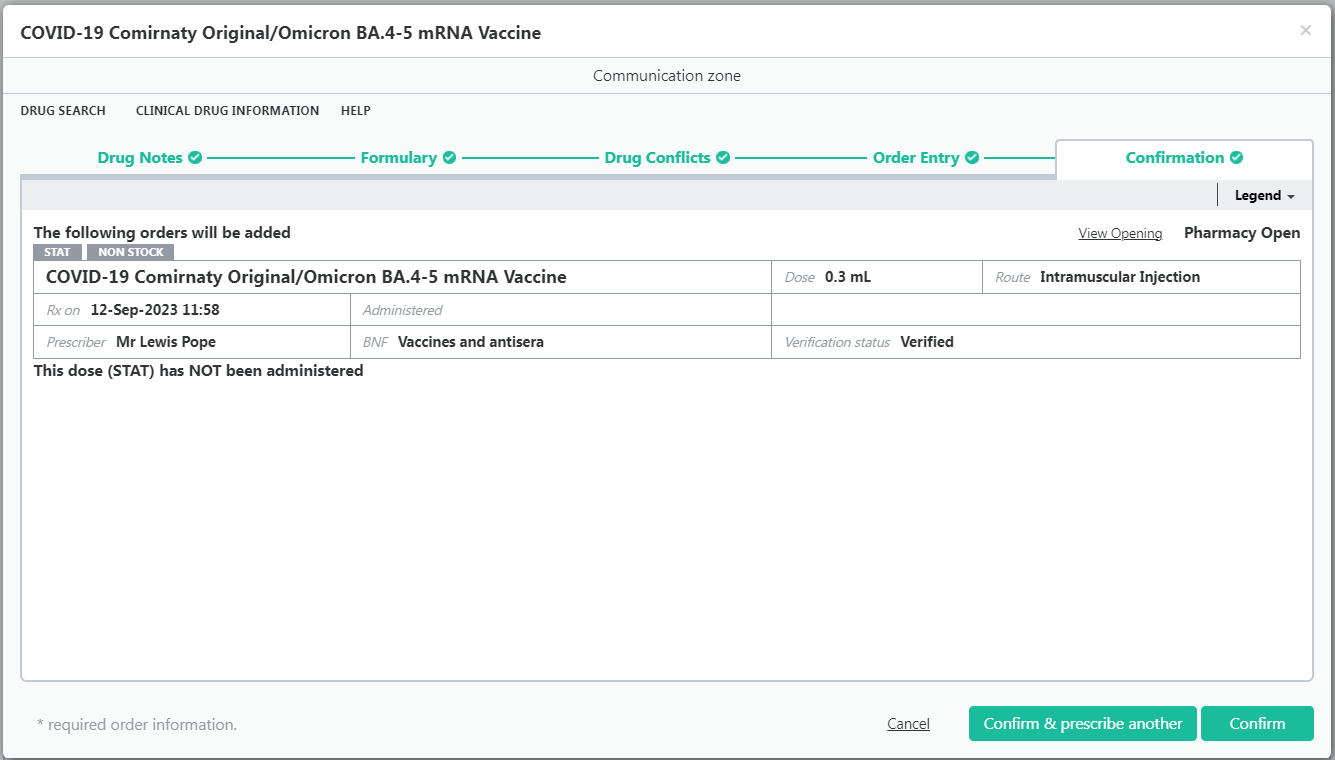
2. On selecting ‘COVID-19 Comirnaty Original/Omicron BA.4-5 mRNA Vaccine’ the below drug note will appear.



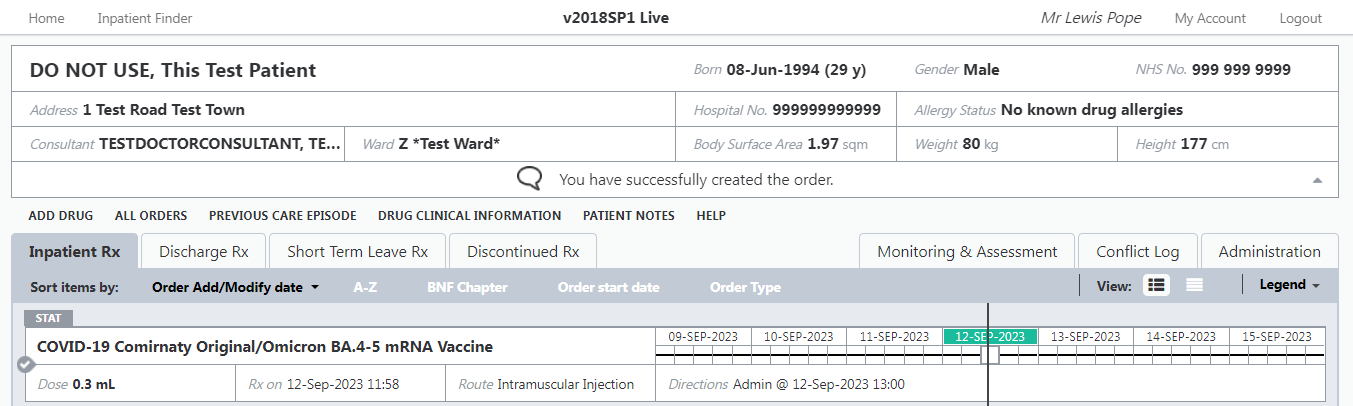
3. On the ‘Order Entry’ page, ensure all the details are correct. The dose will be set to a STAT Order and will default to be administered on the day of prescribing. It is therefore important to ensure ‘start on’ date and time are correct. Select ‘Next’



