

Flu vaccinations 2022/23

Toolkit for GP Practices: Improving uptake for eligible children and adults

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About this toolkit

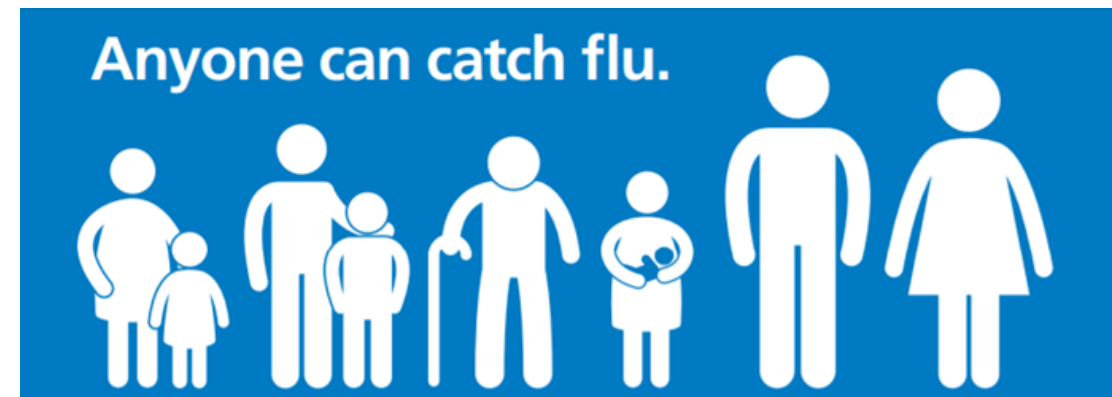
- This toolkit reflects guidance from the national Flu Letter and uses evidence from a study into factors associated with higher flu vaccine uptake¹.
- High-performing practices will already use several of these tools and follow good practice for encouraging high uptake of the flu vaccine in their setting.
- If you need further guidance, please contact the South West Screening & Immunisation Team:
england.swicars@nhs.net

¹ Dexter L et al. (2012) Strategies to increase influenza vaccination rates: outcomes of a nationwide cross-sectional survey of UK general practice.



The basics

- **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.
- **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 about risk across 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.**

This year’s national ambitions

Systems should maximise opportunities to co-promote and co-administer (e.g.COVID-19, flu and pneumococcal)

GPs and school providers to demonstrate 100% offer

Health inequalities plan for all underserved groups and improvement in coverage in those groups who were more than 5% lower than the national average

Cohorts eligible	2022/23 Ambitions
Children aged 2-3	Improved uptake from 2021-22
Primary school aged children	Achieve and ideally exceed 2021-22 uptake
Clinical risk groups	Improved uptake from 2021-22
Pregnant women	Improved uptake from 2021-22
Aged 65 and over	Achieve and ideally exceed 2021-22 uptake
Care home residents	Achieve and ideally exceed 2021-22 uptake
Carers	Achieve and ideally exceed 2021-22 uptake
Close contacts of immunocompromised	Achieve and ideally exceed 2021-22 uptake
FHCW without employer led OH schemes	Achieve and ideally exceed 2021-22 uptake
<i>FHCW (though OH) – including primary care</i>	Between 70% and 90% of staff

South West priorities

- To co-promote and co-administer flu and COVID (where possible)
- A focus on people:
 - with chronic liver disease
 - chronic neurological disease
 - chronic obstructive pulmonary disease (COPD)
 - that are pregnant
- In line with our inequalities strategy, have an enhanced focus on the most deprived 20%, those with SMI, and LD

Get your free flu jab

Some people with a learning disability can get very ill if they get flu.

The best way to avoid flu is to get a free flu jab.

NHS GP surgery

You can have the flu jab at your GP surgery.

Pharmacy +

Or you can have the flu jab at a pharmacy.

If you are scared of needles, tell the nurse. You may be able to have the vaccine as a nose spray instead.

