To: All GP practices, NHS England South (South West) area

August 2015

Dear Colleagues

SEASONAL INFLUENZA VACCINATION 2015/16: FOR INFORMATION and ACTION PLEASE

We are writing to confirm planning arrangements for the 2015/16 influenza vaccination programme and to seek assurance that practices have in place all necessary actions to ensure an increased coverage in target groups.

The eligible groups are:

- those aged 65 years and over;
- those aged six months to 64 years in clinical risk groups;
- pregnant women;
- all two, three and four year olds
- all children in years one and two at school (i.e. age 5 and 6 years)
- those in long-stay residential care homes;
- carers;
- all front line health and social care staff

In line with national priorities, we are asking practices to pay particular attention to increasing uptake in those aged six months to under sixty five years clinical risk groups, particularly those with chronic liver disease and neurological conditions, including people with learning disabilities. Improvements in vaccination uptake in pregnant women is also a national target for 2015/16, and target uptake remains 75% for those aged 65 and over and for frontline health and social care staff.

This pack, alongside our locally designed GP practice communications toolkit, aims to support practices in improving uptake. The communications guide is an additional resource to be used alongside national guidance and publicity. The integrated toolkit with approved communications materials, including approved social media lines, will be published by Public Health England in mid-September. Practice profiles showing comparative uptake for each locality will also be shared throughout the 2015/16 season.
If you have any questions about the influenza vaccination programme 2015/16 please contact Charles Biscoe from the South West Screening and Immunisation Team - (c.biscoe@nhs.net).

Many thanks for all your hard work in implementing and delivering this important national programme.

Julie Yates
Screening and Immunisation Lead
Public Health England / NHS England South (South West)
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GP Checklist: Hints for practices on increasing vaccine uptake

This checklist is based on evidence from a study examining the factors associated with higher vaccine uptake in general practice\(^1\). You may find it helpful to use as a reference for checking your own systems.

1. Do you have a named individual in the practice responsible for the flu vaccination programme?

2. Do you have a register that can identify
   - all pregnant women
   - patients in the under 65 years at risk groups,
   - those aged 65 years and over
   - Those aged two to six years.

   And can you flag the notes of patients on “at risk” and pregnancy registers with a reminder code?

3. Do you have a system to update the patient registers throughout the flu season paying particular attention to the inclusion of women who become pregnant during the flu season?

4. Can you submit accurate data on the number of your patients eligible to receive flu vaccine and the number actually given (ideally using the automated function on ImmForm)? Can you also record uptake by partners and practice staff (whether given in the practice or elsewhere) using the ImmForm data collection tool?

5. Have you ordered or reserved sufficient flu vaccine taking into account past and planned performance, expected demographic increase, to ensure that everyone at risk is offered the flu vaccine?

6. Do you have a system for directly contacting eligible patients (by letter, e-mail, phone call, text or otherwise) inviting them to a flu vaccination clinic or to make an appointment? (See\(^2\) below for link to PHE flu vaccination invitation template letter).

7. Have you considered chasing up non-attenders (especially those at greatest clinical risk) towards the end of the immunisation season?
8. Have you arranged for the bulk of your flu vaccination to be done before the end of October (starting as soon as practicable after receipt of the vaccine) so that the maximum number of patients are vaccinated before flu starts to circulate?

9. Can you collaborate with the community midwives to offer and provide flu vaccination to pregnant women, including any who become newly pregnant up to the end of March?

10. Is your system flexible enough to offer flu vaccination both in clinics and opportunistically elsewhere?

11. Have you a policy on how and by whom immunisation will be offered to residents in care homes, nursing homes and house-bound patients, including those not on the district nurse caseload?

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1 Dexter, L. et al. (2012) Strategies to increase influenza vaccination rates: outcomes of a nationwide cross-sectional survey of UK general practice. [http://bmjopen.bmj.com/content/2/3/e000851.full](http://bmjopen.bmj.com/content/2/3/e000851.full)

A Guide to Influenza Vaccine

**Children and Adults in Clinical Risk Groups (2 – 65)**
- chronic respiratory disease, such as severe asthma, COPD or bronchitis
- chronic heart disease
- chronic kidney disease at stage three, four or five
- chronic liver disease
- chronic neurological disease, such as Parkinson’s disease or motor neurone disease, or learning disability
- diabetes
- splenic dysfunction
- a weakened immune system due to disease (such as HIV/AIDS) or treatment
- all pregnant women

**All people over 65 years of age**

**Other**
- Health and Social Care Workers
- People in long stay residential homes or other long-stay facilities
- Carers
- Household contacts of immune-compromised patients

**Children aged 2, 3, 4, or in school years 1 and 2 who are not in a clinical risk group**

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1. All those age 65 years or older on or before 1 March 2015
2. Follow additional guidance from UK Health Departments
3. All children age 2 – 4 years on or before 1 Sept 2015, and children in school years 1 and 2.
4. If quadrivalent vaccine inactivated vaccine available, consider for children age 3 years and older only. If quadrivalent unavailable, offer suitable trivalent inactivated influenza vaccine – see Green Book as some are not suitable for young children
5. Cannot have if: (full details in Green Book)
   - Under two years old
   - 18 years or older
   - Have egg allergy
   - Active wheezing at time of vaccination
   - Certain immunodeficiencies
   - pregnant

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**Children aged 2 to under 18?**

**Can they receive Fluenz?**

**One dose of inactivated influenza vaccine**

**If first ever dose of flu vaccine and age 6 months to less than 9 years, give second dose a month later**

**One dose of Fluenz Tetra**

**Can they receive Fluenz Tetra?**
Eligibility for NHS Flu Vaccination

In 2015/16, flu vaccinations will be offered at NHS expense to the following groups:

