Flu and flu vaccination 2018/19: A toolkit for care homes

(South West)
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<tr>
<td>1.0</td>
<td>26/09/2017</td>
<td>Draft to final document, published on NHSE South West</td>
<td>Jayne Stewart &amp; Charlotte Cadwallader</td>
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<td>Charlotte Cadwallader</td>
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<td>Updates for 2018/19 flu season and acknowledgement of repeat offer of national social care staff vaccinations service</td>
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Flu & flu vaccination: a toolkit for care homes

Foreword:

As those who have had the flu will tell you, it is very different to a common cold. At the very least, it confines even the fittest of people to bed. For older people or those with long-term health conditions, the effects of flu can be much more serious, and in some cases even fatal.

For those working in a care home or health and care environment where there are many vulnerable people, it is incredibly important to have the flu vaccine. This not only helps to protect the staff themselves and their immediate families, but also helps to protect very vulnerable residents who might not respond well to vaccination.

That is why we have produced this toolkit. It is designed to help care home owners and managers - and partnership organisations who work alongside care homes and in residential settings - in meeting their duty of care by ensuring their staff are able to access the annual seasonal flu vaccine.

As well as keeping staff and residents safe and well, reducing the threat of flu also helps you to ensure business continuity; reducing the likelihood of your staff being ill and off work and the associated costs of providing bank or agency cover for them. Vaccination is also of benefit as it helps to reduce transmission to the wider public and in times of increased pressure on health and social care services, helps to reduce the burden of ill health, and therefore demand on the wider health system at a time when services are already under pressure.

Providing flu vaccination for staff is an annual responsibility for employers. It is recognised that it can be difficult for Care Home owners and managers to facilitate staff vaccination, so we have prepared this toolkit to give you up-to-date guidance, information, and options for arranging staff flu vaccination to support you in providing protection to your employees.

This document has been prepared in partnership with Public Health England’s (South West) Screening & Immunisation Team, NHS England, South Gloucestershire Council, Plymouth City Council, North Somerset Council and Somerset County Council.

Julie Yates
Screening & Immunisation Lead, Public Health England, South (South West)
About this document:

This document is to be used alongside PHE’s ‘Infection Prevention and Control: An Outbreak Information Pack for Care Homes’ and PHE’s ‘South West Care Home Planning Checklist for Seasonal Influenza (Flu)’ documents.

The resources detailed below are intended to supplement the PHE documents and are aimed at supporting Care Homes to improve uptake and to understand:

- the importance of flu vaccination
- the responsibilities of employers
- barriers to increasing uptake
- benefits of displaying and recording flu uptake
- employer options for vaccinating staff
- cost calculator
- video links to promotional material
- NICE guidance
- link to useful resources

This document was originally produced in 2017 by a sub-group of the ‘South West Care Home Workers – Improving Uptake’ Working Group and is updated annually.

Please contact england.swscreeningandimms@nhs.net for more information.
Update: NHS vaccination of social care staff for 2018/19

NHS England and Public Health England introduced a programme offering free flu vaccination to nursing and care home workers during the 2017/18 flu season. This will continue for the 2018/19 season.

Arrangements are in place for the influenza vaccination scheme for eligible health and social care and hospice staff to be offered by GP practices and community pharmacy as part of the seasonal flu programme.

This scheme is intended to complement, not replace, any established occupational health schemes that employers have in place to offer the flu vaccination to their workforce. We would urge employers to continue their efforts to protect their staff and most vulnerable patients and clients by encouraging frontline social care staff to be immunised. They can do this by accessing local schemes that are already in place or, if they are eligible as they are in one of the at-risk groups or other groups identified in the annual flu letter, by going to their own GP practice or any pharmacy.

The extension to the seasonal influenza vaccine will be available to:

Health and social care staff, employed by a registered residential care/nursing home or registered domiciliary care provider, who are directly involved in the care of vulnerable patients/clients who are at increased risk from exposure to influenza. Vulnerable means those patients/clients in a clinical risk group for flu or who are aged 65 years and over.

