

- To:
- Chief Executives of all NHS Trusts and NHS Foundation Trusts
  - NHS Trust:
    - Chief People Officers
    - Chief Nursing Officers
    - Chief Medical Officers

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**6 September 2022**

- cc.
- ICB/ICS Accountable Officers
  - NHS Regional Directors
  - Chairs of NHS Trusts and NHS Foundation Trusts

Dear colleagues,

## **Healthcare worker COVID-19 and seasonal flu vaccination in Trusts**

Thank you for your continued efforts in delivering both Covid-19 and flu vaccinations which saw over nine million Covid-19 vaccinations delivered in 'Hospital Hubs' and more than four in five healthcare workers get their flu vaccination last year.

Vaccination of staff is a priority for the NHS and the responsibility of employers.

This winter could be the first time we see the real effects of both Covid-19 and flu and so it remains vital that we do everything we can to protect staff and their patients.

The successful delivery of the autumn campaign, including the protection of frontline health and social care workers, is a fundamental part of supporting NHS and adult social care resilience over the coming months.

Along with local arrangements health and care workers will be able to book in for their Covid-19 vaccination through the national booking service as it opens, with more detail set out shortly.

To encourage vaccination against Covid-19 and flu vaccinations, and boost uptake, we know trusts will make every effort to:

- Make it as convenient as possible for staff to take up their offer.
- Ensure public health information on getting vaccinated is made available to all staff, and clinics are promoted.

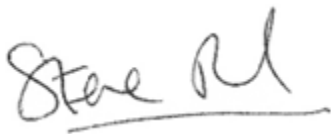
- Offer both Covid-19 and flu vaccinations at the same time, where possible, to reduce the number of appointments needed. This should also be the case for hospital sites that are open to the public.

All Trusts should maximise opportunities to get those who are eligible protected including staff, in-patients and people with a hospital appointment, for example, at upcoming outpatient appointments where we know a significant number of patients are also likely to be due a vaccination.

Annex A, alongside the autumn Covid-19 booster and flu planning letter, provides additional operational guidance for Trusts on the vaccination of frontline healthcare workers (HCWs) as well as in-patients and those patients attending Trusts who may be eligible.

We are very grateful for your continued leadership and support to this programme.

Yours sincerely,



**Steve Russell**  
National Director for  
Vaccinations and Screening  
NHS England



**Professor Stephen Powis**  
National Medical Director  
NHS England



**Dame Ruth May**  
Chief Nursing Officer,  
England

## **Annex A – operational guidance for Trusts**

Last year vaccination uptake amongst healthcare workers on ESR in Trusts was 80% for COVID-19, (ranging from 64% to 90%) and flu vaccination uptake was 58% (ranging from 24% to 76%)<sup>1</sup>

This year, there is an opportunity to improve uptake of seasonal vaccinations across Trusts for both COVID-19 and flu to maximise protection for NHS staff and patients that we look after in healthcare settings. As social contact returns to pre-pandemic norms there is likely to be a resurgence in influenza activity this winter to levels similar to or higher than before the pandemic. The potential for co-circulation of influenza, COVID-19 and other respiratory viruses could add substantially to pressures in the NHS.

The next steps for increasing operational capacity and resilience in urgent and emergency care ahead of winter set the NHS a key objective of delivering an integrated flu and COVID-19 campaign. This letter provides additional operational guidance for Trusts on the vaccination of frontline healthcare workers (HCWs), in-patients and those patients attending Trusts who may be eligible for COVID-19 and flu vaccines during the autumn/winter 2022/23 season.

The definition of frontline HCWs remains aligned for COVID-19 and flu and includes all staff with patient contact<sup>2</sup> Annex B contains further details. COVID-19 and flu vaccinations should be offered to 100% of frontline staff by their employer.

Trusts that do not vaccinate on site should ensure arrangements are made with other providers and should signpost their staff. HCWs can also be directed towards the National Booking Service where they can self-declare their status from the 7<sup>th</sup> September and book a COVID-19 vaccination.

