

NHS Highland Community Pharmacy
Vaccination Services
Service Level Agreement
September 2026

Version History

Version	Date	Comments
1.0	September 2025	First version of “Umbrella” Service Level Agreement for NHS Highland Vaccination Services
2.0	September 2026	Updated SLA – fee structures updated, training updated, travel health patient consent form updated

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1.Vaccination Services Description and Background

- 1.1. This Service Level Agreement (SLA) covers the following vaccination programmes:
- NHS Highland Influenza Vaccination Service (Highland HSCP contractors only)
 - NHS Highland Covid-19 Vaccination Service (Highland HSCP contractors only)
 - NHS Highland Travel Health Service (Highland HSCP and Argyll & Bute HSCP)
- 1.2. This Service Level Agreement (SLA) acts as a contract between NHS Highland and the pharmacy contractor and commits the contractor to provide the selected vaccination service(s) as defined by, and using the appropriate documents provided in, the current version of the North of Scotland (NoS) Patient Group Directions (PGD).
- 1.3. The Contractor will select the vaccination service(s) to be provided at the premises using the Contract Agreement Form for the appropriate Health and Social Care Partnership (HSCP) (see appendices 1 and 2).
- 1.4. The most up to date version of the PGD for each relevant vaccine must be read in conjunction with this SLA. Services will be provided within the legal and ethical framework of pharmacy. Up to date versions of the NoS PGDs are held on the NHS Highland intranet ([link](#)) and NHS Highland Community Pharmacy website ([link](#)).

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2. Service Outline and Standard for Service Delivery from the Contracted Premises

- 2.1. This SLA is effective from 1st April 2026.
- 2.2. The Contractor delivering the vaccination services must have signed up to this SLA, indicating the services to be undertaken and return the Contract Agreement Form (see appendices 1 and 2) to nhsh.cpsoffice@nhs.scot
- 2.3. The notice period for changes to the provision of services under this SLA shall be **3 months** in writing by either party OR immediately if in breach of regulations pertaining to the Agreement.
- 2.4. Every Healthcare Professional involved in the delivery of any of the vaccination services must have read this SLA, signed and agreed to act in accordance with the relevant PGDs, completed training as per the Contract Agreement Form and be professionally competent to deliver the service.
- 2.5. The Healthcare Professional is required to assess patient eligibility for the NHS Highland Vaccinations Services in accordance with national and local guidance, available in the relevant PGD and in the TURAS Vaccination Management Tool (VMT). Vaccinations offered under these services are provided in line with Immunisation against infectious disease (The Green Book) ([link](#)) and the NoS PGDs, which outlines all relevant details on the background, dosage, timings and administration of the vaccination, and disposal of sharps waste.
- 2.6. The Healthcare Professional administering the vaccine will be responsible for the provision of immunisation advice (both written and verbal) to the patient and/or parent/guardian if for a child. Each patient being administered a vaccine should be given a copy of the manufacturer's patient information leaflet about the vaccine.
- 2.7. **Vaccinations to patients who are school age or recent school leavers:**
Prior to administering vaccines to patients in secondary school, including recent school leavers, it is advisable to contact the Child Health School Team within the Child Health Department to confirm the patient's vaccination history. Records of vaccinations given during secondary school are held by this team and are routinely shared with GP practices; however, these updates are not always reflected in GP IT systems. Vaccines typically administered during secondary school include Influenza, HPV, Diphtheria/Tetanus/Polio (DTP), and MenACWY.
Any **DTP** vaccines given to this age group by community pharmacy should be communicated to the Child Health School Team via email to support appropriate scheduling and reduce the risk of duplication. For urgent queries where a quick response is required, the team can be contacted by telephone on **01463 701314**.

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Alternatively, they can be reached by email at chsp.school@nhs.scot, although responses via email may take longer than by telephone.

2.8. The Healthcare Professional will be responsible for referring eligible patients who are excluded from treatment under the PGDs to other immunisation providers.

Excluded patients can be referred to the Health Protection Team (HPT) by email (hpt.highland@nhs.scot) or telephone number 01463 704886.

2.9. The Level 4 Service Pathway should be used to refer eligible patients who are high risk or excluded under the NoS PGDs and accessing the NHS Highland Travel Health Service (Service 3c – Level 4 Service Pathway).

2.10. The Contractor will maintain accurate patient clinical records of the episodes of care (where applicable):

- For adults aged 18 yrs and over: retain records for 8 yrs.
- For a child: retain records until the 25th birthday or 26th birthday if the patient was 17 yrs when treatment finished

2.11. The Contractor will be responsible for the provision of a user-friendly, client-centred, safe, non-judgemental, and confidential service.

2.12. The Contractor providing the service will ensure that the premises used for immunisation meet the GPhC standards (Section 4).

2.13. Each patient will be required to confirm consent before being administered a vaccine.

Contractors must use the consent statements set out in the Vaccination Management Tool (VMT) ([link](#)) to obtain the patient's consent. The consent covers the administration of the vaccine. The patient must be notified that details of the vaccination will be shared with the GP Practice, NHS Highland and third-party data handlers (National Services Scotland, Public Health Scotland). This notifies the patient of the information flows that may take place as necessary for the appropriate recording in the patient's GP practice record and for the purpose of post payment verification by NHS Highland.

2.14. The Contractor, or member of staff administering the vaccine, will use the online TURAS Vaccination Management Tool (VMT) ([link](#)), which will be made available by NHS Highland for this purpose where required, to capture data on the vaccination of each person. Access to this tool can be requested via the CPS office nhsh.cpsoffice@nhs.scot

2.15. If the VMT is temporarily unavailable at the time of vaccination, the VMT standard offline form ([link](#)) should be completed. The information must then be transferred to the online VMT as soon as available by a member of the Pharmacy team.

2.16. The Contractor will display material within the premises advertising the service.

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2.17. The Contractor must have a standard operating procedure (SOP) in place for this service, which includes procedures to ensure cold chain integrity. All vaccines are to be stored in accordance with the manufacturer's instructions and all refrigerators in which vaccines are stored are required to have a maximum / minimum thermometer. Maximum / minimum and actual temperature readings are to be taken and recorded from the thermometer on all working days

2.18. The Public Health Scotland (PHS) Guidance for Vaccine Storage and Handling must be followed ([link](#)). The vaccines must not be used after the expiry date shown on the product. Further information can be found in the NHS Highland Cold Chain Policy ([link](#)).

2.19. The service provider will ensure that appropriate staffing arrangements are in place for the operation of this service.

The Health and Care (Staffing) (Scotland) Act 2019 ("the Act") places requirements on the Health Board stating that:

"In planning and securing the provision of health care from another person under a contract agreement must have regard to:

a) The guiding principles for health and care staffing, and

b) The need for the person from whom the provision of health care is to be secured to have appropriate staffing arrangements in place"

2.20. Contractors providing an NHS immunisation service must also ensure that they have:

- Additional trained staff who can identify, support and take first steps in the event of an adverse event.
- Have indemnity cover for staff involved in the service delivery.

2.21. Facilities must be available to ensure appropriate hygiene levels are maintained throughout service delivery including the use of recommended PPE.

2.22. The Contractor must maintain appropriate records to ensure effective ongoing service delivery and post payment verification. Section 7 details the required records that must be kept as part of provision of the service.