Health and care staff, employed by a voluntary managed hospice provider, who are directly involved in the care of vulnerable patients/clients who are at increased risk from exposure to influenza. Vulnerable means those patients/clients in a clinical risk group for flu or who are aged 65 years and over.

Staff will be able to attend their registered GP practice or pharmacy to have a flu vaccination. These individuals will be required to provide some evidence of eligibility, such as an ID badge, a recent pay slip or letter from an employer.

The following arrangements remain unchanged:

- Employers, remain responsible for ensuring that their staff are protected from exposure to risk of infection and they are keen to support them to achieve a high rate of uptake as this will also help protect residents from infection and ensure that their business remains resilient during the winter.
- The national scheme is intended to compliment any local schemes that have already been put in place by employers to support flu vaccination during 2018/19 and is not a replacement service.
- It is recommended that health and social care staff contact their GP practice or local...
pharmacy in advance, to ensure that they are offering the service and to book an appointment, to receive their flu vaccination.

1. The importance of flu vaccine for staff and residents in care

Flu immunisation is effective in preventing disease in working-age adults, and is recommended for all care home and social care workers with direct patient/client contact. It is the single best way to protect against catching or spreading flu.

The immunisation of staff protects care home and social care workers themselves, their colleagues, their families and also their clients/residents.

Flu immunisation is particularly important for staff in care homes that look after older people, as these are a group who are very vulnerable to severe complications of flu. The immune response in some frail older people can also be poor, so the vaccine may not provide them the same level of protection as younger people. Vaccination of staff has been shown to reduce respiratory deaths in residents to a marked degree.

Care home residents are eligible for free flu vaccination from the NHS because they are considered to be at high risk from flu. Residents are eligible because they live in a care home setting – an environment in which there is considerable close contact with many other people which can lead to flu spreading easily. Many residents will also be aged 65 or over and/or have underlying medical conditions which independently increase their risk from flu infection and severe complications. All care home residents should be offered flu vaccine – to protect themselves, their fellow residents and staff.

2. Responsibilities of employers

Increased incidence of flu in winter is a regular, predictable event. Health and social care workers who have regular close contact with patients, residents and clients are likely to have a greater degree of exposure to infection. As such, the Health and Safety at Work Act (1974) covers the assessment and management of occupational risk to employees and this includes offering the flu vaccine to staff with direct caring responsibilities.

In addition, under Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, providers registered with the Care Quality Commission (CQC) must “assess the risks to people’s health and safety during any care or treatment and make sure that staff have the qualifications, competence, skills and experience to keep people safe”\(^1\).

\(^1\) CQC can prosecute for a breach of this regulation or a breach of part of the regulation if a failure to meet the regulation results in avoidable harm to a person using the service or if a person using the service is exposed to significant risk of harm.
This includes, taking steps to prevent and control the spread of infection by doing “all that is reasonably practical to mitigate [identified] risks”. Offering vaccination to staff is a reasonably practicable measure to reduce the risk of influenza infection and outbreaks in a residential care setting. National guidance on infection control for care homes has been published separately by the Department of Health which states that:

“Influenza immunisation is highly effective in preventing the disease in working-age adults; Immunisation is also recommended for staff directly involved in social care, especially for staff in nursing and care homes that look after older people. Staff immunisation may reduce the transmission of influenza to vulnerable residents, some of whom may have impaired immunity and thus reduced protection from any influenza vaccine they have received themselves.”

In addition to local guidance the Department of Health have produced national guidance covering a range of other areas of practice which can help control the risk of infections and outbreak in the care home sector and is available to download here: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/214929/Care-home-resource-18-February-2013.pdf

There is also a NICE (National Institute for Health and Care Excellence) and SCIE (Social Care Institute for Excellence) infographic guide for those working in care homes entitled ‘Helping to prevent infection: a quick guide for managers and staff in care homes’. This is available to download here: https://www.nice.org.uk/Media/Default/About/NICE-Communities/Social-care/quick-guides/Infection%20prevention.pdf

Finally, employers are responsible for ensuring that their staff comply with professional guidelines, for example the RCN Duty of Care Statement which is considered best practice for health care assistants (HCAs) and assistant practitioners.