### **COVID-19 vaccinations**

Trusts should prepare to deliver COVID-19 vaccinations to:

- frontline HCWs
- eligible in-patients who will be discharged into care homes, who are homeless or housebound, or who have had an extended length of stay and may have missed the opportunity to be vaccinated in the community.
- people who are under the care of maternity services

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<sup>1</sup> Source: Foundry Flu Vaccination Events cohort uptake: frontline healthcare worker (ESR) as of 24 August 2022

<sup>2</sup> JCVI definitions can be found in the relevant Green Book disease chapters for [influenza](#) and [COVID-19](#).

- patients and their household contacts who may benefit from receiving a vaccination during a routine appointment. This is particularly important for patients who are immunosuppressed, but we would ask all clinicians to consider reminding people about their eligibility for vaccination and signposting them as part of the routine clinical discussion with patients in outpatient and other settings.

## **Flu vaccinations**

As in previous years, Flu vaccination is an occupational responsibility and to support Trusts maximise uptake an additional payment will be made under the [Commissioning for Quality and Innovation \(CQUIN\) for 2022-2023 Guidance](#) framework for those trusts achieving more than 70% uptake amongst HCWs.

Trusts will already have ordered flu supplies for 2022/23 following guidance released in the [Amended Flu Reimbursement Vaccines letter of 21 July 2022](#). For those ordering via the Commercial Medicines Unit (CMU) framework the delivery schedule for this stock will be confirmed with each trust by the NHS England Commercial Medicines team. There will not be any additional centrally procured flu vaccine available for Trusts this year.

This year healthy 50-64 year olds are eligible for a flu vaccine. Some Trusts are commissioned to vaccinate this group in addition to their role in vaccinating frontline staff.

Trusts should ensure that they have sufficient vaccine supply to cover priority cohorts (namely frontline HCWs, pregnant women, and those clinically at risk) before starting to vaccinate healthy 50-64 year olds. Nationally, across all delivery models this group can start after the 15th October to align with flu supply and will ensure the most vulnerable are vaccinated first.

## **Trusts with a Hospital Hub+**

Over 80 Trusts have been assured to deliver vaccines to the wider public cohorts as part of the Hospital Hub+ model and should also follow the actions set out in the [Autumn COVID-19 booster and flu vaccine programme letter](#) to ensure readiness from 12<sup>th</sup> September. For eligible patients attending routine appointments in these sites in particular, consideration should be given to offering opportunistic COVID-19 vaccination when attending other routine appointments.

In addition to offering COVID-19 vaccination, there is an important opportunity for Hospital Hub+ and Vaccination Centres based at trusts to offer Flu vaccinations opportunistically on a co-administration basis to maximise the opportunity for people eligible for a Flu

vaccination to receive one. Trusts who wish to support this should contact their Regional Team. Vaccine must be purchased using the CMU framework, or direct from manufacturers and wholesalers, by the Trust and will be reimbursed by NHS England under locally commissioned arrangements. Trusts should only order vaccine once regional teams have confirmed that you have been commissioned to deliver this service.

### **Administration models**

COVID-19 vaccinations can be delivered under the National Protocol or the Patient Group Direction (PGD). Flu vaccinations can be delivered under the following mechanisms: the National Protocol; the Patient Group Direction (PGD); and the Occupational Health Written Instruction or, a Patient Specific Direction (PSD) where delivered by Occupational Health (OH) Services.

An approved National Protocol and template PGDs for Flu vaccination will be shared by UKHSA ahead of the 2022/23 season, and it is anticipated that the [Specialist Pharmacy Service](#) will develop [Written Instruction](#) templates for influenza vaccination. The [National Protocol](#) and [PGD](#) for COVID-19 has been published.

