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| **NHS England and NHS Improvement (North East and Yorkshire)**  **Yorkshire and the Humber Flu Programme 2021-22** |
| **Frequently Asked Questions & Answers** |
| **This is a live document and will be routinely updated. This document can only reference national policy or local commissioning arrangements. The intention is to circulate FAQs regularly. Please note that this is not an NHS England policy document; formal policies, which are worked through NHSE/PHE Gateway will be sent to you directly. This document is a reference tool to help support local providers and stakeholders and is an effort to share, collaboratively, questions that we receive.** |
| **This document & any information provided herein is guidance only. All information is given in good faith and is accurate at the response date listed in this document. Information may be superseded by later versions; therefore, please ensure you read/review all questions to ensure you are receiving the most up to date information. The commissioning team believe the content of this to be correct at the date of issue.**  **Updates are shown in yellow.** |

| **No.** | **Question** | **Answer** |
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|  | **A: Guidance / Legislation on delivery models** | |
| A1 | What National guidance has been issued for 21-22 Flu Programme so far? | [National flu immunisation programme plan](https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan?utm_source=7122860a-fe26-4d1c-94d3-0cccddbd93dd&utm_medium=email&utm_campaign=govuk-notifications&utm_content=weekly)  The annual flu letter describes the national flu immunisation programme and outlines which groups are eligible for flu vaccination.   * 3rd Feb 2021  [C1076-NHSEI-Flu-reimbursement-letter (psnc.org.uk)](https://psnc.org.uk/sheffield-lpc/wp-content/uploads/sites/79/2021/02/C1076-NHSEI-Flu-reimbursement-letter-3-February-2021.pdf) * 1st April 2021 [NHS England » Achievements and developments during 2020/21 flu season](https://www.england.nhs.uk/publication/achievements-and-developments-during-2020-21-flu-season/) * 14th July 2021 Enhanced Service Spec: Phase 3 Coronavirus Vaccination: Letter to GP’s and Phase 3 Enhanced Service Spec: [Coronavirus » Enhanced Service Specification: Phase 3 coronavirus vaccination (england.nhs.uk)](https://www.england.nhs.uk/coronavirus/publication/enhanced-service-specification-phase-3-coronavirus-vaccination/) * 14th July 2021 <https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2021/07/C1347-Letter-to-community-pharmacy-Phase-3-Expression-of-Interest-process.pdf> * 17th July 2021 (Updated 28th July) [National flu immunisation programme 2021 to 2022 letter - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan/national-flu-immunisation-programme-2021-to-2022-letter) * <https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan> * 1st September 2021 (updated 5th November 2021) [National Protocol for Inactivated Influenza Vaccine](https://www.gov.uk/government/publications/national-protocol-for-inactivated-influenza-vaccine) |
| A2 | Where can I find the GP Enhanced Service specification? | [NHS England » NHS England Enhanced Services Influenza Specifications](https://www.england.nhs.uk/publication/nhs-england-enhanced-services-influenza-specifications/)  This has been updated to included co-administration and synergistic delivery of influenza vaccine with COVID-19 and vaccination of frontline primary care workers.  The revised PGD has now been updated and will be available on the Y&H PGD website.  The National protocol for Inactivated Influenza Vaccine has also been updated (see above). |
| A3 | What will the pharmacy delivery be for 21/22? | [Community Pharmacy Service Specification for the upcoming 2021/22 flu season](https://generalpracticebulletin.cmail19.com/t/d-l-qukhitd-jujdjlttkd-j/).  This has been updated to enable community pharmacies to vaccinate primary care contractors (primary medical services, pharmaceutical services, primary dental services, or general ophthalmic services) and their frontline staff, who elect to receive their vaccination from the community pharmacy.  The revised PGD has now been updated to include this group of staff and should have been shared directly with providers.  The National protocol for Inactivated Influenza Vaccine has also been updated (see above). |
| A4 | What are the issues relating to indemnity insurance for delivery of 2021/22 flu programme? | NHSE/I cannot advise on indemnity insurance and practices should always ensure that their indemnity insurance covers them for any delivery plans. |