It is the employers’ responsibility to:

- assess and control the increased risk of occupational exposure to flu (and other healthcare associated infections)
- put arrangements in place for staff vaccinations
- to pay for the vaccination of staff against flu
- direct staff to their registered GP or local pharmacy to access a flu vaccination under the enhanced service for social and care workers and hospice staff. Find out ‘high risk’ category are listed here: https://www.gov.uk/government/publications/flu-vaccination-who-should-have-it-this-winter-and-why
- to provide advice about vaccination, as well as to arrange and pay for the administration of vaccinations required to protect against occupational exposure.

South West Care Home survey results from 17/18 season

At the end of the 2017/18 flu season, a survey was distributed to local authorities to share with their care and residential home providers. Some local authorities edited the survey to add additional questions, therefore it was not possible to combine the data accurately from all results. Results were received from several areas across the South West. Please note that some survey
returns from local authorities included only very small numbers of responding care settings. The main findings that could be analysed quantitatively are summarised below.

**Devon, Plymouth and Torbay:**
- The majority of care homes (77.1%) did provide flu vaccinations for staff
- 51% of eligible staff were given vaccinations
- The majority of care and domiciliary care providers used free NHS England funded vaccinations for their staff. NHSE funded (75.9%), care home funded (6.9%) and a combination of both (13.8%)
- 40% of care homes used the checklist provided

**Bristol, North Somerset & South Gloucestershire**
- The majority of care homes (57%) did not provide flu vaccinations for staff
- 33% of eligible staff were given vaccinations
- Of those care homes which offered flu vaccines, there was a fairly even split between NHSE funded (31%), care home funded (28%) and a combination of both (31%)
- Just over half of care homes used the checklist provided (54%)

Results were also received from Somerset and Bournemouth, Dorset and Poole local authorities.

3. **Common barriers to increasing uptake amongst care home staff and residents and suggested solutions**

A survey of flu vaccination uptake among care home staff and residents in Wales (2013-14) indicated several barriers perceived to have a negative impact on flu vaccination uptake were identified by care home managers.

The main barriers identified and solutions to help improve uptake proposed by care homes as a result of the survey are detailed in the table below.

When considering implementing new solutions to improve uptake solutions; bear in mind that the logistics and processes required may vary depending on local factors such as:

- care home size
- geographical location of the care home
- current primary care arrangements for your residents
- working relationships between care homes, primary care, pharmacy and other health partners
- whether you manage a single independent care home or are part of a large collaboration/group
Table 1: Reported barriers and suggested solutions to vaccination of residents and staff. *(This table has been adapted from Public Health Wales’ document: ‘Flu and flu vaccine: a guide for care home managers and staff 2016/17’)*

