

Cheshire and Merseyside Screening and Immunisation Team  
Public Health England/NHS England

To: Cheshire and Merseyside GPs & Practice Managers  
Local Medical Committees

11 July 2017

Dear Colleague,

**Re: Cheshire and Merseyside Influenza Immunisation Programme 2017/18**

Thank you for your hard work in vaccinating your patients and staff against influenza each year.

Please share this letter with your General Practice team who are involved in delivering and/or promoting the influenza vaccine programme. Its purpose is to help you prepare for the 2017/18 seasonal influenza vaccine programme with:

- Key points from the GP Enhanced Service Specification, and the national Flu letter
- Learning from the annual programme within Cheshire and Merseyside
- Local key recommendations
- Recommendations from the Cheshire and Merseyside Sustainability and Transformation Partnership (STP).

In 2016/17, General Practice teams in Cheshire and Merseyside delivered almost all of 510,000 immunisations given to people over 65 years old, under 65 years old with an at risk condition, and pregnant women. Overall the average uptake within these cohorts improved slightly compared to previous years. Some practices achieved very good uptake rates, particularly for “at risk groups” and pregnant women and healthy children age 2, 3 and 4 years. If your practice did well, please share your experience in your CCG. One of our aims this year is to reduce variation in uptake rates.

**Seasonal influenza GP enhanced service (available at <https://www.england.nhs.uk/wp-content/uploads/2017/03/sfl-pneumococcal-2017-18-service-specification.pdf>)**

- This season, the service specification offers again £9.80 per dose to eligible patients.
- Those eligible should be vaccinated as early as possible in the season, from 01 September 2017.
- Patients should be vaccinated on either:
  - i. A proactive call basis, if not considered at-risk, or
  - ii. A proactive call and recall basis, if considered at-risk with the aim of maximising uptake in at-risk patients.
- Where the patient (or parent/guardian where appropriate) has indicated they/their child wish to receive the vaccination but are physically unable to attend the practice (for example the housebound) the practice must “make all reasonable effort) to ensure the patient is vaccinated.
- Morbidly obese patients are included as an at-risk cohort in the DES. Practices are reminded that it is a contractual requirement to record all influenza vaccinations on ImmForm. Funding to cover this new cohort will be from Section 7A.

## The tripartite flu letter: 'The National Flu Immunisation Programme 2017/18'

A national flu plan was published alongside the letter; both are available at the following link:  
<https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan>

These documents contain comprehensive information to help you prepare for this year's national seasonal flu programme. Information is presented in separate appendices making it easier to access specific information as follows:

Appendix A:	Groups included in the national flu immunisation programme
<b>Appendix B:</b>	<b>GP practice checklist (attached as an appendix to this letter)</b>
Appendix C:	National extension of flu programme to children
Appendix D:	Health and social care workers
Appendix E:	Pregnant women
Appendix F:	Vaccine supply and ordering
Appendix G:	Data collection
Appendix H:	Contractual arrangements
Appendix I:	Communications

The GP practice checklist is a particularly useful tool, based on the findings from a study examining the factors associated with higher vaccine uptake in general practice. General practices are urged to implement these guidelines in order to help improve vaccine uptake.

Template letters will also be available to GP practices (for the latest updates, please check <https://www.gov.uk/government/collections/annual-flu-programme#2017-to-2018-flu-season>):

- To invite at risk patients and those aged 65 and over for flu vaccination
- To invite two and three year olds
- An easy read invitation leaflet for people with learning difficulties

### National uptake ambition (within the tripartite letter)

Eligible group	Uptake ambition for 2017/18
<b>Routine Programme</b>	
Aged 65 years and over	<b>75%</b> , reflecting the World Health Organisation (WHO) target for this group.
Healthcare workers	Minimum <b>75%</b> uptake and an improvement in each Trust. In 2017/18 there continues to be financial incentive to reach this target in the form of the CQUIN. It is expected that primary care providers aim to achieve this ambition as well.
Aged under 65 'at risk', including pregnant women	<b>At least 55% in all clinical risk groups</b> , maintaining higher rates where those have already been achieved. Ultimately the aim is to achieve at least 75% uptake in these groups given their increased risk of morbidity and mortality from flu.
<b>Children's Programme</b>	
Children aged 2 – 8 years	<b>40-65%</b> to be attained by every provider. The ambition is expressed as a range because, to date, uptake among pre-school children has been lower than among those at school.

