



## 1. Purpose of Report

- 1.1. The purpose of the report is to outline the staffing requirements to deliver the Covid 19 vaccination programme until the end of July 2021.

## 2. Background

- 2.1 The immunization programme for COVID 19 in Scotland was introduced in December 2020. JCVI have set out the prioritization categories for vaccination. The First Minister has pledged that the programme will deliver first dose vaccinations for JCVI category one to nine by mid-April 2021 and for category ten by the end of July 2021. For NHS Lanarkshire this equates to approximately 1,000,000 vaccinations. There is currently no nationally available data on the plans for COVID vaccination past category ten vaccination by July 2021. More information is expected in the coming weeks/months on recall, boosters and vaccination of those under the age of 16 years.
- 2.2 The planning for the programme has been delivered at pace with initial staffing projections offered in November 2020 to allow for commencement of recruitment of in excess of 1000 staff. Further papers have been brought to gold command for approval on specific aspects of the programme, as understanding of operational need has arisen. There have been many challenges in planning the programme delivery and determining the workforce requirement. This has included determining the model for vaccine delivery, national vaccine supply, GP opt in/out of over 80's vaccine delivery, implementing new clinical roles, sessional staffing and delivering a vaccine programme at a scale that is unprecedented.
- 2.3 The vaccine delivery manual was developed nationally that set out a new way to administer Covid vaccinations and outlined how to set up vaccine centres. The health care support worker vaccinator role was agreed nationally. This was developed in conjunction with changes in legislation to allow the introduction of a national protocol for Covid vaccination administration by registrant and non-registrant. The workforce delivering the vaccinations for the most part are new to vaccinations and many are new to working in a clinical setting.

## 3. Current Service Delivery

- 3.1 When the Covid vaccination team was established in January 2021 there was agreement to transfer the vaccination transformation programme (VTP) nursing staff from primary care improvement plan (PCIP) in the short term to provide a core vaccination workforce. This equates to 58.8wte nurses however there were 17wte vacancies within the team. Interviews for these posts have now concluded with staff taking up post in the coming weeks. There were no other substantive staff transferred to the team. All other staff with the exception of band 5 nursing staff have been recruited since December 2020 on a fixed term basis until December 2021 or are working sessionally to support vaccine delivery.
- 3.2 Initially vaccinations were delivered in 9 main locality hubs and with satellite locations ran in up to 22 different locations. This presented several challenges with being able to deliver the vaccine at the increase paced we would endeavour to moving forward and with clinical risk of safely staffing this number of sites. From the week commencing

Monday 8<sup>th</sup> March 2021 vaccination delivery is primarily being offered via two super centres in NHS Lanarkshire with local hubs offering vaccination to patients who are unable to travel to the super centres. The centers are set up to offer 36 lanes at Ravenscraig and 20 lanes at Alistair McCoist Centre. Both centres are open seven days a week from 8am-8pm. There are two rotational local centres open each day from Thursday to Sunday each week each offer 4 lanes and running from 9am-5pm. With the required staffing this would offer a capacity of 56,368 vaccines per week. There will however be points in the vaccination campaign for example the second dose for people aged over 80 years of age that will require short term stand up of more local centres.

#### **4. Staff deployment**

- 4.1 This is a very new team with the majority of staff in new roles, new to the NHS or taking on promoted posts for the first time. This led to an increased support in senior clinical leadership being required to maintain clinical safety, whilst recruitment progressed and staff quickly orientated to their roles. The senior professional nursing team in both HSCP worked clinically to support stand up of clinics in the initial weeks through February 2021.
- 4.2 A whole system response was required with staff deployment from across the organisation to safely maintain vaccination delivery for a period of three weeks from mid-February 2021. Whilst this was predominantly clinical staff, support continues to be required from an Operational Service Manager and Clinic Administrators that remain redeployed. Staffing support was also given to the administration team within the staff bank.
- 4.3 The care home team have delivered the vaccination within the care home setting with all staff and residents now having been offered two vaccines. There will be an ongoing programme for anyone that was not present when sessions occurred within care homes and for new residents but this is on a much smaller scale and will not require a significant staffing resource.
- 4.4 A roving team have been established to offer vaccination within the acute setting for any patients meeting the criteria for Covid vaccination. This work is being led by Lise Axeford with a small nursing resource of under 2.7wte staff supporting daily vaccination. Numbers of inpatients eligible for vaccination, i.e. not in an acute phase of illness, are small but the service continues to be provided as required.

#### **5. Staff bank and sessional staffing**

- 5.1 The volume of staff recruited for this programme, at the pace required has been incredibly challenging and an amazing achievement for all staff involved. This has included areas redirecting several staff members to focus solely on this recruitment and induction including, HR team, nursing staff, payroll and practice development. Recruitment colleagues have now brought in nearly 300wte fixed term staff for vaccination in the last 12 weeks in addition to further recruitment for the staff bank and sessional staff such as dentistry, optometrists and pharmacist. In total this equates to approximately 1,000 staff.
- 5.2 The high number of bank and sessional staff helps to augment the core workforce however there are risks associated with the heavy reliance levels currently placed in

this area. Staff are predominantly either exiting NHS Lanarkshire staff who are working additional hours, students or sessional practitioners that need to fit immunisation delivery around other clinical commitments. The sessional staff are also likely to rapidly decrease the support they can offer as services such as dentistry and optometry recover.