| A5 | Can Patient Group Directions (PGD's) be used across Primary Care Networks / Clinical Commissioning Groups (PCNs / CCGs)? | The general principle is that you can use one PGD but there must be an MOU/SLA etc to cover the governance etc. The following link states: If a registered healthcare professional (HCP) is approved to operate under a PGD within the legislation and their own practice then it can be considered that that HCP is also authorised to operate under the same PGD for the treatment of patients across the PCN provided this has been agreed by the PCN. <https://www.sps.nhs.uk/articles/patient-group-direction-use-in-primary-care-networks/>. This also applies to a CCG footprint. |
| A6 | Who can deliver under a PGD - can this be extended to ALL Healthcare Professionals? | The list of Health Care Professionals who can deliver under the NHSE/I Commissioned Flu Services PGD as follows:   * nurses and midwives currently registered with the Nursing and Midwifery Council (NMC) * pharmacists currently registered with the General Pharmaceutical Council (GPHC) (Note: This PGD is not relevant to the national community pharmacy seasonal influenza vaccination advanced service nor privately provided community pharmacy services) * chiropodists/podiatrists, dieticians, occupational therapists, orthoptists, orthotists/prosthetists, paramedics, physiotherapists, radiographers and speech and language therapists currently registered with the Health and Care Professions Council (HCPC) * dental hygienists and dental therapists registered with the General Dental Council * optometrists registered with the General Optical Council.   This list cannot be extended to other healthcare professionals; however, the development of a national protocol is being considered.  Further detail can be found at: <https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-19-patient-group-directions-pgdspatient-specific-directions>;  <https://www.sps.nhs.uk/articles/doctors-dentists-and-use-of-pgds/> |
| A7 | If a Covid vaccination site wants to co-administer flu and covid vaccinations for walk-in patients from across the CCG/borough (so the patient is not in their PCN),  are they able to give the flu vaccination under the PGD to a patient that is not in their PCN please? | Following discussion with Medicines Optimisation colleagues, agreed that as long as there is an MOU/SLA in place between the vaccination centre and **all** practices whose patients would potentially attend (probably all of them) and the practice running the vaccination centre accepts full responsibility for all patients, they could work under the PGD  and you can administer to anyone in the CCG area. However, all staff from any practice staffing the centre would have to be listed and authorised. |
| A8 | Is vaccination permitted ‘off site’/away from the CQC registered premises? | Response from CQC <https://www.cqc.org.uk/guidance-providers/registration/registration-flu-vaccination-arrangements>:   1. The vaccination site will be at an existing practice location already listed in my/our conditions of registration for TDDI/D&SP and I/we will be responsible for the quality and safety of the service.  * *In this case, you are already registered to carry on the Registered Activities (RA’s) at the proposed location and no application is necessary.*  1. The vaccination site will be hosted at another location which is not listed in my/our conditions of registration, but already listed in the conditions of registration of another CQC registered provider (host) for TDDI/D&SP.  * *If the host will be responsible, you will not need to make any application. You could update your SOP to tell us that you are helping the host. The host is already registered to carry on the RAs at the proposed location and no application is necessary.* * *If you will be responsible, you will not need to make any application. You will need to update your SOP to tell us that you are running the vaccination site as a ‘satellite’ of your own practice. There will be no separate inspection of the service, which will be included as a part of any inspection of your main practice location.*  1. You will provide vaccination and other medical services at a site, in premises which have not been used for the carrying on of a RA. The location is not listed in my/our conditions of registration or in the registration of any other CQC registered provider.   I/we will be responsible for carrying on the RA and the quality and safety of the service at the location and the location will be equipped and maintained to the standard expected for patient healthcare, i.e. surgery   * *While sites ONLY used for vaccination generally don’t need to be added as a location, the other services you provide there may mean that you will need to make an application to vary your location condition by adding the location to your registration.* * *You need to speak to the local Registration Team. If the service is already in operation, you will be in breach of your location condition and you should not do that without consulting us. If the service needs to start urgently, we may be able to agree this and process your application in retrospect.