Flu **i**mmunisation
Helping to protect everyone, at every age

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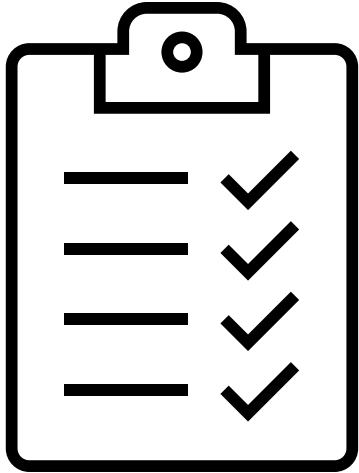
Involving all practice staff



- 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.

Image from Stay Well This Winter
2018/19 resources: [Winter
Vaccinations Public Facing Campaign
| Campaign Resource Centre
\(phe.gov.uk\)](#)

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.
- 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

Vaccine recommendations by age

Table 1. Recommendations for the use of inactivated influenza vaccines

Eligible group	Type of influenza vaccine
Those aged 65 years and over	<ul style="list-style-type: none"> • aQIV or QIVr • use QIVc only where aQIV or QIVr are not available
At-risk adults aged 18 to less than 65 years	<ul style="list-style-type: none"> • QIVc or QIVr
Pregnant women	<ul style="list-style-type: none"> • use QIVe only where QIVc or QIVr are not available
50 to 64 year olds not in a clinical at-risk group	<ul style="list-style-type: none"> • QIVe • QIVc / QIVr (these should only be offered where it does not divert stock from clinical at-risk groups and those age 65 years and over)
Children aged 2 years and over and contraindicated to receive LAIV	<ul style="list-style-type: none"> • QIVc (if LAIV is contraindicated or otherwise unsuitable)
Infants aged 6 months to 2 years in a clinical risk group	<ul style="list-style-type: none"> • QIVe (LAIV and QIVc are not licensed for use under 2 years of age. For egg-allergic children under 2 years it is advised that QIVc is offered off-label)

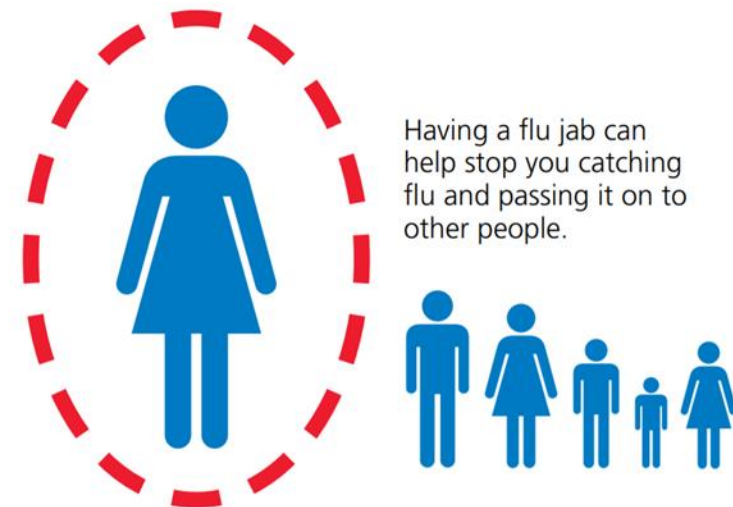
Table 2. Recommended vaccines for children

Eligible group	Type of influenza vaccine
At risk children aged from 6 months to less than 2 years	Offer QIVe. For egg-allergic children under 2 years it is advised that QIVc is offered off-label.
At risk children aged 2 to under 18 years	Offer LAIV. If LAIV is contraindicated (or it is otherwise unsuitable) offer QIVc*
Aged 2 and 3 years on 31 August 2022 All primary school aged children in reception year to year 6 (aged 4 to 10 on 31 August 2022) Eligible secondary school aged children	Offer LAIV If LAIV is contraindicated (or it is otherwise unsuitable) offer QIVc*

Tables taken from: [The national influenza immunisation programme 2022 to 2023: Information for healthcare practitioners \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/108122/the-national-influenza-immunisation-programme-2022-to-2023-information-for-healthcare-practitioners.pdf)

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 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.