• people aged 65 years or over (including those becoming age 65 years by 31 March 2016)
• people aged from 6 months to less than 65 years of age with a serious medical condition such as:
  • chronic (long-term) respiratory disease, such as severe asthma, chronic obstructive pulmonary disease (COPD) or bronchitis
  • chronic heart disease, such as heart failure
  • chronic kidney disease at stage three, four or five
  • chronic liver disease
  • chronic neurological disease, such as Parkinson’s disease or motor neurone disease, or learning disability
  • diabetes
  • splenic dysfunction
  • a weakened immune system due to disease (such as HIV/AIDS) or treatment (such as cancer treatment)
• all pregnant women (including those women who become pregnant during the flu season)
• all those aged two, three, and four years (but not five years or older) on 31 August 2015 (ie date of birth on or after 1 September 2010 and on or before 31 August 2013) through general practice
• all children of school years 1 and 2 age through locally commissioned arrangements
• people living in long-stay residential care homes or other long-stay care facilities where rapid spread is likely to follow introduction of infection and cause high morbidity and mortality. This does not include, for instance, prisons, young offender institutions, or university halls of residence
• people who are in receipt of a carer’s allowance, or those who are the main carer of an older or disabled person whose welfare may be at risk if the carer falls ill consideration should also be given to the vaccination of household contacts of immunocompromised individuals, specifically individuals who expect to share living accommodation on most days over the winter and therefore for whom continuing close contact is unavoidable

The list above is not exhaustive, and the healthcare practitioner should apply clinical judgement to take into account the risk of flu exacerbating any underlying disease that a patient may have, as well as the risk of serious illness from flu itself. Flu vaccine should be offered in such cases even if the individual is not in the clinical risk groups specified above.

The JCVI has also advised that morbidly obese people (defined as BMI 40+) could also benefit from a flu vaccination. This has not been included as part of the GP contract in the 2015/16 DES. Many in this patient group will already be eligible due to complications of obesity that place them in another risk category. Practices will need to use clinical judgement to decide whether to vaccinate this group of patients, but vaccinations for morbidly obese patients with no other recognised risk factor will not attract a payment under the DES in 2015/16. The inclusion of this patient group into the flu programme from 2016/17 is currently under consideration.
Contraindications

Full details regarding contraindications and precautions are available from the Green Book, Chapter 19, Influenza (p204-206) https://www.gov.uk/government/publications/influenza-the-green-book-chapter-19. If you have any concerns, appropriate advice should be sought promptly either from the screening and immunisation team on england.bnsssg.imms@nhs.net, a consultant in communicable disease control or a consultant paediatrician.

Patient Group Directions (PGDs) and egg free vaccine arrangements

Optaflu®, an injectable influenza vaccine, is the only egg free influenza vaccine available in the UK for the 2015/16 influenza season. Advice regarding which patient should receive a low egg content vaccine or an egg-free vaccine can be found in the influenza chapter of the green book.

Practices need to source their own egg-free influenza vaccine for the 2015-16 influenza season. Supplies of Optaflu® for patients who cannot receive an influenza vaccine which contains egg ovalbumin will not be provided by the CCG, NHS England, or the hospital pharmacy nor will it be available via ImmForm. The procurement decision is effectively similar to the surgery’s “normal” flu vaccine supply and can include the following options:

1. Order Optaflu® vaccine directly from the manufacturer Novartis Vaccines 08457 451 500.
2. Order Optaflu® vaccine from any local high street pharmacy. A community pharmacy without a Wholesalers Dealers License may sell or supply medicines or vaccines to a GP practice however, the pharmacy must meet all of the following transactional criteria:
   • it takes place on an occasional basis
   • the quantity of medicines supplied is small
   • the intention is to meet the needs of an individual patient
   • the supply is made on a not for profit basis
3. Ask a pharmacy to dispense an NHS prescription for Optaflu® vaccine via a Green FP10 prescription for each individual patient. (Care must be taken regarding patients who pay prescription charges as patients must not be charged for free NHS flu vaccinations and the surgery is responsible for ensuring this)
The surgery ordering policy should take into account:

- Supply chain mechanisms mean it may take some days between placing your order and availability of the vaccine for delivery or collection. The surgery need to plan administration accordingly.
- Care is needed to ensure that the cold chain is maintained during vaccine transfer prior to administration.
- Payment terms and conditions will vary between suppliers and the surgery will carry the cost of unused stock it has ordered.
- Practice can reclaim the cost as a personally administered vaccine under the usual rules provided option 4 has not been used.

Please follow this link [http://www.bnssgformulary.nhs.uk/NHS-England-South-(South-West)-Patient-Group-Directions/](http://www.bnssgformulary.nhs.uk/NHS-England-South-(South-West)-Patient-Group-Directions/) to download the NHS England South (South West) Influenza Vaccine PGDs for adults and the NHS England South (South West) Influenza Vaccine PGDs for those under 18 years (expected to be available by 5th Sept). Finally, please remember that Optaflu is not licensed for use in those under 18 years and as such a Patient Specific Directions will be required (instead of a PGD) for people administering this vaccine to anyone under the age of 18 years.


Frontline healthcare workers vaccine uptake data collection tool 2015/16

The ImmForm data collection tool enables GP Practices to upload their own data regarding staff uptake of the flu vaccine. Unlike last year, we will be asking GP Practices to use this tool to submit their own data. Updated user guides are due to be published later this summer but no changes are planned for 2015/16. The 2013/14 user guide for this tool is available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/259680/Seasonal_flu_HCWs_data_collection_tool_Survey_2013_to_2014_acc2_final.pdf.

Cumulative data will be collected on vaccinations administered from 1st September 2015 onwards and will comprise of four monthly surveys for October, November, December and January. The data collection tool will open in November and run through to February so there are four monthly data collection tool periods.

Please note, the data collection is cumulative; data submitted should be on vaccinations given from 1st September 2015 until the relevant month end, and not just on vaccinations given since the previous month’s survey.

