





 Flu and flu vaccination 2023/24:

 A toolkit for care homes

 (South West)

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Document management

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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.

Delivering the flu immunisation programme for 2024/25 is likely to be more challenging but also more important than ever because of the impact of COVID-19 on our health and social care services. It is vital that we have effective plans in place for the 2024/25 flu season to protect those at risk, prevent ill-health, and minimise further impact on the NHS and social care. 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 can 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, and 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.

Thank you for your continuing efforts to protect your clients and staff by supporting this programme.

About this document:

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

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

* Update of social care offer for 24/25 and written instruction
* The importance of flu vaccination
* The responsibilities of employers
* Common barriers to increasing uptake
* Benefits of displaying and recording flu uptake
* Employer options
* Video and links to promotional materials
* NICE guidance
* Link to useful resources

Please contact england.swicars@nhs.net for more information.

Update: NHS vaccination of social care staff for 2024/25

The seasonal influenza vaccine will be available to:

**“Frontline workers in a social care setting without an employer led occupational health scheme including those working for a registered residential care or nursing home, registered domiciliary care providers, voluntary managed hospice providers and those that are employed by those who receive direct payments (personal budgets) or Personal Health budgets, such as Personal Assistants”.**

**“All frontline health care workers, including both clinical and non-clinical staff who have contact with patients, should be offered a flu vaccine as part of the organisations’ policy for the prevention of the transmission of flu to help protect both staff and those that they care for. Social care workers directly working with people clinically vulnerable to flu should also have the flu vaccine provided by their employer. There are circumstances where frontline staff, employed by specific social care providers without access to employer led occupational health schemes (see**[**cohort eligibility**](https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan/national-flu-immunisation-programme-2023-to-2024-letter#cohort)**above), can access the vaccine through the NHS free of charge”.**

More information from the national flu immunisation programme 2023-2024 letter can be found here: [National flu immunisation programme 2024 to 2025 letter - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan-2024-to-2025/national-flu-immunisation-programme-2024-to-2025-letter)

Staff that are unable access an occupational health offer for the flu vaccine, from their employer, can get their flu vaccine at their GP practice or pharmacy. It is not a requirement for staff to provide proof of employment such as an ID badge, pay slip or letter from their employer, but it may be beneficial to do so.

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 2024/25 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.

Written Instruction for the administration of seasonal flu vaccination to staff

In 2022/23 a permanent amendment was made to [Schedule 17 of the Human Medicines Regulations 2012](https://www.legislation.gov.uk/uksi/2012/1916/schedule/17)to allow occupational health vaccinators working within an NHS body or a local authority operated occupational health scheme to administer influenza or coronavirus vaccines in accordance with a Written Instruction. An occupational health vaccinator is a listed professional (see below) who is employed or engaged by a person operating an occupational health scheme.

Independent and other organisations may use a written instruction administer influenza or coronavirus vaccines as part of an occupational health scheme only registered nurses can operate under a written instruction.

The following professions can acts as NHS body or Local Authority occupational health vaccinators:

* Registered nurses
* Registered midwives
* Registered nursing associates
* Operating department practitioners, paramedics or physiotherapists registered in Part 13, 8 or 9 of the Health and Care Professions Council register
* Pharmacists

Within independent or other organisations, only registered nurses can administer under a written instruction. Occupational health vaccinators cannot operate within non NHS/local authority provided services.

Information for the written instruction can be found here:

<https://www.sps.nhs.uk/articles/written-instruction-for-the-administration-of-seasonal-flu-vaccination/>

Authorisation of written instructions within organisations requires the signature of an appropriate registered doctor before they can be used.

The medical signatory must be the doctor assuming responsibility for the delivery of the influenza vaccination programme to staff within an organisation (for example an Occupational Health Physician employed by the organisation, the organisation’s Medical Director or a GP partner).

Once signed and adopted, the written instruction allows named registered healthcare professionals included in the legislation to administer the seasonal influenza vaccination to the organisation’s staff, including peer to peer vaccinators.  Vaccinators must be trained and competent to work in accordance with the written instruction.

The written instruction template along with a factsheet to support the use of the written instruction by organisations can be found here: [Influenza vaccine written instruction templates for adoption – SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](https://www.sps.nhs.uk/articles/influenza-vaccine-written-instruction-templates-for-adoption/)

Further advice on the use of PGDs in Occupational Health Services can be found here: [Using PGDs in occupational health services (OHS) – SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](https://www.sps.nhs.uk/articles/using-pgds-in-occupational-health-services-ohs/)

Enhanced Service Specification for 24/25: [NHS England » General practice enhanced service specification: Seasonal influenza vaccination programme 2024/25](https://www.england.nhs.uk/publication/general-practice-enhanced-service-specification-seasonal-influenza-vaccination-programme-2024-25/)

If you have any further queries, please contact: england.swicars@nhs.net

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.

Where possible, it is advised that the COVID and Flu vaccination are co-administered at the same time, for both staff and residents. The opportunity to check if staff and/or residents are eligible for the Pneumococcal and Shingles vaccine should also be taken. Residents aged 75-79 years old will be eligible for the RSV vaccine from the 1st September 2024, which can be co-administered with Flu and COVID vaccines.

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.

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 and Social Care 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:

[Care homes: Infection prevention and control (GOV.UK)](https://www.gov.uk/government/publications/infection-prevention-and-control-in-care-homes-information-resource-published)

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: [Helping to Prevent Infection: A quick guide for managers and staff in care homes (NICE)](https://www.nice.org.uk/Media/Default/About/NICE-Communities/Social-care/quick-guides/Infection%20prevention.pdf)

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.

