

To:

- Chief Executives of all NHS trusts and foundation trusts
- Chief Nursing Officers of all NHS trusts and foundation trusts
- Medical Directors of all NHS trusts and foundation trusts
- All GP practices
- All community pharmacies

Copy to:

- NHS Regional Directors
- NHS Regional Directors of Commissioning
- NHS Regional Directors of Primary Care and Public Health Commissioning
- CCG Accountable Officers
- CCG Flu Leads
- Chairs of ICSs and STPs
- Chairs of NHS trusts and foundation trusts
- Regional Chief Pharmacists

1 April 2021

Dear colleagues,

### **Achievements and developments during 2020/21 season**

The 2020/21 NHS Annual Influenza Vaccination Programme has been the most successful in the history of the programme. Despite the pandemic, the hard work and diligence by NHS and social care providers has resulted in our best uptake levels yet. In addition to implementing good practice identified from previous years, the 2020/21 programme was supported by new developments to information technology systems. For the first time, a national call/recall service to support primary care and school aged provision was implemented. In another first, NHS school age vaccination services used a NIVS to record data in a standardised and more timely manner resulting in much less duplication of effort and manual reporting. Informed by more timely data, the NHS has been able to offer vaccinations more successfully to eligible individuals regardless of where they live, their ethnicity, disability or other individual circumstances.

During 2021/22, the NHS will be undertaking further work to further increase uptake, improve equity, and build on the developments achieved so far in data and technology to get further granularity, accuracy and electronic interoperability of data.

### **JCVI advice on influenza vaccines for 2021/22**

In November 2020 the JCVI published advice on the use of influenza vaccines in the UK for the 2021/22 season. NHS providers delivering influenza vaccinations to health

and social care professionals are encouraged to review the JCVI advice<sup>1</sup> and order vaccines in line with NHS England and NHS Improvement reimbursement guidance below.

### **Vaccines reimbursed as part of the NHS Seasonal Influenza Immunisation Programme 2021/22<sup>2</sup>**

The following JCVI-advised vaccines will be reimbursed as part of the NHS Annual Influenza Vaccination Programme for adults in 2021/22.

<b>Those aged 65 years and over</b>	<b>Those aged 50 to 64 years</b>	<b>At-risk adults, including pregnant women, aged 18 to less than 65 years</b>
<ul style="list-style-type: none"> <li>• aQIV</li> <li>• QIVc/QIVr (where aQIV is not available)</li> </ul>	<ul style="list-style-type: none"> <li>• QIVc/QIVr</li> <li>• QIVe (where QIVc or QIVr is not available)</li> </ul>	<ul style="list-style-type: none"> <li>• QIVc/QIVr</li> <li>• QIVe (where QIVc or QIVr is not available)</li> </ul>

JCVI considered the use of QIV-HD in those aged 65. However QIV-HD is **not** currently available in the UK market.

JCVI also considered the use of QIVr in both those aged over 65 and those aged 18 to 64. QIVr was not initially eligible for reimbursement under the NHS Annual Influenza Vaccination programme for 2021/22, however doses of QIVr are now available to order in limited quantities and will be reimbursed. Providers should liaise with the manufacturer, Sanofi, to discuss their order.

**Influenza vaccines for eligible children are centrally procured by Public Health England and are supplied free of charge via ImmForm. These vaccines will NOT be reimbursed as part of the NHS Annual Influenza Vaccination Programme.**

#### **Uptake ambitions for programme - vaccine ordering and planning**

In planning for the forthcoming influenza vaccination season, all providers should identify and work closely with their designated CCG flu lead and their regional Public Health Commissioning Team, to ensure the effective planning and delivery of the 2021/22 NHS Annual Influenza Vaccination Programme.

General practices and community pharmacies will also want to work closely with their Primary Care Networks in order to maximise vaccine coverage and to minimise vaccine

<sup>1</sup> <https://app.box.com/s/t5ockz9bb6xw6t2mrrzb144njplimfo0/file/737845224649>

<sup>2</sup> Prices and suppliers of the vaccines can be found here: <https://bnf.nice.org.uk/medicinal-forms/influenza-vaccine.html>

wastage. This will also support the achievement of incentives within their respective contracts. PCN coverage targets incentivised through the Investment and Impact Fund (IIF) are detailed in the table below for each cohort.