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

- **Not everyone sees 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)

International longevity centre UK (2019) Under the skin: listening to the voices of older people on influenza immunisation. <https://ilcuk.org.uk/wp-content/uploads/2019/05/ILC-Under-the-skin.pdf>

Which patients are most at risk

- Increasing flu vaccine uptake in clinical risk groups is important because of increased risk of death and serious illness if people in these groups catch flu
- For a number of years only around half of patients aged 6 months to under 65 in clinical risk groups have been vaccinated
- Strategies to improve vaccine uptake should be tailored to each risk group to ensure optimum uptake of vaccine in each of them.
- Further information on flu vaccination for those with learning disabilities can be found on the GOV.UK website www.gov.uk/government/publications/flu-vaccinations-for-people-with-learning-disabilities/flu-vaccinations-supporting-people-with-learning-disabilities

Table 19.1 Influenza-related population mortality rates and relative risk of death among those aged six months to under 65 years by clinical risk group in England, September 2010 – May 2011.

	Number of fatal flu cases (%)	Mortality rate per 100,000 population	Age-adjusted relative risk*
In a risk group	213 (59.8)	4.0	11.3 (9.1-14.0)
Not in any risk group	143 (40.2)	0.4	Baseline
Chronic renal disease	19 (5.3)	4.8	18.5
Chronic heart disease	32 (9.0)	3.7	10.7 (7.3-15.7)
Chronic respiratory disease	59 (16.6)	2.4	7.4 (5.5-10.0)
Chronic liver disease	32 (9.0)	15.8	48.2 (32.8-70.6)
Diabetes	26 (7.3)	2.2	5.8 (3.8-8.9)
Immunosuppression	71 (19.9)	20.0	47.3 (35.5-63.1)
Chronic neurological disease (excluding stroke/transient ischaemic attack)	42 (11.8)	14.7	40.4 (28.7-56.8)
Total (including 22 cases with no information on clinical risk factors)	378	0.8	

* Mantel-Haenszel age-adjusted rate ratio (RR), with corresponding exact 95% CI were calculated for each risk group using the two available age groups (from six months up to 15 years and from 16 to 64 years).

Maximising uptake

- Raise awareness amongst patients tailoring to their concerns, communication needs and risk factors (including parents and carers of children eligible for vaccination).
- Contact patients who don't respond – phone or text may be more effective than a letter
- Take any opportunity to discuss and/or offer flu vaccination – use flagging systems, other clinics and appointments
- Create a display on the waiting room and promote through practice screens, website
- Make sure patients know how to book an appointment
- Make appointments accessible – after working hours, weekends, longer for those with additional needs, alongside other clinics (e.g. diabetes, asthma, CHD etc)
- Ensure that all staff in your practice, but also others that you work with (i.e. health visitors, midwives, pharmacists) are promoting the flu vaccination, and find opportunities to work together.

Top 10 messages to promote

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
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

The South West Screening and Immunisation Team, including our flu locality coordinators, can provide support and guidance. To get in touch with us, please contact england.swicars@nhs.net

Additional resource can be found here:

- 2022/23 Flu Letter: [National flu immunisation programme plan 2022 to 2023 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/111111)
- General Practice Enhanced Service Specifications for the Seasonal Influenza Vaccination Programme 2022/23 [NHS England » Enhanced service specification: Seasonal influenza vaccination programme 2022/23](#)
- Download promotional materials here: [Winter Vaccinations Public Facing Campaign | Campaign Resource Centre \(phe.gov.uk\)](#)
- Order leaflets and posters here [Home - Health Publications](#) (free to order and deliver)
- The national flu immunisation programme training/update slide-sets: [Annual flu programme - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/111111)
- E-learning: [Flu Immunisation - e-Learning for Healthcare \(e-lfh.org.uk\)](#)
- Flu vaccine for children: best practice guide for GPs: [Flu vaccine for children: best practice guide for GPs - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/111111)
- NHS England South West Influenza website with further resources: [NHS England — South West » Influenza](#)