<table>
<thead>
<tr>
<th>Reported barriers</th>
<th>Suggested solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccination of residents</td>
<td></td>
</tr>
<tr>
<td>Limited policies in place within care home setting for immunisation of residents against flu</td>
<td>All care homes should have a written flu immunisation policy in place for residents, which is known and understood by all care home staff, residents and (where appropriate) residents’ next of kin. Residents should be provided with information, and encouraged / supported to have flu immunisation. See Useful Resources section 10</td>
</tr>
<tr>
<td>Limited availability of documentation of residents’ flu immunisation status within the care home setting</td>
<td>Immunisation status of residents should be clearly recorded within their care home notes and within their primary care records. This will assist you to be able to identify those who are not protected against flu e.g. for a targeted approach to increasing immunisation uptake. This will also assist primary care services and Public Health England should cases of flu or an outbreak occurs within your care home setting.</td>
</tr>
<tr>
<td>Poor communication between primary care and the care home</td>
<td>Having a named individual responsible for flu vaccination (a ‘flu champion’) within the care home can lead to improved communications between the home and primary care services. Consideration should be given to close working and/or shared responsibility with primary care colleagues for advising, arranging and delivering flu vaccination to care home residents.</td>
</tr>
<tr>
<td>Difficulty in obtaining general practice appointments for residents</td>
<td>Vaccination of residents within the care home setting can result in a more coordinated approach, and an increase in numbers of residents who receive their annual flu vaccine.</td>
</tr>
<tr>
<td>Resident unwell on the day vaccination occurred / resident admitted to care home after vaccination day</td>
<td>Care homes should make provision, in collaboration with colleagues in primary care, to provide ‘catch up’ vaccination sessions for residents who were unwell or unable to be vaccinated on the day of the initial flu vaccination session, and for those residents who moved into the home after that date.</td>
</tr>
<tr>
<td>Vaccine given late in season</td>
<td>Consideration should be given to close working and/or shared responsibility with primary care colleagues for advising, arranging and delivering flu vaccination to residents before the start of, or early in, the flu season.</td>
</tr>
<tr>
<td>Limited information regarding flu vaccination available in care home setting.</td>
<td>Care homes must ensure that accurate and up-to-date information is available to residents (many such resources are contained within this document), and that staff have sufficient knowledge to answer queries relating to flu vaccination.</td>
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<tr>
<td>Difficulties in obtaining informed consent from residents and where necessary their next of kin</td>
<td>Consent procedures should be simplified wherever possible but residents (and if appropriate their next of kin) should be provided with the necessary information and support regarding the benefits of obtaining flu vaccination to enable them to make an informed decision.</td>
</tr>
<tr>
<td><strong>Vaccination of staff</strong></td>
<td></td>
</tr>
<tr>
<td>Advice on vaccination not provided to staff</td>
<td>All care homes should have written policies and procedures for the provision of advice about vaccines and the administration of flu vaccine (and other occupational health vaccinations) to all staff who have direct resident / client contact.</td>
</tr>
<tr>
<td></td>
<td>Public Health Wales have developed FluOne (information for health and social care staff) an on-line learning module about flu specifically for care home and social care staff. It is only 10 minutes long, and available at: <a href="http://www.wales.nhs.uk/immslearning">www.wales.nhs.uk/immslearning</a></td>
</tr>
<tr>
<td></td>
<td>E-learning for health also have on line learning modules available at: <a href="https://www.e-lfh.org.uk/programmes/flu-immunisation/">https://www.e-lfh.org.uk/programmes/flu-immunisation/</a></td>
</tr>
<tr>
<td></td>
<td>If you have any difficulties accessing the e-learning module, contact: <a href="mailto:PHW.immslearning@wales.nhs.uk">PHW.immslearning@wales.nhs.uk</a></td>
</tr>
<tr>
<td>Flu vaccination not offered or encouraged to staff with direct resident contact.</td>
<td>Employers, remain responsible for ensuring that their staff are protected from exposure to risk of infection and they are keen to support them to achieve a high rate of uptake as this will also help protect residents from infection and ensure that their business remains resilient during the winter. Having a named individual responsible for flu vaccination within the care home is considered beneficial in ensuring all staff are offered flu vaccination.</td>
</tr>
<tr>
<td>Staff having to independently fund their own flu vaccination.</td>
<td>The national scheme to provide free vaccination is intended to compliment any local schemes that have already been put in place by employers to support flu vaccination during 2018/19 and is not a replacement service.</td>
</tr>
<tr>
<td>Accessibility of vaccine – care home staff are busy people often juggling shift-work and family commitments.</td>
<td>Multiple and varied options for accessing the vaccine should be explored. Examples may include provision of vaccine during working hours on the care home premises by trained care home staff, or allowing staff time to go to a local pharmacy to be vaccinated (and reimbursed). See Employer Options section 5</td>
</tr>
<tr>
<td>Issue</td>
<td>Description</td>
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<td>----------------------------------------------------------------------</td>
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<tr>
<td>Insufficient knowledge regarding flu and flu vaccination among health, social care and care home professionals.</td>
<td>Care homes must ensure accurate and up-to-date information is available for staff (many such resources are contained within this document), and that staff have sufficient knowledge to answer residents’ queries relating to flu vaccination. Care home staff should have access to adequate training through their employers. The Local Authority may be able to help you to find appropriate training sessions and resources.</td>
</tr>
<tr>
<td>Flu immunisation training not undertaken by staff.</td>
<td>Public Health Wales have developed an on-line learning module FluOne (for health and social care staff), it is about flu and aimed specifically for care home and social care staff. It is available at: <a href="http://www.wales.nhs.uk/immslearning">www.wales.nhs.uk/immslearning</a> If you have any difficulties accessing the e-learning module, contact: <a href="mailto:PHW.immslearning@wales.nhs.uk">PHW.immslearning@wales.nhs.uk</a></td>
</tr>
<tr>
<td>General lack of understanding that flu vaccine is safe to be given to pregnant staff members</td>
<td>Care homes could provide education and information to all staff groups to ensure that they are fully aware of the benefits of vaccine and the potential life threatening consequences to both mother and child of influenza. Individual staff would be advised by their GP practice.</td>
</tr>
<tr>
<td>Insufficient records kept by care homes on flu / flu immunisation training undertaken by staff</td>
<td>Encourage all staff to complete FluOne (social) Care homes should record both the training undertaken by staff, and the training needs of staff. Maintaining up-to-date records will make it easier for care home managers to identify which staff members require training, or updates, at any given point in time.</td>
</tr>
<tr>
<td>Immunisation status of staff not recorded by care home</td>
<td>All care homes must record the flu vaccination status of staff. This is important for the protection of staff and residents during the management of cases / outbreaks, and in order that information about flu and flu vaccine can be provided to those staff members who have not received vaccine.</td>
</tr>
<tr>
<td>Relationships between care homes and other health partners require improvement</td>
<td>Links between local authority/public health and care homes should be strengthened to ensure adequate educational resources and support are available to care home staff</td>
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</tbody>
</table>