In Cheshire and Merseyside our average achievement in CCGs is generally comfortably above those ambitions. We also know that many practices already achieve much higher uptake. We encourage colleagues to maintain their previous high uptake rates and aspire further, in line with Cheshire and Merseyside STP recommendations (as part of the NHS Five Year Forward View).

## Cheshire and Merseyside STP (NHS Five Year Forward View) Recommendations

On flu vaccination, the recommendation states that “morbidity and mortality attributed to flu is a key factor in NHS winter pressures and a major cause of harm to individuals, especially vulnerable people. Flu vaccination is critical to reduce GP consultations, unplanned hospital admissions and pressure on A&E.”

The plan commits to reduce existing wide variation in flu vaccination uptake across providers and all organisations to achieve 75% flu vaccination uptake for pregnant women, clinical risk groups and health care workers, and 65% uptake for the healthy child flu vaccination programme.

### Local arrangements across Cheshire and Merseyside

The below recommendations are taken from the Cheshire and Merseyside annual flu report:

- Share examples of good practice, particularly for: young children age 2 and 3 years, pregnant women and at risk groups
- Address wide variation and support particularly low performing providers
- Enhance maternal clinical provision of flu vaccine
- Roll out of bespoke services, to promote engagement with vulnerable groups/clients, such as homeless services and substance misuse team
- Support, via Local Authorities and local flu groups, an increase in uptake for Health Care Workers within residential/nursing homes, to assist the prevention of flu outbreaks

**House Bound Nursing/Residential Homes:** The Cheshire and Merseyside commissioning plan is for GP Practices to offer the flu vaccination to all of the eligible patients on their list including housebound and those residing in nursing and residential homes.

If GPs wish to enter into other arrangements with any other provider e.g. district nurses to vaccinate patients on their behalf, they will need to provide assurance to NHS England’s commissioning team that arrangements are in place for all of their eligible patients.

**Children’s School based Flu Programme:** There is an added change to the extension of the universal nasal spray flu vaccine programme to children of school age for 2017/18. It now includes five school years: reception class and school years 1, 2, 3 and 4. These cohorts will be offered the vaccine by school nursing services. GPs will be notified by school nursing services within a 14 day timeframe. All flu vaccination data will need to be entered onto the GP electronic system to ensure clinical records are up to date and for monitoring purposes.

For those children in ‘at risk’ categories **only**, if they either require a second dose or have missed the vaccination in school they will be directed to their GP for vaccination. In addition if the school is not scheduled to be visited by the school health provider service until late November or early December, then a parent may wish to bring their child with “at risk” criteria to have the immunisation sooner at the GP surgery; this is within the GP service specification. We encourage practices NOT to immunise the “well children” in the universal school programme cohorts listed above; there is no GP payment for this cohort and also it can cause incidents of children receiving the vaccine twice.

**Maternal flu programme:** This programme is mostly delivered by primary care. NHS England has worked with maternal providers to support this programme. Last season ALL maternal providers offered some clinical administration of the vaccine. Plans are under way to increase this clinical activity, mostly based within the hospital setting of antenatal care; however there is some learning to share of community based delivery also.

GPs will be notified by maternity services within 24 to 48 hours of their patients receiving flu vaccination by the midwives.

**Pharmacists:** NHS England has announced that the flu vaccinations service in community pharmacies will be recommissioned for 2017/18.

When pharmacy teams provide the Flu Vaccination Advanced Service, notifying the patient's GP practice is an important service requirement. Community pharmacy contractors must ensure that a notification of vaccination is sent to the patient's GP practice on the same day the vaccine is administered or on the following working day. To help support the communication of the flu vaccine programme in pharmacy to general practices, NHS England Cheshire and Merseyside has agreed that all participating pharmacies use the PharmOutcomes software for payment and reporting purposes. This is co-funded by NHS England and the LPCs for the cost of the software. Use of this software helps NHS England to have quite detailed real time statistics relating to uptake. Please note the national Pharmacy specification is restricted to: 18 years of age and over, delivered within the pharmacy setting and an outreach service to care/nursing homes by contractual arrangement.

