

Lothian GPs Zoom meeting -COVID vaccine special – Wednesday 2nd December 19.30

Dr Iain Morrison, Chair of Lothian LMC welcomed all to our LMC hosted zoom meeting which was attended by 667 colleagues.

Dr Drummond Begg hosted a panel discussion with contributions from David Small (Director of Primary Care Transformation, NHS Lothian), Alison McNeillage (general manager Primary Care Contracts), Liz Young (Practice Nurse Manager for NHS Lothian), Janet Corcoran (Chief Nurse for clinical education in NHS Lothian), Stephen McBurney (Associate Director of Pharmacy, NHS Lothian), Dr Lorna Willocks (Consultant in Public Health, NHS Lothian), Pat Wynne (Nurse Director for Primary and Community Care, NHS Lothian).

DS advised that the vaccination programme will proceed in Waves.

Wave 1 will include Health and Social Care workers, Care Home residents and staff, the over 80 year olds and unpaid carers. Locally the housebound will also be included in wave 1. Wave 1 will occur in December and January.

Further waves will cover adults younger than 80 in decreasing 5 year age brackets and all those at risk under 80.

GP Practices have been asked to vaccinated the ambulant over 80s. It is likely practices will use the AstraZeneca designed vaccine which was used in the Oxford trial. This information is subject to formal approval of the vaccine. Current plans are for first supplies of this vaccine to be available in late December but this is also subject to change.

No current plans to ask Practices to be involved in vaccinating any other cohorts. This will be done by the HSCPs.

AM updated the meeting on plans for staff vaccinations and funding for practices.

The PCCO will send information to all practices on 3rd December. Staff vaccination clinics at the hospital sites will start on 8th December. Practice staff will be allowed to attend hospital staff clinics or wait until the vaccinations can be given within their practice.

[https://www.sehd.scot.nhs.uk/pca/PCA2020\(M\)17.pdf](https://www.sehd.scot.nhs.uk/pca/PCA2020(M)17.pdf)

It was highlighted that the DES (see link above) was a national agreement. A LES will be produced to cover the ambulant over 80s. This will not include the housebound or patients living in care homes. As per the DES, it was highlighted that payment will be for each vaccine given and not for completion of the full course.

Patients are likely to be contacted through a national template letter with additional local information.

A Vision template for recording the vaccine is ready and an EMIS one should be soon. It may require initial paper recording of vaccines given to practice staff. GP practices will be asked to make refrigerators available for community staff vaccinating the housebound. It is expected PPE will be ordered through PECOS, and reporting arrangements are awaited.

LY and JC talked about training issues.

There will be a national PGD for nurses which must be signed in advance. Healthcare Support Workers will be available to give the vaccine but will require additional training as this vaccine requires to be drawn up. JC informed the meeting that she will be organising specific training for HSWs in early January and this will be available for practice employed staff.

The Green Book chapter 14a on Covid-19 is still currently draft but is available and likely to be updated imminently following the MHRA announcement. The importance of all vaccinators having sight of this chapter was highlighted.

(https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/939119/Greenbook_chapter_14a_provisional_guidance_subject_to_MHRA_approval_of_vaccine_supply.pdf)

There will also be three national webinars hosted by Public Health Scotland with expert speakers. These aim to support registered healthcare practitioners to safely administer the Covid-19 vaccine with confidence and will occur on Friday 4th December at 12.30 till 2pm and Monday 7th at 12.30 till 2pm and also at 6-7.30pm. Details about how to book on to these webinars was sent to all practices earlier today. Although they will focus on the Pfizer vaccine and the plans for staff clinics there is expected to be useful information regarding the wider programme. Colleagues were encouraged to submit questions in advance of the webinars.

SB discussed some of the practicalities of the vaccine supply chain and the differences between the Pfizer and AstraZeneca vaccines.

The Pfizer vaccine must be stored between -60 and -80. There are 3 cryo-freezers in Lothian and once out of them it must be kept between 2 and 8 degrees. Onward movement must be minimised (perhaps just one further journey due to the potential effect on vaccine efficacy). The packs will contain approx. 1000 doses and can't easily be broken up. The vials are multidose and need reconstituted. Once out of the fridge the vaccine has 2 hours until expiry (6 hours once diluted, but at that stage can't be moved further, the patient has to come to the vaccine). It is very unlikely that the Pfizer vaccine will be used in practices.

The AZ vaccine (subject to MHRA approval) can be kept at 2-8 degrees and has a 6 week expiry. It has a 6 hour window once drawn up. There will be 10 vials per pack and 8-10 doses per vial (depending on manufacture site). Reconstitution is not needed, it comes pre-diluted, it just needs drawn up. It is possible that practices will receive direct delivery similar to the current flu arrangements.

LW addressed issues and questions about the vaccine itself

LW has produced FAQs based on the green book chapter and these will be added to the intranet. It is expected that these will grow and change. The MHRA publication on its decision regarding the Pfizer vaccine was also commended as a useful source of information

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/940565/Information_for_Healthcare_Professionals_on_Pfizer_BioNTech_COVID-19_vaccine.pdf

There was a “quick fire” session, summarised below. It was again highlighted that some information is subject to change, therefore colleagues are strongly recommended to reference the updated and evolving Green book chapter.

- Is it a live vaccine? The Pfizer one isn't, the AZ one has a live base but is non-replicating.
- What's the schedule? Pfizer 1 & 21 days and AZ 1 & 28 days, but Green book likely to recommend both at 28 days for clearer messaging.
- What if someone can't make the repeat dose at 28 days? Giving later not thought to matter, no need to restart the process.
- What if someone has had Covid infection already? Green book advises should still get (unless within 4 weeks of positive test) and no increased risk of reactions.
- If someone is immunosuppressed? No contraindications, indeed desirable to get given risk of infection and illness.
- Pregnancy? Not recommended as not fully tested (Pfizer recommend delay pregnancy for 2 months after 2nd dose. They also recommend delaying vaccination if breastfeeding).
- Flu vaccine gap? 7 days (mainly to avoid any confusion about side effects).

Does it need repeated in 6 months? We don't know yet, hopefully not but studies are ongoing.

The main reported side effect is pain at the injection site, 1:100 may get lymphadenopathy. The trials suggest will be very efficacious and are based on tens of thousands of volunteers, but evidence is accumulating and as rolled out this will continue. The importance of 'yellow carding' was emphasised.

PW touched on the wider delivery of the vaccine.

Staff vaccination will be at 15 centres. The main centres will be open 10 hours per day for 7 days/week and will have over 120 vaccinators at any one time. There will also be staff needed for observations afterwards and First Aid etc. Huge numbers of additional staff vaccinators are needed and they are asking for support from multiple groups across primary and secondary care, medical and nursing students and retired colleagues. GP Colleagues who feel they have capacity to help can contact covidWFvac@nhslothian.scot.nhs.uk to volunteer. It was emphasised that colleagues will be drawn from across the system for this massive exercise and the already great response was commended.

It was recognised that colleagues and practices are all under considerable pressure at the moment, but it was hoped that the start of the vaccination programme can help to move us on from the pandemic.