Indicator	Value	Thresholds
<b>VI-01:</b> Percentage of patients aged 65 or over who received a seasonal influenza vaccination between 1 September and 31 March	40 points £9.0m	80% 86%
<b>VI-02:</b> Percentage of patients aged 18 to 64 years and in a clinical at-risk group who received a seasonal influenza vaccination between 1 September and 31 March	88 points £19.8m	57% 90%
<b>VI-03:</b> Percentage of children aged 2-3 who received a seasonal influenza vaccination between 1 September and 31 March	14 points £3.2m	45% 82%

*For more detail about the IIF incentives, including allowable Personalised Care Adjustments, coding requirements, and cohort definitions, refer to the IIF guidance*

All providers should plan their influenza vaccine ordering to at least equal the high levels of uptake achieved in 2020/21. For frontline healthcare workers, providers should plan to achieve a 100% offer of vaccination to all appropriate staff groups. School aged influenza vaccination services should plan to achieve at least 75% uptake across all commissioned year groups.

Hospital trusts should continue to vaccinate pregnant women under their care and in addition should work with their regional Public Health Commissioning Teams to offer vaccinations to all those eligible individuals considered clinically at risk through in and out-patient appointments. Trusts should ensure they order sufficient vaccines to fulfil their contractual obligations in this regard.

**Manufacturers will start to produce volumes of vaccines shortly based on the orders they have received. Please submit your order as soon as possible.**

[Manufacturers have provided the following information about how they can support you with additional vaccine:](#)

Manufacturer	Notes
Mylan	Mylan have some doses of QIVe available that can be used for this cohort. Please contact their flu customer services team who will be able to help you place your order on: <ul style="list-style-type: none"> <li>• Freephone: 0800 358 7468</li> <li>• E-mail: <a href="mailto:flu@mylan.com">flu@mylan.com</a></li> </ul>
Seqirus	In the first instance Seqirus will contact existing customers who already have a QIVc order to facilitate any amends.
Sanofi Pasteur	Sanofi Pasteur will be fulfilling current orders for the 2021/2022 season with QIVe or QIVr (Supemtek), you can contact Sanofi Pasteur with any questions around current or future orders through your local representative: <ul style="list-style-type: none"> <li>• Vaxishop</li> <li>• Tel: 0800 854 430 (option 1)</li> </ul>

For reference, the 2021/22 uptake expectations and achievements for each cohort as of 24 March 2021 are as follows:

<b>Eligible groups</b>	<b>2020/21 season uptake</b>	<b>2020/21 uptake ambition</b>
Aged 65 years and over	81%	At least 75%
Under 65 clinical at-risk group	52%	At least 75%
Pregnant women	44%	At least 75%
Aged 50 to 64 years	34%	N/A
Children aged 2 and 3 years old	58%*	At least 75%
All primary school aged children from reception to year 6 (January data not currently available)	75% ambition	At least 75%
Frontline health care workers	100% offer	100% offer

\* based on the higher 3 year old uptake

Community pharmacies should plan their ordering on the basis of meeting at least the numbers of vaccinations they achieved during the 2020/21 season. Community pharmacy are expected to play a strong role in vaccinating the 50 to 64 year old cohorts to ensure the availability of general practice capacity to continue their focus on flu and COVID vaccination of the most vulnerable clinical cohorts.

As with 2020/21, there may be further policy developments to ensure strong uptake across all eligible cohorts during 2021/22. These developments will be informed by the levels and impact of COVID-19 in communities. In this situation, further advice will be communicated as soon as possible.

Further information will be provided on the policy decisions on offering an alternative to LAIV for children whose parent/guardian does not consent to the vaccine on grounds of objection to the porcine gelatine content, and on extending the complementary offer of a free NHS vaccination to adult social care workers in 2021/22.

Yours faithfully,



Professor Stephen Powis  
National Medical Director  
NHS England and NHS Improvement