* * *This location may be inspected in its own right and separately to existing practice locations.*  1. The vaccination site will be in premises which have not been used for the carrying on of an RA. The location is not listed in my/our conditions of registration or in the registration of any other CQC registered provider and will only be used as a vaccination site where healthcare professionals will bring the necessary equipment and records to carry out vaccinations and removed at the end of the session, i.e. no medical equipment or storage of medicines is held on site.   *You will not need to make any application. If you will be responsible, you will need to update your SOP to tell us that you are running the vaccination site as a ‘satellite’ of your own practice.* |
| A9 | Can a HCSW administer a non-injectable vaccine (LAIV)? | No not under the PGD – they can support the child/individual to administer the vaccine once supplied by the registered healthcare professional following local protocols.  Yes, if instructed under a patient specific direction.  See guidance below  <https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/publications/2019/april/007-441.pdf>  <https://www.england.nhs.uk/north-east-yorkshire/wp-content/uploads/sites/49/2021/08/Fluenz-Tetra.pdf> |
|  | **B: Cohorts** | |
| B1 | Which cohorts are eligible for the 2021-22 Flu Immunisation Programme? | [National flu immunisation programme 2021 to 2022 letter - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan/national-flu-immunisation-programme-2021-to-2022-letter)  Additional funding is available, this season only, to vaccinate all eligible primary care contractors, primary medical services, pharmaceutical services, primary care dental services or general ophthalmic services) and their frontline staff, who are either registered with the GP practice or not registered with the GP practice, and who elect to received their vaccination from the GP practice. (see A2 & A3 above). |
| B2 | Will BAME be included in the Flu ‘at risk’ cohort, due to the evidence suggesting BAME are at increased risk of COVID? | Patients in BAME communities are not a specific at-risk group, however the updated Annual flu letter 28th July 2021 reiterates:   * The need to ensure those who are living in the most deprived areas, from ethnic minority and other underserved communities, have equitable uptake compared to the population as a whole. * Providers are expected to ensure they have robust plans in place for tackling health inequalities for all underserved groups to ensure equality of access. * GP practices must request details of the Patient’s ethnicity status if they have not previously provided this information to the GP practice and where provided by the patient or their carer, the GP practice must record the ethnicity information in the patient record. |
|  | **C: Vaccine characteristics, supply, movement, delivery** | |
| C1 | What vaccines are recommended for the 2021-22 Flu Immunisation Programme? | [C1076-NHSEI-Flu-reimbursement-letter (psnc.org.uk)](https://psnc.org.uk/sheffield-lpc/wp-content/uploads/sites/79/2021/02/C1076-NHSEI-Flu-reimbursement-letter-3-February-2021.pdf) (3rd Feb 2021)  [BW485-achievements-and-developments-during-202021-flu-season.pdf (england.nhs.uk)](https://www.england.nhs.uk/wp-content/uploads/2021/04/BW485-achievements-and-developments-during-202021-flu-season.pdf) (Updated 1st April 2021) |
| C2 | What is the current guidance on rules around sharing vaccines between organisations and/or PCNs Medicines and Healthcare Products Regulatory Agency (MHRA)? | The regulations on movement of flu and COVID vaccine without a wholesale dealer licence remain current and have not been revoked and are not due to cease until April 22.   * Consultation on exemption of wholesale dealer licence for flu and COVID vaccine: [Changes to Human Medicine Regulations to support the rollout of COVID-19 vaccines](https://www.gov.uk/government/consultations/distributing-vaccines-and-treatments-for-covid-19-and-flu/consultation-document-changes-to-human-medicine-regulations-to-support-the-rollout-of-covid-19-vaccines) * Consultation outcome document: [Government response: consultation on changes to the Human Medicines Regulations to support the rollout of COVID-19 and flu vaccines](https://www.gov.uk/government/consultations/distributing-vaccines-and-treatments-for-covid-19-and-flu/outcome/government-response-consultation-on-changes-to-the-human-medicines-regulations-to-support-the-rollout-of-covid-19-vaccines) * Legislation agreed by parliament in October 2020, note the regs are applicable until 1st April 2022:  [The Human Medicines (Coronavirus and Influenza) (Amendment) Regulations 2020 (legislation.gov.uk)](https://www.legislation.gov.uk/nisr/2020/349/regulation/4/made) |