2.23. Where a patient presents with an adverse drug reaction following the initial vaccination and the Vaccinator believes this is of clinical significance, such that the patient's GP practice should be informed, this information should be recorded and shared with the GP practice as soon as possible by contacting the practice directly. Adverse events should be reported to the Commission on Human Medicines via the yellow card scheme.

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- 2.24. Contractors are required to record and report any patient safety incidents. Any incidents should be reported to nhsh.cpsoffice@nhs.scot .
- 2.25. Contractors are required to comply with arrangements that will be in place for the removal and safe disposal of any sharps waste generated in the provision of this service. Further information is available from nhsh.cpsoffice@nhs.scot .
- 2.26. Any questions or comments regarding any aspect of the service from Contractors can be sent to nhsh.cpsoffice@nhs.scot .
- 2.27. Any patient comments/ complaints should be directed to the Patient Relations Team nhshighland.feedback@nhs.scot .
- 2.28. A process to gather patient feedback on NHS Highland vaccination services should be available. An MS Form titled Community Pharmacy Services – Vaccination Services is available for patients to complete and provide feedback on NHS Highland vaccination services (Appendix 3).

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3. Service Availability

- 3.1. The Contractor should seek to ensure that the service is available to be booked throughout the pharmacy's contracted opening hours as far as possible.
- 3.2. Vaccination clinics may be scheduled at the discretion of the Contractor but should not impede the normal core business of the pharmacy.
- 3.3. The Contractor should ensure that locums or relief pharmacists are adequately trained, to ensure continuity of service provision as far as possible offering a variety of appointment options.
- 3.4. If the pharmacy cannot offer the service at any given time the pharmacy staff should signpost patients appropriately to either a different time and/or date to re-present or to an alternative participating nearby contractor.
- 3.5. The Contractor must ensure the service is accessible, appropriate and sensitive to the needs of all service users. No eligible patient shall be excluded or experience particular difficulty in accessing and effectively using this service due to their race, gender, disability, sexual orientation, religion or belief, gender reassignment, marriage or civil partnership status.
- 3.6. Off-site provision of these vaccination services is out with the scope of these services and is not covered by this SLA.

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4. Premise Requirements

- 4.1. Community Pharmacy Contractors providing an NHS Highland Immunisation service must have a private, enclosed clinical area suitable for vaccine administration within the community pharmacy, external to the dispensary area, which complies with GPhC standards.
- 4.2. Vaccinations under these services must only be carried out on the pharmacy premises.
- 4.3. Key requirements include:
- A private, clinical area is available
 - A pharmaceutical grade refrigerator is used to store vaccines
 - Hand cleaning facilities are available
 - Access to a clinical wash hand basin
 - Washable floors
 - Clinical workbench sufficient to prepare vaccine and layout ancillaries
 - Minimum floor area as specified by national/local criteria for clinical treatment room (sufficient to lay patient down in the event of an adverse event)
 - Minimum seating for two people in waiting area from other patients and staff.
 - Communication equipment – telephone, PC/tablet, WIFI, TURAS VMT access
 - Sharps waste disposal
 - Safe storage of documentation
- 4.4. Adrenaline injection for the management of anaphylaxis must be available
- 4.5. The Contractor will ensure that all vaccines are stored in line with both national and NHS Highland policies for the safe storage and handling of vaccines and are stored securely. This includes:
- The Public Health Scotland Guidance for Vaccine Storage and Handling must be followed ([link](#)).
 - The NHS Highland Medicines Cold Chain Policy ([link](#)).
- 4.6. If a vaccine or cold chain incident occurs the Public Health Scotland (PHS) Vaccine Incident Guidance should be followed ([link](#)) and advice maybe sought from the Pharmacy Quality Assurance Team at Raigmore team by telephone 01463 704013 or email nhshighland.pharmacyqa@nhs.scot
- 4.7. All staff involved in the service must adhere to the Public Health Scotland guidance on personal protective equipment (PPE) and environmental cleaning procedures ([link](#)).

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- 4.8. The Contractor should ensure that they have reviewed the Service Specification and other associated documents.
- 4.9. The Contractor must ensure that staff are appropriately trained and made aware of the risks associated with the handling and disposal of sharps waste and that correct procedures are used to minimise those risks.
- 4.10. A needle stick injury SOP must be in place.
- 4.11. The Contractor must ensure that staff involved in the provision of this service are advised that they should consider being vaccinated against Hepatitis B and be advised of the risks should they decide not to be vaccinated. Vaccination for Hepatitis B can be provided through the NHS Highland Occupational Health Teams. Requests for this can be sent via email to nhsh.ohadmin@nhs.scot.
- 4.12. Vaccine sharps waste process must be included in an SOP and all relevant staff must be aware. Vaccine clinical waste from the service should be placed in sharps containers and can be uplifted by NHS Highland. These containers must be fully sealed and the information on the front of the container must be completed before they can be uplifted.
- 4.13. A national requirement from Public Health Scotland (PHS) states that NHS vaccine waste must be recorded and reported. The Contractor must ensure that vaccine waste resulting from the NHS Highland Influenza and Covid-19 vaccination services is recorded. In NHS Highland this data is captured by Healthcare Professionals using an MS Form ([link](#)) and then reported by NHS pharmacy colleagues to PHS.
- 4.14. A Vaccination Service Checklist available (Appendix 4).

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5. Training Requirements

- 5.1. The Contractor will ensure that all staff, including locums, involved in delivering the vaccination programme participate in appropriate immunisation training in accordance with agreed national standards. Contractors must ensure that those providing a vaccination service are competent to do so. Healthcare Professionals providing the service must be able to demonstrate to the Contractor that they have the necessary knowledge and skills to provide the service. The Contractor has a duty to ensure that all healthcare professionals and staff involved in the provision of the service are aware of and operate within the parameters of this SLA.
- 5.2. By signing the authorisation sheet for the NHS Highland and NoS PGDs the Healthcare Professional will be declaring their competence to provide the service. Signing the PGD whilst not meeting the required competence may constitute or be treated as a GPhC Fitness to Practice issue. Contractors must retain copies of each PGD completed by the Healthcare Professionals that they employ/engage to deliver the service on their premises. Contractors are asked to complete a Microsoft Form confirming that PGDs are signed and actioned. Microsoft Forms for each of the vaccination services are found here ([link](#)).
- 5.3. All Healthcare Professionals should maintain their skills, knowledge and their own professional level of competence in their area according to their individual Code of Professional Conduct. Training for all Healthcare Professionals, as authorised in the NoS PGDs, includes:
- The North of Scotland PGD module training on TURAS learn.
 - Basic life support training to be undertaken either face to face or online. NHS Highland recommends that BLS training is undertaken annually.
 - Immunisation training including adult and paediatric vaccination.
 - Anaphylaxis management with training undertaken annually.
 - If any training needs are identified these should be discussed with the Contractor.
 - See Appendix 5 for a list of training resources and further information is available

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6. General IT Provision

- 6.1. When a new Community Pharmacy team member undertaking Vaccinations requires access to the required IT systems, the Pharmacy Manager/Business lead is responsible for providing access to SWAN networked PCs and VMT for data recording and reporting and the Community Pharmacy Patient Management System for all staff involved in vaccination services in the Pharmacy.
- 6.2. Access to clinical systems. The Community Pharmacy is responsible for requesting user accounts and passwords in the systems 1,2,3,5,6 listed below. Some are under the direct control of the Pharmacy Manager, some will require the Pharmacy Manager to complete a CPAR1 Form to authorise NHS Highland Access Management to link the professional role to the registered Pharmacy and apply the appropriate security groups. The CPAR1 Form is the Pharmacy Manager authorisation process to add the professional to the correct Pharmacy security group within NHS Highland IT system, ensuring that the Pharmacy maintain the governance for system access.

