

## **Sessional Vaccinator Request Process for GP Practices and Community Pharmacies – Autumn 2024 issued by PHA**

- 1 This is a supplementary support service for the administration of the COVID-19 Vaccination Programme
- 2 Practices/pharmacies must always have a clinical lead supervising delivery of the service
- 3 Practices/pharmacies should make their request, using the form below, as early as possible to allow the team to allocate vaccinator/s
- 4 Practices/pharmacies should be aware that we may not be able to facilitate every request but will make every effort to allocate a vaccinator to the requested session
- 5 Please provide an 'on the day' contact number which we can pass on to our vaccinators should they need to contact you directly in an emergency or at short notice
- 6 Practices/pharmacies should allow for sufficient induction time prior to the start of the clinic. Induction should cover local policies, processes, site layout and any other issues practices/pharmacies deem appropriate. Please request your vaccinator/s based on clinic times and we will ask them to attend at least 30 minutes prior to clinic start time for induction/setup.
- 7 Practices/pharmacies should provide PPE to vaccinators in line with regional guidance
- 8 If an unexpected need arises e.g. a vaccinator being unwell, you can still make contact and we will try to assist
- 9 PHA will be unable to allocate any vaccinators until the Practice Agreement is signed and returned
- 10 Please do not make local agreements with vaccinators – all vaccinator requests should be made on the attached form directly to the allocation team who will then seek to identify vaccinators for your clinic. We will try to allocate the same vaccinator where possible
- 11 When we receive your request, we will acknowledge it, add it to our database and begin the process to allocate vaccinators. Once a vaccinator is allocated, a further email will be sent detailing the name of the vaccinator and your request – this will be copied to the vaccinator. Vaccinators are allocated on a week by week basis so you may receive confirmations at different times.
- 12 Please plan your clinic/s so that the sessional vaccinator/s have adequate breaks, our payment system will assume breaks are taken and as these are unpaid, will deduct time (if the session runs over 6 hours, it will be assumed that vaccinators have taken a break of at least 30 minutes, as required by law, and this time will be deducted from the overall session for payment purposes)

If you have any queries, please do not hesitate to contact us via email at

[PHAVaccinesitrep@hscni.net](mailto:PHAVaccinesitrep@hscni.net)

Or by telephone

Delia Devlin      07436 042664

Deirdre Ward     07826 885305

## PHA Sessional Vaccinator Request Form

<b>Practice Number</b> e.g. (Z00123) or <b>Pharmacy Contractor number:</b>	
<b>Name:</b> GP Practice / Community Pharmacy	
<b>Contact</b> Practice Manager / Lead Pharmacist	
<b>Direct dial telephone number</b>	
<b>'On the day telephone number'</b> if different	
<b>Vaccination clinic location,</b> including postcode	
<b>Date/s of vaccination clinic/s</b>	
<b>Vaccination clinic hours</b> (we will ask vaccinator to attend 30 mins prior to start time)	
<b>Number of patients</b> planned per clinic	
<b>Number of practice/pharmacy vaccinators at session</b>	
<b>Number of PHA sessional vaccinators requested</b>	
<b>Is this clinic in an outside venue</b> (do vaccinators need to bring warm/outdoor clothing) Yes/No	

Please return the completed form to [PHAVaccinesitrep@hscni.net](mailto:PHAVaccinesitrep@hscni.net)