| C3 | Can Injectable (inactivated) vaccine be given to children whose parents refuse on the grounds of porcine? | Yes, for 2021/22 season no supply constraints are anticipated and the alternative offer (IM injectable/Inactivated) should be made routinely available from the start of the season where applicable.  Please see below the latest information about ordering non-porcine alternative vaccines for children. This is taken from the latest Vaccine Update bulletin which can be found here: [Vaccine update: issue 324, November 2021](https://lnks.gd/l/eyJhbGciOiJIUzI1NiJ9.eyJidWxsZXRpbl9saW5rX2lkIjoxMDAsInVyaSI6ImJwMjpjbGljayIsImJ1bGxldGluX2lkIjoiMjAyMTExMTcuNDg5NjkwNjEiLCJ1cmwiOiJodHRwczovL3d3dy5nb3YudWsvZ292ZXJubWVudC9wdWJsaWNhdGlvbnMvdmFjY2luZS11cGRhdGUtaXNzdWUtMzI0LW5vdmVtYmVyLTIwMjEtZmx1LXNwZWNpYWwtZWRpdGlvbiJ9.O_gPqw7P4jodwUUivj6kcez18K43Z76u_BZI289AUhY/s/184683638/br/121124158695-l) Inactivated influenza vaccine ordering UKHSA is also supplying 2 inactivated vaccines for the 2021 to 2022 season:   * Quadrivalent Influenza Vaccine (split virion, inactivated) (QIVe) which should only be ordered for children in clinical risk groups aged from 6 months to less than 2 years old, with an initial order cap of 2 doses per week * Flucelvax (QIVc), which is available for:   + children aged 2 to less than 18 years old in clinical risk groups for whom LAIV is unsuitable   + healthy children from 2 years old and all eligible school aged cohorts, who object to LAIV on the grounds of its porcine gelatine content   + this vaccine is available to order in a single dose pack to GPs, with an initial order cap of 8 doses per week   + this vaccine is available to order by school-age providers in a 10-dose pack with an order cap of 45 packs (450 doses) per week – each pack will be supplied with a separate pack of 10 patient information leaflets (PILs)   Requests for larger orders should be sent to the helpdesk ([helpdesk@immform.org.uk](mailto:helpdesk@immform.org.uk)) in good time before your order cut-off. Out of schedule deliveries will be by exception only.  The British FATWA Council (Midlands office) have kindly updated their Children’s flu guidance. We are aware that other regions found this document useful last year when having conversations with Muslim parents about the Fluenz Tetra vaccine. |
| C4 | Can the COVID-19 vaccine be co-administered with other **School Aged Immunisation** vaccines including the flu vaccination? | Please see below a summary of the recently updated Green Book guidance on co-administration of the COVID-19 vaccine with other School Aged Immunisation Service (SAIS) programmes, including the flu vaccination. Please consider co-administration where this is feasible and appropriate.    *The COVID-19 chapter (14a) of the Green Book was updated on 30 November 2021 with more detailed co-administration guidance, a summary of which is provided below. This confirms that COVID-19 vaccination can be co-administered with all SAIS programmes, including LAIV. The full co-administration guidance can be found on pages 26-27 of the Green Book chapter, at this*[*link*](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1037340/Greenbook-chapter-14a-30Nov21.pdf)*.*     * *As all of the early COVID-19 vaccines are considered inactivated, where individuals in an eligible cohort present having recently received one or more inactivated or another live vaccine, COVID-19 vaccination should still be given* * *It is generally better for COVID-19 vaccination to proceed to avoid any further delay in protection and to avoid the risk of the patient not returning for a later appointment.****This includes vaccines commonly administered around the same time or in the same settings, including LAIV, HPV, MenACWY and Td-IPV vaccines in the schools programmes*** * ***Similar considerations apply to co-administration of inactivated COVID-19 vaccines with live vaccines such as MMR*** * *Note that there is no evidence of safety concerns, but attribution of adverse events may be made more difficult if vaccines are co-administered* |
| C5 | Is there evidence to say that drivers who are vaccinated are safe to drive immediately, will the staff be covered to vaccinate them? | Recipients of any vaccine should be observed for immediate Adverse Drug Reactions. There is no evidence to support the practice of keeping patients under longer observation. Onset of anaphylaxis is rapid, typically within minutes, and its clinical course is unpredictable with variable severity and clinical features. Due to the unpredictable nature of anaphylactic reactions it is not possible to define a particular time period over which individuals should be observed following immunisation to ensure they do not develop anaphylaxis. Some individuals may suffer panic attacks which should be differentiated from anaphylaxis – see [Green Book](https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book). Practitioners should also refer to the summary of characteristics for the specific vaccine to check for any specific advice. A full risk assessment of the drive through facility (including time post vaccination) should be undertaken prior to commencing delivery via this model. Practices should refer to the RCGP guidance on delivering mass vaccination (see question 40) and other guidance that becomes available. It is the responsibility of the immuniser to ensure that the patient is feeling well following vaccination and feels safe to leave the premises/drive. |
