



Public Health
England

Protecting and improving the nation's health

The national flu immunisation programme 2017/18

Tracey Turner
Screening and Immunisation Coordinator

Flu kills

- PHE estimates that an average of 8,000 people die every year from flu
- Some years this is as high as 14,000
- People with an underlying health condition are 11 times more likely to die from flu than those who don't (despite this, only 52% get vaccinated)
- Pregnant women are especially vulnerable – 1 in 11 pregnant women who died between 2009 and 2012 had flu



Flu Vaccination programme 17/18

- All **GP practices** commissioned to offer flu vaccination to all cohorts.
- National NHS Flu vaccination programme offered to all **Pharmacists** in Barnsley (awaiting confirmation who has accepted).
- BHNFT **maternity services** offering flu vaccination to pregnant women.
- BHFNT, SWYFT – offer to **staff**



Flu vaccine eligibility: 2017/18 flu season

- all children aged two to eight (but not nine years or older unless in a clinical at risk group)
- all primary school-aged children in former primary school pilot areas (not Barnsley)
- those aged six months to under 65 years in clinical risk groups
- all pregnant women (including those who become pregnant during flu season)
- those aged 65 years and over
- those living in long-stay residential care homes or other long-stay care facilities
- carers and household contacts of immunocompromised individuals

Frontline health and social care workers should be provided flu vaccination by their employer. This includes general practice staff.



Clinical risk groups

- Chronic respiratory disease
- Chronic heart disease
- Chronic kidney disease
- Chronic liver disease
- Chronic neurological disease
- Diabetes
- Immunosuppression
- Asplenia or dysfunction of the spleen
- Pregnant women
- Morbidly Obese (defined as BMI of 40 and above)



Other groups who should receive flu vaccine

The list of clinical risk groups is not exhaustive

- healthcare practitioners should apply clinical judgement to take into account the risk of flu exacerbating any underlying disease as well as the risk of serious illness from flu itself
- flu vaccine should be offered to such patients even if the individual is not in the clinical risk groups specified in the risk groups list
- child contacts of very severely immunocompromised individuals should be given inactivated vaccine

Flu vaccine pilot success

In flu vaccine pilot areas (2014/15) where primary school age children were given the nasal spray vaccine we saw:



Public Health
England



↓ 94%

Primary school aged children: GP influenza like illness consultation rates 94% lower



↓ 74%

Primary school aged children: A&E respiratory attendances 74% lower



↓ 93%

Primary school aged children: Hospital admissions due to confirmed influenza 93% lower



↓ 59%

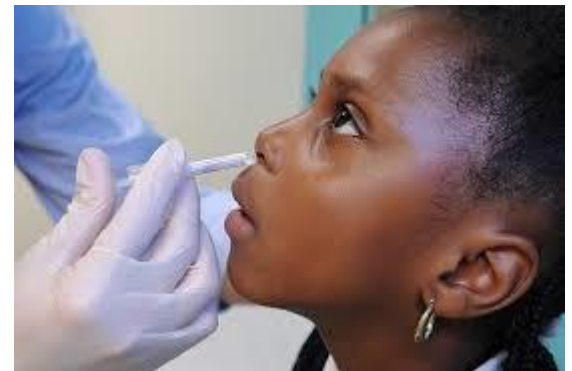
Adults: GP influenza like illness consultation rates 59% lower

Childrens programme delivery

GP delivery

All those aged two or three years (but not four years or older) on 31 August 2017

= date of birth on or after 1 September 2013 and on or before 31 August 2015



Primary School Based programme

All Children in:

Reception is defined as four rising to five year olds.

