



COVID-19 Vaccine Handling and Management policy 2020-2021

The Policy Template contains the sections that have to be included in a policy; any additional references or referencing are subject to requirements of the policy lead director or stakeholders.

Document Author	Authorised
Written By: NHS England	Authorised By: <i>Clinical Standards Group</i>
Date: January 2021	Date: 7 th January 2021
Lead Director: <i>Director of Nursing, Midwifery, AHPs & Community Service</i>	Review Date: 7 th January 2022
Effective Date: 7 th January 2021	Date Approved: 7 th January 2021
Approval at: Clinical Standards Group	

DOCUMENT HISTORY

(Procedural document version numbering convention will follow the following format. Whole numbers for approved versions, e.g. 1.0, 2.0, 3.0 etc. With decimals being used to represent the current working draft version, e.g. 1.1, 1.2, 1.3, 1.4 etc. For example, when writing a procedural document for the first time – the initial draft will be version 0.1)

Date of Issue	Version No.	Date Approved	Director Responsible for Change	Nature of Change	Ratification / Approval
07/01/2021	1	07/01/2021	Director of Nurisng, Midwifery, AHPs & Community Service	New document	Approved by Clinical Standards Group

NB This policy relates to the Isle of Wight NHS Trust hereafter referred to as the Trust

Uncontrolled once printed

Contents

1	Executive Summary	4
2	Introduction	4
3	Definitions	4
4	Scope	4
5	Purpose	4
6	Roles and Responsibilities	6
7	Policy detail/Course of Action.....	7
8	Workforce and Training.....	7
9	Monitoring Compliance and Effectiveness.....	8
10	Links to other Organisational Documents and References	9
11	Appendices	10

Uncontrolled once printed

1 Executive Summary

This is a policy document to enable the Isle of Wight NHS Trust to implement good governance in the context of the safe and secure handling and management of COVID-19 vaccines.

2 Introduction

The COVID-19 vaccination programme is of the highest priority for the NHS. In order to deliver this programme both safely and effectively, good practice in the handling and management of vaccine is paramount.

It is anticipated that a number of COVID-19 vaccines will be introduced during 2020 and 2021, so good governance is essential. Clarity of both the overarching principles and the detailed 'standard operating procedures' are required to enable safe, effective implementation and delivery of the vaccination programme.

This document is to be read alongside the national NHS Standard Operating Procedures developed for all COVID-19 vaccines and all environments in which they are handled.

3 Definitions

Medicines and Healthcare products Regulatory Agency – MRHA
Standard Operating Procedures – SOPs
Patient Group Direction – PGD
Ultra Low Temperature - ULT

4 Scope

All staff responsible for planning and managing the COVID-19 vaccination programme in 2020/21, and all Pharmacy staff engaged in supporting and delivering the COVID-19 vaccination programme in 2020/21.

5 Purpose

This policy document enables corporate and professional governance for use of the COVID-19 vaccines, with the expectation that all areas detailed are addressed locally and that standard NHS medicines governance arrangements are in place.

The document is intended to provide the overarching principles for robust governance of the safe and secure handling and management of COVID-19 vaccines in the end-to-end supply chain for the vaccination programme.

Objectives

To ensure that all staff involved in delivery of the vaccination programme are aware of, and adhere to, the correct procedures for the ordering, receipt, storage, supply and administration of the product.

To ensure that the physical and biochemical integrity and sterility of all vaccines and related medicines is maintained.

To ensure that all staff involved in delivery of the vaccination programme are aware of the relevant characteristics of COVID-19 vaccines and the implications this has for vaccine efficacy and patient safety.

To provide assurance that vaccine safety, sterility, quality and efficacy is protected.

To define key roles and responsibilities needed to deliver this assurance.

To ensure that all staff understand their critical roles and responsibilities in delivering these objectives.

COVID-19 Vaccines

There are a number of COVID-19 vaccines under development and it is anticipated that a range will be utilised in the vaccination programme.

None will be authorised at the start of the programme so initially they will be unlicensed products temporarily authorised for supply under Regulation 174 of the Human Medicines Regulations 2012. This regulation enables the Medicines and Healthcare products Regulatory Agency (MHRA) to authorise use of a product on a temporary basis in response to the spread of pathogenic agents.

The characteristics of the different vaccines may vary considerably and will increase in clarity over time. Prior to licensing the product, characteristics are available in the relevant MHRA publications. Following award of the Marketing Authorisation this information is available in the Summary of Product Characteristics and Patient Information leaflet respectively.

The first vaccine made available requires transport and storage under ULT conditions (-70 +/- 10 C). This may not be the case for those that follow, but cold chain will be critical for all. Use of vaccines that have deviated from recommended storage or transportation conditions risks compromising vaccine efficacy and patient safety.