In order to maximise the amount of registrant time available to routine NHS services, Trusts should make use of the non-registered workforce to administer both COVID-19 and flu vaccinations. Non-registered vaccinators can operate under both a PSD and an approved National Protocol. Consideration should be given to the utilisation of Staff Sharing Agreements/MOU to provide non-registered vaccinators to OH providers. This could mean an OH service delivering flu vaccinations under a PSD, and COVID-19 vaccinations under the national protocol, so that the non-registered workforce can be optimised to support both vaccinations through a single clinician.

### **Coadministration of flu and COVID-19 vaccines**

Trusts should consider co-promotion, and co-administration of COVID-19 and flu vaccines where it is clinically and operationally feasible in-line with eligibility. However, the delivery of either vaccine should not be unduly delayed to facilitate co-administration. To support this the NHSE CMU team are working closely with flu manufacturers to expedite deliveries of flu stock to Trusts possible and the National COVID-19 team are working with Regional and System leads to try and align supply as far as possible. Trusts should have visibility of COVID-19 vaccine allocations for the first four weeks of the programme.

## **Addressing Staff Hesitancy**

We recognise that there may be some hesitancy from staff towards vaccinations this season and appreciate that the previous VCOD policy may have had an impact on this.

We know that Trusts will continue to take a proactive approach to address staff engagement and overcome hesitancy. Trusts are asked to begin planning a refresh of engagement activities to maximise uptake of both COVID-19 and flu vaccinations. This includes involving staff networks, faith leaders, and local clinical leaders to disseminate messaging. Trusts should also ensure that all staff, including those that do not have access to the usual information cascades, are able to access educational events and receive invitations for vaccination.

NHSE will, again, provide a HCW Toolkit and associated campaign material for Trusts to utilise. These campaign materials are available for Trusts to order pre-print materials from the Campaign Resource Centre (CRC) at the following link [Health and Social Care Workers Winter | Campaign Resource Centre \(phe.gov.uk\)](https://www.phe.gov.uk/crc/campaigns/health-social-care-workers-winter) for delivery during September. Digital assets will also be available during September from CRC [Health and Social Care Workers Winter | Campaign Resource Centre \(phe.gov.uk\)](https://www.phe.gov.uk/crc/campaigns/health-social-care-workers-winter).

The HCW Toolkit will be updated regularly with case studies of healthcare workers who have been vaccinated, these will also be available through social media. Regional teams will also share their local plans and resources via FutureNHS including best practise across Trusts.

It is recommended that managers help promote uptake through regular well-being discussions with their staff.

## **Reporting**

All Trusts are asked to ensure that all COVID-19 and flu vaccination events are captured on the same point of care systems (POC) at point of delivery. This is to provide real-time reporting of vaccination events which NHS England will use operationally. Trusts must capture vaccinations of frontline HCWs, pregnant individuals, patients, and the general public (for those sites servicing the wider public cohorts). Trusts will be reimbursed for COVID-19 vaccination based on activity submitted through NIVS. In addition, the registered GP will be automatically informed of vaccinations administered where they are recorded on NIVS.

Please ensure your Trust has access to the National Immunisation and Vaccination System (NIVS) for the commencement of the season. Trusts can register for a NIVS account by emailing [nivs@england.nhs.uk](mailto:nivs@england.nhs.uk) or by calling 0121 6110187. Training support for NIVS App is available to Trust colleagues from the NIVS team.

For those sites who have previously used the National Immunisation Management Service (NIMS), later in the campaign there will be a choice to remain with NIVS or revert back to using the NIMS App, once this system meets the required specification for the autumn campaign. The Vaccine Data Resolution Service (VDRS) continues to be available for data correction, and also supports the Overseas Data Entry service. Details of how to access these services can be found [here](#).

Trusts are also required to submit a monthly self-declaration on the total number of frontline HCWs vaccination events to UKHSA via ImmForm. This is used for the [UKHSA seasonal flu and COVID-19 vaccine uptake in frontline healthcare workers](#) and as the basis for the calculation of Flu CQUIN payment. We appreciate there is some duplication in reporting which we will review for the future.

