



**NFCC**  
National Fire  
Chiefs Council

The professional voice of the UK Fire & Rescue Service

# Community Vaccine Support Guide

## Notable Practice

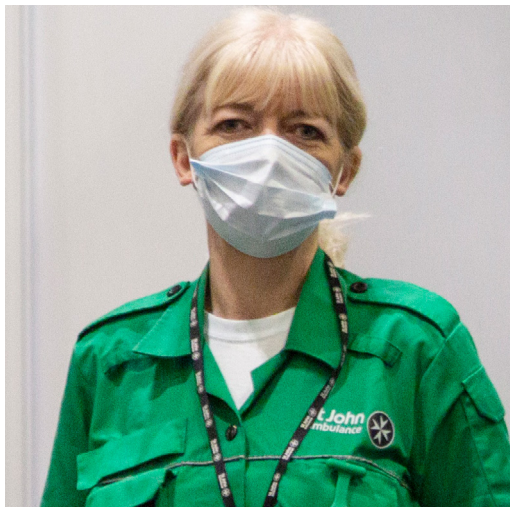
National Fire Chiefs Council & St John Ambulance Partnership

February 2021

**St John**  
Ambulance



# Foreword



## Dr Lynn Thomas

**This is an amazing opportunity for St John Ambulance and West Midlands Fire Service to partner together, in conjunction with the NHS, to help vaccinate the nation.**

We are delighted that so many members of the fire service have offered to support the mass vaccination programme and are ready and willing to undertake the training provided – both on line and face to face. Through your dedication and commitment, St John is able to ensure that we are able to support mass vaccination centres across the Country.



## NFCC Vice Chair CFO Phil Loach West Midlands Fire Service

**We are both proud and excited to be piloting fire and rescue services' involvement in St John Ambulance's delivery of the NHS vaccination programme.**

This is the latest example of how Fire and Rescue staff across the country continue to be ready, willing and able to help our communities find a way out of this dreadful pandemic.

Yet again, they will be making a real and meaningful difference during this immensely challenging period.

