Flu vaccinations 2019/20

Best practice toolkit for GP practices

Improving uptake in eligible children and adults

PHE South West Screening & Immunisation Team
Included in this toolkit

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About this toolkit

• This toolkit reflects guidance from the national Flu Letter and uses evidence from a study into factors associated with higher flu vaccine uptake¹.

• High-performing practices will already use several of these tools and follow good practice for encouraging high uptake of the flu vaccine in their setting.

• If you need further guidance, please contact the PHE South West Screening & Immunisation Team: england.swscreeningandimms@nhs.net

The basics

Many practices will already have the basics well-covered:

**Have a lead individual responsible for the flu programme** – this is your flu advocate for the season

**Hold an up-to-date and regularly reviewed register that can identify all eligible patients** Checking phone numbers, addresses, including newly diagnosed patients, updating pregnancy status etc before and during the season. Keep checking eligibility during the season.

**Ensure all eligible patients receive a personalised invitation for flu vaccination** by letter, phone call, text or email – this is a requirement of the enhanced service specification

**If patients don’t reply or attend, ensure you have a system for recalling non-responders** remaining unvaccinated leaves these patients at risk of flu complications

**Continue to recall until you have an active decline.**
Reviewing last season

Check your uptake figures on Immform or through your practice system to see how you did last year.

Identify what went well and where you could improve – did clinics work or were appointments better?

Set a higher goal for uptake than you achieved in the previous season. This year’s ambition figures are:

<table>
<thead>
<tr>
<th>Eligible group</th>
<th>Uptake ambition</th>
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<tbody>
<tr>
<td><strong>Routine programme for those at risk of flu</strong></td>
<td></td>
</tr>
<tr>
<td>Aged 65 years and over</td>
<td>75%</td>
</tr>
<tr>
<td>Aged under 65 years and ‘at risk’ including pregnant women</td>
<td>At least 55% in all clinical at risk groups</td>
</tr>
<tr>
<td><strong>Children’s programme</strong></td>
<td></td>
</tr>
<tr>
<td>2 and 3 year olds</td>
<td>At least 50%</td>
</tr>
</tbody>
</table>
Unvaccinated eligible patients are at risk of the complications of flu – challenge yourself to identify these patients and to make personalised vaccination offers.

Think about your patients who *didn’t* attend or respond – is vaccination accessible, e.g. can patients attend before or after work? What do they need to enable them to attend?

How did you talk to patients about their risk of flu? How else could you get the message across about risk of flu and the benefits of vaccination?

What was your uptake in the individual ‘at risk’ groups? E.g. patients with chronic respiratory disease, chronic heart disease, COPD etc. Could you pay special attention to making invitations to those groups with the lowest uptake?

Think about your patients who are most at risk and how to encourage their uptake.
Involving all practice staff

Your staff are key to a successful flu programme.

Make sure all staff in all roles understand the importance of the flu programme and the impact that flu can have on vulnerable patients.

All staff should be advocates for flu vaccination.

Make sure non-clinical staff know where they can signpost patients for more information in the practice.

Take every opportunity to discuss vaccination with patients.

Ensure your staff are offered vaccination.

Keep staff enthused during the season – consider an incentive promoting staff competition.
Pre-season checklist

Make sure your practice staff are aware of the named flu lead or flu team within the practice.

Ensure you have a list of your eligible population and have ordered sufficient vaccine considering your ambition to increase your uptake and anticipated population increase.

Confirm you have the right vaccine for the right eligible groups.

Vaccines for under 18s are ordered through Immform and there are caps on ordering, make sure you know how much you can order at a time.

See the next page for vaccine recommendations by age.
## Vaccine recommendations by age

<table>
<thead>
<tr>
<th>Eligible group</th>
<th>Recommended vaccine 2019/20</th>
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</thead>
<tbody>
<tr>
<td>Over 65 years</td>
<td>Adjuvanted trivalent influenza vaccine (aTIV) or cell-based quadrivalent influenza vaccine (QIVc)</td>
</tr>
<tr>
<td>Adults aged 18 to 64 years</td>
<td>Egg-grown quadrivalent influenza vaccine (QIVe) or cell-based quadrivalent influenza vaccine (QIVc)</td>
</tr>
<tr>
<td>Children aged 2 to 17 years</td>
<td>Live attenuated influenza vaccine (LAIV) (ordered through Immform)</td>
</tr>
<tr>
<td>Infants aged 6 months to under 2 years or children who are contraindicated to LAIV</td>
<td>QIVe (ordered through Immform)</td>
</tr>
</tbody>
</table>
Pre-season checklist cont.

Utilise national letter templates for individual invites to patients: https://www.gov.uk/government/collections/annual-flu-programme templates will be available nearer to the start of the flu season.

Offer a range of appointments, day time clinics, evenings, weekends as well as opportunistic vaccination.

Make use of pop-ups on the practice system to remind staff that patients are eligible.

Build in time for admin staff to undertake recall of patients who haven’t attended or responded.

Have plans in place for the vaccination of housebound patients, these patients can be particularly vulnerable to flu.
During the flu season

Start flu vaccination as soon as possible after your vaccines arrive

Monitor your uptake through the season regularly

Keep the patient register up-to-date and proactively contact eligible patients who haven’t attended

Liaise closely with maternity services to ensure your pregnant patient list is up-to-date

Hold regular meetings with staff so everyone knows the practice plan and progress. Make sure you celebrate your success.

Use national resources (Stay Well This Winter) to create colourful poster displays

If a patient hasn’t attended or responded – recall!
Why don’t some patients attend?

A recent study looked at older people’s attitudes towards flu vaccination\(^2\).