(i.e. date of birth between 1 September 2012 and on or before 31 August 2013)

Year 1 is defined as five rising to six year olds

(i.e. date of birth between 1 September 2011 and on or before 31 August 2012)

Year 2 is defined as six rising to seven year olds

(i.e. date of birth between 1 September 2010 and on or before 31 August 2011)

Year 3 is defined as seven rising to eight year-olds

(i.e. date of birth between 1 September 2009 and on or before 31 August 2010)

Year 4 is defined as eight rising to nine year-olds

(i.e. date of birth between 1 September 2008 and on or before 31 August 2009)

Barnsley Uptake 2016/17

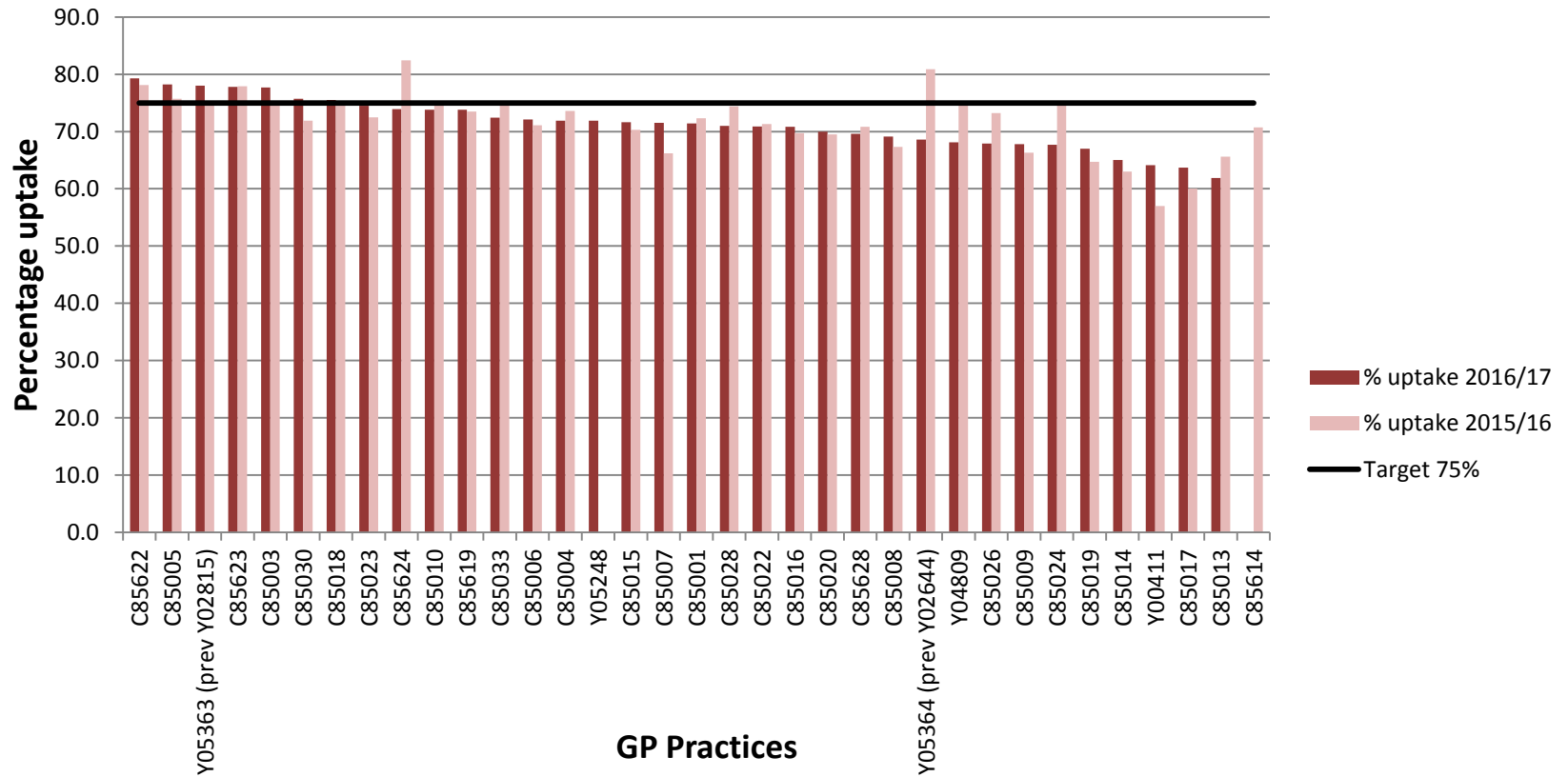
Cohort	% Uptake 16/17	Aspirational Targets 17/18
Aged 65 years and over	71%	75%
Aged under 65 at risk	50.9%	55%
Pregnant women	46.2%	55%
All Aged 2 Years	43.5%	40-65%
All aged 3 Years	46.2%	40-65%
All Aged 4 Years	37.9%	40-65%
School Years 1	65.2%	40-65%
School Years 2	65.9%	40-65%
School Years 3	64.5%	40-65%