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## Executive Summary

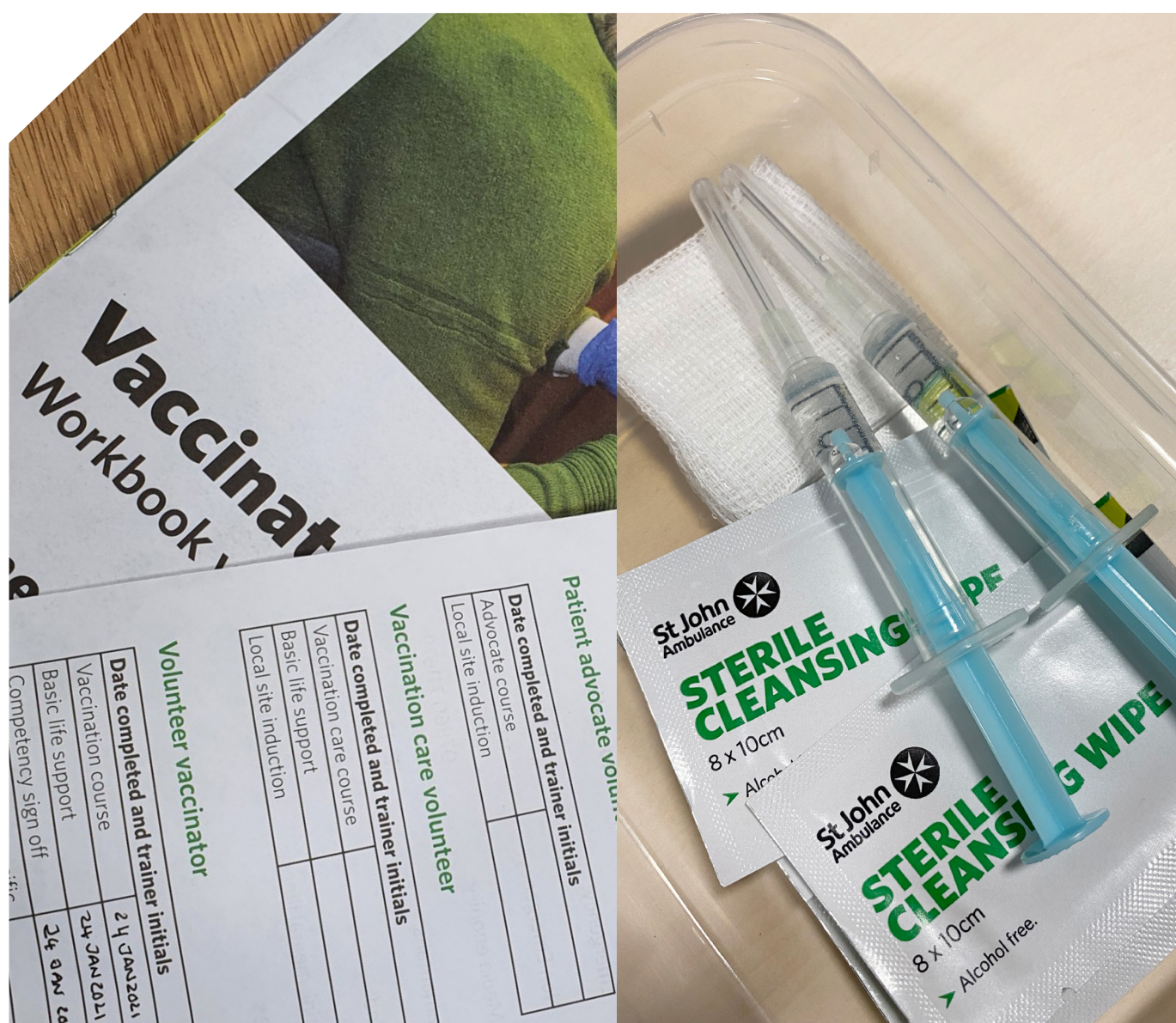
The Community Vaccine Support Guide outlines the approach that was taken to work in collaboration with St John Ambulance (SJA) to support the National Health Services (NHS's) vaccination effort, as part of the COVID-19 pandemic response.

Throughout the document, other key documents have been hyperlinked to provide greater understanding and additional context. This guidance also captures some of the key learning points experienced by West Midlands Fire Service (WMFS) as the pilot service during the work with SJA in the West Midlands.

## Background

In December 2020 NFCC met with Dr Lynn Thomas, Medical Director of St John Ambulance (SJA), to consider how Fire and Rescue Services (FRS) across the country could support the SJA national vaccinator programme. Having set a target of training 30,500 vaccinators there was an initial desire to undertake a pilot scheme on behalf of the NFCC to identify early learning and build confidence for future partnerships.

Initial conversations quickly established that WMFS were well placed to act as a pilot and utilise many existing SJA arrangements. Following initial conversations between WMFS and SJA Medical Directors the work to establish this partnership was handed to the dedicated WMFS Additional Activities Team who have supported other existing COVID support activities alongside SJA Managers. This document seeks to outline the approach taken by WMFS and SJA to develop the pilot partnership, in support of other FRS developing their own local approach





## St John Ambulance Requirements

SJA have a long-standing history and tradition of responding to health and medical emergencies, supporting communities, and saving lives. As part of the pandemic response, SJA are supporting the NHS with the delivery of the COVID-19 vaccinations.

To ensure that excellent patient care and a high level of vaccine efficacy is delivered, SJA expectations are that volunteers will meet the following criteria:

- **Training** – Volunteers must undertake all NHS and SJA online modules and face-to-face training required for the vaccinator role they are undertaking. All associated assessments must be successfully passed.
- **Disclosure and Barring Service** – You must have a valid enhanced DBS check in place prior to attending a vaccination centre.
- **Health Declaration** – The SJA Health Declaration Form must be completed and approved prior to attending a vaccination centre.
- **Commitment to Volunteer** – Each volunteer will commit to undertaking two (six hour) voluntary shifts per month.
- **Qualifications/Educational** – For volunteers undertaking the vaccinator role, there is a minimum legal and NHS requirement of 2 A levels (or equivalent or higher) that must be met. For those that cannot demonstrate this level of education, then other roles (Vaccination Care Volunteer and Volunteer Patient Advocate) remain open to ensure inclusion of all staff.