**Vaccination of staff and residents**

<table>
<thead>
<tr>
<th>Issue</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recording of all vaccinations provided to residents and staff is essential to evaluate the effectiveness of the campaign, and for management of cases / outbreaks of flu.</td>
<td>Local advice and further details of courses for immunisers can be accessed through your Local Authority/Public Health team. All vaccinations must be recorded not only in residents’ care home notes / staff member’s file but also in their medical notes held by the relevant General Practice. There must be a system in place to ensure that information is passed to GPs in order for them to upload it onto their electronic patient record system</td>
</tr>
</tbody>
</table>

Your Local Authority Lead will ask about your staff and residents’ vaccination status. **This information is vital in situations of outbreak and will be asked for as a matter of urgency in these situations.**
It would therefore be beneficial for care homes to take a pro-active approach and put systems and processes in place to systematically collect and document vaccination status within your care home in advance of this information being required.

Using a tool such as the ‘fluometer’ below could provide you with a documentation process and provide a visual display for residents, visitors and staff as to how well you are doing.
4. Displaying flu uptake amongst staff and residents

Visual tools, such as the ‘fluometer’ below, can be really useful for measuring uptake. Try using them before the flu season starts, and then at intervals throughout the flu season so you can keep track on how your vaccine uptake rate is improving - and make extra efforts if it is not. Displaying the chart in the staff room or on the residents' notice board might help motivate more people to be vaccinated. It is also another way of showing your residents and their families how you work to maintain residents’ health and wellbeing.

Recording vaccination data is also important for providing information to CQC or being able to share uptake data in the case of an outbreak in your setting. You might find the excel tool and recording sheet useful for this purpose.

*Chart 1: Example of how the display information could look once the Excel datasheet has been populated.*

The template for recording staff and resident flu vaccination is available here: https://www.england.nhs.uk/south/info-professional/public-health/infection-winter/care-guidance/
5. **Employer options**

From the start of the 2018/19 flu season, Health and social care staff employed by a registered residential care/nursing home or registered domiciliary care provider, and providing direct care to vulnerable patients, are eligible for free seasonal influenza vaccination via their registered GP practice or pharmacy. Also included in the 2018/19 offer to health and care staff are staff employed by a voluntary managed hospice provider, who are directly involved in the care of vulnerable patients/clients who are at increased risk from exposure to influenza.