Clinical risk groups uptake in Barnsley

Cohort	% uptake 16/17	Number needed to vaccinate to reach target	Aspirational target for 17/18
Chronic liver disease	40.5%	127	55%
Immunosuppression	53.6%	23	
Chronic neurological disease	53.6%	23	
Chronic renal disease	53%	31	
Chronic heart disease	52.7%	130	
Chronic respiratory disease	51.7%	466	
Diabetes	63.7%	Achieved	

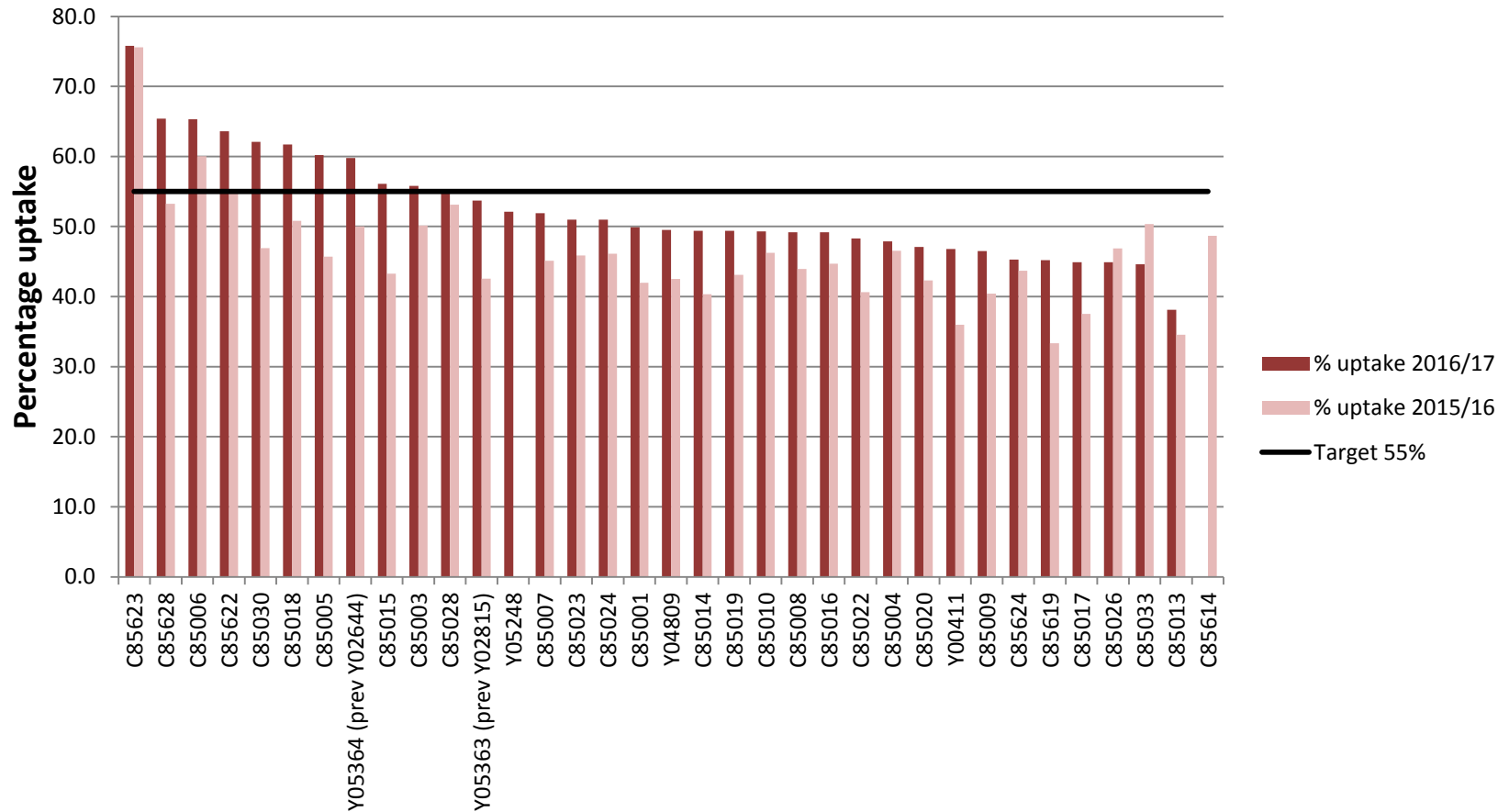
GP Practice level data

65 and Over



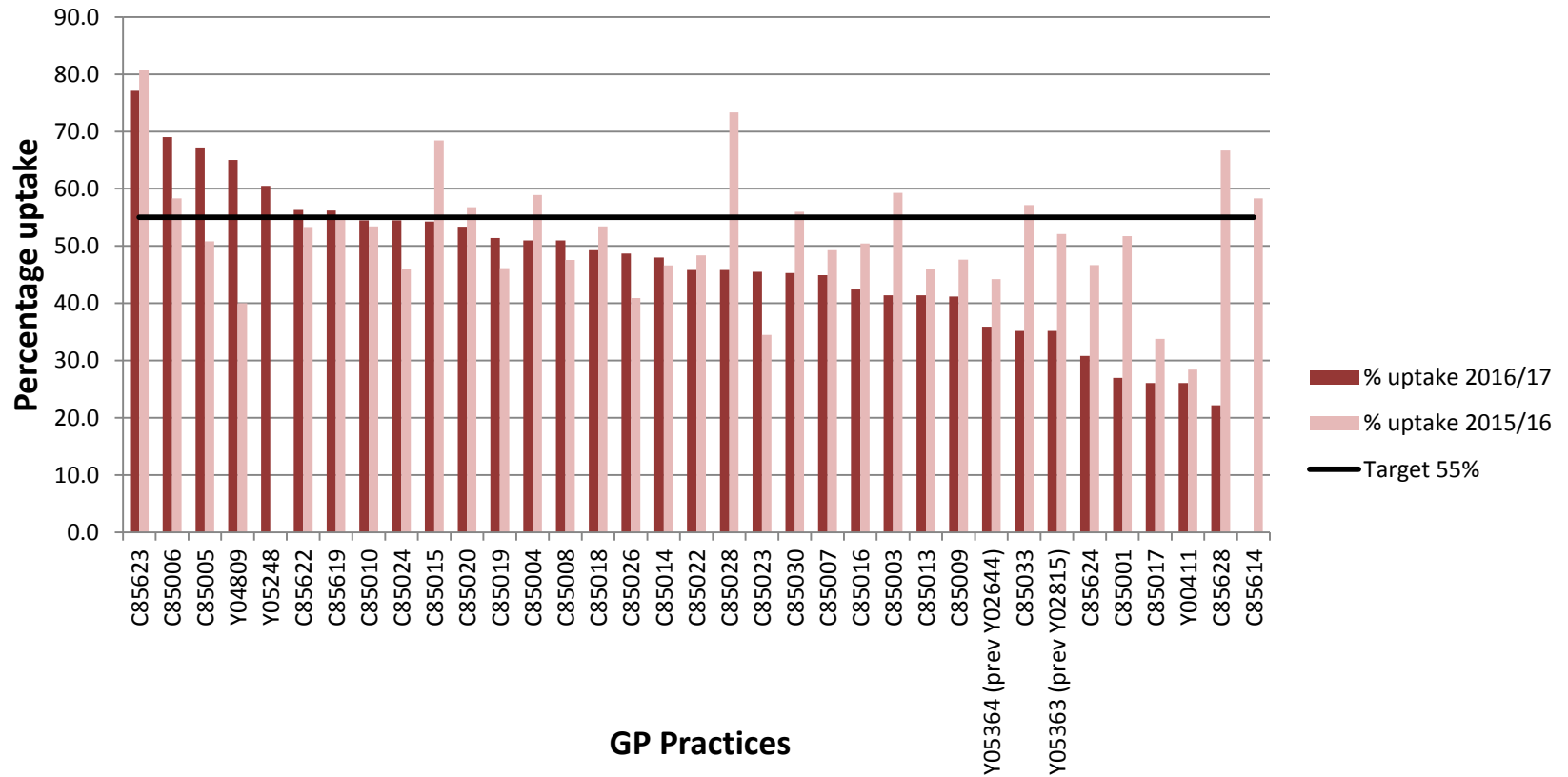
GP Practice level data

Patients at-risk 6 months to under 65 years



