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# Flu Vaccination 2020-21 Frequently Asked Questions

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## AUTHOR

Lincolnshire LMC Secretariat with input from the LMC Committee

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## Eligible Cohorts

<b>Which cohorts does the Seasonal Influenza DES cover?</b> <b>UPDATED 26.10.2020</b>
<p>Eligible patients are those who are registered at the practice, who are:</p> <ul style="list-style-type: none"> <li>aged 65 and over on 31 March 2021</li> <li>diagnosed as pregnant</li> <li>aged six months to 64 years (excluding patients aged two and three on 31 August 2020) defined as at-risk in <a href="#">appendix 001</a></li> <li>locum GPs</li> <li>health and social care staff employed by a registered residential care/nursing home or registered domiciliary care provider</li> <li>health and care staff employed by a voluntary managed hospice provider</li> <li>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</li> <li>household contacts of an individual on the Shielded Patient List</li> <li>household contacts of immunocompromised individuals</li> <li>living in long-stay residential or nursing homes or other long-stay health or social care facilities</li> <li>carers</li> </ul> <p>NHSE Public Health have produced a flu vaccination signposting aide memoire for practice staff. A copy is available to download at <a href="#">Appendix 008</a></p> <p>Reminder – All care home staff are eligible for flu vaccination under the DES. A few anecdotal reports have been received from care homes that their staff have been told by practices that they are not eligible.</p>

#### 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? UPDATED 26.10.2020

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.

Further instruction on timing of extension of eligibility to all 50 to 64 year olds has yet to be announced and central stock should **not** be ordered for this cohort at this stage.

#### 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](mailto: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? **UPDATED 26.10.2020**

The following flu vaccinations are now available to order centrally,

Manufacturer	Product	Age profile in the adult programme	Expected first deliveries to DHSC	Min order	Max order
Seqirus	Flucelvax® Tetra	18 years to 64 years	w/c 30 <sup>th</sup> Nov	150	1000
	Adjuvanted Trivalent Influenza Vaccine	65 years and above	w/c 19 <sup>th</sup> Oct		
Mylan	Quadrivalent Influvac® sub-unit Tetra	18 years to 64 years	w/c 9 <sup>th</sup> Nov	30	1000

If a GP practice has a provisional order with Sanofi for QIVe, please contact them to confirm this, before placing another order for QIVe for this cohort.

As set out in the guidance, on placing an order, your practices will be asked by manufacturers to verify that stock is being ordered for NHS eligible patients where there is a genuine shortage for this cohort. Orders should only be placed where you have a shortfall in supply for existing eligible patients at this stage.

Information on the ordering process is available at [Appendix 009](#)

Any general queries/requests please email: [england.phs7apmo@nhs.net](mailto:england.phs7apmo@nhs.net)

Any flu queries please email: [england.nhsfluspoc@nhs.net](mailto:england.nhsfluspoc@nhs.net)

### Can Practices/PCNs share flu vaccinations if there are supply issues?

The MHRA has confirmed that with regards to the flu vaccines in the 2020/2021 flu season, during COVID-19, it would not prevent the transfer of locally held flu stock for the NHS Flu immunisation programme, in the circumstance of acute, temporary, local supply issues, provided that:

- The CCG, PCN or Practice believes the transfer of flu vaccine(s) is necessary to support the continued delivery of the NHS flu immunisation programme during the COVID-19 response and will ensure the effective use of available resource;
- The CCG, PCN or Practice or that is holding the vaccine stock has assurance that the flu vaccine has been stored in the correct temperature-controlled conditions;
- confirmed daily record keeping of temperature monitoring is available;
- The CCG, PCN or Practice that requires locally held flu vaccine stock can verify the assurances given; and
- the flu vaccine(s) can be transported appropriately under the right cold chain conditions.

**Who should we notify if we run out of vaccine while awaiting further deliveries?** ADDED 26.10.2020

If you have run out of vaccine supply or are about to, notify the CCG by emailing the generic primary care mailbox [lccg.primarycarelincs@nhs.net](mailto:lccg.primarycarelincs@nhs.net) and cc in your locality lead

**What comms are available for patients that are asked to wait for their flu jab?** ADDED 26.10.2020

The NHS has published a guide for patients explaining the reasons why they may be asked to wait for their flu jab. A copy is available to download at [Appendix 010](#)

**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  $\leq 0.024$ mcg per dose
- QIVc is egg free so can be used for patients aged  $\geq 9$  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? **UPDATED 26.10.2020**

NHSEI have made an additional £15.4m available to local systems and primary care providers to cover reasonable additional costs (over and above the usual fee structures) associated with this year's extended flu programme. Guidance has been published on how to claim from this funding & is available to download at [Appendix 011](#)



**Will the current Covid additional costs funding be extended?**

The CCG has agreed that funding for additional Covid costs will be extended until the end of September. This includes additional Covid related costs for flu clinics. Further discussions are currently underway for post September costs.

**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 March	14	56-96%	3

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](mailto: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:

1. **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.
2. **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](mailto:low.pinnaclehealth@nhs.net)
3. **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 SystmOne accredited for MESH last year and will be live from 1<sup>st</sup> 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](mailto: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 <b>(This MUST be secure i.e. @nhs.net)</b>

**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.

## How do we obtain masks with a clear panel?

Practices members may wish to wear a mask with a clear panel to help them communicate with patients that lip read. If masks are not available from your usual PPE suppliers or through the PPE portal then a very small supply is available via the LRF. To access these please email [andrew.hill3@nhs.net](mailto:andrew.hill3@nhs.net)

## 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?

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?

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.

### Can community nurses give flu vaccines?

Yes, community nurses can, and should, give flu vaccines to patients that they are already visiting. This will increase uptake of flu vaccine and reduce the risk to patients by reducing contacts with health professionals.

To enable community nurses to give flu vaccines practices will need to complete a Vaccination Agency Agreement with LCHS. This Agreement will enable the community teams to be covered by the flu PGD and to legitimately use practice flu vaccine stock. Practices should complete the VAA and email the signed copy to Lauren Scott at LCHS ([Lauren.scott12@nhs.net](mailto:Lauren.scott12@nhs.net)) who will then arrange for the Agreement to be signed by LCHS.

The VAA can be viewed and downloaded from [Appendix 007](#)

### 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](mailto:england.limms@nhs.net)
- General enquiries to:  
Louise Fergusson on 07568 431900  
[Louise.fergusson@nhs.net](mailto:Louise.fergusson@nhs.net)  
or  
Vanessa Robinson on 07714 772645  
[Vanessa.robinson3@nhs.net](mailto: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](mailto:maria.turner@lincs-chs.nhs.uk)  
(non-secure), [mturner1@nhs.net](mailto:mturner1@nhs.net)  
(secure)

## Appendices

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