Mandatory:

	IT system	Additional Costs
1	NHS SWAN NETWORK: Access request via CP AR1	X NHSH Funded
2	NHS Highland EMAIL system: Access request for 365 account (essential for access to the National Vaccination system VMT via the national TURAS system – CPAR1)	X NHSH Funded
3	NATIONAL VACCINATION MANAGEMENT RECORD: National VMT system account for new Community Pharmacy Vaccinators joiner/leavers via nhsh.cpsoffice@nhs.scot	X ScotGov Funded
4	COMMERCIAL COMMUNITY PHARMACY RECORD system (Proscript Connect/Pharmacy Manager/ Analyst/Columbus/RX Web/LS Pharmacy/Compass/PSA) – local system access in Pharmacy	X Pharmacy Funded
5	NATIONAL EMERGENCY CARE SUMMARY (ECS): Form CPAR1 to Access Management authorised by CP Services	X NHSH Funded
6	NORTH OF SCOTLAND CARE PORTAL: Access to view patient past vaccination history, hospital letters, GP medication and allergy summary and National Emergency Care Record – Form CPAR1 to Access Management authorised by CP Services – WHEN AVAILABLE	X NHSH Funded

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7	NATIONAL TURAS SYSTEM: Access gateway to the National Vaccination Management recording system (VMT no. 3 above)	X NHSH Funded
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6.3. Access to Community Pharmacy IT Equipment (existing):

The Pharmacy Manager is responsible for providing access to a SWAN connected computer system (desktop PC/, monitor, keyboard, mouse/laptop) within the Community Pharmacy. This may be within the existing consultation room at the Pharmacy.

6.4. IT Systems Training:

The Contractor is responsible for ensuring the roles involved in the Community Pharmacy Vaccination Services have received appropriate VMT and Care Portal training when available. Training and training materials, including videos and help guides can be provided by the eHealth Facilitator Team prior to commencing vaccination work. VMT training is currently provided remotely via MS Teams and Turas. Care Portal training will also be provided in a similar model.

6.5. Computer User Management Business as Usual:

The Pharmacy Manager is responsible for notifying NHS Highland Access Management for every change of staff with IT access and attached to the Community Pharmacy Location. Specifically for vaccination governance the Pharmacy Manager should follow the recommended service levels:

JOINERS SOP: For new staff/vaccinators joining, the Pharmacy Manager should submit a CPAR1 form a minimum of 14 days prior to the start date.

LEAVERS SOP: For staff leavers and/or movers the Pharmacy Manager should submit a CPAR1 form a minimum of 1 day prior to the leave date.

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7. Data Collection and Reporting Requirements

- 7.1. The Vaccination Management Tool (VMT) is available to record consultations and vaccination administration. The vaccinator is responsible for recording all NHS vaccinations onto the VMT. It is a requirement that appropriate patient care records are recorded by the Contractor. This is to enable verification for service provision and to provide information to NHS Highland for internal and external audit and evaluation.
- 7.2. The VMT offline paper form should be used only when the online VMT is not available ([link](#)). Paper forms should be transferred by pharmacy staff to the online VMT as soon as it is available. Paper offline forms should be retained for an appropriate period, but for the purposes of post-payment verification, the forms should be kept for a minimum of three years after the vaccination takes place. As Contractors are operating as the data controller, it is for each contractor to determine what the appropriate length of time is, beyond three years. Decisions on this matter must be documented and should be in line with national and local policies ([link](#)).

8. Monitoring and Evaluation

- 8.1. It is a requirement of the service that appropriate records are kept and maintained by the Contractor to enable verification of service provision and to provide information to NHS Highland for internal and external audit and evaluation purposes should this be requested. This will be done by use of the TURAS Vaccination Management Tool (VMT).
- 8.2. To ensure the correct number of administered vaccinations is captured, the reimbursement and reporting process requires that data recorded in TURAS VMT is accurate and complete. Vaccination events must be recorded on TURAS VMT on the day of administration, unless the system is unavailable, and all data flows between IT systems used to manage and report on immunisation programmes, supporting clinical decision-making.
- 8.3. Any inaccuracies, such as incorrect batch numbers or vaccine products, must be corrected promptly to ensure updates are reflected across all systems and throughout the data collection process. Where data is identified as potentially inaccurate, the NHS Highland Data Quality Team will request verification via email, issued either by the CPS office or the Data Quality Team, and contractors are responsible for reviewing and verifying highlighted records, notifying the team of confirmed errors, and taking appropriate action.

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- 8.4. If a vaccination has been recorded retrospectively with errors in TURAS VMT, the contractor must re-record the event correctly and inform the Data Quality Team so that the incorrect entry can be removed.
- 8.5. Reimbursement report data is collated at the start of each month for the previous month; therefore, contractors must ensure all vaccination events for the previous month are entered into TURAS VMT before the start of the new month to ensure inclusion in reporting.
- 8.6. If a patient has been vaccinated contrary to Green Book guidance, the CPS office should be notified as per point 2.24. A DATIX must be completed by the NHS Highland vaccination pharmacist and the reference number provided to the Data Quality Team.
- 8.7. A standard operating procedure(s) should be in place in the pharmacy to cover all aspects of service provision.

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9. Claims and Payment

- 9.1. Prior to provision of the service, the Contractor must ensure that both their premises and all vaccinators administering vaccinations meet the requirements outlined in this SLA.
- 9.2. The VMT should be used at the time of vaccination for every patient to register details of the vaccination for the Health Board. Incomplete submissions will not be paid. This information may be used to audit claims received from the Contractor.
- 9.3. The vaccine(s) used are expected to be that recommended by NHS Scotland. Additional costs related to the use of alternative vaccines will not be paid. Supplies of vaccine are accessed as per usual contractor procurement arrangements.
- 9.4. Reimbursement for vaccine used will be via submission on a Universal Claim Form using the “Vaccinations” tab.
- 9.5. Payment for the administration of influenza, Covid-19 or travel health vaccines will be made automatically using data extracted from the VMT by the Community Pharmacy Services (CPS) office monthly. The CPS team will capture this information each month and add the appropriate payment to the LNS Monthly Claim Excel Spreadsheet.
- 9.6. **Travel Health Only** – Patient consultations should be claimed using the Locally Negotiated Services (LNS) Monthly Claim Excel Spreadsheet, including consultations for initial risk assessments and follow up vaccine boosters. Contractors should submit their claims using this Excel spreadsheet.
- 9.7. Claims for payments for all vaccination services will be verified by data submitted via the Vaccination Management Tool.
- 9.8. Payments will be made monthly as per usual contractor locally negotiated services.
- 9.9. Claims by the Contractor to be reimbursed/remunerated for vaccines administered to patients outside of the eligibility criteria for this service will not be paid.