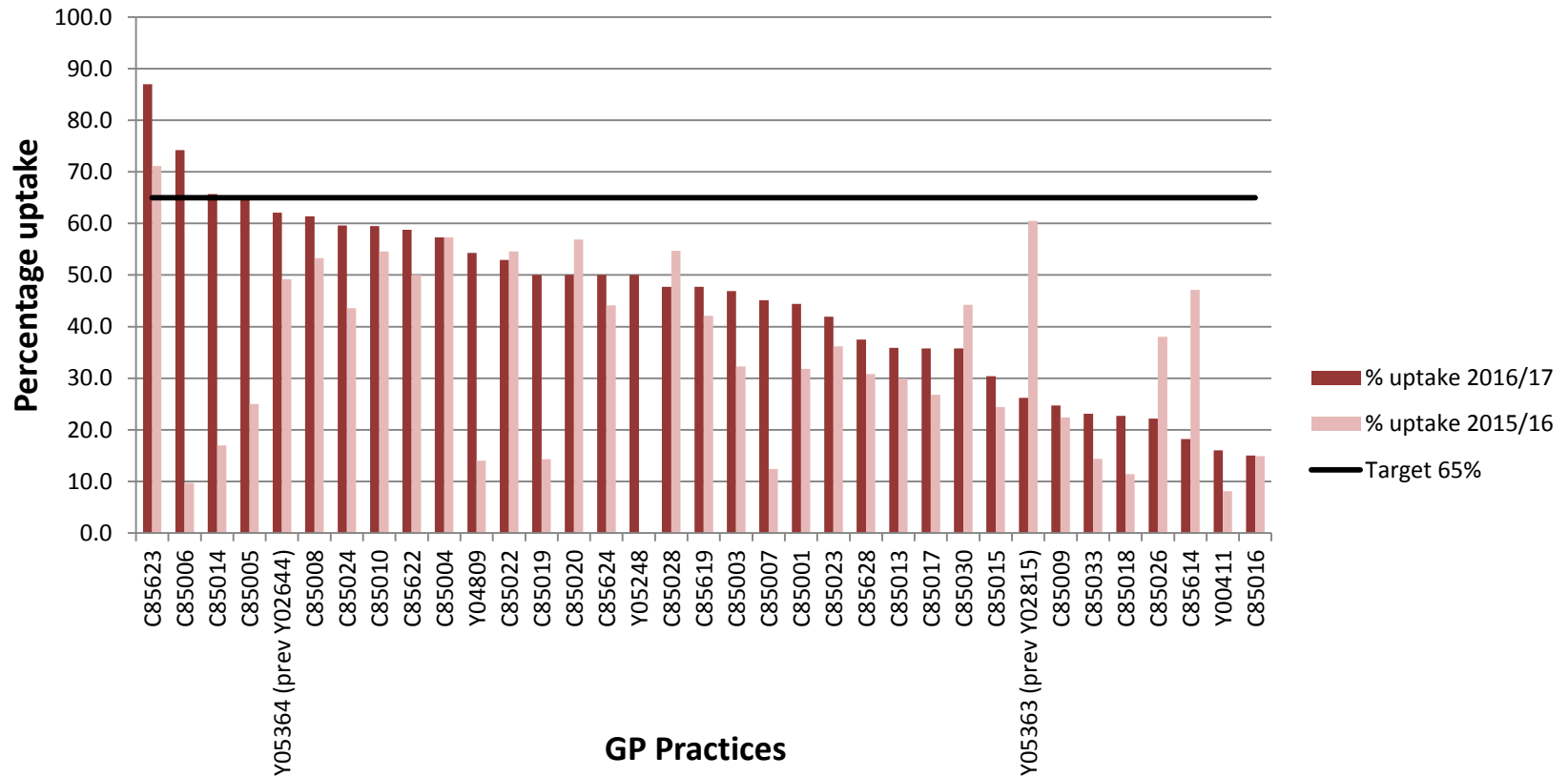
GP Practice level data

Total pregnant women



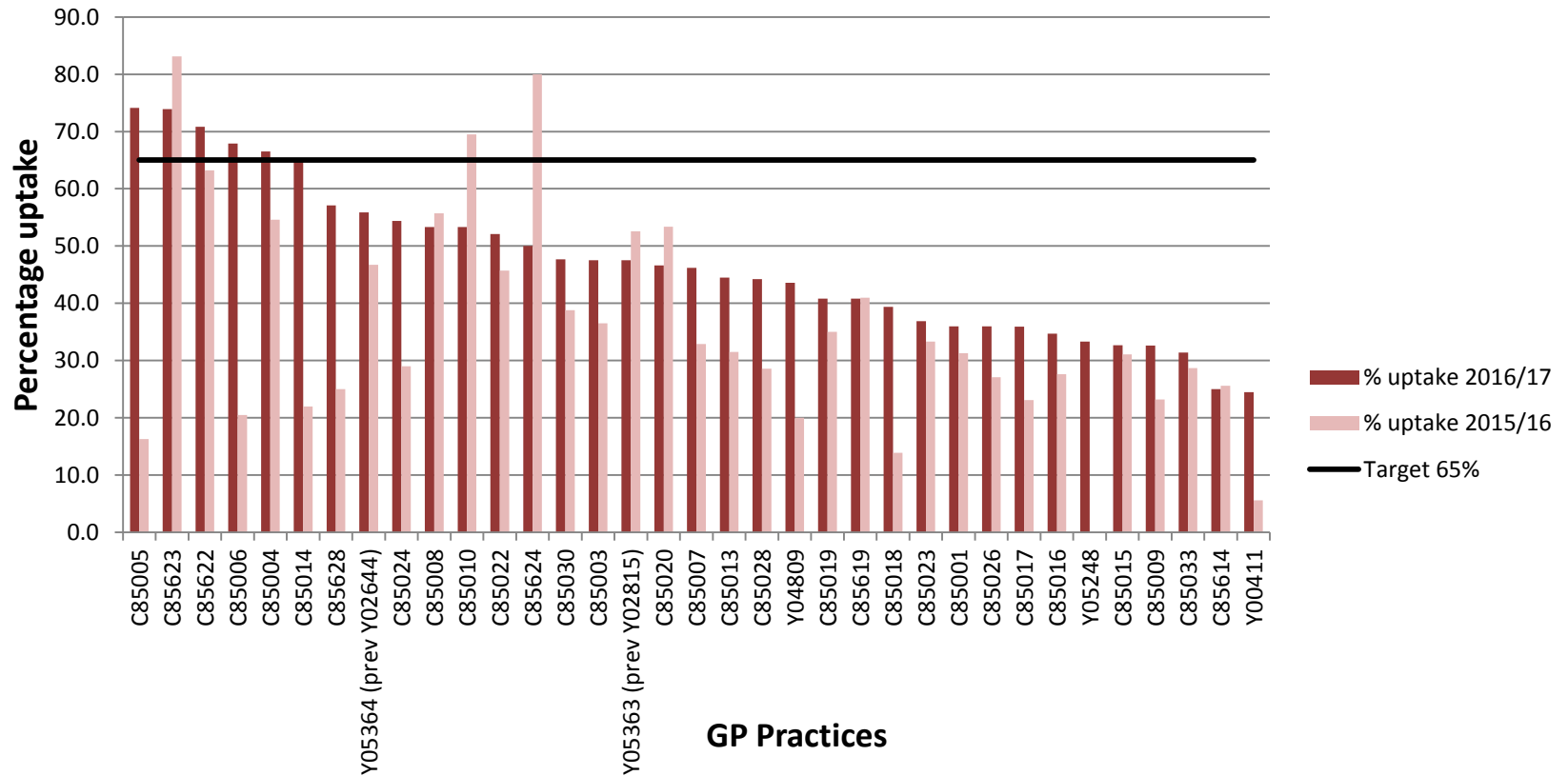
GP Practice level data

All 2 year olds