As some providers may finish their vaccination programme of their FHCW before the final collection, there will be an option on the form that allows data providers to indicate that their programme has been completed. If the appropriate box is selected, data providers will not have to submit data for remaining months as their last submitted data will be carried forward as their final data. If data providers do not select the box to indicate their programme has been completed, they will appear as a ‘non-responder’ for the following month’s survey, data will not be carried forward and it will be necessary for the area team to contact practices to chase up the data.

Locally, across NHS England South (South West) areas, the following protocol is to be followed:

1. GP practices are asked to manually upload their own data onto the ImmForm website (see above link for guidance) starting in November
2. GP practices will be expected to complete four monthly surveys unless they finish their staff vaccination programme before the final collection, in which case they should select the appropriate box on the survey
3. The NHS England South (South West) Administrative Support will check the monthly data submissions and manually upload to provide a monthly report at Area Team level
4. Any ‘non-responders’ failing to submit the first survey in November will be contacted by the NHS England South (South West) team to request this data
5. GP practices will be contacted again in February, prior to the final collection, if they have failed to submit data and appear as ‘non-responders’

We strongly recommend that the FHCW vaccination programme starts as early as possible after 1st September. Any practices that are unable to access the ImmForm data collection tool or have difficulty completing the form should contact mike.crew@nhs.net for assistance.
Examples of local best practice and innovation

If you have an example to add to this section please contact c.biscoe@nhs.net

Text Message Invitations - Heavitree Practice, Exeter
Heavitree Practice introduced an opt-out text messaging service to save money on postage and to increase uptake. They used the process outlined in the ‘Text Messaging how-to’ resource. They estimate that they are saving 150-170 (£90-£102) letters every month in their everyday communications (not including the flu invitations). For the flu programme they send out an early text invitation to all eligible patients (this year 9th July) asking people to book in to the main clinics on 30th September/6th October. They send another text invitation 4-6 weeks later. After the main clinics they follow up by phone to book patients into ‘mop-up’ clinics.

For more information contact Sarah Johnstone (Deputy Practice Manager) on 01392 222099 or sarah.johnston2@nhs.net

Automated Phone Reminders - Petroc Group Practice, St Columb Major
Last year the practice tried out a free telephone reminder service offered by their vaccine supplier (Sanofi). The service leaves an automatic voicemail to remind patients to book in for their appointment. The practice staff found that “The phone reminders via the drug company were very useful and at no cost to the practice in time or money.” They used this as an additional reminder strategy alongside more personal contact wherever possible such as letters and face to face.

For more information contact Sarah Dawson on sarah.dawson@petrocdocs.cornwall.nhs.uk.

Dedicated flu phone line – Rolle Practice, Exmouth
Rolle send personal invitations by letter to all their eligible patients in the first week of September. They also include reminders in repeat prescriptions, and publicise the clinics via Facebook and their website. A dedicated practice flu line enables patients to get straight through to book their appointment.
Involving patients - Heavitree Practice, Exeter

When patients come in to the clinic, staff ask them to put a note in their diary for the following 1st August as a trigger to phone up and book their appointment for the next year. This gives patients more ownership and makes the seasonal flu vaccine a routine part of their year, like a dentist appointment or annual check-up.

Ongoing reminders for at-risk groups - Petroc Group Practice, St Columb Major

Flu reminders are included throughout the year on invitations to chronic disease clinics and check-ups. This reinforces the importance of flu vaccination to these groups.

Allocating at risk patients for follow-up - Waterside Practice, Ilfracombe

Once their main flu clinics have taken place, at risk patients are followed up with phone calls. The nurses and Healthcare Assistants each take a QOF group and focus on them – e.g. the diabetes nurse lead follows up all the diabetes patients so that she can talk to them about it from a self-care point of view. They counter any concerns that the patient might have and encourage them to come in. The intended outcomes are either for the patient to book an appointment or to give a verbal decline which gets recorded.

Clinical follow-up to address patient concerns – Rolle Practice, Exmouth

Follow-up calls start from November. Admin staff make the first phone call, but if the patient expresses concerns, they arrange for a clinician to phone the patient back to discuss any worries they make have and encourage them to book in.
Reaching patients with learning disability - Okehampton Practice
The practice issue a special invitation letter and clinic including an annual review for people with learning disability, with follow up nurse visits for non-attenders.

Reaching asthma patients – Heavitree Practice, Exeter
If an asthma patient has not had an asthma check in the last 12 months, they are asked to come in for a check-up before they are allowed to access the flu vaccination – this is a good way to encourage them to come in.

‘One for all’ staff vaccinations – Waterside Practice, Ilfracombe
The GPs have an ‘all for one and one for all’ approach to staff flu vaccination. They agree with each other that for the protection of their patients and each other, they all get the vaccination without exception.

Staff vaccination – Rolle Practice, Exmouth
Staff are strongly encouraged to get vaccinated, and are offered the vaccine at the start of the clinics so it is easy for them to have it done all together. The practice manager follows up with those who have not yet had it done to remind them.

Running efficient and sociable flu clinics – Rolle Practice, Exmouth
They make an occasion of the main clinics by putting up lots of publicity material, wearing t-shirts, badges and sashes, but also focus on efficiency, aiming to vaccinate one patient per minute. They speed the process up by asking patients to come in for a specific appointment time and to wear short sleeves, and they have admin staff on hand to enter the Read code electronically while the nurse is seeing the patient. The nurses reinforce the key messages to every patient, reassuring them that they won’t get the flu as a result of the vaccination.
Children’s party – The Alverton Practice, Cornwall

When vaccines were introduced for children last year, The Alverton Practice sent out letters to all eligible children inviting them to a vaccination ‘party’. Clinicians and practice staff dressed in fancy dress, put up balloons and decorations, gave out sweets, provided colouring pencils and sheets, and had a children’s entertainer making balloon animals. Some of the children also came in fancy dress. The clinic was on a Saturday morning, 9.00-12.30, and if the children’s parents were also eligible for a flu jab, they were vaccinated at the same time.