| C6 | Can the nasal spray be used for people with learning disabilities where it would be difficult for them to receive the injection? Is there any guidance on this and is it a potential offer? | Yes - Practices are advised of the importance to ensure patients with a learning disability are vaccinated.  Patients with a learning disability are included in the eligibility for payment under this ES. GP’s can use their clinical discretion to offer LAIV ‘off-label’ under a PSD (from their centrally supplied vaccine stock) to patients with a needle phobia. This is not limited to those with a learning disability and may include those in a clinical risk group with a serious needle phobia who may otherwise go unimmunised if they refuse to have an injected inactivated vaccine.  Please see the Enhanced Service Specification and link below, this is considered a reasonable adjustment. Nothing has changed in terms of the licensing of the product and it would not be eligible under the PGD, but is referenced in the PGD and can be given ‘off label’ using a PSD:  [Flu vaccinations: supporting people with learning disabilities - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/flu-vaccinations-for-people-with-learning-disabilities/flu-vaccinations-supporting-people-with-learning-disabilities) |
| C7 | Is flu nasal spray aerosol generating?  What level of PPE is required? | No: Coughing and sneezing which may occur following administration of live attenuated influenza vaccine (LAIV) are not included as high risk aerosol generating procedures, see this link: <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-personal-protective-equipment-ppe> however a local risk assessment should be carried out and any queries raised with the local infection prevention and control team. |
| C8 | Has the agency agreement from last year been updated for use this year? | The national community agency agreement is enclosed (dates changed for 2021/22) |
| C9 | How can I order the DHSC additional flu vaccine? | The Department of Health and Social Care (DHSC) has secured additional flu vaccine to support delivery of this year’s seasonal flu vaccination programme. This is a temporary measure to support reaching the uptake ambitions for this year’s expanded flu programme, with additional supply being deployed to areas where it is most needed to maximise uptake and top up local supplies where they run low. Requests will take account of where uptake is lower and any associated inequalities.  DHSC has published [guidance for General Practices and Community Pharmacies on how to access the stock and what vaccines are available](https://generalpracticebulletin.cmail20.com/t/d-l-ajtkhul-ttnmhykd-b/)  Please see the attachment below for NHSE Y&H process of how to order DHSC additional stock 2021/22 season |
| C10 | Is the flu vaccine suitable for vegetarians and vegans | Information for HealthCare Practitioners [The national influenza immunisation programme 2021 to 2022: August 2021 (publishing.service.gov.uk)](https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fassets.publishing.service.gov.uk%2Fgovernment%2Fuploads%2Fsystem%2Fuploads%2Fattachment_data%2Ffile%2F1018779%2FInfluenza_vaccination_information_document_for_healthcare_practitioners.pdf&data=04%7C01%7CJulia.Thompson%40sheffield.gov.uk%7C27d957b4f4a34facce3408d993c5ea13%7Ca1ba59b9720448d8a3607770245ad4a9%7C0%7C0%7C637703300516694386%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=ux%2BJ8%2BWGsGyZKPrM3zktrn9M554wxRwLzHsjlugTGVg%3D&reserved=0) see Pg 12 which includes vaccine and it’s components.  The vaccine SPC (Summary of Product Characteristics) also provides the composition for each vaccine (see link below).  [Home - electronic medicines compendium (emc)](https://www.medicines.org.uk/emc)  Where it is known that there are animal derivatives/excipients etc then it is a personal choice. |
|  | **D: PCN / pharmacy / collaborative delivery** | |
| D1 | If immunising as a PCN does the PCN need to be CQC registered? | Please see - [NHS England » Frequently Asked Questions: Third iteration](https://www.england.nhs.uk/primary-care/primary-care-networks/resources/pcn-faqs/third/#will-pcns-need-to-register-with-the-cqc-and-do-practices-need-to-modify-their-current-registration-when-they-become-a-part-of-a-pcn) |