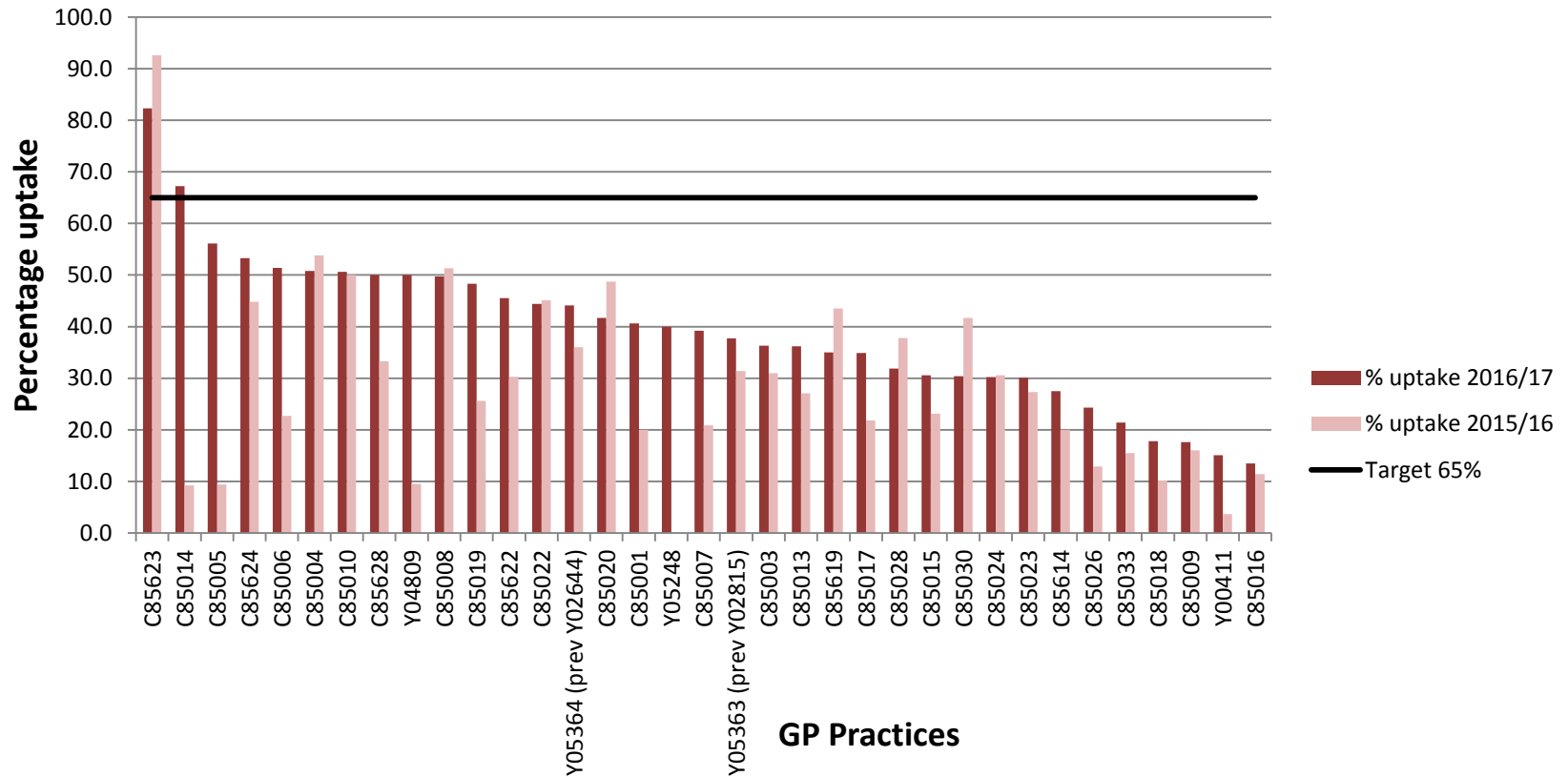
GP Practice level data

All 3 year olds



GP Practice level data

All 4 year olds



Achieving high uptake (GP Practice checklist)

