



Rialtas na hÉireann
Government of Ireland

High Level Task Force on COVID-19 Vaccination

22 March 2021 Meeting

Updates, decisions and actions from meeting

High Level Task Force on COVID-19 Vaccination

Monday 22 March 2021 14:00

Updates, decisions and actions arising from meeting

1. Attendees

A. Members in attendance	B. Additional attendees in support
Prof Brian MacCraith, Task Force Chair	Kate Waterhouse, Task Force Secretariat
Liz Canavan, Chair, SOG on COVID-19	Sean Bresnan, National Director of Procurement, HSE
Fergal Goodman, Assistant Secretary, Health Protection Division, DOH	Dr Ronan Glynn, Acting CMO, DOH
Dr Colm Henry, Chief Clinical Officer, HSE	Elizabeth Headon, Programme Communications
Rachel Kenna, Chief Nursing Officer, DOH	Gerry O'Brien, Director, Health Protection, DOH
Barry Lowry, Chief Information Officer, OGCI	Deirdre Watters, Head of Communications, DOH
Derek McCormack, Expert on Cold Chain Logistics	Dr Lucy Jessop, SRO WS2, Director, NIO, HSE;
Dermot Mulligan, Assistant Secretary, Innovation and Investment Division, DETE	David Walsh, SRO WS4
Dr Nuala O'Connor, ICGP	Dr John Cuddihy, SRO WS5
Lorraine Nolan, Chief Executive, HPRA	Fran Thompson, SRO WS6
Dalton Philips, Chief Executive Officer, DAA	David Leach, SRO WS7
Paul Quinn, Government CPO and CEO, OGP	Damien McCallion, National Director, HSE
Paul Reid, Chief Executive Officer, HSE	Deirdre McNamara, General Manager, Quality & Patient Safety, Acute Hospitals Division, HSE
Martin Shanahan, Chief Executive Officer, IDA	Keiran Barbalich (PWC), Programme Office
Derek Tierney, Programme Director	Michael McDaid (PWC), Programme Office
	Yvonne Mowlds (PWC), Programme Office
	Fiona Smith (PWC), Programme Office

Apologies: Paul Flanagan, SRO WS3

2. Updates, decisions and approvals by Task Force

At the meeting, the Task Force:

- Noted that this week's context included the pause (14 Mar) and recommencement (20 Mar) of the AZ vaccine, with the primary focus readiness for a steep ramp-up starting next week.
- Reviewed an update on open actions and near-term issues: a waste minimisation factor KPI has been developed and a report on waste/spoilage minimisation at point of use is being finalised; no significant issues identified at this stage of the programme; a working version of the workforce dashboard developed will be shared, an update was given on whether APAs with drug companies will include virus variants (APAs incorporate possibility of negotiating this but do not contain guarantees); around 200,000 pharmacists have had first doses of vaccination and role in programme is being progressed. A number of actions in progress are due for report at next week's meeting.
- Heard a communications update: the pause and recommencement of AZ was the main focus of the Public Information Campaign with significant stakeholder outreach; 35 videos in 35 different languages will be launched this week with accompanying ads; campaign ads continue, with an update by the HSE to the COVID ad to include vaccine reference and a new Government of Ireland ad due next week (HSE ad will be paused for this); website/phone contacts remain high; and ongoing research shows a slight decrease in those who say they will 'definitely' take the vaccine. News coverage focussed on the AZ vaccine and general supply issues.
- Heard a programme update: 668,529 doses were administered to 19 March; approximately 13% of the adult population has had a first dose and nearly 5% have had two doses. Around 57,000 vaccines were administered last week, mainly mRNA vaccine to fHCWs and LTCFs. The AZ pause and recommencement were reviewed, including the timeline of key indicators and the significant work involved in re-operationalisation of the programme (incl. planning; guidance, FAQs and other documentation in place and distributed to vaccination sites; communications; logistics; delivery of new guidance, patient information leaflets, booklets). Over 2,000 AZ vaccines administered at the weekend, with positive vaccine orders for this week.
- Discussed upcoming planned activity for w/c 22 March: plans to distribute 75-80,000 mRNA vaccines; priority for AZ vaccines to those scheduled before pause (cohort 4; fHCWs - dose 1 to be completed), with expectation of being mostly back on track by next week; and continued planning for operationalisation of future cohorts.
- Reviewed a programme status report, noting key risks including supply chain resilience and supply certainty, and understanding consequences of the AZ pause, and heard an update on the workstreams: ongoing mapping of information flows across the programme (WS1); ongoing work on supply certainty, GP programme and new improvements working well with work underway to increase deliveries (WS2); progress on vaccinating cohorts 1-4 and ongoing work on large-scale vaccination

centres and integrated delivery model for later cohorts (WS4); and a focus on readying and testing of public portal, as well as integration and testing of GP functionality and ongoing work on data quality (WS6).

- Heard an update on integrated operational planning, outlining the division of cohorts into three blocks, vaccination planning principles (efficiency, supply, distribution and technology, as well as appropriate setting for cohorts, max utilisation of available workforce and safety as a core assumption), and a VAL plan summary for cohorts 4-7. It was noted that complexity of cohorts creates planning challenges, that technology is a key factor and that constructive stakeholder engagement is ongoing. Recruitment - of vaccinators and local - is progressing well and work is ongoing on preparation of critical training; there is confidence that sufficient workforce will be available for April. The overall complexity of the programme structure (cohorts and centres) was noted, as well as the demand-led nature of centres, which will open, evolve, and be stood down as appropriate; a readiness template for centres was reviewed, and a high degree of preparation across the centres noted. It was agreed that decisions on cohorts are needed as soon as possible to facilitate planning.
- Discussed vaccine supply and forecast; by end Q1 a cumulative 1.18m doses are expected to have been supplied to Ireland across the three vaccine types. More than 3.7 million vaccines are expected in Q2; the first (small) delivery of Janssen vaccines is expected in the second half of April with a steep ramp-up thereafter. Deliveries for the next four weeks were also reviewed, noting that the size of deliveries will vary significantly from week to week, which will have to be accounted for to ensure steady distribution. The buffer models for each vaccine were also reviewed.
- Discussed medium-term issues, agreeing that virus variants will continue as a central issue and a new issue was discussed: Modelling Impact of Vaccination Programme to take account of outcomes, variants and transmissibility; it was noted that modelling work is ongoing within NPHET/IEMAG and that updates will be shared with the HLTF.
- Heard an update on the indicative operational scorecard, noting that programme Cumulative Administration Efficiency remains strong, that measurement will be reviewed in light of changing delivery patterns, and that the scorecard will start to focus on VAL-specific and vaccine-specific data, and introduce comparisons across other countries.
- Noted, in summary, recommencement of AZ administration; updates on integrated delivery, vaccination centres and workforce, and updates to the supply forecast.
- Agreed the next meeting of the HLTF will take place on Monday, 29 March at 2pm.

New actions agreed by Task Force – 22 March

#	Action	Owner
1	Overview of IEMAG modelling of impact of vaccination programme to be presented to HLTF	Dr Ronan Glynn
2	Date to be set for meeting in lieu of Easter bank holiday (5 April)	Prof Brian MacCraith