| D2 | Can practices work with a single pharmacy? Are there any competition rules etc? | Practices would need to seek advice from their LMC or advisory body in relation to this.  NHSE/I are unable to advise on competition rules.  We would, however, expect patients to be notified of all their available options and assumptions should not be made as to where they will find it easier to access services. |
| D3 | Do pharmacies need the permission of GP’s to immunise the residents of a care home or is it just the need to inform them? | Pharmacists are not required to obtain GPs permission to vaccinate patients in care homes but are required to inform the GP of this intention. The pharmacy contractor will ensure that a notification of the vaccination is sent to the patient’s GP practice on the same day the vaccine is administered or on the following working day.  [Community Pharmacy Service Specification for the upcoming 2021/22 flu season](https://generalpracticebulletin.cmail19.com/t/d-l-qukhitd-jujdjlttkd-j/) |
| D4 | Payments for PCN flu delivery:  How do I claim the service fee payment for vaccinations if my practice has delivered this as part of a PCN model?  How do I claim reimbursement of drug costs for vaccines which I have contributed? | The following overview has been developed by NEY Commissioning Team to describe how service fees are paid to practices where flu vaccinations have been delivered as part of a PCN arrangement    National guidance on recording of vaccination events, and payment flows has been released (see below)    Drug cost reimbursement:  The Statement of Financial Entitlements explains that reimbursement for Flu vaccine (drug costs) is on the basis of administration (i.e. only vaccine administered may be claimed). Practices that are collaborating as part of a PCN-grouping to deliver flu vaccinations will therefore be required to individually claim drug cost reimbursement for any administered flu vaccines they have contributed. As such, PCN-groupings will need to agree how they will manage the flu vaccination stock supplied by each of their Collaborating Practices, so that each practice can individually claim reimbursement for administered flu vaccine as per the usual process each practice applies every year. |
| D5 | CQRS payments. How do I claim a service fee for patients I vaccinate that are not registered at my practice? | Where individuals who are not registered with the GP practice and elect to be vaccinated by the GP practice, the GP practice should first register the patient within their existing GP clinical systems using the Immediately Necessary Treatment (INT) registration status, then code the vaccination event as ‘needs influenza vaccine’ on or after 1 September 2021(see in the letter available via the link in A2 above).  A new GPES run is being developed so the INT records can be claimed at the end of the flu season (March 2022). No manual claims should be needed.  NHSEI has published guidance for general practice in relation to influenza vaccinations of eligible frontline health and social care staff and patients who are not registered with the practice. The guidance includes specific information for each system supplier on how to record the vaccination event, payment processes, drug reimbursement and the transfer of the records to the patients registered practice.  The influenza guidance for the recording of unregistered patients vaccination events is available via the following link: [Influenza Guidance for the Recording of Unregistered Patients Vaccination Events](https://future.nhs.uk/P_C_N/view?objectId=29652880) |
| D6 | Can I co-administer flu vaccinations with Covid vaccinations as part of a PCN? | Yes, the Covid-19 Collaboration Agreement has been updated to include Flu  [C1402-updated-vaccination-collaboration-agreement-september-21-FINAL.pdf (england.nhs.uk)](https://www.england.nhs.uk/wp-content/uploads/2020/12/C1402-updated-vaccination-collaboration-agreement-september-21-FINAL.pdf)  Refer to D4 for details of how service fee payments can be claimed for flu vaccinations delivered as part of a PCN arrangement.  The Statement of Financial Entitlements explains that reimbursement for Flu vaccine (drug costs) is on the basis of administration (i.e. only vaccine administered may be claimed). Practices that are collaborating as part of a PCN-grouping to deliver flu vaccinations either alongside or co-administered with COVID-19 will therefore be required to individually claim drug cost reimbursement for any administered flu vaccines they have contributed. As such, PCN-groupings will need to agree how they will manage the flu vaccination stock supplied by each of their Collaborating Practices, so that each practice can individually claim reimbursement for administered flu vaccine as per the usual process each practice applies every year.  