**Bespoke NHS E commissioned services:** Providers of Drug and Alcohol Services across Cheshire and Merseyside have been contacted to roll out the successful previous pilots. These resulted in 720 vaccinations being given to clients of the Drug and Alcohol Services across Cheshire and Merseyside in 2016/17. It is expected that for 2017/18, all providers will work with NHS England to provide flu vaccinations.

**Patient Group Direction:** The National influenza Patient Group Directions (PGD) will be authorised locally for Cheshire and Merseyside and circulated.

**Practice Support:** The PHE Screening & Immunisation Team will work in collaboration with Local Authorities and CCGs to provide support to practices in developing and enhancing flu action plans. Any practices that have been successful in reaching high uptake are encouraged to share their plans and best practice at practice manager and practice nurse meetings, or with local flu groups.

**Training:** Annual updates for all practice nurse staff are recommended. Information regarding immunisation updates has recently been circulated to CCGs. Bespoke influenza vaccine e-learning is available on the NHS website: <http://www.e-lfh.org.uk/programmes/flu-immunisation/>

We hope you find the summary letter useful. If you have any queries regarding any information in this letter please contact the Screening and Immunisation team, via the generic email inbox: [england.cm-imms@nhs.net](mailto:england.cm-imms@nhs.net)

Kind regards

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## Appendix A: Cheshire and Merseyside Influenza Programme Contacts for 2017/18

### **Lead Manager for routine programme (adults and at risk):**

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## Appendix B: GP Practice Checklist

Practices are encouraged to implement the guidelines below which are based on evidence about factors associated with higher flu vaccine uptake.

### Named lead

- Identify a named lead individual within the practice who is responsible for the flu vaccination programme and liaises regularly with all staff involved in the programme.

### Registers and information

- Hold a register that can identify all pregnant women and patients in the under 65 years at risk groups, those aged 65 years and over, and those aged two to three years.
- Update the patient register throughout the flu season paying particular attention to the inclusion of women who become pregnant and patients who enter at risk groups during the flu season.
- Submit accurate data on number of patients eligible to receive flu vaccine and flu vaccinations given to its patients on ImmForm ([www.immform.dh.gov.uk](http://www.immform.dh.gov.uk)), ideally using the automated function. Submit data on uptake amongst healthcare workers in primary care using the ImmForm data collection tool.

### Meeting any public health ambitions in respect of such immunisations

- Order sufficient flu vaccine taking into account past and planned improved performance, expected demographic increase, and to ensure that everyone at risk is offered the flu vaccine. It is recommended that vaccine is ordered from more than one supplier and in respect of children from PHE central supplies through the ImmForm website.

### Robust call and recall arrangements

- Invite patients recommended to receive the flu vaccine to a flu vaccination clinic or to make an appointment (e.g. by letter, email, phone call, text). This is a requirement of the enhanced service specification.
- Follow-up patients, especially those in at risk groups, who do not respond or fail to attend scheduled clinics or appointments.

### Maximising uptake in the interests of at-risk patients

- Start flu vaccination as soon as practicable after receipt of the vaccine. This will help ensure the maximum number of patients are vaccinated as early as possible and are protected before flu starts to circulate. Aim to complete immunisation of all eligible patients before flu starts to circulate and ideally by end of December.
- Collaborate with maternity services to offer and provide flu vaccination to pregnant women and to identify, offer and provide to newly pregnant women as the flu season progresses.
- Offer flu vaccination in clinics and opportunistically.
- Where the patient has indicated they wish to receive the vaccination but is physically unable to attend the practice (for example is housebound) the practice must make all reasonable effort to ensure the patient is vaccinated. The GP practice and/or CCG will collaborate with other providers such as community pharmacies and community or health and social care trusts to identify and offer flu vaccination to residents in care homes, nursing homes and house-bound patients, and to ensure that mechanisms are in place to update the patient record when flu vaccinations are given by other providers.

For guidance on improving uptake among children in general practice see 'Increasing influenza immunisation uptake among children': [www.gov.uk/government/collections/annual-flu-programme](http://www.gov.uk/government/collections/annual-flu-programme)