



Flu Vaccination 2020-21 Frequently Asked Questions

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Eligible Cohorts

Which cohorts does the Seasonal Influenza DES cover?

Eligible patients are those who are registered at the practice, who are:

- aged 65 and over on 31 March 2021
- diagnosed as pregnant
- aged six months to 64 years (excluding patients aged two and three on 31 August 2020) defined as at-risk in [appendix 001](#)
- locum GPs
- health and social care staff employed by a registered residential care/nursing home or registered domiciliary care provider
- health and care staff employed by a voluntary managed hospice provider
- health and social care workers employed through Direct Payments and/or Personal Health Budgets (such as personal assistants) to deliver domiciliary care to patients and service users
- household contacts of an individual on the Shielded Patient List
- household contacts of immunocompromised individuals
- living in long-stay residential or nursing homes or other long-stay health or social care facilities
- carers

Which cohorts of children does the Childhood Seasonal Influenza DES cover?

Registered patients,

- aged two and three
 - but not aged less than two or aged four or over on 31 August 2020
 - i.e. born on or after 1 September 2016 and on or before 31 August 2018

What changes to cohorts are expected?

The programme may be further extended in November and December to include those in the 50-64 year old age group subject to vaccine supply and after existing eligible groups have been prioritised.

Notification of the phased eligibility of individuals in this cohort will be formally announced later in the flu season.

What changes will there be to the Pharmacy Flu Contract with regard to Care Home cohorts?

The Community Pharmacy Seasonal Influenza Advanced Service Framework will be amended to enable community

pharmacies to vaccinate,

- Both residential care/nursing home residents **and staff** in the home setting in a single visit to increase uptake rates and offer further protection to this vulnerable group of patients
 - Following discussion with the Local Pharmacy Committee (LPC), there appears to be little appetite to take up this role due to the shortage of pharmacists.
- GP practices are only able to vaccinate in the residential/care home, residents and staff who are registered with the practice
- Lincolnshire County Council have also offered to support practices if they are struggling to vaccinate care home patients
 - If you require any assistance, please email Shona Brewster at Lincolnshire CCG sbrewster@nhs.net

When does the Influenza DES run from & to?

The Influenza DES runs from 1 September 2020 to 31 March 2021.

Vaccines

How will practices have enough vaccine with all the additional cohorts to vaccinate?

The Department of Health and Social Care (DHSC) has procured additional national supply of the adult vaccine and will issue guidance in September on how and when this can be accessed.

Which vaccines should be used for the different cohorts of patients?

A table detailing which vaccines may be used for each cohort is available at [Appendix 002](#)

What vaccine do we give to patients with egg allergy?

[Green book](#) states that vaccines with low ovalbumin content (<0.06 mcg per dose) can be safely used in individuals with egg allergy.

- Fluenz nasal flu vaccine has ovalbumin content ≤ 0.024 mcg per dose
- QIVc is egg free so can be used for patients aged ≥ 9 with egg allergy.
- Children in a risk group who have had anaphylactic reaction to egg requiring intensive care treatment should be referred to hospital for immunisation
- All other children should be safe from an egg allergy perspective to receive LAIV in general practice

What vaccine should we give children who decline Fluenz because of the porcine glycerine content?

Children may have beliefs which prevent them having pork products. Fluenz nasal vaccine contains porcine glycerine.

Children in at risk groups under 9 years old should be offered QIVE as an alternative, and this is sourced direct from Public Health England via ImmForm

Children in at risk groups 9 years or over should be offered QIVc.

We are still awaiting guidance for children who are not in at risk groups.

What immunisation do we give to patients living with shielding individuals?

If a patient is not normally eligible for the flu vaccination, but they are living with a shielding individual, this makes them eligible for the flu vaccine.

They should be given the age appropriate flu vaccine which would be given to an “at risk” patient.

Vaccinating Practice Staff

Which staff groups should be offered a flu vaccination?

Both clinical & non-clinical staff should be offered an influenza vaccination.

Details are available at

<https://www.gov.uk/government/publications/immunisation-of-healthcare-and-laboratory-staff-the-green-book-chapter-12>

Is practice staff immunisation covered in the Influenza PGD?

No, it is not covered in the Influenza PGD and a written instruction document will need to be used.

A template is available to download & use at [Appendix 003](#)

Is practice staff immunisation covered by the CNSGP?

NHSEI has confirmed that such indemnity falls out of scope of the Clinical Negligence Scheme for General Practice (CNSGP).

Practices should check with their Medical Defence Organisation to ensure that they have cover in place to cover administration of vaccines to their staff.

How will locum GPs be vaccinated?

Where locum GPs wish to be vaccinated, they should be vaccinated by their own GP.

Targets for uptake

What targets have been set for uptake?

The following minimum uptake ambition has been set for the following groups,

Aged 65 years and over	At least 75%
In clinical at risk group	At least 75%
Pregnant women	At least 75%
Children aged 2 and 3 year old	At least 75%
Frontline health and social care workers	100% offer

Call & recall

Are we required to call & recall our patients?