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Appendix 1 – Contract Agreement Form (Argyll & Bute HSCP)

Service Level Agreement

Community Pharmacy Vaccination Services

NHS Highland reserves the right to cancel this SLA and withdraw this service following an agreed period of notice. The Pharmacy Contractor signing this SLA has the same right.

I have read and understood the NHS Highland Vaccination Service Specification and agree to provide the service in accordance with the terms set out:

- ☐ I confirm that this Pharmacy Contractor is ready to provide the following immunisation service:
 - ☐ NHS Highland Travel Health Service
- ☐ I confirm that the premises meet the required standards outlined in section 4 of the NHS Highland Community Pharmacy Vaccination Service Specification.

The trained vaccinator(s) working at this site are competent to deliver this service(s) and can provide evidence for the following:

- ☐ The essential training requirements (Appendix 5)
- ☐ Covered by indemnity arrangements to provide vaccinations
- ☐ Signed signature page of PGD and agreed to act in accordance with relevant PGDs
- ☐ Submitted MS Form response for the individual Vaccination PGDs to the Community Pharmacy Services office

Pharmacy Contractor Representative Name (block capitals):		Signature:	
Contractor Code:		Date:	
Trading name of pharmacy:			

Please return by e-mail (using contractor generic mailbox) to: nhsh.cpsoffice@nhs.scot

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Appendix 2 – Contract Agreement Form (Highland HSCP)

Service Level Agreement

Community Pharmacy Vaccination Services

NHS Highland reserves the right to cancel this SLA and withdraw this service following an agreed period of notice. The Pharmacy Contractor signing this SLA has the same right.

I have read and understood the NHS Highland Vaccination Service Specification and agree to provide the service(s) in accordance with the terms set out:

- ☐ I confirm that this Pharmacy Contractor is ready to provide the following immunisation service(s) (please tick accordingly):
 - ☐ NHS Highland Travel Health Service
 - ☐ NHS Highland Influenza Vaccinations
 - ☐ NHS Highland Covid-19 Vaccinations
- ☐ I confirm that the premises meet the required standards outlined in section 4 of the NHS Highland Community Pharmacy Vaccination Service Specification.

The trained vaccinator(s) working at this site are competent to deliver this service(s) and can provide evidence for the following:

- ☐ The essential training requirements (Appendix 5)
- ☐ Covered by indemnity arrangements to provide vaccinations
- ☐ Signed signature page of PGD and agreed to act in accordance with relevant PGDs
- ☐ Submitted MS Form response for the individual Vaccination PGDs to the Community Pharmacy Services office

Pharmacy Contractor Representative Name (block capitals):		Signature:	
Contractor Code:		Date:	
Trading name of pharmacy:			

Please return by e-mail (using contractor generic mailbox) to: nhsh.cpsoffice@nhs.scot

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Appendix 3 – Patient Feedback

Patient feedback for the NHS Highland Community Pharmacy Vaccination Services can be recorded via the following Microsoft Form:

Community Pharmacy Service – Vaccination Services

Link to form: <https://forms.office.com/e/uNizGZySj0>



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Appendix 4 – Vaccination Service Checklist

Vaccinator:	Tick
Is competent to deliver immunisation and has completed recommended training as required	
Has read and signed the PGDs	
Has completed adult and paediatric immunisation training	
Has had required training in adult and paediatric BLS and anaphylaxis within the last 12 months	
Has been offered appropriate occupational immunisations	
Is competent with standard hand hygiene procedures	
Has read the SPC for the vaccines	
Has an NHS login/email address in use (To access NES TURAS)	
Has access to Emergency Care Summary (ECS) for accessing allergy status and completed ECS training	
Has access to Care Portal (when available)	
Has VMT account setup and completed VMT training	
<u>Vaccine Stock:</u>	
Vaccine stock is fit for use	
Recommended vaccines are available	
Cold Chain Compliance is in place	
<u>Resources:</u>	
Copies of the PGDs and relevant SOPs are available	
Copies of standard reference texts are available	
A telephone is available	

PPE is available	
Vaccine supplies and sharps bins are available	
Relevant Standard Operating Procedures (SOPs) are in place for vaccination services including cold chain/ fridge monitoring, needlestick injury, sharps waste processes and vaccine incident management	
Adrenaline / Epinephrine is available	

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Appendix 5 – Training Resources

The trained vaccinator(s) working at this site are competent to deliver this service(s) and can provide **evidence of completion of the training requirements** below (where applicable):

Recommended	Recommended Frequency	Resource	Additional Information
NoS PGD module training	One off module (revisit when module updates)	NES TURAS – Patient Group Directions (PGDs) Patient group directions (PGDs) Turas Learn	
Adult and Paediatric Basic Life Support (BLS)	Annually	NES TURAS or equivalent	Face to face BLS training available via NHS Highland (at cost, contact CPS office for details)
Anaphylaxis management (for additional staff members)	Annually	NES TURAS or equivalent Anaphylaxis: recognition and management of anaphylaxis (link).	Resus Council UK – Addition information on anaphylaxis following vaccination: Anaphylaxis guidance for vaccination settings Resuscitation Council UK
Immunisation training including Adult and Paediatric vaccination training	As required	NES TURAS – Immunisation - Immunisation Turas Learn NES TURAS – Core Learning Resources Core Learning Resources Turas Learn	UKHSA The Green Book - For guidance when administering vaccines Immunisation against infectious disease - GOV.UK Shadowing / administration with local vaccination teams Private vaccination training courses such as TREC and ECG Training
Promoting Effective Immunisation Practice (PEIP)	Once off (revisit when modules update)	NES TURAS eLearning: Promoting Effective Immunisation Practice (PEIP) PEIP for registered healthcare practitioners Turas Learn	UKHSA The Green Book – Ch. 3 Storage, Distribution and Disposal of Vaccines

			Storage, distribution and disposal of vaccines: the green book, chapter 3 - GOV.UK NHS Highland Medicines Cold Chain Policy (intranet page) Microsoft Word - id1349 - Medicines Cold Chain Refrigeration and Cold Storage Policy.docx
Infection Prevention and Control	One off	NES TURAS – Why infection prevention and control matters Once for Scotland : why infection prevention and control matters Turas Learn	
Safe Sharps Disposal	One off	NES TURAS – Safe Disposal of Waste (including sharps) Safe disposal of waste Turas Learn	
Occupational Exposure (sharps) programme.	Every 3 years	NES TURAS – Occupational Exposure (Sharps) Programme Sharps Turas Learn	
Adult and Child Protection Modules	Every 3 years	NES TURAS – Public Protection Adult Support and Protection Child Protection Public Protection Turas Learn	

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Additional Training Resources			
Self-appraisal tool for returning immunisers	As required	Knowledge and self-appraisal tool for immunisers to assess competence Knowledge Self Appraisal Tool for Immunisers Turas Learn	
Proficiency document for Vaccines	As required	General proficiency Proficiency Document for Vaccine Administration by Registered Healthcare Practitioners	
Proficiency document for Travel Health	As required	Knowledge and self-appraisal tool for immunisers and to assess competence Proficiency Document for Travel Health Vaccine Administration by Registered Healthcare Practitioners	
TURAS Vaccination Management Tool User Guide	As required	NES TURAS Turas Vaccination Management tool Turas Learn NHSH VMT Video Tutorial VMT Tutorial - YouTube	eHealth Facilitator Training
Vaccine Specific Training	As required	NES TURAS Vaccine specific learning Turas Learn	The Green Book – vaccine specific chapters Immunisation against infectious disease - GOV.UK