The seasonal flu ES is a variation of the GMS, PMS, APMs contract. Therefore, if a practice vaccinates a patient within the HSCW category it is a contractual activity and GP practices would be covered by the CNSGP scheme should any clinical negligence arise. The [collaboration](https://www.england.nhs.uk/wp-content/uploads/2020/12/C1402-updated-vaccination-collaboration-agreement-september-21-FINAL.pdf) agreement has also been updated and Clause 37 covers this requirement.  The Immediately Necessary Treatment status is also acceptable to use. This is a temporary mechanism to allow recording of unregistered patients as a means to collect data; and supply payment to practices |
|  | **E: Care Homes** | |
| E1 | Can practices immunise the care home staff they are linked to, to prevent too many people going into the home and also improve staff uptake, can GP claim for these vaccines? | Yes - please refer to the enhanced service specification and CQRS guidance |
| E2 | Is there a way that registered nurses in care homes can deliver the flu vaccines to residents this year? | Anyone delivering/administering flu vaccine would need to provide evidence/assurance that they have completed and are up to date with the necessary immunisation training requirements. Any agreement would need CCG approval to ensure compliance with all legal frameworks/workforce sharing agreements. |
|  | **F: Health and Social Care Workers** | |
| F1 | Can other practice staff, such as receptionists, be trained to administer flu this year? | See [National Protocol for Inactivated Influenza Vaccine](https://www.gov.uk/government/publications/national-protocol-for-inactivated-influenza-vaccine) |
| F2 | Peer-to-peer vaccination:  Can the Written Instruction used to support peer to peer vaccination be extended to include other registered clinicians (e.g. pharmacists), as this posed a problem in acute trusts where Occupational Health is external to the trust? | The written instruction for OHS seasonal flu vaccination 20/21– has been updated and can be found at [Written Instruction for the administration of seasonal ‘flu vaccination](https://www.sps.nhs.uk/articles/written-instruction-for-the-administration-of-seasonal-flu-vaccination/) |
| F3 | Which health and social care staff can I vaccinate in GP practices and pharmacy? | <https://www.england.nhs.uk/wp-content/uploads/2021/08/B0993-i-letter-vaccination-of-frontline-pc-health-care-workers-and-available-funding.pdf> |
|  | **G: Maternity and other Secondary Care delivery** | |
| G1  G2 | Where in Yorkshire and the Humber are flu vaccinations available for pregnant women through maternity units?  Can the COVID-19 vaccines or booster be given at the same time as the flu vaccine (or the whooping cough vaccine)? | All maternity providers across Yorkshire and the Humber are able to deliver vaccinations to pregnant women. Trusts have received a service specification which includes the requirements to record these vaccinations through NIVS.  Under the ES pregnant women remain the responsibility of their registered GP and should be invited by the practice. Women can also request vaccination from their registered GP.  See the relevant guidance for providers on both the flu and COVID – 19 vaccination programmes. [Coronavirus » COVID-19 and seasonal flu vaccination for pregnant women (england.nhs.uk)](https://www.england.nhs.uk/coronavirus/publication/covid-19-and-seasonal-flu-vaccination-for-pregnant-women/) |
|  | **H: Technology and Data reporting** | |
| H1 | Data reporting - how can we ensure flu vaccinations given in Pharmacy settings are correctly recorded? | Full details can be found in the Pharmacy Service Spec (see link in A3). Information will include:   * Routine details of vaccination i.e. patient details, route/date etc * Eligibility * Name of vaccine, batch number and expiry date (this is a new requirement) * Location where vaccine given if different to the pharmacy * Any immediate adverse reactions   Practices will need to ensure the notification is uploaded into the patient record. This will vary depending on how the notification has been sent e.g. FHIR message/PDF etc  PharmOutcomes has been commissioned regionally and all pharmacies are encouraged to use this to support effective recording and upload of vaccination details. |
| H2 | Data reporting - how can we ensure flu vaccinations given in Secondary Care settings are correctly recorded? | Work has been undertaken nationally to improve data reporting and electronic interoperability to facilitate more timely updates directly into the GP patient record. Providers are required to use the national reporting system daily which will flow automatically into the GP record. NIVS will also be used for activity monitoring and payment. |