GP Practices are required to ensure:

- ii. a proactive call and recall basis, if considered at-risk, or
- iii. a proactive call basis, if not considered at-risk with the aim of maximising uptake in at-risk patients.

Will patients also be recalled centrally?

NHSEI are developing a national call and recall service to support localised call and recall provision and ensure that all eligible patients are informed of their eligibility and are encouraged to get vaccination this season.

This service is intended to supplement not replace local call and recall mechanisms that are already in place contractually.

Further details are awaited on when this service will commence.

Payments

How much will we be paid?

A payment will be made to practices of £10.06 per dose to eligible patients.

How do we claim the payments?

There is an automated monthly data collection through GPES, including a five day period following the month end to allow practices to record the previous month's activity before the collection occurs. Activity recorded after the collection period is closed (five days), will not be collected and recorded on CQRS. Practices must ensure all activity is recorded by the cut-off date to ensure payment.

When will we receive payment?

Payment will be made by the last day of the month following the month in which the practice validates on CQRS and commissioners approve the payment.

What about additional costs incurred due to covid?

The CCG have stated that additional costs will be reviewed on a case by case basis. In the first instance these should be raised with your Locality Manager.

How will QOF points vary for indicators that include flu vaccinations this year?

The points allocated to flu vaccination are doubled in 2020/21 as detailed in the table below.

COPD007	The percentage of patients with COPD who have had influenza immunisation in the preceding 1 August to 31 March	12	57-97%	3
DM018	The percentage of patients with diabetes, on the register, who have had influenza immunisation in the preceding 1 August to 31 March	6	55-95%	2
STIA009	The percentage of patients with stroke or TIA who have had influenza immunisation in the preceding 1 August to 31 March	4	55-95%	1
CHD007	The percentage of patients with coronary heart disease who have had influenza immunisation in the preceding 1 August to 31	14	56-96%	3

March

The 2020/21 QOF Guidance has now been released & is available at [Appendix 006](#)

How does our PCN flu uptake effect our payments?

As part of the Impact and Investment Fund (IIF) for 2020/21, Primary Care Networks (PCNs) will receive additional funding for achievement at a network level between 70% and 77% for flu vaccinations provided to patients aged 65 and over.

CQC

Will we need to change our CQC registration to run flu clinics outside of the practice premises?

The CQC has issued guidance regarding possible changes to registration that may be needed for running flu clinics outside of your practice premises.

This guidance can be accessed at <https://www.cqc.org.uk/guidance-providers/registration/registration-flu-vaccination-arrangements>

If you are in any doubt as to whether you need to change your registration, further individual guidance is available by emailing enquiries@cqc.org.uk

Vaccinations Given at Pharmacies

How will practices be notified of vaccinations given to their patients at pharmacies?

As in previous years, pharmacists will record vaccinations given on PharmOutcomes. For each vaccination, the system will automatically generate a notification in line with the NHS England National Service Specification. This will be sent to the patient's GP Practice when data is saved.

The GP notification mechanism this year has changed to include FHIR/MESH messages as follows:

- Pass 1:** Following work with NHS Digital, and as the preferred route, PharmOutcomes will attempt to send all Flu notifications to GP practices as a **FHIR message** to be managed within the GP practice system using MESH. For those practices that have an accessible MESH mailbox, this means the information will pass directly into the GP practice system for appropriate management. This is NHS England's preferred mechanism of information transfer.
- Pass 2:** If PharmOutcomes is not able to send the notification via FHIR/MESH this will be recognised by the system and the GP notification will send to a **secure nhs.net email** if the GP practice has set and verified this as in previous years. You will be able to identify the email as it will come from Pinnacle Health whose secure address is low.pinnaclehealth@nhs.net
- Pass 3:** If PharmOutcomes is unable to send via FHIR/MESH and does not hold a verified secure nhs.net email

address for the GP Practice for receiving Flu notifications, the pharmacy will be prompted to print and securely send a **hard copy** notification to the GP practice by post or other secure means.

How do I know if my clinical system has an accessible MESH Mailbox?

TPP SystemOne accredited for MESH last year and will be live from 1st September to receive FHIR/MESH notifications.

EMIS Web is now accredited but the supplier but must complete its test period with NHS Digital that involves the receipt of 800 live messages successfully in one CCG before national rollout can take place. It is anticipated that EMIS Web will roll out nationally for MESH early in the 2020/21 campaign.

What do we do if we don't have a preferred secure email set up?

If you are not currently receiving notifications via your preferred secure email address, NHSEI are requesting that you complete the box below stating your preferred secure practice email address for the purposes of receiving patient notifications. Please email the form to helpdesk@phpartnership.com so that Pinnacle Health can ensure this is as up to date as possible. Once they receive your form, Pinnacle will send you a validation message for you to confirm receipt.

Name of GP Practice	Practice Code	Preferred notification email address (This MUST be secure i.e. @nhs.net)

Barcodes

How can we use patient barcodes to manage our flu clinics?