Vaccines that have not been transported or stored correctly may be ineffective or harmful; they would therefore no longer be within the terms of their product authorisation or temporary Regulation 174 authorisation and must not be used. Means of detecting when a temperature excursion has occurred are required. The focus on avoidance of waste should also be of high priority.

Further information concerning COVID-19 vaccines is available in the Public Health England publication 'COVID-19 vaccination programme Information for healthcare practitioners'

Legal framework and practice standards

All activity is to be undertaken in accordance with the Human Medicines Regulations 2012, as amended by the Human Medicines (Coronavirus and Influenza) (Amendment) Regulations 2020.

In addition, adherence to national standards of good practice is required including those set by the Care Quality Commission, the National Institute for Health and Care Excellence, Public Health England and the Royal Pharmaceutical Society of Great Britain, as detailed in appendix 1 below.

6 Roles and Responsibilities

The Isle of Wight NHS Trust as the legal entity responsible for operating the vaccination site is to assign responsibility for clinical and operational oversight. Executive Director oversight should be in place supported by the Chief Pharmacist for assurance on the safe and secure handling and management of the COVID-19 vaccine and related medicines.

Accountability and responsibility for vaccines, associated medicines and their supply chain

- The Executive Director and allocated Senior Responsible Officer for the COVID-19 vaccination programme are accountable for the safe and secure handling and management of medicines on all vaccination sites operating within or under the jurisdiction of their employing legal entity. This includes oversight of those elements of practice within designated vaccination sites that may impact upon product integrity, from receipt of product to vaccine administration.
- The Chief Pharmacist is to support the Executive Director and Senior Responsible Officer. They may delegate operational responsibility for oversight of ordering, receipt, storage and safe handling of vaccines and medicines, to a named and suitably trained member of staff on each vaccination site.
- The Trust Medicines Use and Safety Group is to document the above named individuals.
- The NHS Specialist Pharmacy Services Regional Quality Assurance Specialists will provide specialist pharmaceutical expertise in the development of systems and processes of work to ensure the safe and secure handling of the vaccine.

Handling and management of vaccine and medicines in vaccination sites

The Senior Responsible Officer must ensure that all activities are carried out in accordance with:

- This policy document
- The relevant nationally authored documents and Standard Operating Procedures (SOPs)
- Relevant local organisational medicines policies
- Standard good practice guidance including aseptic technique
- Relevant Health and Safety guidance
- National Standards including those detailed in appendix 1

Staff authorisation to be supplied with and administer COVID-19 Vaccines

The Executive Director and allocated Senior Responsible Officer for the COVID-19 vaccination programme must ensure that appropriate and formal authorisation for vaccine administration is in place such as a Patient Group Direction, protocol or written instruction, and that the staff groups who are supplied with, prepare, and administer the COVID-19 vaccine are those defined as eligible to do so.

Safety and security of vaccines and related medicines

The Executive Director and allocated Senior Responsible Officer for the COVID-19 vaccination programme must ensure that safe and secure handling and storage of vaccine and medicines are in place in accordance with principles and guidance encompassed in 'Professional guidance on the safe and secure handling of medicines'

Storage and transportation of vaccines

The 'cold chain' is a term used to describe the cold temperature conditions in which certain products need to be kept during storage and distribution. Maintaining the cold chain ensures that vaccines are transported and stored according to the manufacturer's recommended temperature range until the point of administration. Vaccines must be stored at the correct temperature and transported only in approved and validated packaging, and the temperature of the vaccine carrier and contents monitored and reviewed before use.

The Executive Director and allocated Senior Responsible Officer for the COVID-19 vaccination programme must ensure that storage and transportation are undertaken in accordance with the relevant SOPs, that cold chain temperatures are monitored correctly and that any 'out of specification' recordings are addressed promptly and appropriately, and that a full audit trail is maintained. Further details are included in the relevant SOPs and in manufacturers' information.

7 Policy detail/Course of Action

This policy sets out the principles and arrangements to enable the Isle of Wight NHS Trust to implement good governance in the context of the safe and secure handling and management of COVID-19 vaccines.

For further information please refer to the Patient Group Direction (PGD) for the administration of COVID-19 mRNA vaccine BNT162b2 30micrograms in 0.3ml to individuals in accordance with the national COVID-19 vaccination programme - [PGD for COVID-19 mRNA vaccine](#)

8 Workforce and Training

All staff undertaking duties at the vaccination site must meet the necessary training standards and competencies in line with the SOPs and standard organisational processes. A training needs assessment is required for the roles within the vaccination services, with corresponding training materials and assessment process, to enable timely and focussed workforce development.