This initiative resulted in an uptake of 87%, with 93/106 children taking up the offer (including some in clinically at risk groups).
**Flu Facts (taken from NHS Flu Fighter)**

**Flu kills**
For the majority of people who catch it flu is unpleasant, but for some it can lead to chest infections, severe complications and death. Globally, seasonal flu accounts for about three to five million causes of severe illness annually and between 250,000 and 500,000 deaths.

**The flu vaccine has an excellent safety record**
The risk of having a serious (anaphylactic) reaction to the seasonal flu vaccine is less than one in a million: much lower than the risk of getting seriously ill from having the flu itself. If you have had a serious allergic reaction (anaphylaxis) to a flu vaccine before, please talk to a clinician before getting vaccinated. If you have a serious allergic reaction (anaphylaxis) to hens’ eggs, you should enquire about vaccines with a very low egg content and be vaccinated under clinical supervision.

**The flu jab can’t give you the flu**
It is impossible to get flu from the having the flu jab because the vaccine doesn’t contain live viruses. A very small number of people experience side effects such as aching muscles, but this is simply the immune system responding to the vaccine.

**The side effects of the flu vaccination aren’t bad**
For the most part, seasonal flu vaccine side effects are mild or often non-existent. The most common side effect is soreness around the site of the injection and occasionally aching muscles. These symptoms are a lot less serious than having flu.

**Health professionals need to protect patients**
Vaccination isn’t just about keeping yourself safe, it’s about protecting your colleagues, your family and your patients. You can carry and pass the virus on to others without having any symptoms yourself, so even if you consider yourself healthy, you might be risking the lives of others.

**The flu vaccine is one of the safest in the world**
Seasonal flu vaccine is given to millions of people in the UK each year. The specific strains of flu that are included may change from one year to the next but vaccines are still thoroughly tested and are safe.

**You need the vaccine every year**
If you were vaccinated last year you helped to fight the flu and took an extra step towards excellent patient care. Please do the same again this year. You won’t be protected against the new strains of flu circulating.
Vaccination works
The World Health Organisation cites clean water and vaccination as the two interventions that have the greatest impact on public health - vaccination works. Trivalent seasonal influenza vaccines generally give 60-80 per cent protection against infection.

Pregnant women can be vaccinated
Pregnant women can have the flu vaccination at any stage of their pregnancy. Having the vaccination when pregnant is beneficial and helps protect baby from flu over the first few months of life.

Healthy diets won’t prevent flu
Your diet could well be helping to boost your immune system, but eating well will not protect you from flu. The best way to protect you, your family and your patients against flu is by getting the flu jab.

Hand-washing is very important, but it won’t stop flu
It is vital to follow universal infection prevention procedures and wash your hands, but once flu has been passed on to your family, colleagues or your patients, clean hands won’t keep flu at bay. Book your flu jab as soon as possible, and encourage those around you to do the same.

Anyone can get the flu
One of the most common reasons for not getting vaccinated is “I’ve never had flu before”. There’s no such thing as natural immunity to influenza; with new strains circulating this year, it’s best to get vaccinated against flu.
Advanced Flu Pharmacy Service

Adult patients, aged 18 and over at the time of vaccination, who are defined in the Annual Flu letter will be able to receive their seasonal influenza vaccination at participating community pharmacies from September. Details are limited at the moment, but further information will be circulated via the weekly GP bulletin.
SMS from NHS Mail

This free service was due to close in July 2015, but it is now extended to 30 September 2015. Further information is available on the NHS England website here. Support for the NHS Mail SMS service is available from support@t-mmp.com

Flu Vaccination Invitation Template Letters

The following templates have been adapted from the generic national flu letter template which can be viewed at https://www.gov.uk/government/publications/flu-vaccination-invitation-template-letter. These templates are provided as aid and there is no obligation to follow this format. GP practices are therefore advised to review these templates and amend as they feel appropriate.
Do you find your home difficult to keep warm in the winter? Does your home suffer from condensation, damp and mould? Are your energy bills on the rise? For free, impartial and local advice contact the Home Energy Team on Freephone 0800 082 2234 9am-5pm, Monday-Friday or email home.energy@cse.org.uk

Template 1: Over 65s invitation

Dear [Name]

Annual flu vaccination

Every autumn, as part of a yearly national campaign, everyone who is 65 (by 31 March 2015) or older is offered a free seasonal flu vaccination as you may be at greater risk of serious illness should you catch flu.

You are therefore invited:

Either

To have your free, annual flu vaccination at the surgery on:

[Insert dates – preferably ones that allow for people’s working hours and other demands on their time]

Please phone us now on [phone number] to arrange a time on one of these days.

Or

To phone the surgery on [phone number] to arrange a time for your free, annual flu vaccination.

You may also be offered a vaccination against pneumococcal disease which can cause severe pneumonia or a new vaccine to reduce the chance of getting shingles and neuralgia. The shingles vaccine is available for free to everyone who is aged 70 OR 78 OR 79 on 1st September 2014.

If you have a carer they may also be eligible for the free flu vaccination (as the welfare of the person they care for may be at risk if the carer falls ill). Please let your carer know that they can ask their own GP for a free flu vaccination.

If you decide not to have the vaccination please let us know so we can enter this on your medical records.

Thank you.

We look forward to seeing you soon.

Yours sincerely

[GP name – Suggest GP signs letter]

[Position/title]

Please see overleaf for some frequently asked questions about the flu vaccination.

Common questions about the flu and shingles vaccination

Do you find your home difficult to keep warm in the winter? Does your home suffer from condensation, damp and mould? Are your energy bills on the rise? For free, impartial and local advice contact the Home Energy Team on Freephone 0800 082 2234 9am-5pm, Monday-Friday or email home.energy@cse.org.uk
What is flu?
Flu is an unpleasant disease that spreads quickly and easily through coughing and sneezing. Flu can also give you headaches, a sore throat, fever, chills, and muscle and joint aches. Those people who are at risk, either because of their age or medical conditions, may develop complications such as chest infections and pneumonia or in some rare cases cardiac problems, meningitis and/or encephalitis.

