Sensium blog:

Vaccinating for Covid-19



by Alexandra Honour

Alexandra Honour has been a qualified nurse for 16 years. She has experience in A&E and day surgery, and has been with Connected Care since 2015 and is currently our European Clinical Manager. Follow Alex on her journey through Covid-19 as a Community First Responder in Northamptonshire.

One of the questions I get asked a lot is 'do you miss nursing, and would you go back?' The answer always is: yes, I do miss it but no, I would not go back. Sometimes I do feel incredibly guilty for saying that, especially with the nursing crisis and everything we are currently facing. So with that question often asked, it had me thinking for a long time about my nursing skills and knowledge. I was starting to feel they were being a little bit wasted, but not wanting to run back into the crazy world of an an NHS hospital, I had been trying to find something that would fill the gap that I felt was missing, so when I found out further information on becoming a Community First Responder (CFR), it ticked all the boxes.

Since September 2019 I have been a CFR for South Northants Community Responder scheme, which is made up of a group of around 40 volunteers. CFR's are primarily called to attend "Category 1" emergency calls, these are 999 calls which are deemed to be "Serious and/or life threatening". By their very nature they need medical help to arrive as quickly as possible, usually within the first 8 minutes from the 999 call being made. While I am on call, I can continue with my normal day to day activities while in the local area but must be ready to drop everything and attend a call should one arise. A Community First Responder needs to be extremely reliable and trustworthy, good under pressure, able to remain

calm in emergency situations, be caring when dealing with patients and have a good level of physical fitness. Anyone can volunteer for these roles, you don't need to be from a medical/clinical background either. On our team, we have architects, HR managers, police officers, sales reps.

I can choose as and when I go on duty (we have to commit to 200 hours a year), it can fit around my working hours and I get to meet patients again and feel that I am making a difference. Above all of this, I am helping local people in my community at a time when they need someone the most and for me putting on the uniform and getting out there to help other gives me the greatest satisfaction, knowing that I could make a difference.



Photo: East Midlands Ambulance Service CFR Team (Twitter @EMAS_CFR)

Community First Responder in Covid

Fast forward to March 2020, when across the world everyones lives changed. Coronavirus was taking hold and so I made the difficult decision to stand down from my CFR responding duties, mainly due to the fact that I felt vulnerable myself being an asthmatic. However, I was still able to continue to help my community by delivering prescriptions to the vulnerable and shielding patients in our surrounding villages for my local GP surgery, which I absolutely loved.

A couple of weeks later, it turns out that was indeed the right choice as my partner was hospitalised just as the UK went into lockdown. Unfortunately for him he was not tested for Covid-19 as the test was not readily available at that point but we now assume that it was likely to have been Covid, which fortunatelydid not affect his lungs but instead his heart and blood. After 6 days in hospital, he came home and our endless journeys to the hospital for appointments, scans, blood tests and various procedures began. His original diagnosis was Cardiomyopathy, Heart Failure, Atrial Fibrillation and he had a blood clot in his heart - which in turn moved to 2 of his arteries in his right leg, giving the term arterial thrombosis. He also had 'sticky blood', which

meant the number of red blood cells in his blood had increased, making the blood flowing through his body 'sluggish' and could lead to further blood clots. Things looked bleak and there was even talk of amputating his leg. Luckily, between May and December things got a lot brighter, we knew a bit more, he was starting to feel better and currently he is shielding at home during this 3rd lockdown.

In September I went back on call, going out in our CFR community car based in Northampton with a wonderful CFR-colleague, Anne, who I adore being on duty with. She was actually the one who encouraged me to get back out there, so I really do thank her for that.

The Vaccine!

We were all given hope and a glimpse of light at the end of tunnel in December: the vaccine was there. The first one here in the UK was the Pfizer BioNTech and everyone was obviously very excited. Our CFR scheme was asked to be part of the rollout across Northamptonshire, along with a number of other Northamptonshire schemes. We were the only CFRs in the country to be asked to be involved, everyone was watching to see how this would work. I leapt at the chance to be involved with the rollout as it meant I could not

Community First Responder (East Midlands)

There are many Community First Responder (CFR) schemes around the country, linking up with many of the Ambulance Trusts. CFR Schemes ensure that local people are trained in simple and safe techniques that can be used to save lives. These techniques are rarely associated with causing harm and in true life and death situations, there is often little harm that can be done compared to doing nothing at all.

Why: The scheme was set up because approximately 600 people die each year unnecessarily of cardiac arrest and those who live in a rural area can expect a slower response from the Emergency Services than town residents

Who: highly trained individuals who operate as a charity under the governance of East Midlands Ambulance Service NHS Trust. Community First Responder Schemes ensure that local people are trained in simple and safe techniques that can be used to save lives. These techniques are rarely associated with causing harm and in true life and death situations, there is often little harm that can be done compared to doing nothing at all.

Usual procedure: The control room will despatch them to an emergency call within their area. At the same time, an Ambulance will also be dispatched. Whilst the larger vehicle and crew are still on their way, CFR's have usually completed the essential patient assessment and began treatment. Once the crew arrive, the professionals will then take charge and transport the patient to hospital if needed.

only use my nursing skills, albeit rusty, but it meant that I could really feel like I was playing my part in not only getting our local communities vaccinated but also getting the country going again. However, it was not as simple as turning up in our uniform and being able to vaccinate; there was a huge amount of work that needed to be done behind the scenes. For us, this was done by someone who I can only describe as incredible. Conor McClelland, our newly appointed County Co-Ordinator & Training Officer for Northamptonshire and Lincolnshire, was asked to step up and organise a huge task in involving the CFR schemes to sup-

port the role out on behalf of East Midlands Ambulance Service and he has been doing a remarkable job.