Staff should be signposted to their registered GP practice or any pharmacy offering flu vaccinations, to receive their free flu vaccination. They will be required to show some evidence of eligibility such as a recent pay slip, ID badge or letter from their employer.

If you choose not to signpost staff to their registered GP or to a local pharmacy there are a number of options for how the flu vaccination could be delivered to your staff. We have included the advantages and disadvantages for each option to help you to make a decision about what would best suit your care home.

Managers should keep a record of staff vaccinated and update as staff report they have been vaccinated. This will be useful information in the event of an outbreak and for auditing numbers of staff vaccinated at the end of the season.
### Table 2: Options of how to deliver flu vaccination to your staff and advantages and disadvantages

<table>
<thead>
<tr>
<th>Option</th>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 National programme offer of free vaccination for those eligible (eligibility outlined on page 6) employed in health and social care via GP practice or community pharmacy</td>
<td>Free vaccination for eligible staff&lt;br&gt;Appointments can be booked in own time&lt;br&gt;Staff have a choice of attending their GP practice or a pharmacy of their choice&lt;br&gt;Pharmacy may be willing to vaccinate staff in place of work. Care homes all need to negotiate individually</td>
<td>If not delivered in place of work staff need way to book their own appointments</td>
</tr>
<tr>
<td>2 Occupational health services may want to set up reimbursement of expenses for vaccinations arranged privately by staff members at a pharmacy; this is a potential option particularly for those not eligible i.e. Admin staff&lt;br&gt;Costs range from approximately £7-£10</td>
<td>Staff have a free choice of which pharmacy to attend and when&lt;br&gt;Appointments can be booked in own time&lt;br&gt;Managers will have an accurate record of who has been vaccinated as staff will be able to provide you with proof of vaccination prior to reimbursement&lt;br&gt;Comparatively easy to implement compared with other options&lt;br&gt;Could be used in combination with other options</td>
<td>Access/convenience- cost to travel/time&lt;br&gt;Financial/economic barriers: initial cost to the individual; wider costs including travel to provider&lt;br&gt;Administrative burden - need process in place to claim back and administer. Costs per vaccine may vary depending where they go to receive&lt;br&gt;Success will require communications support to address awareness, attitudes and behaviours; see <a href="http://www.careengland.org.uk/resources-flu-fighter-residential-care">http://www.careengland.org.uk/resources-flu-fighter-residential-care</a></td>
</tr>
<tr>
<td>3 Purchasing vouchers directly through one or more high-street</td>
<td>Potential to negotiate good rate with local provider/s&lt;br&gt;By arranging a voucher scheme</td>
<td>Access/convenience- cost to travel/time&lt;br&gt;Administrative burden need</td>
</tr>
<tr>
<td>Community pharmacy providers or via national online provider via a number of local pharmacies <a href="http://www.fluvouchers.co.uk">www.fluvouchers.co.uk</a></td>
<td>With a local pharmacy: Many pharmacies offer this option and it is often cheaper to bulk buy prepaid vouchers than send individuals to be vaccinated. Staff can choose a time convenient to them. Opportunity to ask staff in advance whether they will want a voucher and then order to meet demand. Could be used in combination with other options.</td>
<td>To administer and update staff records. Limited choice if single provider. Limited evidence that voucher schemes can increase uptake.[2] Numbers may not be accurate as employee may take voucher but not use it or could give voucher to others - you will not have written proof that vouchers have been used. Success will require communications support to address awareness, attitudes and behaviours.</td>
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</tr>
<tr>
<td>Potential for non-eligible staff</td>
<td>National provider costs-£7.95 per person.</td>
<td></td>
</tr>
<tr>
<td>Contracting an occupation health service to arrange clinics in your home: (The national scheme to provide free vaccination is intended to compliment any local schemes that have already been put in place by employers to support flu vaccination during 2018/19 and is not a replacement service.)</td>
<td>Potential to buddy up with other Care Homes and negotiate good rates. On site provision of vaccine clinics. Pharmacists have experience of delivering on site and can offer a tailored approach. Could offer in conjunction with other options. Care homes can join with other local care homes to provide clinics at differing times.</td>
<td>Heavy on admin for the care homes. Would need to hold multiple clinics to take shift workers into account. Success will require communications support to address awareness, attitudes and behaviours; see <a href="http://www.careengland.org.uk/resources-flu-fighter-residential-care">http://www.careengland.org.uk/resources-flu-fighter-residential-care</a>. May be a more expensive option, particularly if uptake is low in the staff group.</td>
</tr>
</tbody>
</table>