Why get the vaccine?
The vaccine provides the best available protection against flu. It is not 100% but it will protect a significant number of people and reduce the severity of flu if you get it. It could also help your relatives or carers because you will not be passing the disease to them.

Who should get it?
Young babies, older people, pregnant women and those who have other underlying health conditions, especially those of the lungs, heart, liver or kidneys, are particularly vulnerable to serious complications and possibly hospitalisation. Every year in the UK a number of people in these groups die from the complications of flu.

I've heard that the vaccination can give you flu. Is that true?
No; the flu vaccine that is given to adults is made from dead flu virus and cannot cause the infection. The flu vaccine that will be given to most children is a live vaccine, but the viruses in it have been weakened so they can not cause flu. You may get some side effects after the vaccination but these are quite mild like a slightly raised temperature or aching muscles for a couple of days or an ache in the arm where the injection was given. Other reactions are very rare.

When can I get the vaccine?
The vaccine is available now and you just need to contact the surgery on [phone number] to book an appointment. Get the vaccine as early as possible to be protected in time for winter.

What is the shingles vaccine for?
Most people have had chickenpox when younger or have been in contact with the chickenpox virus. As people get older, this virus (which stays in the body) can reactive to cause shingles. Shingles can be very painful and can last for many years. The vaccine can reduce your risk of getting shingles or reduce the severity of its symptoms should you develop the disease.

Does the shingles vaccine have side effects?
Side effects are usually quite mild and don’t last very long. You may get a headache or soreness at the site of the injection. If the side effects persist for more than a few days you should discuss this with your GP or practice nurse.

When should I have the shingles vaccine and how often?
You should have the shingles vaccination when you are 70 years old. You will only have the vaccination once – unlike the flu jab, you do not need to be re-vaccinated every year. The shingles vaccination can be given at the same time as your flu jab. A catch-up programme is also running for people aged 78 AND 79 on 1st September 2014 so if you are in this age bracket you should also have the shingles vaccination.

Why can’t people aged 71 to 77 years of age, or over 80 have the vaccination?
Vaccine supply from the manufacturer is at present limited, and between 1 September 2014 and 31 August 2015, there will only be enough vaccine to fully vaccinate two birth cohorts - the routine cohort, and the catch-up cohort (those aged 78 AND 79 on 1 September 2014). The most equitable approach is to vaccinate 78 and 79-year-olds first, in addition to the routine cohort, as 79 year-olds will be too old to be eligible for vaccination in 2015/16. People aged 80 and over will not get the shingles vaccination because the vaccine is less effective as people get older.
Do you find your home difficult to keep warm in the winter? Does your home suffer from condensation, damp and mould? Are your energy bills on the rise? For free, impartial and local advice contact the Home Energy Team on Freephone 0800 082 2234 9am-5pm, Monday-Friday or email home.energy@cse.org.uk

Template 2: Clinical at risk invitation letter

Dear (INSERT NAME)

Annual flu vaccination

You may be aware that because you have a health condition you are at greater risk of serious illness if you catch flu this winter. We therefore recommend that you have your free, annual flu vaccination to protect yourself against this risk.

You are therefore invited:

Either
To have your free, annual flu vaccination at the surgery on:
[Insert dates – preferably ones that allow for people’s working hours and other demands on their time]
Please phone us now on [phone number] to arrange a time on one of these days.

Or
To phone the surgery on [phone number] to arrange a time for your free, annual flu vaccination.
If you have a carer they may also be eligible for the free flu vaccination (as the welfare of the person they care for may be at risk if the carer falls ill). Please let your carer know that they can ask their own GP for a free flu vaccination.
If you decide not to have the vaccination please let us know so we can enter this on your medical records.

Thank you. We look forward to seeing you soon.
Yours sincerely

[GP name – Suggest GP signs letter]
[Position/title]

Please see overleaf for some frequently asked questions about the flu vaccination.
**Common questions about the flu vaccination**

**What is flu?**
Flu is an unpleasant disease that spreads quickly and easily through coughing and sneezing. Flu can also give you headaches, a sore throat, fever, chills, and muscle and joint aches. Those people who are at risk, either because of their age or medical conditions, may develop complications such as chest infections and pneumonia or in some rare cases cardiac problems, meningitis and/or encephalitis.

**Why get the vaccine?**
The vaccine provides the best available protection against flu. It is not 100% but it will protect a significant number of people and reduce the severity of flu if you get it. It could also help your relatives or carers because you will not be passing the disease to them.

**Who should get it?**
Young babies, older people, pregnant women and those who have other underlying health conditions, especially those of the lungs, heart, liver or kidneys, are particularly vulnerable to serious complications and possibly hospitalisation. Every year in the UK a number of people in these groups die from the complications of flu.

**I’ve heard that the vaccination can give you flu. Is that true?**
No; the flu vaccine that is given to adults is made from dead flu virus and cannot cause the infection. The flu vaccine that will be given to most children is a live vaccine, but the viruses in it have been weakened so they can not cause flu. You may get some side effects after the vaccination but these are quite mild like a slightly raised temperature or aching muscles for a couple of days or an ache in the arm where the injection was given. Other reactions are very rare.

**When can I get the vaccine?**
The vaccine is available now and you just need to contact the surgery on [phone number] to book an appointment. The best time to get the jab is as early as possible to be protected in time for winter.
Do you find your home difficult to keep warm in the winter? Does your home suffer from condensation, damp and mould? Are your energy bills on the rise? For free, impartial and local advice contact the Home Energy Team on Freephone 0800 082 2234 9am-5pm, Monday-Friday or email home.energy@cse.org.uk

Template 3: Pregnant women invitation letter

[GP Surgery]  T [000 000 0000]  F [000 000 0000]  www.gov.uk
[First address line]  [Second address line]  [Town/city]  [County Postcode]

[Date]

Dear (INSERT NAME)

Annual flu vaccination

You may be aware that because you are pregnant you are at greater risk of serious illness if you catch flu this winter. We therefore recommend that you have your free, annual flu vaccination to protect yourself and your baby against these risks.