## St John Ambulance Voluntary Roles

FRS personnel can support the NHS and SJA in the national vaccination effort by undertaking one of the following roles which have different responsibilities, and therefore come with different training requirements:

**Volunteer Vaccinator** – will administer vital vaccines and ensure the completion of documentation associated with the administration of the vaccine.

**Vaccination Care Volunteer** – support patients all the way through from arrival to discharge. They will help patients get to the right place to receive their vaccination and

be on hand to provide first aid if anyone has a medical emergency.

**Volunteer Patient Advocate** – will focus on the welfare of patients throughout their experience. You will look after individuals and small groups in the vaccination centres. If anyone has a medical emergency, then a Volunteer Patient Advocate will be able to recognise it and get help quickly.

## Memorandum of Understanding (MOU)

A model [MOU](#) has been developed between SJA and WMFS to that outlines an initial 6 month agreement. Key areas outlined within the MOU are training, clinical supervision, indemnities and insurance, uniform/PPE, risk assessments and financial arrangements.

FRS vaccine volunteers will be indemnified under the Public Liability/Employment Liability policy SJA has in place but local FRS will need to ensure themselves of these arrangements.

Whilst FRS personnel are volunteering they will be under the clinical supervision of SJA whilst they are performing work on behalf of SJA.

## Risk Assessment (RA)

WMFS have used the [NFCC Community Vaccine Support RA](#) as the basis of the local RA and ensured that it is consistent with both the SJA and NHS RA's. WMFS health surveillance (testing) system is based on twice weekly Lateral Flow Testing (LFT) facilitated at WMFS LFT Hubs. However it is worthy to note that SJA volunteers do not have this included in their RA's or health surveillance. To support the understanding and implementation of the community vaccine support RA there is also a supplementary [Vaccine Guidance Document](#) to support the implementation of a local delivery model and answer any FAQ's

Consultation with Representative Bodies has been done through the agreed WMFS Employee Relations Framework, with the Fire Brigades Union outlining the national position communicated in the recent National Joint Council COVID Support Agreement discussions. There is a commitment from the FBU to continue to work with Management on solutions.

## Privacy Impact Assessment (PIA) & Equality Impact Assessment (EIA)

To support the partnership and manage risk a [PIA](#) and [EIA](#) have been developed.

## Qualifications and Educational Standards

The NHS/SJA expectation for volunteers to undertake the role of Volunteer Vaccinator is a minimum level of academic qualifications equal to or greater than 2 A Levels such as a relevant Level 3 qualification.

FRS's are committed to continuous learning and development of all employees including acquisition of relevant qualifications/accreditation. Many FRS employees will also hold/ have held previous relevant jobs with appropriate qualifications including nurse, paramedics, care workers and military roles.

To support FRS's assessments the vocational qualifications achieved in the workplace at Level 3 and above some examples are listed below

- **Level 3 NVQ Diploma in Emergency Fire Services Operations in the Community**
- **Level 3/4 First Responder Emergency Care (FREC)**
- **Level 4–Level 6 qualifications such as ILM/ CMI Awards at level 4, 5, Degrees at Level 6 BA/BSC. Including Fire Safety Diplomas and Fire Engineering Diplomas,**
- **Level 7 qualifications such as Masters MA/ MSC or Certificate/Diploma**

## Training

Training for all the volunteer roles is provided by SJA, each role has different responsibilities and therefore training requirements differ, as seen below. The training provided is a blended approach of online and in-person sessions which incorporates NHS and SJA online training modules and assessments for which there is a minimum pass mark of 80% required and must be completed prior to the in-person training. The in-person training session with SJA, will cover the practical aspects of the role and is facilitated in a COVID secure environment.