As detailed in 'Professional guidance on the safe and secure handling of medicines' "the named individual ensures that accountable individuals are competent and supported in their role as it relates to the safe and secure handling of medicines".

The roles assigned to support the rollout of COVID-19 vaccination need to be in accordance with legislation including that detailed in the Human Medicines (Coronavirus and Influenza) (Amendment) Regulations 2020

Precautions

Anaphylaxis kits including injections of intramuscular adrenaline 1:1,000 must be in date and readily available at all locations undertaking vaccination.

Any needlestick or other injuries must be addressed in accordance with the policies of the relevant employing legal entity.

9 Monitoring Compliance and Effectiveness

Maintenance of records

All records must be maintained in accordance with relevant SOPs. These include the ordering, receipt and issue of vaccines, tracking of product, plus patient focused records including consent and administration.

Any serious adverse reactions are to be escalated for immediate senior clinical input; such situations are to be fully documented following the event and a record kept of relevant product batch numbers. A record of all serious adverse events is to be provided to the Chief Pharmacist.

Data Protection

All staff have a responsibility to ensure that they do not disclose information about the service, service users, staff members and corporate documentation to unauthorised individuals.

Disposal of vaccines and other waste

Disposal of waste vaccines and any sharps must be undertaken in a safe and secure manner in accordance with relevant SOPs. If any packaging includes dry ice this must also be disposed of in a safe and secure manner using appropriate personal protective equipment.

Business Continuity Planning

The Chief Pharmacist will be responsible for establishing an agreed business continuity plan in relation to safe and secure handling of vaccines, and for testing this plan in line with the organisational emergency preparedness processes and NHS Core Standards for Emergency Preparedness, Resilience and Response. The business continuity plan should detail how the relevant aspects of the service will respond, recover and manage during disruption relating to people, information, security, premises including utilities, facilities particularly refrigerator failure, supplier, IT and data.

10 Links to other Organisational Documents and References

CQC Regulation 12: Safe Care and Treatment

The intention of this regulation is to prevent people from receiving unsafe care and treatment and prevent avoidable harm or risk of harm. Providers must assess the risks to people's health and safety during any care or treatment and make sure that staffs have the qualifications, competence, skills and experience to keep people safe.

- Providers must make sure that the premises and any equipment used is safe and where applicable, available in sufficient quantities. Medicines must be supplied in sufficient quantities, managed safely and administered appropriately to make sure people are safe.
- Providers must prevent and control the spread of infection. Where the responsibility for care and treatment is shared, care planning must be timely to maintain people's health, safety and welfare.

The CQC understands that there may be inherent risks in carrying out care and treatment, and we will not consider it to be unsafe if providers can demonstrate that they have taken all reasonable steps to ensure the health and safety of people using their services and to manage risks that may arise during care and treatment'

NICE Clinical Guideline QS61: Infection Prevention and Control

This quality standard covers preventing and controlling infection in adults, young people and children receiving healthcare in primary, community and secondary care settings.

The Green Book - Immunisation against infectious disease (Public Health England)

The latest information on vaccines and vaccination procedures, for vaccine preventable infectious diseases in the UK.

Guidance on the safe and secure handling of medicines (Royal Pharmaceutical Society)

Adhere to the documented governance principles and relevant guidance.

11 Appendices

Appendix 1:

Go-Live Checklist

The following list provides an indication of the specific items for consideration in providing assurance that the pharmacy and medicines handling requirements for the vaccination programme have been met. It is by no means definitive and is subject to change.

Governance and leadership

- Approval of policy to assure safe and secure handling of the vaccine from receipt to administration
- Chief Pharmacist in post
- Senior nurse identified for oversight of training for vaccine preparation
- Primary Care Lead Pharmacist identified

Standard Operating Procedures (SOPs)

- SOPs for receipt, storage, stock control, temperature excursions, record keeping and security in place
- SOPs for preparation of individual doses of vaccine in place
- SOPs for administration of individual doses of vaccine in place
- SOPs for waste handling in place



Workforce and training

- Appropriately skilled workforce identified for service delivery
- Appropriately skilled pharmacy workforce identified for service delivery support
- Standard training material relating to SOPs and service delivery available
- Training delivery plan in place
- Competence assessment in place for appropriate elements

Premises, equipment and supply

- Sufficient validated fridge and, where appropriate, freezer capacity available
- Fridge automatic temperature monitoring and logging system installed
- Fridge alarms installed and tested
- Supply of vaccine and non-vaccine consumables determined
- Chief Pharmacist agreement to vaccination site layout and preparation areas

Sign off

ROLE	NAME	SIGNATURE	DATE
Executive Director and Senior Responsible Officer	Alice Webster		08/01/2021
Chief Pharmacist	Thomas Cox		08/01/2021