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
* pay for the vaccination of staff against flu or 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.
* to provide advice about vaccination, as well as to arrange and pay for the administration of vaccinations required to protect against occupational exposure.

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

When considering implementing new solutions to improve uptake; 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’)***

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| **Reported barriers** | **Suggested solutions** |
| **Vaccination of residents** |
| Limited policies inplace within care home setting forimmunisation of residents against flu | 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 |
| Limited availability of documentation ofresidents’ flu immunisation statuswithin the care home setting | 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 UKHSA should cases of flu or an outbreak occurs within your care home setting. |
| Poor communicationbetween primary care and the care home | 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. |
| Difficulty in attendinggeneral practice appointments for residents | 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. |
| Resident unwell on theday vaccination occurred / resident admitted to care home after vaccination day | 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. |
| Vaccine given late inseason | 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. |
| Limited information regarding flu vaccination available in care home setting. | 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. |

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| Difficulties in obtaininginformed consent from residents and where necessary their next of kin | Consent procedures should be simplified wherever possible butresidents (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. |
| **Vaccination of staff** |
| Advice on vaccination not provided to staff | 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.  |
| Flu vaccination not offered or encouraged to staff with direct residentcontact. | 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. |
| Staff having to independently fund their own flu vaccination. | 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 and is not a replacement service. Free flu vaccination is available at pharmacies and care workers registered GP. |
| Accessibility of vaccine – care homestaff are busy people often juggling shift- work and family commitments. | 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 or their registered GP, to be vaccinated.  |
| Insufficient knowledge regarding flu and flu vaccination among health, social care and care home professionals. | 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 tofind appropriate training sessions and resources. |

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| Flu immunisationtraining not undertaken by staff. | E-learning for health have online learning modules available at:<https://www.e-lfh.org.uk/programmes/flu-immunisation/> and national slide sets are available on the following link:[The national flu immunisation programme for 2023 to 2024 slideset](https://khub.net/documents/135939561/350113940/National%2Bflu%2Bimmunisation%2Bprogramme%2B2023%2Bto%2B2024%2Btraining%2Bslideset%2BJuly%2B2023.pptx/ac3ad475-14a8-eb8d-33cd-25c4ea076efd)[Flu immunisation training recommendations - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/flu-immunisation-training-recommendations/flu-immunisation-training-recommendations) |
| General lack ofunderstanding that flu vaccine is safe to be given to pregnant staff members | 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. |
| Insufficient records keptby care homes on flu /flu immunisation training undertaken by staff | Encourage all staff to complete the training. 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. |
| Immunisation status ofstaff not recorded by care home | 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. |
| Relationships betweencare homes and other health partners require improvement | 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 |
| **Vaccination of staff and residents** |
| Recording of all vaccinations provided toresidents and staff is essential to evaluate the effectiveness of thecampaign, and for management of cases / outbreaks of flu. | 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 |

In an outbreak situation you will be asked about your staff and residents’ vaccination status. **This information is vital in these situations and will be asked for as a matter of urgency.**

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.

4. Employer options

From the start of the 2024/25 flu season, health and social care staff employed by a registered residential care/nursing home or registered domiciliary care provider, providing direct care to vulnerable patients, without an employer-led occupational health offer, are eligible for free seasonal influenza vaccination via their registered GP practice or pharmacy. Also included in the 2024/25 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. Health and social care workers employed through Direct Payment (personal budgets) and/or Personal Health Budgets, such as Personal Assistants, to deliver domiciliary care to patients and service users are eligible as well as health and social care workers employed in supported living facilities.

Staff should be signposted to their registered GP practice or any pharmacy offering flu vaccinations, to receive their free flu vaccination. It is not a requirement for staff to provide proof of employment such as an ID badge, pay slip or letter from their employer, but it may be beneficial to do so.

If you choose not to signpost staff to their registered GP or to a local pharmacy, there are several options for how the flu vaccination could be delivered to your staff.

* Contracting an occupation health service to arrange clinics in your care home
* Using your own trained and registered nursing staff to administer the vaccine where appropriate under a written instruction.

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.

5. Video and links to promotional materials

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| **1** | NHS England: Flu can be fatal<https://www.youtube.com/watch?v=15pieb-313o> |
| **2** | Flu posters for visitors to care homes:<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/735380/Flu_Poster_for_care-homes_.pdf> |
| **3** | Campaign Resource Centre:[Campaign Resource Centre (dhsc.gov.uk)](https://campaignresources.dhsc.gov.uk/) |
| **4** | Helping to prevent Infection: A quick guide for managers and staff in care homes:[Helping to prevent infection: A quick guide for managers and staff in care homes (NICE)](https://www.nice.org.uk/Media/Default/About/NICE-Communities/Social-care/quick-guides/Infection%20prevention.pdf) |

6. 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.
* 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 UKHSA. 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](http://www.nice.org.uk/guidance/indevelopment/gid-phg96):

<https://www.nice.org.uk/guidance/ng103>

7. 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:

* 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.
* You can download or order promotional resources through NHS England, visit: <https://www.healthpublications.gov.uk/Home.html> 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=15pieb-313o>
* Campaign resources for Health and Social Care Workers can be accessed through: [Campaigns | Campaign Resource Centre (dhsc.gov.uk)](https://campaignresources.dhsc.gov.uk/campaigns/)
* 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.