My inbox has been regularly filled with emails regarding updates as to what

needed to happen, how it was going to happen, what we needed to do and when and where we needed to do it, by Conor! Before we could start anything, we needed to complete various amounts of online training, this was needed nationally by anyone undertaking the role, and included modules regarding the Pfizer vaccine (and in January the Astra Zeneca) and anaphylaxis. We needed to have recently completed our Basic Life Support and had to attend hands on training at the hospital, where we were given the opportunity to draw up a 'pretend' vaccine and administer into a fake arm. After nearly 10 years of not giving injections from my previous life as an A&E nurse,

everything came flooding back very quickly!

18th December 2020 - I had my first shift at Northampton General Hospital (NGH) where they had just started the roll out to the over 80s age-group and staff. At this point I was not yet able to vaccinate due to being only a Level 2 CFR and some 'red tape' surrounding the vaccinations. This was something that Conor was passionate about changing and worked very hard with the authorities to change. Even without actually vaccinating, I loved absolutely every minute of my shift. I was tasked

with meeting and greeting the patients, ensuring they all had their temperature checked on arrival and given the correct paperwork to complete. The patients were then seen by a doctor to ensure they were suitable for the vaccine, then it was straight into another room for the actual vaccine. I had not seen a customer for near on 40 weeks, so it was amazing to interact with people again that were not on a screen! Even more joyful were that these people that I was meeting, were also so happy because having the vaccine meant so much to them. I came home with the biggest smile on my face feeling extremely proud and a little emotional.

"Within a blink of an eye and a wriggle of my toes, it was done: I had been given my first dose of the COVID vaccine! It was quite an emotional moment, a little ray of light at the end of the dark tunnel we have all been travelling"

20th January – My own vaccination. As we volunteer on behalf of East Midlands Ambulance Service and as we are on the frontline attending patients it meant that we were eligible for the vaccine. At the beginning of the vaccine rollout, the Pfizer vaccine was the only one available and as I have previous history of anaphylaxis and lots of food and medicine allergies, I needed to wait a little longer until the Astra Zeneca one became available and so on 20th January my turn came up. I had to go over to Kettering Ambulance Station to be vaccinated and to be honest, I was a little apprehensive. Not because I was worried about having the vaccine,



no, but because despite being a nurse, I am petrified of needles. I am fine if they are for someone else, but if they are for me, that is a different story! But, within a blink of an eye and a wriggle of my toes, it was done: I had been given my first dose of the COVID vaccine! It was quite an emotional moment, a little ray of light at the end of the dark tunnel we have all been travelling. Over the next couple of days, I had an achy arm and felt a little out of sorts but other than that I had no real side effects, so now I am happily waiting to be called for my 2nd dose.

During the week of Moulton Park opening, I needed to have my competencies signed off part of which included giving the vaccine. To do this I had to go back and work some shifts at NGH, this was super exciting for me. After shadowing another colleague and watching the process of completion of paperwork for each patient, it was my turn! It felt so good to be able to start vaccinating people and once I had been signed off by the shift leader, I was able to vaccinate my own patients, once the doctor had completed their paperwork and double checked everything with the patient.

The 21st January saw some of us attend Moulton Park in Northampton, which had been designated as Northamptonshire's vaccination centre. We were there to help with a walkthrough - essentially a dress-rehearsal - ahead of the opening on 25th January. This was a great opportunity to be part of the next stage of Northamptonshire's vaccine rollout and supporting clinical leads at the vaccination centre, making sure everything was in place. From the patients arriving



I did four 3-4 hour shifts that week, which enabled me to vaccinate 35 people, these varied from anaesthetists, to HCAs, to nurses, to various members of staff from St Andrews Healthcare in Northampton. I even had the privilege to vaccinate one of our own CFRs from our scheme! I now cannot wait to have some shifts at Moulton Park.

Our efforts were recognised on 2nd February by Health Secretary Matt Hancock who hailed the "hard graft" which has made Northamptonshire's NHS' Covid vaccine roll-out

one of the most successful in the country and at that time the official figures showed the county was among the top three areas in England after delivering jabs to 87.2 per cent of the 80-plus population in the county. It has been such a wonderful experience to be part of the history made, not only being able to vaccinate people but also to see and hear the joy of those people finally seeing an end to what has been one hell of a year!! To be able to help my community in this way has been a privilege and for those putting all of these plans into action has been nothing short of amazing.

to park, waiting to book in at the main entrance, patient flow throughout their visit, assessing the patients and of course the most important part, the vaccinating. The walkthrough enabled the clinical leads to be able to understand how long each element of the patient's journey would take and that everything was set out as it needed to be including chairs, social distancing signage, equipment needed etc. The was also the opportunity for further hands-on training, this time being more relevant to the Astra-Zeneca vaccine, as this was the one going to be used at the centre, a building induction (knowing where to get your tea and coffee from, is very important) and finally a clinical induction. A very busy few hours, but nonetheless an enjoyable and worthwhile experience.