There is a train-the-trainer model that SJA also runs. However, this was not accessed as SJA were able to accommodate up to 150 volunteers each weekend for in-person training. WMFS are utilising the train-the-trainer model to deliver training to the non-vaccinator volunteers in the future. This training will then be delivered by the FREC L4 Subject Matter Advisors in Pre-Hospital Care.

Role	Training Requirements – Hours*
Volunteer Patient Advocate	11.5
Vaccination Care Volunteer	13.5
Volunteer Vaccinator	21.5

\*Total training requirement hours of both online and in-person training.

All WMFS staff regardless of previous relevant experience, qualifications, and secondary employment such as Nurses, Paramedics and Doctors undertook the SJA training for the role that they have volunteered for.

After 2 weekends of in-person training, SJA had trained approx. 250 of the 300 WMFS volunteers.





## Medical Declaration

All prospective volunteers must submit and have accepted a SJA health declaration and consent form as part of the application process to volunteering. Like with many other COVID support activities, those deemed as high risk will not be able to volunteer. Those that are clinically vulnerable or clinically extremely vulnerable are not permitted to undertake any patient facing roles. Other health conditions may also prevent individuals from volunteering but these are risk assessed by SJA in consultation with the FRS on an individual basis.

## DBS Checks

**All FRS volunteers will require a valid enhanced DBS check prior to attending a vaccination centre for a voluntary shift. Many of WMFS staff already possessed some form of DBS check. However, WMFS decided that all volunteers would have a new enhanced DBS check (valid for 3 years) for the SJA voluntary scheme. This was seen as a positive opportunity to recertify a large number of WMFS employees with the enhanced checks as part of the partnership and with no cost to the WMFS as benefit of the partnership.**

SJA has a rapid DBS approval process in place due to COVID which all volunteers can access to gain their enhanced DBS checks. WMFS have conducted the relevant ID checks on behalf of SJA through our administration support team.

## Volunteering Requirements and Staffing

**All volunteers are asked to commit a minimum of 2 x 6-hour shifts in each month. However, it is acceptable by SJA to undertake 2 x 6-hour shifts back-to-back in 1 x 12-hour session to minimise impact on the FRS for station based volunteers.**

In support of the NFCC, WMFS have a strategic objective to support the wider community efforts to combat COVID-19. In support of this WMFS have released vaccine volunteers by modifying their duties within existing contracted hours of duty. For station based volunteers, a risk based approach has been adopted by varying appliance availability and utilising Voluntary Additional Shifts (VAS) to backfill staff when necessary. This approach has meant that additional costs have been kept to a minimum.

WMFS Staffing Team collates volunteer availability on a monthly basis to ensure a coordinated approach and minimise the internal impact on the service. SJA volunteer shifts are then allocated by the Staffing Team using the SJA Global Rostering System (GRS) App before the volunteers have their shifts confirmed.

FRS volunteers will be required to wear some form of SJA uniform or identification whilst undertaking vaccine support activity.

## Volunteers

**Throughout the COVID-19 pandemic, WMFS has raised awareness of the volunteering opportunities through staff briefings, news items and through support of local line managers. A Microsoft Form was used to capture the volunteer's information, this was then processed by a central team that could ensure the administration and the wellbeing of the volunteers.**

The request for volunteers to take part in the NHS vaccination programme was answered in a very positive manner, with many volunteers undertaking their training immediately and over a weekend. A total of 300 staff from across all areas of the service have volunteered to date.