## **6. Wider staff support**

- 6.1 The operationalisation of the covid vaccination clinics has been reliant on support from across the organisation. This has included extensive onsite support from e-health staff support in clinics, on a daily basis, to resolve any access issues, being invaluable. As the clinical and administrative staff working in clinics is becoming more consistent this requirement is changing. The support from Referral Management Service to assist with scheduling of clinics is ongoing. As agreed at the e-health Executive Group an SBAR will be prepared to highlight the workforce needs within e-health
- 6.2 Facilities support from North and South Lanarkshire Council(s) will continue to be required to support the 2 super centres and 7 locality sites, this staffing will be flexible and will stand up and down as required. The Planning and Development Team Manager will continue to lead the logistics requirements for the programme liaising with senior Local Authority and NHS Lanarkshire staff to ensure logistical support is in place for the wider vaccination programme.
- 6.3 Pharmacy also play a vital role in assuring supplies of vaccine and that the handling, transport and storage systems all fulfil the strict and complex legal and cold chain requirements. Additional Pharmacy technician time, 0.5wte and Assistant Technical time has previously been agreed.

## **7. Senior staffing and on call arrangements**

- 7.1 The Covid vaccination team currently is hosted within the command structure rather than within Acute, North or South Health & Social Care Partnership (HSCP). It has therefore had to establish a separate on call system for the service as it is operational seven days per week from 8am-8pm. The on call commitment is currently offered by the Associate Medical Director in North HSCP, the Nurse Director in South HSCP and a Service Manager. The Associate Medical Director and Nurse Director were not previously part of any on call arrangements. Longer term plans for on call arrangements until the end of July 2021 need to be developed.

## 7.2 Staffing Model

7.2.1 The table below outlines the workforce requirements to meet the revised model of vaccination delivery until the end of July 2021. This is based on a capacity of 56,000 vaccines per week and operating at the 2 supercenters with roving satellites daily. This includes staff that have previously been authorised, are in the process of being recruited.

Role	Staffing required	Funding stream	Previously agreed by gold (Y/N)	Permanent posts/FT to Dec 21	Currently in post	Pre-employment checks	With recruitment at advert or interview	Further post requiring authorisation	Notes
<b>Service Manager</b>	1.0	Covid	Y	FT	1.0	0	0	No	
<b>Team Leader</b>	7.0	Covid	Y	FT	6.0	1.0	0	No	
<b>Charge Nurse</b>	18.7	Covid	Y	FT	0	8.6	4.0	Yes - 6.1wte	12.6wte previously authorised
<b>Assessor</b>	87.5	58.8 PCIP	N/A	58.8 Perm	41.2	17.6	7.6	No	Gold agreed perm backfill VTP nurses seconded to CN posts
<b>Registrant Housebound</b>	16.7	Covid	Y	permanent	0	0	16.7	No	interviews scheduled for week commencing 22/03/21
<b>vaccinators</b>	162.0	Covid	Y	FT	157.5	0	0	No	Bank available to support any gaps
<b>HCSW</b>	54.9	Covid	N	FT	10.5	0	0	Yes – 35wte	Utilising bank staff
<b>Admin (check in)</b>	109.7	Covid	Y	FT	93.56	25 (headcount)	0	No	
<b>Admin support SM/housebound/rostering</b>	6.6	Covid	Y	FT	0	0	6.6	No	
<b>Operational Service Manager</b>	1.0	Covid	N	FT	0	0	0	Yes 1.0wte	New post for authorisation
<b>Centre Administrator</b>	5.0	Covid	N	FT	0	0	0	Yes 5.0wte	New post for authorisation

7.2.2 The significant staffing gap detailed above is in the assessor role. The permanent workforce in this group are staff nurses from the Vaccine Transformation Programme. All other staff are sessional staff primarily comprised of staff that are on the staff bank, dental and optometry staff. In total the staff bank have 457 staff available to fulfil any requests. There is however a gap of 28.7wte staff giving a vacancy rate of 33%. There is a balance of risk in the recruitment of the assessor role. Further recruitment to fill the 33% vacancy level has the potential to destabilise other areas of the nursing workforce within NHS Lanarkshire. If, however, as proposed, we carryout no further recruitment and utilise sessional staffing, which is currently readily available, there is the risk as independent contractor services such as dental and optometry recommence that there will be workforce challenges that may impact the rate of vaccine delivery. Measures are in place to mitigate this risk.

## **8. Employee Implications**

8.1 As previously noted this is a largely new team working within a service that is operating at pace. Team Leaders are newly appointed and beginning to orientate to their teams and build relationships with staff. Practice Development have offered significant support and continue to attend the super centres to ensure training needs are met for all staff. Safety briefs at every shift change and de-briefs are also in operation to ensure staff have up to date information, can ask questions and learning is promptly shared.

## **9. Financial Implications**

9.1 The financial implications of the model, covering the period to the end of July 2021, have been captured as part of our Covid tracking, which is reported to Scottish Government for reimbursement. South and North Lanarkshire Council staff that are supporting the programme are not factor in to these costs. Other wider support services as mentioned above e.g. e-health and recruitment continually review their own workforce requirements.

## **10. Equality Impact Assessment and Consultation Arrangements**

10.1 An overarching EQIA is being completed for Covid vaccination by Karen McGuigan in Public Health