The study found that attitudinal barriers were significant in influencing flu vaccination. They broke attitudinal barriers down into two main types:

- **Not everyone seems themselves as vulnerable to flu**
- **Not everyone believes that the vaccine works**

They found that patients knew that flu was a health concern and that being older meant you could be more vulnerable to disease, but this didn’t translate into seeing themselves as vulnerable. Framing vaccination as part of a healthy lifestyle might generate a more positive response from older patients:

‘…*presenting immunisation as a positive and healthy lifestyle choice*’ (page 2)

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Which patients are most at risk?

The Green Book (Chapter 19, page 4) has a chart explaining mortality risk and relative risk of death from flu in some of the ‘at risk’ groups: https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book

Those with **chronic liver disease**, **immunosuppression** and **chronic neurological disease** are at increased relative risk of mortality if they contract flu compared to the general population.

It would be beneficial to focus efforts on some of your most vulnerable patients.
Raising awareness amongst patients

Patients should understand that vaccination is a positive lifestyle choice, it is safe and helps to protect those around them as well as giving individual protection.

Patients need to understand that they are eligible for the flu vaccination because either their long-term condition or age puts them at increased risk of flu and the complications of having the virus.

Ensure all eligible patients receive a personalised invitation by letter, phone, text or email.

Edit the national template letter to make the invitation even more tailored to the patient You could mention their eligibility, i.e. ‘Your chronic liver disease puts you at greater risk of complications from flu…’

(the updated letter will be available here: https://www.gov.uk/government/collections/annual-flu-programme)
Raising awareness amongst patients cont.

Think about how you can encourage uptake in patients in ‘at risk’ groups to attend. Is flu vaccination discussed when patients attend other clinics at the practice (i.e. at asthma or diabetes clinics etc) or can vaccination be offered opportunistically?

Contact patients who don’t respond to your initial invitations. Keep inviting them until they attend or decline.

Take any and all opportunities to discuss flu vaccination with eligible patients when you see them for routine appointments.

Create a display in the waiting room or put images/videos onto practice screens to share important messages.

Make sure patients know how to book an appointment or when clinics are taking place.
Raising awareness amongst parents of eligible children

Explain to parents that:

Healthy children are offered the flu vaccination because some children can develop a high fever or complications from flu such as bronchitis, pneumonia or a painful ear infection.

Healthy children under the age of 5 are more likely to have to be admitted to hospital with flu than any other age group.

Protecting children against flu helps to stop the spread to other more vulnerable family and friends.

For children with long-term health conditions such as diabetes, asthma or heart-disease, getting flu can be really serious and these vulnerable children are at greater risk of developing serious complications.
Maximising uptake for adults

Arrange bookable clinics as well as offering opportunistic vaccination.

To help working age patients attend, offer appointments outside of working hours and on weekends.

Offer vaccination alongside existing clinics (e.g. diabetes, asthma follow-up, CHD etc).

Encourage patients to see flu vaccination as part of their management of their condition and as part of a healthy lifestyle.

Phone calls can be more effective than other methods of contact; text messages act well for reminders.

Put information about the flu programme on the practice website and make sure patients know how to book or attend.
Maximising uptake for children

In the practice you’ll be vaccinating 2 and 3 year olds and eligible children with ‘at risk’ conditions

Arrange bookable clinics as well as offering opportunistic vaccination.

To help families attend, consider evening and weekend appointments, appointment times between 3.30 and 6.30pm would coincide with school pick-up

Consider October half term for clinics and aim to have vaccinations completed by Christmas

If you want to hold a bespoke 2 and 3 year old clinic, contact Immform who can arrange larger vaccine orders

All staff can help to promote the vaccination message to parents; include Health Visitors, midwives, pharmacists and other healthcare professionals in your planning and find opportunities to work together
Top 10 messages for eligible patients

1. **Flu is much worse than a heavy cold** flu symptoms can be severe and can come on suddenly. You’re likely to spend several days in bed and feel very unwell. Some people become seriously ill and have to go to hospital.

2. **You are at greater risk of complications from flu** – you’re eligible for flu vaccination because you need it.

3. **The flu vaccine is very safe.**

4. **The flu vaccine is the best protection we have** against an unpredictable virus.

5. **The flu vaccine CANNOT give you flu** your arm might be a bit sore where you were injected and some people have a slight temperature.
Top 10 messages for eligible patients cont.

6. The flu vaccine stimulates your body’s immune system to make antibodies to attack the flu virus — if you’re exposed to the virus after you’ve been vaccinated, your immune system will recognise the virus and produce antibodies to fight it.

7. It can take up to 2 weeks for the flu vaccine to work, so get vaccinated as soon as you can.

8. You need to have the flu vaccine each year because the circulating strains of the virus change and so different vaccines are produced to match.

9. Pregnant women can have the vaccination at any stage of pregnancy, flu can make you and your baby very ill. Vaccination can also protect your baby against flu after they’re born and during their first few months.

10. Your vaccination helps to protect those around you too, so elderly relatives, those with long-term conditions and other family members are all protected by your vaccination.
Resources and more information


Download resources here: https://campaignresources.phe.gov.uk/resources/campaigns/34-stay-well-this-winter/resources (will be updated for 2019/20)

Order leaflets and posters here: https://www.orderline.dh.gov.uk/ (free to order and deliver)

Find the national flu immunisation programme training/update slide-set here: https://www.gov.uk/government/collections/annual-flu-programme


Contact us

If you want to speak about your flu programme plans, please contact the PHE South West Screening & Immunisation Team:

email: england.swscreeningandimms@nhs.net