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[2] Experience of many organisations has shown this to be the least effective route as it does not directly address the issue of motivation of staff to get vaccinated.
|   | Using your own trained staff to administer the vaccine where appropriate authorisations exist (PSD, PGD, training) | On site peer to peer model may be best practice if staff able to vaccinate in nursing homes  
Can update staff records and monitor uptake  
Can offer alternative mop up clinics  
Could offer to other homes if dedicated team to deliver  
Research has shown this to be the most effective method of overcoming recipient resistance and, once established, is probably the most cost-effective  
Good evidence that this can work in acute and primary healthcare services | Reliant on having enough trained staff to deliver and clinical governance structure to sign off the legal authorisations  
Relies on the availability of your own trained staff to plan and run the clinic  
May not be a realistic option for many homes particularly residential and small nursing homes as many do not have trained staff  
Success will require communications support to address awareness, attitudes and behaviours. |
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<td>5</td>
<td>This would be at care homes own cost</td>
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6. Cost calculator

How much could flu vaccinations save you?

As in previous years, the health and social care workforce is eligible to help protect them from illness and reduce the risk of frontline workers spreading infection to patients, particularly those in vulnerable groups. However, there is also a strong economic case for offering the flu vaccine to your staff this winter to help reduce sickness absence.

Created by South Gloucestershire Council, this tool can help you to estimate the impact of achieving a good uptake of flu vaccine in your workforce. Visit the link below to find out more.


7. Video links to promotional materials

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| 1 | NHS ENGLAND: Flu can be fatal  
https://www.youtube.com/watch?v=15pieb-3130 |
| 2 | Additionally Public Health Wales has produced a video "Why would you not?" where the staff in a general practice in Cardiff explain why they have the flu vaccine each year. This can be viewed from this website at  
www.publichealthwales.org/whywouldyounot |
| 3 | "Flu and you" is a short video encouraging people aged 65 and over to have a flu vaccine. This can be viewed at  
www.publichealthwales.org/fluandyou |
| 4 | Flu fighters have collated the best flu fighter videos from past years on their website  
http://www.nhsemployers.org/campaigns/flu-fighter  The videos are free for you to use in your local flu fighter campaigns or to draw inspiration from to create your own. If you like the ‘Imagine’ animation or ‘Adele’s story’ we can send you the files directly so that you use it across your trust. |
8. The National Institute for Health and Care Excellence (NICE)

The National Institute for Health and Care Excellence (NICE) released a document on how to improve flu vaccination uptake in August 2018.

There are specific recommendations for employers of health and social care workers:

- Provide flu vaccination to all front-line health and social care staff who have direct contact with patients or clients. This includes employees who provide community-based care services to people in their own homes, or who care for people in residential care homes or other long-stay care facilities.
- Use audit and monitoring systems to review previous strategies and flu vaccination uptake rates among eligible staff and to plan what methods to use to increase uptake and manage the supply for the next flu season. Start planning each year when the annual flu letter for the forthcoming season is published.
- Consider the following as part of a multicomponent approach to increasing uptake of flu vaccination among front-line health and social care staff:
  - A full participation vaccination strategy, with nationally agreed opt out criteria (A full participation strategy is one in which a range of approaches are used to maximise uptake and in which the expectation is that all front-line staff should be vaccinated. The full participation approach includes agreed mechanisms enabling staff to opt out if they wish.)
  - Assigning dedicated staff (for example, a flu vaccination champion or a team with responsibility for implementing a communication strategy) to increase awareness and uptake.
  - Using local broadcast media and social media.
  - Getting and publicising support from high-profile organisational leaders or staff representatives.
  - Providing information about the effectiveness and safety of the flu vaccine.
  - Using staff incentives that fit with the organisation's culture and the values of its employees.
  - Training peers to vaccinate their co-workers, or to encourage uptake and challenge barriers, such as myths that the flu vaccine can give you flu.
  - Using prompts and reminders in various printed and digital formats. Include information about on- or off-site vaccination locations and times.
  - Using systems linked to named staff records to monitor uptake and to target prompts and reminders.