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Service 1 – NHS Highland Influenza Vaccination Service

Service Aims and Objectives

- To increase access to Influenza immunisation for:
 - Eligible staff groups involved in direct patient care to contribute to the achievement of Board immunisation targets.
 - Eligible people within the population or at-risk cohorts who meet the criteria outlined in the Seasonal Influenza annual CMO letter.
- The service should be provided in line with the current North of Scotland PGD: Administration of Inactivated Influenza Vaccine by Approved Healthcare Professionals.
- To be able to provide accurate and up to date information about the disease and vaccine to people.
- The objective of the annual influenza immunisation programme is to protect those who are most at risk of serious illness or death should they develop either influenza. Other objectives include reducing transmission of the infection, thereby contributing to the protection of vulnerable patients who may have a suboptimal response to their own immunisations, or where the vaccine is contraindicated.

NHS Highland has determined that community pharmacies will **not** be the default delivery channel for Influenza Vaccination unless directly negotiated between the pharmacy contractor and the Board where there is a gap in provision in the locality.

Community pharmacies are asked to support the programme by administering vaccinations by agreement with the Health Board where staff groups or patient groups require follow up having been unable to attend the clinics arranged by the Health Board. Eligible patients who have been unable to attend an Influenza vaccination clinic arranged by the Health Board will be directed to contact the nearest participating pharmacy of their choice to make an appointment.

Influenza Service Documents

Copies of the current Patient Group Direction (PGD), CMO letter and further information are found [here](#).

Vaccine Supply

A supply of vaccine from the NHS Highland central stock can be ordered directly from Movianto once your participation in the programme has been verified to National Services Scotland. Ordering information will be provided on receipt of the signed SLA. Should further supplies over and above original allocations be required over the course of the programme, the CPS office should be emailed on nhsh.cpsoffice@nhs.scot with an indication of the additional requirement.

Payment

The arrangements and fees apply where community pharmacy contractors, or trained members of their registered staff who are eligible to work under the PGD, administer vaccinations directly, in which case a fee of **£10.60 per dose administered**, will be paid unless a nationally

negotiated fee is introduced, whereupon this will be used instead. Any payments already made when a national fee is introduced will be adjusted to reflect the nationally agreed fee.

Payment of the **£265 set up fee** will be paid alongside the first vaccination payments on an annual basis.

Payment for the co-administration of both the influenza and covid vaccines for an individual patient on the same day will result in **a combined rate of £21.20** in place of an individual fee per administered doses.

Any vaccination fees agreed for primary care vaccination services for future flu/covid programmes must be equal across all primary care providers including community pharmacy to maintain parity.

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Service 2 – NHS Highland Covid-19 Vaccination Service

Service Aims and Objectives

- To increase access to Covid-19 immunisation for eligible people within the population or at risk cohorts who meet the criteria outlined in the CMO Winter Programme – Seasonal Flu and Covid-19 vaccination.
- The service should be provided in line with the current North of Scotland PGD: Administration of Covid-19 Vaccines to Individual Aged 18 years and Over by Approved Healthcare Professionals
- To be able to provide accurate and up to date information about the disease and vaccine to people.
- The objective of the Covid-19 immunisation programme is to protect those who are most at risk of serious illness or death should they develop Covid-19. Other objectives include reducing transmission of the infection, thereby contributing to the protection of vulnerable patients who may have a suboptimal response to their own immunisations, or where the vaccine is contraindicated.
- Due to multidose vials of Covid-19 vaccine being supplied, clinics should be arranged to provide vaccination to the maximum number of patients to avoid and reduce vaccine wastage.

It has been agreed that community pharmacies will **not** be the default delivery channel for Covid-19 Vaccination unless directly negotiated between the pharmacy contractor and the Board where there is a gap in provision in the locality.

Community pharmacies are asked to support the programme by administering vaccinations by agreement with the Health Board where patient groups require follow up having been unable to attend the clinics arranged by the Health Board. Eligible patients who have been unable to attend a Covid-19 vaccination clinic arranged by the Health Board will be directed to contact the nearest participating pharmacy of their choice to make an appointment.

Covid-19 Service Documents

Copies of the current Patient Group Direction (PGD), CMO letter and further information are found [here](#).

Vaccine Supply

A supply of vaccine from the NHS Highland central stock will be ordered directly from Movianto by the vaccination pharmacist once your participation in the programme has been verified to National Services Scotland. Ordering information will be provided on receipt of the signed SLA. Should further supplies over and above original allocations be required over the course of the

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programme, the CPS office should be emailed on nhsh.cpsoffice@nhs.scot with an indication of the additional requirement.

Payment

Payment arrangements have been previously agreed between Scottish Government and Community Pharmacy Scotland in 2020/21 for Health Boards to enter local arrangements for the pharmacy contractors to participate in the delivery of the COVID-19 Vaccination Programme.

Payment will be **£265 set up fee (annual)** and the flat rate of **£14 per dose administered**, whether primary vaccination or booster. If this payment is updated nationally then the rate for this SLA will change to reflect the nationally agreed payment.

Payment for co-administration of both the influenza and covid vaccines for an individual patient on the same day will result in **a combined rate of £21.20** in place of an individual fee per administered doses.

Any vaccination fees agreed for primary care vaccination services for future flu/covid programmes must be equal across all primary care providers including community pharmacy to maintain parity.

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Service 3 – NHS Highland Travel Health Service

Service Aims and Objectives

- The aims of this service are to provide a patient centred, accessible, consistent and comprehensive travel service for patients requiring travel assessment, vaccination, medicines and advice.
- The objective of the NHS Highland Travel Health Service is to provide a “one-stop” patient-centred, comprehensive, consistent and accessible travel advice and vaccination service for patients.
- The service should be provided in line with the current NoS PGDs:
 - Administration of Low Dose Diphtheria, Tetanus and Inactivated Poliomyelitis Vaccine (Td/IPV) (Revaxis®) For Travel by Approved Healthcare Professionals
 - Administration of Hepatitis A Vaccine for Travel Indications by Approved Healthcare Professionals
 - Administration of Typhoid Vi Vaccine for Travel Indications by Approved Healthcare Professionals
 - Administration of Oral Cholera Vaccine for Travel by Approved Healthcare Professionals
- To increase access to NHS travel advice and vaccination for all patient groups to protect patients while travelling to high-risk destinations.
- To be able to provide accurate and up to date information about travel health risks and vaccine(s) to patients.

The NHS Highland Travel Health Service is available to all travellers who are registered with a GP in NHS Highland who require advice and /or vaccinations for travelling to a destination considered at risk of tropical disease. This service includes provision of vaccination to children.

The NHS vaccinations available, as required, to eligible patients and included in this service offering are Diphtheria, Tetanus & Polio (as Revaxis), Hepatitis A, Typhoid, and Cholera.

The Contractor will be listed on the NHS Highland website advertising that they are a provider of this service ([link](#)).