Many practices now use patient barcodes to manage their flu clinics. This saves administrative time & ensures their flu clinics run quickly & smoothly, also minimising the amount of patient contact time.

Further guidance is available to download for S1 [here](#) and for EMIS Web [here](#)

PPE

What PPE should we be using for Flu clinics?

Public Health England updated their infection prevention and control guidance on 20th August 2020. On page 14 of this document it states

In some clinical outpatient settings, such as vaccination/injection clinics, where contact with individuals is minimal, the need for single use PPE items for each encounter, for example, gloves and aprons is not necessary. Gloves and aprons are recommended when there is (anticipated) exposure to blood/body fluids or non-intact skin. Staff administering vaccinations/injections must apply hand hygiene between patients and wear a sessional facemask.

Thus in flu clinics immunisers should wear sessional face mask, sessional eye protection, and sessional apron. Immunisers should also use hand hygiene between patients.

PPE Supply

In order to support the NHS to deliver the flu vaccination programme, the order limits for emergency supply of PPE via the PPE Portal have been increased. These increased order limits are based on size and type of provider and will enable medium and larger practices to access supplies in line with the predicted increase in activity as a result of the flu programmes. These order limits also reflect the increased need for PPE due to COVID-19.

More information is available on the [DHSC PPE Portal guidance page](#) and the portal customer service team can be reached on 0800 876 6802 for enquiries or registration support.

Drive Thru Clinics

What considerations need to be taken into account for drive thru clinics?

Wessex LMC has created a checklist for practices to consider when planning drive thru clinics. A copy is available to download at [Appendix 004](#)

Patient Group Direction

Which PGD should be used this flu season?

A copy of the Inactivated influenza vaccine Patient Group Direction (PGD) can be downloaded at <https://www.england.nhs.uk/midlands/wp-content/uploads/sites/46/2020/09/20200824InactivatedInfluenzaPGDv08.00-LLR-FINAL.pdf>

How long should signed PGDs be retained for?

- For adults all PGD documentation must be kept for eight years
- For children all PGD documentation must be kept until the child is 25 years old

Can a PGD be used across a PCN footprint?

PGDs can be used across a PCN footprint: <https://www.sps.nhs.uk/articles/patient-group-direction-use-in-primary-care-networks/>

Cold Chain

Where can we get advice on the cold chain?

A recently produced set of slides blending information from the Green Book <https://www.gov.uk/government/publications/storage-distribution-and-disposal-of-vaccines-the-green-book-chapter-3> and the more recent Vaccine Incident Guidance <https://www.gov.uk/government/publications/vaccine-incident-guidance-responding-to-vaccine-errors> and also includes advice for off-site cold chain management, can be downloaded at [Appendix 005](#)

How full should our vaccine fridges be? Section Added 11.09.2020

A recent slide set from NHEI stated that vaccine fridges should be stocked at 50% capacity. This has now been confirmed to be incorrect & the current wording of the Green Book Chapter 3 states, to ensure that,

“the refrigerator is the right size to meet the vaccination storage needs, i.e. there is sufficient space around the vaccine packages for air to circulate and there is sufficient capacity for vaccines for seasonal/ additional programmes such as the annual influenza vaccination campaign”

Workforce

Can HCAs give Flu jabs? Section Added 11.09.2020

Yes, non-registered health professionals can give flu jabs as long as they have had “[specific training and assessment of competence](#)”.

To be able to administer injections a prescriber must have assessed the individual patient and signed a Patient Specific Direction (PSD) authorising a non-registered individual to administer the injection. Ideally the prescriber should assess each individual’s need for the injection, and their suitability to have the injection. However in reality it is not practical for a prescriber to individually review every patient requiring a flu vaccine.

[GMC guidance](#) states ““you should prescribe drugs only when you have adequate knowledge of the patient’s health and are satisfied that the drugs or treatment serve the patient’s needs”. A pragmatic approach to this is for the practice to identify, using a search, all patients eligible for the flu vaccine, and for the search to also exclude patients who are not suitable due to previous adverse reactions or allergies. The search will then generate a list of patients, and this list can either be used to bulk add a PSD to patient electronic records, or be physically signed to authorise administration of the injection.

When patients attend for their flu vaccination, the HCA should also safety net by checking verbally eligibility criteria and previous adverse reactions to the flu jab.

Useful Contact Details

Who to contact?

- General immunisation queries and any problems with immunisation payments and claims can be directed to england.limms@nhs.net
- General enquiries to:
Louise Fergusson on 07568 431900
Louise.fergusson@nhs.net
or
Vanessa Robinson on 07714 772645
Vanessa.robinson3@nhs.net
- School immunisation team contact details
Service provided by Lincolnshire Community Health Services NHS Trust:
<https://www.lincolnshirecommunityhealthservices.nhs.uk/our-services/childrens-services/immunisations>
Immunisation Lead: Maria Turner; Tel: 07920 766036; Email: maria.turner@lincs-chs.nhs.uk
(non-secure), mturner1@nhs.net
(secure)

Appendices

[Click Here To View & Download Flu FAQ Appendices](#)