To ensure HCW uptake is accurate all NHS Trusts should ensure that their ESR records are up to date and accurate by, for example, removing bank staff who haven't worked for a considerable period of time.

To support your preparations for the coming flu season an outline assurance framework is attached in Annex D which is intended to support a smooth start to the season, and ensure HCW uptake for Trusts is maximised and could be used as the basis for part of the wider Board Assurance Framework for Winter.

Thank you again for your continued efforts.

## **Annex B: Definition of frontline healthcare workers**

The definition of frontline healthcare workers includes clinical and non-clinical staff who have contact with patients.

For COVID-19 vaccination, Trusts should use the [Green Book COVID-19 chapter](#) as their definition of who is eligible. This list includes, but is not limited to:

- staff who have frequent face-to-face contact with patients, including both clinical staff involved in patient care, and non-clinical staff who have contact with patients
- laboratory, pathology and mortuary staff
- those working for a sub-contracted provider of facilities services such as portering or cleaning; temporary, locum or 'bank' staff, including those working in the COVID-19 vaccination programme
- students, trainees, and volunteers who are working with patients.

For flu vaccination, Trusts will vaccinate in line with their Occupational Health policy, but it is expected that this will include at a minimum the groups eligible for COVID-19 vaccination. Trusts will also want to review whether other staff should be offered a flu vaccination.



## Annex C: Supporting documents

Description	Link
Reimbursable vaccines and eligible cohorts for 2022/23 NHS Seasonal Influenza (flu) Vaccination Programme – Revised 2022	<a href="#">B1868 Reimbursable-vaccines-and-eligible-cohorts-for-the-2022-23-NHS-Seasonal-Influenza-flu-Vaccination-Progra.pdf (england.nhs.uk)</a>
National flu immunisation programme letter (updated on 21 July 2022)	<a href="#">National flu immunisation programme 2022 to 2023 letter - GOV.UK (www.gov.uk)</a>
Next steps for COVID-19 vaccination letter issued on 22 <sup>nd</sup> June 2022 (C1666)	<a href="#">C1666-next-steps-for-covid-19-vaccination-22-06-22.pdf (england.nhs.uk)</a>
COVID-19 Autumn booster and flu vaccination programme expansion of 15 July 2022 (C1674)	<a href="#">C1674 COVID-19-Autumn-booster-and-flu-vaccine-programme-expansion 150722-2.pdf (england.nhs.uk)</a>
JCVI updated statement on the COVID-19 vaccination programme for Autumn 2022	<a href="#">Joint Committee on Vaccination and Immunisation (JCVI) updated statement on the COVID-19 vaccination programme for autumn 2022 - GOV.UK (www.gov.uk)</a>
Influenza chapter 19 of the Green book	<a href="#">The Green book of immunisation - chapter 19 influenza (publishing.service.gov.uk)</a>
COVID-19 chapter 14a of the Green book	<a href="#">COVID-19 Greenbook chapter 14a (publishing.service.gov.uk)</a>
Commissioning for Quality and Innovation (CQUIN): 2022/23 Guidance	<a href="#">B1477-i-cquin-22-23-march-2022.pdf (england.nhs.uk)</a>
Appendix B: Service specifications for 2022/23	<a href="#">Appendix B: service specifications - GOV.UK (www.gov.uk)</a>
National Protocols for COVID-19 vaccines	<a href="#">Coronavirus » National Protocols for COVID-19 vaccines (england.nhs.uk)</a>
Patient Group Directions (PGDs) for COVID-19 vaccines	<a href="#">Coronavirus » Patient Group Directions (PGDs) for COVID-19 vaccines (england.nhs.uk)</a>