In order to obtain high vaccine uptake, it is recommended that GP practices:

1. 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
2. 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
3. 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
4. Submit accurate data on the number of its patients eligible to receive flu vaccine and the flu vaccinations given to its patients on ImmForm (www.immform.dh.gov.uk), ideally using the automated function. Submit data on uptake among healthcare workers in primary care using the ImmForm data collection tool

Achieving high uptake (GP Practice checklist cont'd)

5. 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
6. Invite patients recommended to receive the flu vaccine to a flu vaccination clinic or to make an appointment (eg by letter, email, phone call, text). This is a requirement of the enhanced service specification
7. Follow-up patients, especially those in at risk groups, who do not respond or fail to attend scheduled clinics or appointments
8. 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 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

Achieving high uptake (GP Practice checklist cont'd)

9. 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
10. Offer flu vaccination in clinics and opportunistically
11. Where the patient has indicated they wish to receive the vaccination but is physically unable to attend the practice (eg 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

The GP practice checklist highlights good practice

- it is based upon the findings from a study examining the factors associated with higher vaccine uptake in general practice
- GP practices are encouraged to review their systems in the light of the checklist

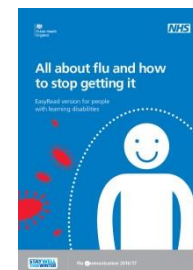
Most recommendations will apply to other settings where flu vaccine is given

Key messages to health and social care workers

- duty of care as professionals to patients or residents to do everything in your power to protect them against infection, including being immunised against flu
- getting vaccinated against flu can help protect you, your patients and family
- everyone is susceptible to flu, even if you are in good health and eat well
- you can be infected with the virus and have no symptoms but can still pass flu virus to others including patients or residents
- good infection control measures reduce spread of flu and other acute respiratory infections in healthcare settings but are not sufficient alone to prevent them
- impact of flu on frail and vulnerable patients can be fatal and outbreaks can cause severe disruption in communities, care homes and hospitals
- flu vaccine has a good safety record and will help protect you. It cannot give you flu. Having the vaccination can encourage your colleagues to do likewise
- throughout the last ten years there has generally been a good to moderate match between the strains of flu virus in the vaccine and those that subsequently circulated
- staff act as positive role models for patients aged 65 and over, those with long-term health conditions and pregnant women to take up the offer too

Resources

- **Flu Plan and Letter detailing 2017/18 flu programme**
Department of Health, Public Health England, NHS England. Published 20 March 2017 Available at: <https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan>
- **Green Book Influenza chapter** Available at: <https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book>
- **Leaflets, posters, information materials and other resources to support the annual flu programme** Available at: <https://www.gov.uk/government/collections/annual-flu-programme>
- **A video for health professionals on how to administer the LAIV vaccine** produced by NHS Education for Scotland is available at <http://www.nes.scot.nhs.uk/education-and-training/by-theme-initiative/public-health/health-protection/seasonal-flu/childhood-seasonal-flu-vaccination-programme-resources-for-registered-practitioners.aspx>
- **Summary of Product Characteristics (SPC) for flu vaccines** are available at <http://www.medicines.org.uk/emc/>
- Find out more about **antibiotic resistance**, other ways to reduce its rise and how you can help through www.antibioticguardian.com



Resources

- Stay Well this Winter Campaign Resources:

<https://campaignresources.phe.gov.uk/resources/campaigns/34-stay-well-this-winter-/resources>

- NHS Employers flu fighter campaign

<http://www.nhsemployers.org/campaigns/flu-fighter>

<http://www.nhsemployers.org/case-studies-and-resources/2017/07/flu-fighter-videos>

- Health & Social Care Publications order line

<https://www.gov.uk/government/publications/flu-vaccination-who-should-have-it-this-winter-and-why>



**STAYWELL
THISWINTER**



ANY
QUESTIONS
?

Contact details

Tracey Turner

Screening & Immunisation Co-ordinator

NHS England North (Yorkshire and Humber)

Tel: 01138253475

Mobile: 07554222699

Email: tracey.turner5@nhs.net