**Wastage**

Q - Is there any other way for packing Covid vacs as if you need 5 then 45 are being wasted?

A - Unfortunately not - PHA have fed back to UKHSA (who procure the covid vaccine) about both the pack size and the size of the vials as a pre-filled syringe (similar to flu) would be much easier. We fully understand that these pack sizes lead to waste but would rather see the vaccines being used for a patient who requests it, so do get in touch if you need more

Q – 30% wastage is mentioned, is that for GPs or all providers?

A - Waste is combined but between the providers it is comparable.

We did see IIVc waste increase last year but this was likely due to increased demand/press coverage due to the earlier flu season.

**VMS**

Q - There still seems to be some blind spots in terms of VMS training/awareness amongst Trust treatment room teams who may be giving vaccs on behalf of practices - worth cascading to Trust teams to identify staff still to get on board/get logins etc?

A – At upcoming meetings re the autumn campaign we will mention that all new VMS user requests should be raised as soon as possible, share a reminder that training material is available through FAQs and Guidance and offer support for any other gaps.

Q - there are patients who have had vaccines - eg shingles but come up in searches - when checked the vaccine is labelled as DEGRADE - how do we sort this?

A – This is a known issue with a workaround in place but please share patient, vaccination details (date & vaccine) and, if possible, a screen shot of the DEGRADE label via VMSRequests@hscni.net and we will review this case before confirming next steps.

**VMS Clinic mode**

Q - The difficulty with the clinic mode and hence why may not be used is because you have no idea if patients are going to have flu/COVID or both

Plus different arms used - too many combinations - flu right arm, flu left arm, flu right arm and covid left arm, flu left arm covid right arm etc etc etc

If you go in and change the arm (if pt prefers right) it doesn't default back to left arm - nightmare to then go and fix

A – Thank you for this feedback and I can understand the challenge as using the co-admin option in clinic mode assumes you need to record for both covid and flu. If you are recording on clinic mode after the clinic has happened, you could set up flu only, covid only and co-admin clinics and add the patients to the relevant clinic in line with the vaccinations received. Or if you are recording as you vaccinate, you could have the three clinics set up and then add patients individually to the relevant clinic as you administer.

With respect to recording the site of vaccine, co-admin clinic mode allows you to select a site for Covid and a site for Flu and then you have the option to edit these (using the Edit Completed Record button) for individual patients if they don't have the vaccines in the predefined sites.

If you change the selection of site of vaccine within the clinic set up, it will stay at the value selected unless you change it again. The better way to manage changes for patients who have the vaccine in a different site is to select the most common site within the clinic set up, record the vaccination and then use the Edit Completed Record button to access the vaccination details recorded and correct the site for specific patients as needed.

Q - Any way of uploading a "clinic" via an Excel list of patients? That can be grabbed from EMIS?

A- Unfortunately this is not possible and could create data integrity issues if external data is input to VMS.

**Consent**

Q - Do we need patients written consent before we give vaccine

A- No, you should seek and record consent, but it can be given orally. Some useful information in DoH guidance and The green Book

Consent guides for healthcare professionals | Department of Health

Consent: the green book, chapter 2 - GOV.UK

**HCAs**

Q - Are HCA's allowed to vaccinate?

A – HCAs are not registered healthcare professionals. They cannot work under a PGD, but with appropriate training and supervision are able to prepare and administer flu and covid vaccines under VGD. They are not able to make clinical assessment or obtain consent. More detail is contained in the VGD

PGDs/VGDs – Primary Care Intranet