Site designation and onboarding process for the COVID-19 vaccination programme	<a href="#">C1655 COVID-19-vaccination-programme - Site-designation-and-onboarding-process - September-2022-March-2023-Phase.pdf (england.nhs.uk)</a>
NHSE COVID-19 Vaccinations	<a href="#">Statistics » COVID-19 Vaccinations (england.nhs.uk)</a>
UKHSA seasonal flu and COVID-19 vaccine uptake in frontline healthcare workers	<a href="#">Seasonal flu and COVID-19 vaccine uptake in frontline healthcare workers: monthly data, 2021 to 2022 - GOV.UK (www.gov.uk)</a>
NHS Standard Contract	<a href="#">NHS England » 2022/23 NHS Standard Contract</a>
FutureNHS	<a href="https://future.nhs.uk/CovidVaccinations">https://future.nhs.uk/CovidVaccinations</a>

## Annex D: Checklist for Trusts delivering flu vaccinations

The checklist below is intended to support Trusts with preparations for the 2021/22 season.

Category	Question
<b>Governance</b>	Do you have a named SRO for the flu programme?
	Do you have an established flu programme board committed to the delivery of flu vaccinations that feeds into the Trust board?
	Is Flu delivery reported into the overall Trust governance structure?
	Do you have a robust governance link to system leaders? Do you feed into the ICS Flu Board?
	Did the Board receive a report evaluating the lessons learned from the 21/22 flu programme? Has this been converted into an action plan for improvement in 22/23?
<b>Supply</b>	Have you ordered supply via the Commercial Medicines Unit Framework or via alternate routes (such as directly from wholesalers) and received confirmation of delivery dates of stock?
	Have you ordered sufficient flu vaccine supply to cover 100% of your frontline HCWs?
	Have you ordered sufficient flu vaccines to cover pregnant women if you offer have a maternity service?
	Have you ordered sufficient flu vaccines to cover patients who cannot access the vaccination elsewhere?
	Have you ordered the recommended vaccine types for the various age cohorts?
	Have you ordered the recommended vaccine types for those who may present with allergies to certain vaccines or, who cannot accept certain vaccination types?
	Do you have appropriate storage facilities to store flu vaccinations?
	If you are not vaccinating staff on site, can you confirm you have signposted your HCW to an alternative convenient site?
	Have you considered flexible delivery models for staff to access the vaccine (e.g. roving models/easy-access clinics)?

	Have you identified appropriate spaces to run vaccinations clinics?
	Do you have a robust method of inviting staff to receive a vaccination (e.g. a local booking system that staff can easily access)?
<b>Delivery</b>	If you are not vaccinating staff on site, can you confirm you have signposted your HCW to an alternative convenient site?
	Have you considered flexible delivery models for staff to access the vaccine (e.g. roving models/easy-access clinics)?
	Have you identified appropriate spaces to run vaccinations clinics?
<b>Communications</b>	Do you have a robust method of inviting staff to receive a vaccination (e.g. a local booking system that staff can easily access)?
	Is information on where to receive a vaccination readily available to staff?
	Is information on importance of flu vaccinations readily available?
	Have you a communications and engagement plan to target those hard to reach staff groups?
<b>Workforce</b>	Have you identified the workforce required to deliver the flu programme?
	Can you confirm you've reviewed and understand the workforce requirements for flu delivery (e.g. National Protocol, PGD, PSD).
<b>Co-administration</b>	Are you planning to co-administer / co-deliver flu and COVID-19 vaccines and have considered timing and workforce to enable this?
<b>Date Capture and Reporting</b>	Do you have licence to use NIVs to record flu vaccinations?
	Have staff been identified and trained on NIVs to record vaccinations at point of delivery?
	Do you have a SPOC and a superuser for NIVS?
	Have you removed any staff no longer employed, or contracted, by the Trust from the ESR system?
	Have you got a regular process in place to ensure ESR is up to date?
	Can you confirm you have access to Foundry and are able to view staff vaccinations which have taken place via any delivery model to provide a view of staff uptake?

	Do you have appropriate process in place for reviewing uptake with a view to improving performance?
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