| H3 | Is there any guidance re: PRIMIS codes? How do I carry out system searches? What searches should I use? | Please contact your local business support team for advice and support. |
| H4 | How do I record vaccinations for non-registered patients? | Please see details within the covering letting in [NHS England » NHS England Enhanced Services Influenza Specifications](https://www.england.nhs.uk/publication/nhs-england-enhanced-services-influenza-specifications/)  See D5 for full details |
|  | **J. Covid requirements (inc PPE)** | |
| J1 | Contraindications to flu vaccine in relation to COVID.  Can flu vaccination be given if patients have symptoms of COVID/are a household contact/self-isolating – or should flu vaccination be given as a priority as they would be perceived as vulnerable/at increased risk even if they feel unwell or have symptoms/temp? | As with any vaccination, patients with any signs of infection / fever, should not be vaccinated until symptoms have fully resolved. All exclusions specified on the PGD should be observed. The Summary of Product Characteristics (SPC) should be referred to for any specific concerns/contraindications.  In addition, all COVID requirements for self-isolation and necessary safety precautions should be adhered to, in line with provider policies and national requirements.  Full guidance will be available via PGD / Green Book. |
|  | **K: Communications** | |
| K1 | Will there be a national flu campaign this year? | The New Winter Vaccinations Campaign  **Download resources here** [Campaign Resource Centre (phe.gov.uk)](https://campaignresources.phe.gov.uk/resources/campaigns/34-stay-well-this-winter-/resources)  **Order leaflets and posters here (free to order)** [Health Publications](https://www.healthpublications.gov.uk/Home.html)  The main winter flu leaflet accessible and translated versions: [Flu Vaccination: who should have it this winter & why](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.uk%2Fgovernment%2Fpublications%2Fflu-vaccination-who-should-have-it-this-winter-and-why&data=04%7C01%7CImmunisation%40phe.gov.uk%7C948346ed16c44404aadc08d967c9df9c%7Cee4e14994a354b2ead475f3cf9de8666%7C0%7C0%7C637654939029869455%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=yMJ9xgD3Mi8IzsAHoO66kyJXmjXxpAfuc24I3s7FckU%3D&reserved=0)  Translated and accessible versions of the children and young people’s leaflets and posters.  [Flu Vaccination for Children: leaflets & Posters](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.uk%2Fgovernment%2Fpublications%2Fflu-vaccination-leaflets-and-posters&data=04%7C01%7CImmunisation%40phe.gov.uk%7C948346ed16c44404aadc08d967c9df9c%7Cee4e14994a354b2ead475f3cf9de8666%7C0%7C0%7C637654939029869455%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=SgV6ifg6sp5YdUF3870wB1fX7qW455u3otrCNo1j1%2Bk%3D&reserved=0)  In addition, NHSEI will be working with local communications teams to do targeted local campaigns based on uptake, using local champions where possible.  The [flu special edition of Vaccine Update](https://www.gov.uk/government/publications/vaccine-update-issue-324-november-2021-flu-special-edition) has been published by UKHSA. This contains a range of useful information in one place, including guidance on training, information for parents on flu and COVID-19 vaccines in schools, and programme resources and how to order them. |
| K2 | Is there an NHS website to allow patients to find a Flu vaccine? | [Find NHS health services (www.nhs.uk)](https://www.nhs.uk/service-search) This tool within the NHS website allows patients to find local pharmacies that provide the NHS commissioned service and check their eligibility. |
|  | **L: Governance** | |
| L1 | What is the role of the CCG/CCG Flu Lead? | CCGs will work with and support providers to:   * improve uptake – to meet national ambitions, * reduce variation and inequalities, and * ensure the recommended vaccines are used   CCGs will have a nominated flu lead who will:   * Provide leadership and support to providers to develop comprehensive and robust flu plans * ensure that there are clear arrangements in place to support oversight of the delivery of the flu programme between September and March as outlined in the national flu letters and related guidance * support general practices to target at-risk population groups to improve uptake and coverage of the flu vaccination to achieve national uptake ambitions; and * ensure that there are mechanisms in place to monitor the demand, supply and where permitted the movement of vaccine to drive up uptake of flu vaccine in all groups. |
| L2 | Can CCG / PCN colleagues attend the ICS flu discussions? | CCG flu leads are part of the ICS Flu Board. PCN colleagues could / should link with their local Operational Flu Group facilitated by the CCG Flu Lead/local Screening and Immunisation Coordinator. |