You are therefore invited:

Either

To have your free, annual flu vaccination at the surgery on:

[Insert dates – preferably ones that allow for people’s working hours and other demands on their time]

Please phone us now on [phone number] to arrange a time on one of these days.

Or

To phone the surgery on [phone number] to arrange a time for your free, annual flu vaccination.

If you decide not to have the vaccination please let us know so we can enter this on your medical records.

When we compile our mailing list we make every effort to ensure that the information is up to date. If you have received this letter and have recently suffered a pregnancy loss, please accept our sincere apologies and disregard this letter – optional.

Thank you. We look forward to seeing you soon.

Yours sincerely

[GP name – Suggest GP signs letter]  [Position/title]
Please see overleaf for some frequently asked questions about the flu vaccination.

Common questions about the flu vaccination

How serious is flu?
Flu is an unpleasant disease that spreads quickly and easily through coughing and sneezing. Flu can also give you headaches, a sore throat, fever, chills, and muscle and joint aches. Pregnant women are at increased risk of getting serious complications from flu compared with other healthy adults. If a pregnant woman catches flu, she is much more likely than a woman who isn’t pregnant, to be admitted to hospital or on rare occasions be admitted to intensive care and even potentially die. Flu can also be serious for new born babies, who can catch the infection from their mothers.

Why get the vaccine?
Catching flu during pregnancy can lead to an increased risk of pneumonia, miscarriage, premature birth or having a low weight baby. The vaccine provides the best available protection against flu and will also protect the baby in the first few weeks of life after birth when they are too young to have a vaccination themselves.

I've heard that the vaccination can give you flu. Is that true?
No; the flu vaccine that is given to adults is made from dead flu virus and cannot cause the infection. The flu vaccine that will be given to most children is a live vaccine, but the viruses in it have been weakened so they can not cause flu. You may get some side effects after the vaccination but these are quite mild like a slightly raised temperature or aching muscles for a couple of days or an ache in the arm where the injection was given. Other reactions are very rare.

Is the vaccine safe?
The flu vaccination has been given safely to millions of women over the last few years and in several countries around the world. This experience has shown that there are no safety issues relating to the pregnancy or the baby – for example, the number of miscarriages or birth defects in pregnant women who have been vaccinated for flu is no different from those who haven’t been vaccinated.

I had the seasonal flu vaccination last year or in my last pregnancy. Do I need another flu jab this year?
Yes; the flu viruses change every year, so the vaccines are changed to match them. Being vaccinated one year won’t protect you during the next.

When should I have the vaccine?
The vaccine is available now and you just need to contact the surgery on [phone number] to book an appointment. The best time to get the jab is as early as possible to be protected in time for winter, but will be available up until 31st March. You can safely have the vaccine at any stage of your pregnancy from conception onwards.

I am pregnant and not sure about the seasonal flu vaccination- where can I find out more information?
Further information is available in the NHS England leaflet ‘Flu, your pregnancy and you’. You can also discuss any concerns with your midwife or GP.
Do you find your home difficult to keep warm in the winter? Does your home suffer from condensation, damp and mould? Are your energy bills on the rise? For free, impartial and local advice contact the Home Energy Team on Freephone 0800 082 2234 9am-5pm, Monday-Friday or email home.energy@cse.org.uk
Common questions about the flu and shingles vaccination

What is flu?
Flu is an unpleasant disease that spreads quickly and easily through coughing and sneezing. Flu can also give you headaches, a sore throat, fever, chills, and muscle and joint aches. Those people who are at risk, either because of their age or medical conditions, may develop complications such as chest infections and pneumonia or in some rare cases cardiac problems, meningitis and/or encephalitis.

Why get the vaccine?
The vaccine provides the best available protection against flu. It is not 100% but it will protect a significant number of people and reduce the severity of flu if you get it. It could also help your relatives or anyone you are a carer for because you will not be passing the disease to them.

Who should get it?
Young babies, older people, pregnant women and those who have other underlying health conditions, especially those of the lungs, heart, liver or kidneys, are particularly vulnerable to serious complications and possibly hospitalisation. Every year in the UK a number of people in these groups die from the complications of flu.

I’ve heard that the vaccination can give you flu. Is that true?
No; the flu vaccine that is given to adults is made from dead flu virus and cannot cause the infection. The flu vaccine that will be given to most children is a live vaccine, but the viruses in it have been weakened so they can not cause flu. You may get some side effects after the vaccination but these are quite mild like a slightly raised temperature or aching muscles for a couple of days or an ache in the arm where the injection was given. Other reactions are very rare.

When can I get the vaccine?
The vaccine is available now and you just need to contact the surgery on [phone number] to book an appointment. The best time to get the vaccine is as early as possible, to be protected in time for winter.
Dear [Name]

Flu vaccination for children aged two, three and four years (on 1st September 2014)

In 2013/14, for the first time, all children aged two and three years were offered a flu vaccination as part of a programme to extend flu immunisation to some children. This year, the programme is being extended to include four-year-olds. For most children, the vaccine is given as a simple nasal spray – no injections are involved. Your [son/daughter] [child’s name] is therefore invited to attend for a free flu vaccination at the surgery on:

[Insert dates – preferably ones that allow for people’s working hours and other demands on their time]

Please phone us now on [phone number] to arrange a convenient time on one of these days.

Alternatively, please phone the surgery on [phone number] to arrange a time for [your child’s] [name] free flu vaccination.

If you decide that do not want [your child] [name] to have the vaccination please let us know so we can enter this on his/her medical records.

Thank you.

We look forward to seeing you and [your child] [name] soon.

Yours sincerely

[GP name – Suggest GP signs letter]

[Position/title]

Please see overleaf for some frequently asked questions about the flu vaccination.
Common questions about the children’s flu vaccination

Why should children have the flu vaccine?