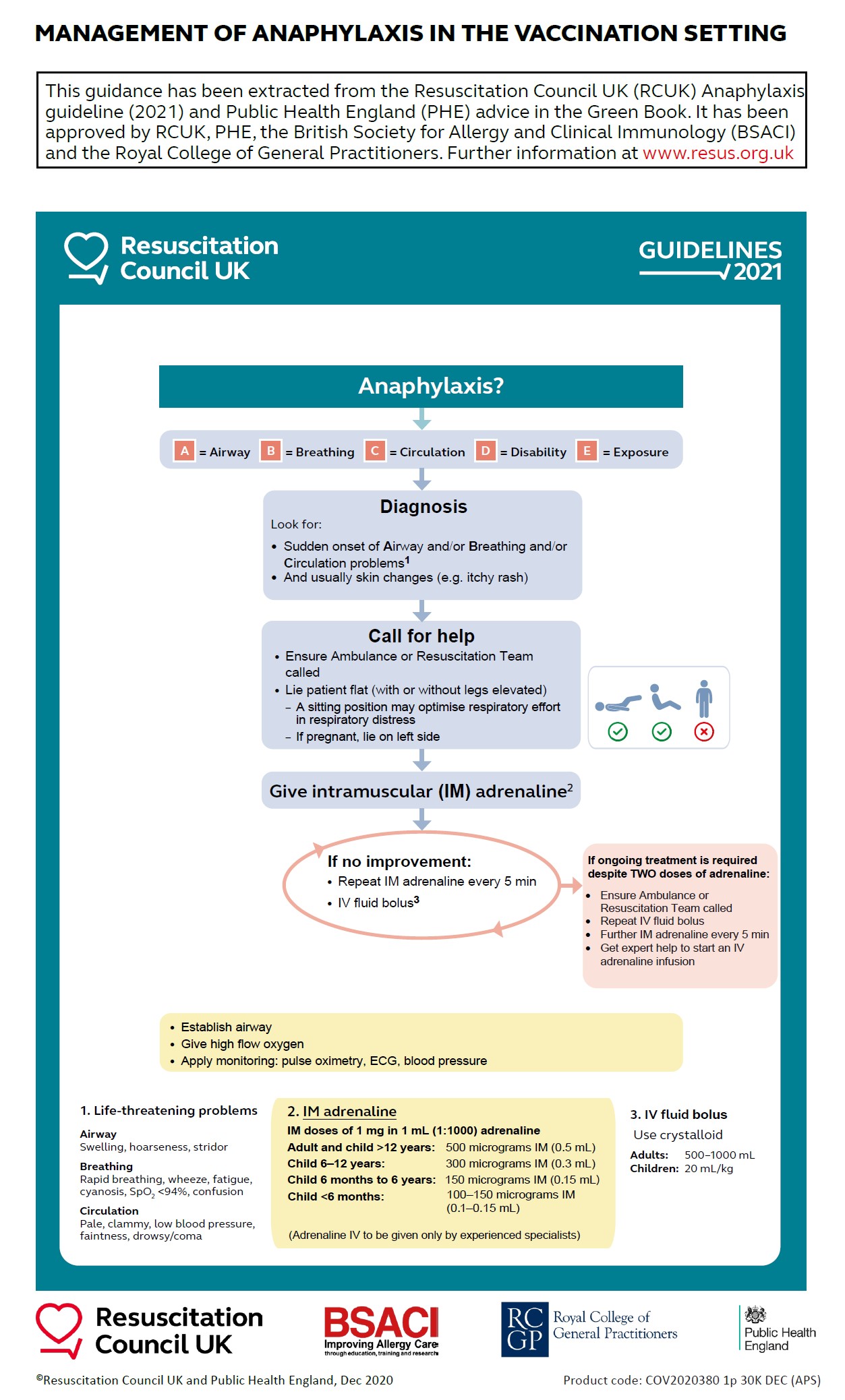
4. Ensure the details are correct on the ‘Confirmation’ tab and select ‘Confirm’.



5. Once the dose has been prescribed, it will appear on ‘Inpatient Rx’ as per the screenshot below



**Appendix 6: Management of Anaphylaxis in the vaccination setting**



## Appendix 7: Risk reduction measures for preventing contamination of vials

The roving model is based on a single site administration; however, the vials may be moved within that site for administration to patients on different wards.

Follow these risk reduction measures to prevent harm through administration of a contaminated dose of vaccine.

Risk reduction measures:

* Aseptic technique is of paramount importance.
* Minimise the time between the first and last puncture within the maximum time period of 6 hours.
* Ensure the vial is transported and stored within a validated cool box for the 6 hour period.
* Remove the vial from a validated cool box immediately before withdrawing the first dose and replace it immediately after withdrawing the last dose to be administered on any 1 ward.
* Swab the entire vial and then the bung, with 70% alcohol swab after removal from the validated cool box.
* Swab the entire vial with alcohol swab before replacing it in the cool box.
* If failure of aseptic technique is suspected, discard punctured vials.