The Contractor will be responsible, where appropriate, for counselling the patient(s) on other related travel health and first aid messages, including but not limited to personal safety and environmental risk. Written information or signposting to appropriate verified online sites should also be available on these topics. The National Travel Health and Network Centre (NaTHNaC) website, TravelHealthPro, contains useful information for patients ([link](#)). TravelHealthPro provides travel

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health advice for professionals and should be accessed to ensure adherence to the latest recommendations ([link](#)).

Treatment offered should not be restricted to that available on the NHS and should include those treatments which would incur a fee payable by the traveller, e.g., for malaria, rabies, tick-born encephalitis and, where the pharmacy is registered to do so, yellow fever vaccination. A list of Yellow Fever Vaccination Centres is available online ([link](#)).

The aim is to provide a complete travel advice service that incorporates those elements available on the NHS along with the opportunity for the individual to access and pay for those not available through the NHS.

Travel risk assessments, advice and vaccinations (if required) are provided to reduce the risk of transmission of diseases amongst patients travelling to countries where these diseases are still prevalent, to contribute to the protection of individuals who may have a suboptimal response to their own immunisations, or to avoid disruption to services that provide their care.

NHS Highland Travel Health Service Documents

Copies of the current Patient Group Directions (PGD) and further information are found [here](#).

Vaccine Supply

NHS vaccines should be ordered through the Contractor's wholesaler account(s) and reimbursement is made for these vaccines via submission on a Universal Claim Form.

Payment

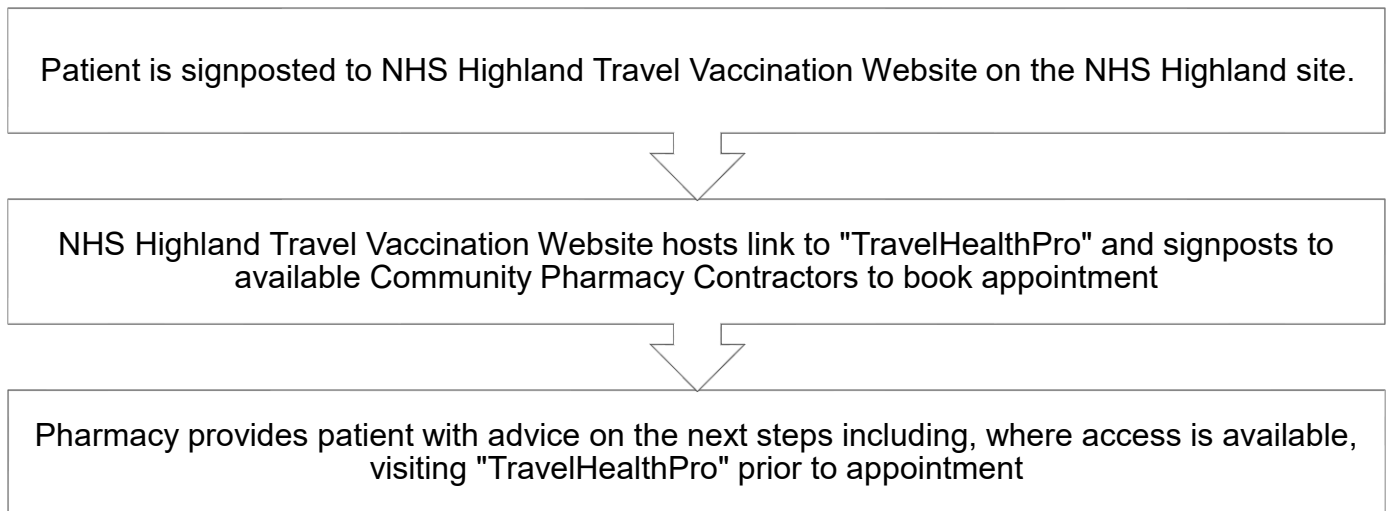
- A new contractor set up fee of £265 will be paid on receipt of a signed service agreement and paid to contractors which have not previously participated in the NHS Highland Travel Health Service (Appendix 1 or 2 – Service Agreement Form).
- Payment will be £40 for risk assessment and consultation.
- Payment will be £9 per administered dose of vaccine.
- A return appointment for a booster vaccination this will attract a fee of £10.60 per administration.
- The vaccine(s) used are expected to be those recommended by NHS Scotland. Additional costs related to use of alternative vaccines will not be paid. Supplies of vaccine are accessed as per usual contractor procurement arrangements. Reimbursement for vaccine used will be via submission on a Universal Claim Form using the "Vaccinations" tab.

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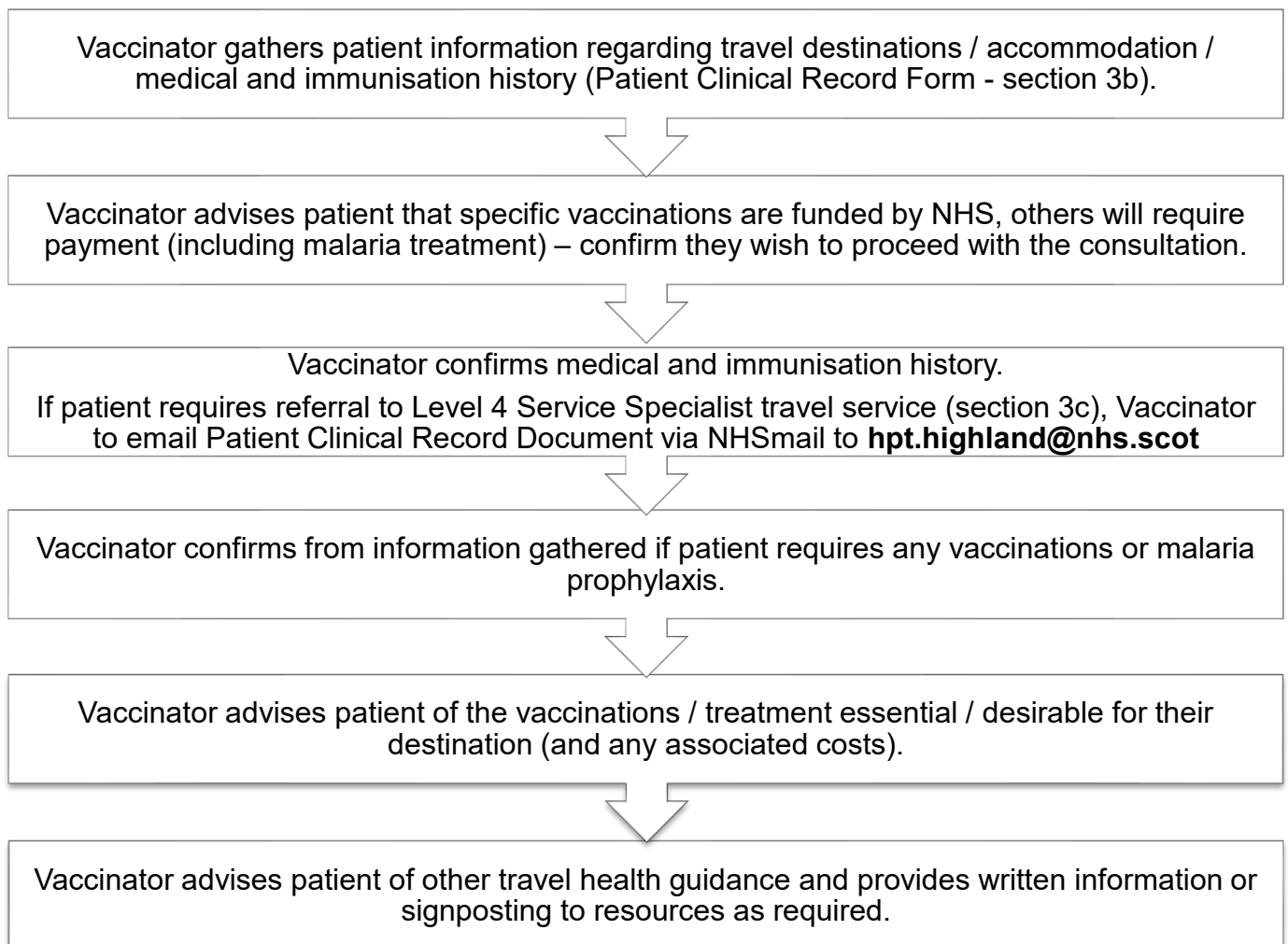
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3a. Patient Journey