Consider promoting flu vaccination to front-line health and social care staff as a way to:
• protect the people they care for
• protect themselves and their families
• protect their co-workers
• meet professional expectations such as the British Medical Association's position statement, the General Medical Council's guidance on good medical practice and the Royal College of Nursing's duty of care statement.

Consider:
• Extending on-site vaccination clinic hours to fit in with staff work patterns.
• Using outreach or mobile services to offer flu vaccination in areas and at times where large numbers of staff congregate, such as staff canteens or during shift changeovers.
• Publicising information about mobile flu vaccination services.
• Offering opportunities for off-site and out-of-hours access, for example, by providing vouchers for flu vaccination at a community pharmacy.
• Publicise flu vaccine uptake rates and the comparative performance of individual departments or sites within the organisation or locality. This could be done within the context of national targets such as CQUIN.
• Develop the flu vaccination strategy in conjunction with staff representatives.
• Consider an anonymous survey of reasons for opting out, which could be used to inform future flu vaccination programmes.
• Agree approaches for information sharing if off-site access to flu vaccination is offered to allow timely, accurate and consistent recording of people's vaccination status.

Education of health and social care staff and support workers – there are national minimum standards for these groups (see national minimum standards and core curriculum for immunisation training for registered healthcare practitioners, the Royal College of Nursing's Immunisation knowledge and skills competence assessment tool, and Immunisation training of healthcare support workers: national minimum standards and core curriculum). Health Education England's eLearning for Healthcare platform has produced an interactive flu immunisation eLearning programme. A national flu programme training slide set is available from Public Health England. The Royal Pharmaceutical Society provides a seasonal influenza hub with information and educational resources accessible to its members. These resources could be used in implementing this guideline.

Cost-effectiveness of vaccinating health and social care staff

Based on the analysis; NICE states that “considering only the costs of vaccination and the cost of replacement workers, increasing the uptake of flu vaccination is cost-saving". The full cost analysis can be found in the guidelines on the NICE website:

https://www.nice.org.uk/guidance/ng103
9. Useful resources

We have included a range of resources that you may find useful to help you with increasing your uptake of the flu vaccination within your care home:

- The ‘Stay Well This Winter’ campaign has lots of resources that can be downloaded and used to promote flu vaccination in your Care Home setting: https://campaignresources.phe.gov.uk/resources/campaigns/34-stay-well-this-winter/resources

- There is information on NHS Choices about who should have the flu vaccination: http://www.nhs.uk/Conditions/vaccinations/Pages/who-should-have-flu-vaccine.aspx as well as more detail about how the vaccine works, its safety, and effectiveness.

- Flu IQ – an interactive quiz to test your flu knowledge, produced by the CDC: https://www.cdc.gov/flu/freeresources/widgets/fluiq/index.html

- You can download or order promotional resources through the Department of Health, visit: https://www.orderline.dh.gov.uk/ and search for ‘flu’ in the keywords section.

- Watch the video of Laura Spacagna, a Health Care Assistant in Torbay, describe how she was left in a coma after contracting flu: https://www.youtube.com/watch?v=15pieb313o

- NICE have produced guidance for increasing flu vaccine uptake in health and social care workers which is available on the below link: https://www.nice.org.uk/guidance/ng103

The recommendations have a strong evidence base and will be useful for care home managers to use when developing their local arrangements to supplement the guidance given in Section 3 of this document.
10. Partner organisations