### Lucy Ford Video – Vaccination

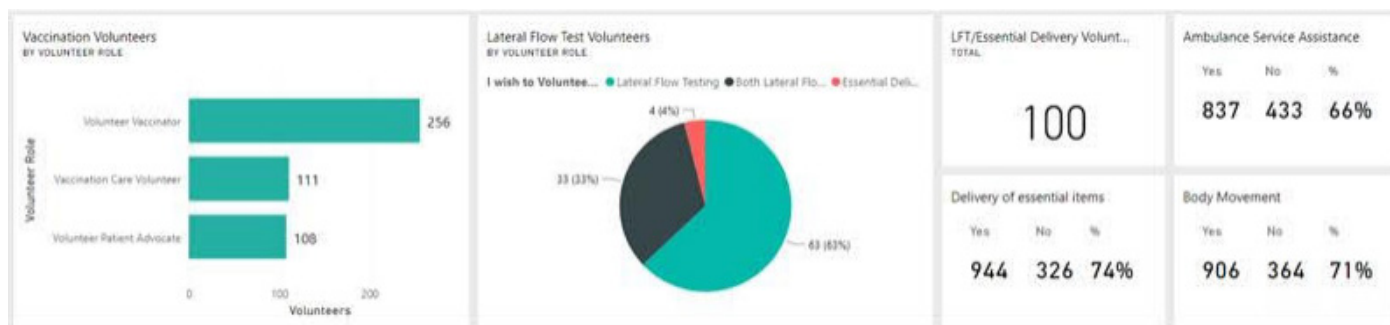




## Data Collection

Community Vaccine Support data is being captured to support the NFCC evidence base. Data sets below will also be collected:

- Total number of volunteers
- Number trained
- Total number of vaccine shifts completed
- Total number of vaccines administered by volunteers



## Financial Considerations and Cost Recovery

**As part of the MOU with SJA a cost recovery model is being agreed with the NFCC. With a recognition that all FRS's have different delivery models it will be important to confirm individual arrangements prior to entering a local partnership.**

All training is delivered by SJA at no cost as part of the partnership and any volunteer travelling expenses are reimbursed directly from SJA. All PPE is also provided and disposed of by SJA.

## Learning Points

**FAQ's** – Due to the scale of interest from across WMFS a FAQ document was set up to give prospective volunteers as much information as they required. This is a live document and is being added to with additional questions and answers.

**Direct Access with SJA** – some WMFS staff had contacted SJA directly to move forward with offering their availability for volunteering against the procedure that was laid out by WMFS. Whilst, this was done in good faith, it did lead to complexities. Moving forward all engagement and information was shared directly between SJA and WMFS.

**Access to Forms** – it has been highlighted that some WMFS personnel used 'local copies' of forms rather than using the links provided. Whilst this did not lead to a data breach through the sharing of personal information, it has been reiterated the importance of accessing the forms utilising the correct SJA links.

**Recording Attendance** – Learning from the 1<sup>st</sup> weekend of training highlighted the need for WMFS attendance records for the training. These have been used at subsequent weeks training and has allowed an accurate record of attendance at the training.

**Debriefing of Activity** – End of shift hot debriefing will be facilitated to identify any immediate risk critical learning, which will be fed back to SJA personnel on site. All WMFS volunteers will then be asked to complete a COVID-19 Vaccination debrief form which capture their feedback against areas such as PPE, Training, Application of Guidance, Welfare etc. The debrief forms will be reviewed to identify themes and trends which will be fed back to SJA.

**Health, Safety & Wellbeing** – WMFS volunteers will have access to the full range of Occupational Health facilities plus a specific Welfare Debrief Form is accessible to capture any personal welfare or wellbeing problems arising from undertaking the range of voluntary roles.

## St John Ambulance & West Midlands Fire Service Contacts

St John Ambulance – <https://www.sja.org.uk/>

St John Ambulance Dr Lynn Thomas – [lynn.thomas@sja.org.uk](mailto:lynn.thomas@sja.org.uk)

St John Ambulance Nikki Fountain – [nikki.fountain@sja.org.uk](mailto:nikki.fountain@sja.org.uk)

West Midlands Fire Service – <https://www.wmfs.net/>

Group Commander Andy Smith – [andy.smith@wmfs.net](mailto:andy.smith@wmfs.net)