

Primary Care Directorate
General Practice Division



Addresses

For Action

Chief Executives NHS Boards
Chief Officers for Health and Social Care Partnerships
GP Practices
NHS National Services Scotland

For information

Scottish General Practitioners Committee
Primary Care Leads NHS Boards

Policy Enquiries to:

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26 November 2020

Dear colleague

COVID-19 VACCINATION DIRECTED ENHANCED SERVICE

Summary

1. This Circular provides guidance to NHS Boards and GP Practices on the COVID-19 Vaccination Directed Enhanced Service (DES).
2. This circular also gives Directions to Health Boards on behalf of Scottish Ministers detailing the payment arrangements (**Annex A**), which must be made under the DES to participating practices and arrangements for practices not participating in the DES.
3. The DES and the payment arrangements have been agreed with BMA Scottish GP Committee (SGPC). While GPs will participate on a DES basis, SGPC has agreed that GPs will not have "first refusal" of this work and Health Boards should make arrangements that best suit delivery of the COVID-19 Vaccination Programme. Practices continue to have the right to decline to participate in the DES where it is offered to them. Local arrangements should be sufficiently flexible to maximise the numbers of practices that are able to participate.
4. The [Primary Medical Services \(Directed Enhanced Services\) \(Scotland\) Directions 2018](#) will be amended to include the COVID-19 Vaccination Programme. Directions to that effect will be issued shortly. The target groups will be detailed in the upcoming CMO letter. The CMO letter will also contain clinical arrangements for the COVID-19 Vaccination Programme.

Background

5. **This circular provides details of the 2020-21 COVID-19 Vaccination Programme.** Contractual arrangements apply from the formal launch of the programme.

6. Scottish Government is cognizant that the need to maintain good infection prevention & control practices and appropriate physical distancing measures will substantially constrain the capacity of general practice to participate in this programme. As such GP practices will not be the default delivery channel for COVID-19 Vaccination.
7. GP practices are asked to support the programme by providing vaccinations by agreement, providing and updated data and making their refrigeration facilities available for vaccine storage. The arrangements below apply where GP practices deliver vaccinations directly and where practices provide and update data. GP partners and staff may also be asked to undertake vaccination sessions by their Health Boards: arrangements for these will be made separately. These arrangements will be set locally and rates will need to be sensitive to local circumstances and local arrangements for the delivery of the programme.

Practice Vaccinations

8. Health Boards should determine how many vaccinations are sought from their GP practices by reference to their local needs, consulting their Local Medical Committees (LMCs) and GP Sub-committees as appropriate. Health Boards should then reach agreement with participating practices regarding the number of Vaccinations sought from each practice. Health Boards may also agree which cohorts of patients will be targeted by practices.

Timing

9. Contractors are required to deliver vaccinations in timescales to be agreed with their Health Boards. Practices are asked to prioritise early vaccination to maximise the timely immuno-protection of eligible individuals.

Reporting arrangements

10. Apart from monitoring uptake for payment purposes, it is important to provide timely data in the interest of patient safety, particularly in situations where vaccinations will be offered in more than one setting. Health Boards will require all necessary data from practices to support the delivery of the programme. In addition practices need to enter the vaccination data timeously in an electronic record and assist in monitoring uptake. This may include vaccination data delivered through alternative Health Board organised clinics (digital solutions are under development to minimize this requirement). This will be a contractual requirement for all practices regardless of whether individual practices will provide vaccinations, and should be provided timeously to ensure data on uptake rates is up to date and has been agreed with SGPC. **Annex B** provides more details on data entry.
11. Health Boards and contractors are reminded of their need to comply with data protection requirements at all times.

Facilities

12. Health Boards might need to make infrequent use of the pharmaceutical refrigerators, designed for the purpose of storing vaccines or medicines, maintained by GP practices to support the COVID-19 Vaccination programme. Health Boards should provide as much advance notice as they can of their intention to use a GP practice's refrigeration facilities.

Claims for Payments

13. Practitioner Services Division will provide separate guidance regarding claims including claim forms.
14. Any necessary variation for local circumstances, outwith the arrangements under the national programme, should be agreed between NHS Boards and local LMCs.

Action

15. NHS Boards are requested to action this guidance and ensure that their primary medical services contractors are aware of it.

Enquiries

16. In the instance of any enquiries on this circular please contact Michael Taylor.

Yours sincerely

A handwritten signature in black ink that reads "Naureen" followed by a stylized circular flourish.

Naureen Ahmad

Deputy Director and Head of General Practice Division

Payment Arrangements – Directions to Health Boards

The Scottish Ministers give the following Directions to Health Boards.

1. Contractors who have entered into an arrangement with a Health Board as part of that Health Board's COVID-19 Vaccination Programme will be reimbursed in accordance with the paragraph below.
2. Payments applicable to GP contractors are set out below.
 - a flat rate of £12.58 will be paid per dose totalling £25.16 per course. It is not necessary for a practice to provide both doses of a course to receive payment.
3. All contractors whether or not they have entered into an agreement with a Health Board as part of that Health Board's COVID-19 Vaccination Programme will be paid £40 for every hundred patient records **updated by the practice for vaccinations not carried out by the practice**. This should be rounded to the nearest hundred patient records.

Payment Verification

4. Prior to issuing payments in accordance with the above, Health Boards must require contractors who have entered into an arrangement with a Health Board's COVID-19 Vaccination Programme in terms of the DES Directions 2018 as amended to sign a declaration to confirm that they are meeting the requirements of the DES Directions 2018.

Template for GP IT systems

Following a successful clinical safety risk assessment the template below will be built for EMIS and Vision and should be in place for the beginning of the programme.

Vaccination data to be entered by GP practice:

Data Item	Example	Possible Values	Coding/Value Set
Vaccination course	404684003 (COVID19)		https://www.snomed.org/snomed-ct
Dose Number	1		
Date of Vaccination	10/10/2013		
Product Name	AZD1222		
Batch Number	Batch-12345		
Site	LUA		https://terminology.hl7.org/2.0.0/CodeSystem-v3-ActSite.html
Method	IM		https://terminology.hl7.org/2.0.0/CodeSystem-v3-RouteOfAdministration.html
Reason not suitable		"Did not Attend" or "Generally unwell" or "Vaccination contraindicated" or "Vaccination consent not given"	https://www.snomed.org/snomed-ct

Reason Not Given		"Patient Refused" or "Other"	
Other Reason Not Given	"Free Text"		

The following information is already captured by each GP IT system per patient encounter and should also be entered:

Data Item	Example
CHI Number	1231231231
Firstname	John
Lastname	Doe
Date of Birth	12/03/1968
Sex	Male
Address	2 Sunny Lane Edinburgh, EH15QW
Phone Number	07712345678
GP Practice Code	"GP Practice Code"
GP	"GMC Code"
HealthBoard	NHS Lothian