Flu can be a very unpleasant illness in children causing fever, stuffy nose, dry cough, sore throat, aching muscles and joints, and extreme tiredness. This can often last several days. Some children can also get a very high fever, sometimes without the usual flu symptoms, and may need to go to hospital for treatment. Complications of flu can include a painful ear infection, bronchitis, and pneumonia – these may be severe.

What are the benefits of the vaccine?

Having the vaccine will help protect your child from what can be a very nasty illness and will also reduce the chance of others in your family getting it. It can help you avoid having to take time out because you are ill or to look after your sick child.

How will the vaccine be given?

For most children, it is given as a nasal spray.

Who will give my child their flu vaccination?

Specially trained healthcare staff will give your child the flu vaccination. In some cases, older children may be given the option to give the vaccine to themselves, under the supervision of the healthcare team.

How does the nasal vaccine work?

The nasal vaccine contains viruses that have been weakened to prevent them from causing flu but will help your child to build up immunity, so that when your child comes into contact with the flu virus they are unlikely to get ill.

Are there any side effects of the vaccine?

Side effects are uncommon but may include a runny or blocked nose, headache, general tiredness and some loss of appetite. The vaccine is absorbed quickly in the nose so, even if your child sneezes immediately after having had the spray, there’s no need to worry that it hasn’t worked.

Are there any children who shouldn’t have the nasal vaccine?

Children should not have the nasal vaccine if they:

- are currently wheezy or have been wheezy in the past week (vaccination should be delayed until at least seven days after the wheezing has stopped)
- are severely asthmatic, i.e. being treated with oral steroids or high dose inhaled steroids
- are allergic to eggs or any part of the vaccine* or
- have a condition that severely weakens their immune system.

Also, children who have been vaccinated should avoid close contact with people with very severely weakened immune systems for around two weeks following vaccination. This is because there’s an extremely remote chance that the vaccine virus may be passed to them.

*See the website at http://xpl.medicines.org.uk/ and enter Fluenz or Fluenz tetra in the search box for a list of the ingredients of Fluenz vaccine’

I believe the nasal vaccine contains products derived from pigs (porcine gelatine), which means my child can’t have it because of our beliefs.
The nasal vaccine contains a highly processed form of gelatine (derived from pigs), which is used in a range of many essential medicines. The nasal vaccine provides the best protection against flu, particularly in young children.

This nasal vaccine not only helps protect your child against disease but, if enough children are vaccinated, the disease won’t spread from one person to another, and so their friends and family are also protected.

Some faith groups accept the use of porcine gelatine in medical products – the decision is, of course, up to you. For further information about porcine gelatine and the nasal flu vaccine, see www.gov.uk/government/news/vaccines-and-gelatinee-phe-response

Can’t my child have the injected vaccine that doesn’t contain gelatinee?

The nasal vaccine offers the best protection for your child and it reduces the risk to, for example, a baby brother or sister who is too young to be vaccinated, as well as other members of the family (for example, grandparents) who may be more vulnerable to the complications of flu. The injected vaccine is not thought to reduce the spread as effectively and so is not being offered to healthy children as part of this programme.

However, if your child is at high risk from flu due to one or more medical conditions or treatments and can’t have the nasal flu vaccine, they should have the flu vaccine by injection.

Has the vaccine been used in other countries?

Yes; it has been used safely in America for many years and it was used in the 2013/14 flu season in the UK where hundreds of thousands of children were successfully vaccinated.
Dear parent or carer of (INSERT CHILD NAME)

Annual flu vaccination

You may be aware that because your child has a health condition [he/she] are at greater risk of serious illness if they catch flu this winter. We therefore recommend that your [son/daughter] [child’s name] has a free, annual flu vaccination to be protected against these risks. For most children over the age of two, the vaccine is given as a simple nasal spray – no injections are involved.

Your [son/daughter] [child’s name] is therefore invited:

Either

To have their free, annual flu vaccination at the surgery on:

[Insert dates – preferably ones that allow for people’s working hours and other demands on their time]

Please phone us now on [phone number] to arrange a time on one of these days.

Or

To phone the surgery on [phone number] to arrange a time for your [son/daughter] [child’s name] free, annual flu vaccination.

If you decide that do not want [your child] [name] to have the vaccination please let us know so we can enter this on his/her medical records

Thank you. We look forward to seeing you soon.

Yours sincerely

[GP name – Suggest GP signs letter]
[Position/title]
Common questions about the children’s flu vaccination

Why should children have the flu vaccine?
Flu can be a very unpleasant illness in children causing fever, stuffy nose, dry cough, sore throat, aching muscles and joints, and extreme tiredness. Complications of flu can include a painful ear infection, bronchitis, and pneumonia – these may be severe.
Children with an underlying medical condition are at increased risk of catching flu and of experiencing complications and are therefore advised to be vaccinated against flu.

What are the benefits of the vaccine?
Having the vaccine will help protect your child from what can be a very nasty illness and will also reduce the chance of others in your family getting it. It can help you avoid having to take time out because you are ill or to look after your sick child.

How will the vaccine be given?
Children aged two to 18 with underlying health conditions will now be offered the nasal spray instead of the injection. Those aged between six months and two years will continue to be offered the flu injection as the nasal spray is only licensed in children aged from 24 months to less than 18 years.

Who will give my child their flu vaccination?
Specially trained healthcare staff will give your child the flu vaccination. In some cases, older children may be given the option to give the vaccine to themselves, under the supervision of the healthcare team.

How does the nasal vaccine work?
The nasal vaccine contains viruses that have been weakened to prevent them from causing flu but will help your child to build up immunity, so that when your child comes into contact with the flu virus they are unlikely to get ill.

Are there any side effects of the vaccine?
Side effects are uncommon but may include a runny or blocked nose, headache, general tiredness and some loss of appetite. The vaccine is absorbed quickly in the nose so, even if your child sneezes immediately after having had the spray, there’s no need to worry that it hasn’t worked.

