

COVID-19 Vaccinations

NHS Staff Indemnity - FAQs

These FAQs have been prepared to support members and beneficiaries of our schemes and others with regard to indemnity arrangements relating to the COVID-19 vaccination programme in England.

Please note that the FAQs have been grouped in this document by audience group, and appear in the following order: [Generic](#), [Trust](#) and [General Practice](#).

These FAQs will be revisited regularly. If you have a specific query that is not answered by the FAQs below, please email: CovidVacc@resolution.nhs.uk

GENERIC FAQs

What indemnity arrangements are in place in the NHS for the administration of COVID-19 vaccinations?

Arrangements are in place as usual to indemnify healthcare professionals in the NHS for clinical negligence through one of the following state indemnity schemes:

- a) The Clinical Negligence Scheme for Trusts (CNST), if they are engaged by an NHS trust to provide NHS services.
- b) The Clinical Negligence Scheme for General Practice (CNSGP), if they are engaged by a GP practice to provide NHS services (i.e. a GP practice, the main business of which, is the provision of NHS primary medical services). This includes salaried GPs, locums, students and trainees, nurses, clinical pharmacists, agency workers and other practice staff.

This cover extends to additional staff being brought in to help with administering vaccines under the national protocol, provided they are engaged by the Trust or practice, for example via a secondment agreement, honorary contract or volunteer agreement. These indemnity arrangements will also apply to the administration of any temporarily authorised COVID-19 vaccines.

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TRUST FAQs

Will I be covered from an indemnity perspective if I administer a COVID-19 vaccination to another member of staff employed by the Trust?

Yes. The contract specification for COVID-19 vaccinations specifically identifies healthcare workers as a cohort of patients for vaccination and therefore cover will be provided under the Trust's membership of the Clinical Negligence Scheme for Trusts (CNST).

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GENERAL PRACTICE FAQs

Will I be covered from an indemnity perspective if I am using an alternative premise or location (including outside locations, e.g. practice car park)?

Yes. Where a GP practice is vaccinating patients under their GMS/PMS/APMS contract, and in line with the COVID-19 vaccine Enhanced Service (ES), the activity is covered by the Clinical Negligence Scheme for General Practice (CNSGP). This indemnity is not dependent on the location in which the services are being delivered.

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Will I be covered from an indemnity perspective if I administer a COVID-19 vaccination to patients that are not registered with my employing GP practice?

Yes. Under the COVID-19 vaccine Enhanced Service (ES) specification, the activity of vaccinating any patient who falls within this specification is covered by the Clinical Negligence Scheme for General Practice (CNSGP).

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Will I be covered from an indemnity perspective if I administer a COVID-19 vaccination to patients who are not registered with my employing GP practice, but are registered with another GP practice that is part of my primary care network (PCN)?

Yes. Under the COVID-19 vaccine Enhanced Service (ES) specification, the activity of vaccinating any patient who falls within this specification is covered by the Clinical Negligence Scheme for General Practice (CNSGP).

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Will I be covered from an indemnity perspective if I administer a COVID-19 vaccination to another member of staff employed by the GP practice?

Yes. The Enhanced Service (ES) specification specifically identifies healthcare workers as a cohort of patients for vaccination and therefore the Clinical Negligence Scheme for General Practice (CNSGP) will apply.

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What indemnity cover is available where a member of a community provider, such as a district nurse, gives a vaccination on behalf of a general practice using practice stock of vaccinations?

There are several ways in which community providers and GP practices can work together to increase COVID-19 vaccination uptake. NHS England and Improvement do not direct how GP practices do this, but options include honorary contracts, secondment agreements, formal subcontracting or by using a 'vaccination agency agreement' (VAA).

A VAA allows for a community nurse to act as 'an agent' of the GP practice using GP practice vaccine stock. For the past two years, NHS England and Improvement has made a template VAA available to local commissioners and public health teams, which they in turn can make available to practices.

Where GP practices have entered into arrangements with community providers for the provision of primary medical services under their GMS/PMS/APMS contract, then for situations as described in the above scenarios clinical negligence liabilities are covered by the Clinical Negligence Scheme for General Practice (CNSGP).

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What indemnity arrangements apply to volunteers who perform stewarding roles for GP practices or PCN-led vaccination sites?

Locally engaged volunteers performing a stewarding role as part of the Covid-19 vaccination service will be covered by CNSGP or the practice's public liability insurance depending on the nature of the incident that leads to a claim being made. For example, if there is a claim for clinical negligence, i.e. related to the provision of care or treatment to a person being vaccinated, and the volunteer's conduct is relevant to that claim, they will be covered by CNSGP. Where there is a claim for public liability, e.g. where an individual suffers injury on the premises unrelated to being vaccinated, and the volunteer's conduct is relevant to that claim, they will be covered by the practice's public liability insurance. We recommend that GPs put in place a local volunteer agreement for locally engaged volunteers.

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