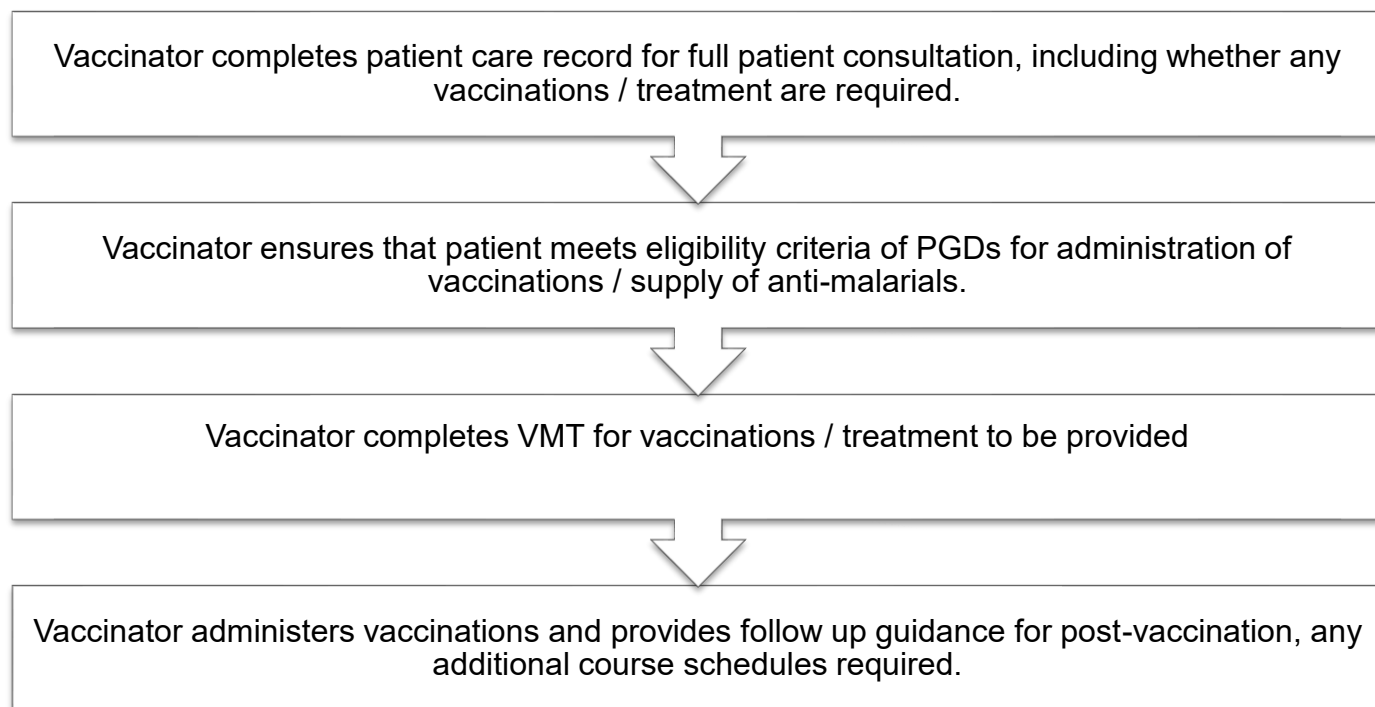
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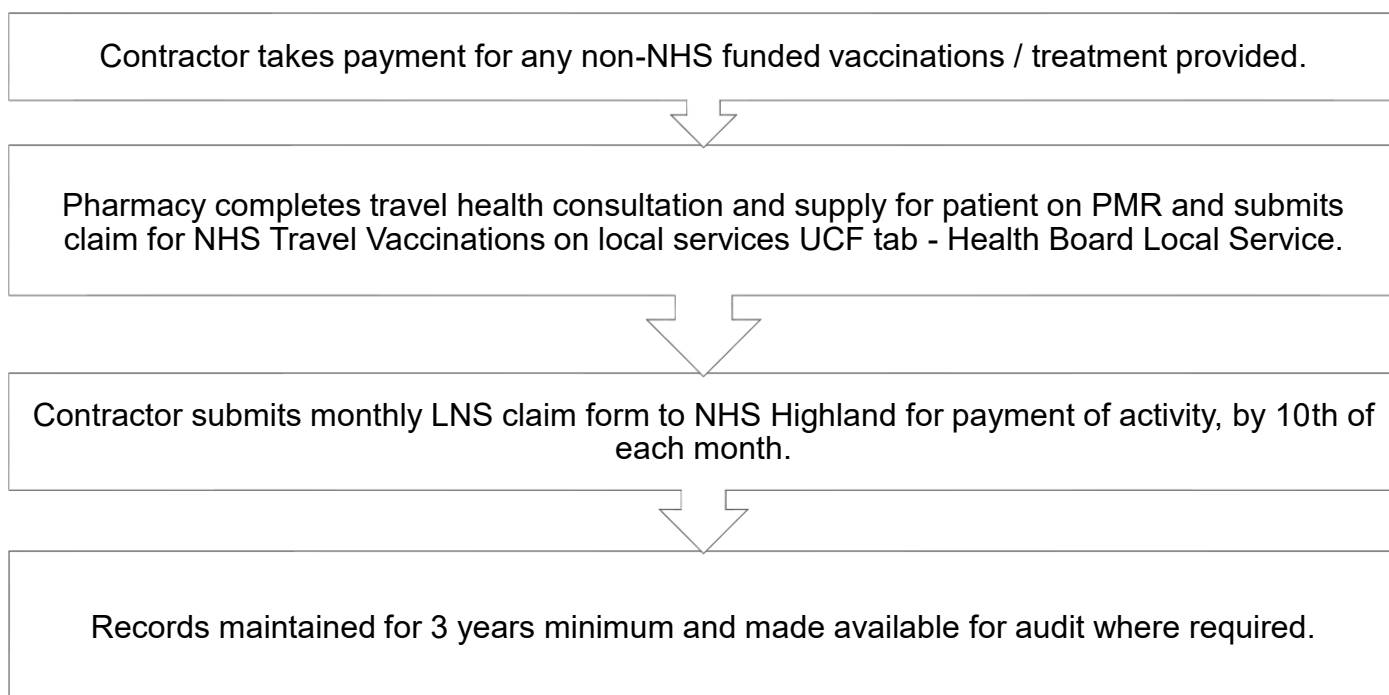
Consultation:



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Post-Consultation:



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3b. Patient Clinical Record*

TRAVEL HEALTH		
Pre-travel clinical record		
Patient details (incl. CHI):	Date/Time of clinic visit:	GP details:
Medical history (including immunosuppression):		Medication history:
Drug allergies:	Food/other allergies:	Previous vaccine reactions:
	Is patient egg allergic? Y N	
	Is patient nut allergic Y N	
	Is patient latex allergic? Y N	
Current health problems:		Is the patient pregnant?
		☐ Yes
		☐ No
		☐ N/A
		☐ No of weeks _____

TRAVEL DETAILS (in date order)					
Date of departure_____		Total travel duration (days/weeks)_____			
Destination Country	Town / City or Area	*Purpose of Trip	**Destination Description	***Accommodation	Length of stay (days/weeks)
*Purpose of trip		**Destination Description			***Accommodation
☐ Package holiday ☐ Migration ☐ Visiting family & friends ☐ Cruise ☐ Organised adventure holiday ☐ Voluntary/charity work ☐ Self-organised holiday ☐ Aid worker / Emergency response ☐ Backpacking ☐ Business / Work ☐ Pilgrimage ☐ Other (please provide details)		☐ Urban (town / city) ☐ Rural (countryside) ☐ High Altitude >3000m ☐ Jungle ☐ Desert ☐ Coastal ☐ Safari ☐ Beach ☐ Other (please provide details)			☐ Hotel ☐ Hostel ☐ Camping ☐ Family/Friends ☐ Good ☐ Basic ☐ Poor ☐ Not known

Activities and occupation during travel:	Items for travel suitcase:	
	☐ Altitude sickness ☐ Bite avoidance ☐ Blood borne virus ☐ Food/water hygiene ☐ Insurance/accidents ☐ Rabies ☐ Schistosomiasis ☐ Medical kit/Sun protection ☐ Other (specify):	

VACCINE RECORD/SCHEDULING						
VACCINE	Vaccine Advised	Dates of previous dose	Planned dates for vaccine schedule			Vaccine Declined by Patient
B.C.G						
Cholera						
Diphtheria/Tetanus/Inactivated Polio						
Hepatitis A						
Hepatitis B						
Hepatitis A & B combined						
Japanese encephalitis						
Mantoux						
Meningococcal						
MMR						
Rabies						
Tick borne encephalitis						
Typhoid						
Yellow fever						
Other (specify)						
PAYMENT DUE						

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MALARIA PROPHYLAXIS RECOMMENDED					
☐ Atovaquone/Proguanil	☐ Chloroquine	☐ Doxycycline	☐ Mefloquine	☐ Proguanil	☐ Not required
Any other advice or comments including need for referral:					
NAME:	SIGNATURE:	DESIGNATION:			DATE:

*Retain forms; adults aged 18+ yrs :8yrs. For child: until 25th birthday or 26th birthday if 17yrs when treatment finished

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TRAVEL HEALTH Continuation Notes	
Patient details:	GP details:

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Date of Initial Visit:

Name:

Signature:

Designation:

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Date of Visit

Name

Signature

Designation

Date of Visit

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Name	Signature	Designation

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Date of Visit

Name

Signature

Designation

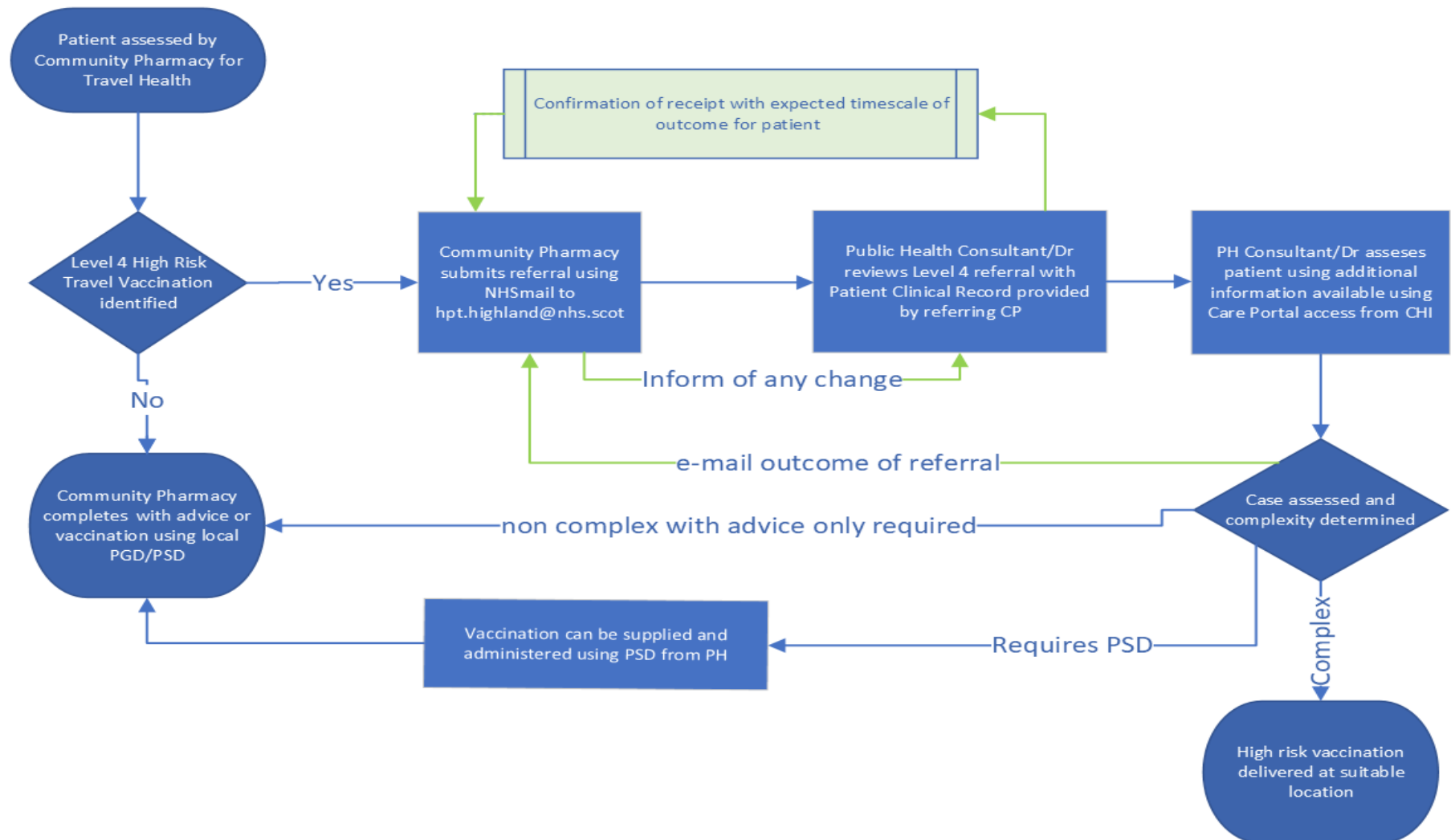
Date of Visit

Name

Signature

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3c. Level 4 Service Pathway



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