Are there any children who shouldn’t have the nasal vaccine?
Children should not have the nasal vaccine if they:
• are currently wheezy or have been wheezy in the past week (vaccination should be delayed until at least seven days after the wheezing has stopped)
• are severely asthmatic, i.e. being treated with oral steroids or high dose inhaled steroids
• are allergic to eggs or any part of the vaccine* or
• have a condition that severely weakens their immune system.

These children will be offered an inactivated injectable vaccine as an alternative unless they have had a confirmed anaphylactic reaction to a previous dose or any component of the vaccine (other than an egg allergy).

Also, children who have been vaccinated should avoid close contact with people with very severely weakened immune systems for around two weeks following vaccination. This is because there’s an extremely remote chance that the vaccine virus may be passed to them.

*See the website at http://xpil.medicines.org.uk/ and enter Fluenz or Fluenz tetra in the search box for a list of the ingredients of Fluenz vaccine’

I believe the nasal vaccine contains products derived from pigs (porcine gelatine), which means my child can’t have it because of our beliefs.
The nasal vaccine contains a highly processed form of gelatine (derived from pigs), which is used in a range of many essential medicines. The nasal vaccine provides the best protection against flu, particularly in young children.

This nasal vaccine not only helps protect your child against disease but, if enough children are vaccinated, the disease won’t spread from one person to another, and so their friends and family are also protected.

Some faith groups accept the use of porcine gelatine in medical products – the decision is, of course, up to you. For further information about porcine gelatine and the nasal flu vaccine, see www.gov.uk/government/news/vaccines-and-gelatine-phe-response

Has the vaccine been used in other countries?

Yes; it has been used safely in America for many years and it was used in the 2013/14 flu season in the UK where hundreds of thousands of children were successfully vaccinated.
### Table 1: Intranasal vaccine – first dose READ codes

<table>
<thead>
<tr>
<th>Description</th>
<th>Read v2</th>
<th>Read CTV3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of first intranasal seasonal influenza vaccination</td>
<td>65ED1</td>
<td>Xaac3</td>
</tr>
<tr>
<td>FLUENEA nasal suspension 0.2mL</td>
<td>n47D.</td>
<td>n47D.</td>
</tr>
<tr>
<td>INFLUENZA VACCINE (LIVE ATTENUATED) nasal suspension 0.2mL</td>
<td>n47E.</td>
<td>n47E.</td>
</tr>
</tbody>
</table>

### Table 2: Intranasal vaccine – second dose READ codes

<table>
<thead>
<tr>
<th>Description</th>
<th>Read v2</th>
<th>Read CTV3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration of second intranasal seasonal influenza vaccination</td>
<td>65ED3</td>
<td>Xaac4</td>
</tr>
<tr>
<td>FLUENEA nasal suspension 0.2mL</td>
<td>n47D.</td>
<td>n47D.</td>
</tr>
<tr>
<td>INFLUENZA VACCINE (LIVE ATTENUATED) nasal suspension 0.2mL</td>
<td>n47E.</td>
<td>n47E.</td>
</tr>
</tbody>
</table>

### Table 3: Inactivated vaccine READ codes

<table>
<thead>
<tr>
<th>Description</th>
<th>Read v2</th>
<th>Read CTV3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seasonal influenza vaccination</td>
<td>65ED.</td>
<td>XaZ0d</td>
</tr>
<tr>
<td>INFLUVAC SUB-UNIT prefilled syringe 0.5mL</td>
<td>n473.</td>
<td>n473.</td>
</tr>
<tr>
<td>FLUARIX VACCINE prefilled syringe</td>
<td>n47d.</td>
<td>n47d.</td>
</tr>
<tr>
<td>AGRIPPAL VACCINE prefilled syringe 0.5mL</td>
<td>n47f.</td>
<td>n47f.</td>
</tr>
<tr>
<td>ENZIRA prefilled syringe 0.5mL</td>
<td>n47m.</td>
<td>n47m.</td>
</tr>
<tr>
<td>IMUVAC prefilled syringe 0.5mL</td>
<td>n47o.</td>
<td>n47o.</td>
</tr>
<tr>
<td>INACT INFLUENZA VACC (SPLIT VIRION) prefilled syringe 0.25mL</td>
<td>n47y.</td>
<td>n47y.</td>
</tr>
<tr>
<td>OPTAFLU suspension for injection prefilled syringe 0.5mL</td>
<td>n47F.</td>
<td>n47F.</td>
</tr>
<tr>
<td>INTANZA 9micrograms/strain suspension for injection pfs 0.1mL</td>
<td>n47u.</td>
<td>n47u.</td>
</tr>
<tr>
<td>INTANZA 15micrograms/strain suspension for injection pfs 0.1mL</td>
<td>n47p.</td>
<td>n47p.</td>
</tr>
<tr>
<td>FLUARIX TETRA suspension for injection prefill syringe 0.5mL</td>
<td>n47H.</td>
<td>n47H.</td>
</tr>
<tr>
<td>INFLUVAC DESU suspension for injection prefill syringe 0.5mL</td>
<td>n47G.</td>
<td>n47G.</td>
</tr>
</tbody>
</table>

### Table 4: Vaccination given by other healthcare provider READ codes

<table>
<thead>
<tr>
<th>Description</th>
<th>Read v2</th>
<th>Read CTV3</th>
</tr>
</thead>
<tbody>
<tr>
<td>First intranasal seasonal influenza vaccination given by other healthcare provider</td>
<td>65E21</td>
<td>Xaac7</td>
</tr>
<tr>
<td>Second intranasal influenza vaccination given by other healthcare provider</td>
<td>65E22</td>
<td>Xaac8</td>
</tr>
<tr>
<td>Seasonal influenza vaccine given by other healthcare provider</td>
<td>65E20</td>
<td>XaZ0e</td>
</tr>
<tr>
<td>Seasonal influenza vaccination given by pharmacist</td>
<td>65ED0</td>
<td>XaZfY</td>
</tr>
</tbody>
</table>