Title: Torbay Influenza (flu) Vaccination Plan 2018/19

Wards Affected: All

To: Health and Wellbeing Board

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1. Background

Flu is a major cause of harm in the population and is a key factor in NHS winter pressures. Preventing flu infection through vaccination also contributes to preventing bacterial infections such as pneumonia. This can help reduce the need for antibiotics and contribute towards preventing antibiotic resistance.

This highlight report outlines Torbay’s Influenza (flu) Vaccination Plan for the 2018/19 season. This local plan is informed by wider national and regional plans as outlined below.

1.1 National Overview

The National Flu Plan 2018/19 (Appendix 1) sets out a co-ordinated and evidence-based approach to planning for and responding to the demands of flu across England, taking account of lessons learnt during previous flu seasons. It aids the development of robust and flexible operational plans by local organisations and emergency planners within the NHS and Local Government.

The National Flu Letter (flu letter: no.1) [Appendix 2] provides information about which patients and children are eligible for vaccination in the flu immunisation programme for 2018/19, what vaccines are appropriate for each eligible group and useful appendices which cover evidence base, vaccine supply and ordering, contractual arrangements and communications. A second letter will follow with information about frontline healthcare workers and social care workers imminently.

1.1.1 Eligible Groups and Ambitions

In 2018/19 the one change in eligibility is the additional cohort of children, those in school year 5 (school year 6 will be the only cohort that is not vaccinated). For a full list of eligible groups, vaccination ambitions for 2018/19 and vaccination coverage for 2017/18 please see Table 1 over the page.
1.1.2 Vaccine Types

Based on the Joint Committee on Vaccination and Immunisation advice, providers should offer:

- **The adjuvanted trivalent vaccine (aTIV) for all 65s and over.** This is the most effective and cost effective vaccine currently available for this group (including the quadrivalent vaccine). An adjuvant is a substance that is added to a vaccine to increase the body’s immune response to the vaccine – vaccine response tends to wane as we get older.

- **The quadrivalent vaccine (QIV) for 18-64 years at risk, pregnant women and frontline workers.** This protects against four strains of flu.

- **Live attenuated vaccine (LAIV) used for the children’s programme is also quadrivalent.** An attenuated vaccine is created by reducing the virulence of a pathogen (rendering it harmless without killing it). This is a nasal spray vaccine so generally more acceptable to children.

<table>
<thead>
<tr>
<th>Eligible group</th>
<th>National vaccine uptake ambitions 2018/19</th>
<th>Torbay vaccine uptake 2017/18</th>
</tr>
</thead>
<tbody>
<tr>
<td>All children aged two to nine (but not ten years or older) on 31 August 2018</td>
<td>Pre-school children aged 2 and 3 years – 48% with most practices aiming to achieve higher</td>
<td>44%</td>
</tr>
<tr>
<td></td>
<td>School aged children (in reception class &amp; year 1 to 5) – An average of at least 65% to be attained by every provider across all years</td>
<td>~61%</td>
</tr>
<tr>
<td>Those aged six months to under 65 years in clinical risk groups*</td>
<td>At least 55% in all clinical risk groups and maintaining higher rates than have already been achieved</td>
<td>49%</td>
</tr>
<tr>
<td>Pregnant women</td>
<td>At least 55% and maintaining higher rates than have already been achieved</td>
<td>50%</td>
</tr>
<tr>
<td>Those aged 65 years and over</td>
<td>75% (reflecting WHO targets)</td>
<td>71%</td>
</tr>
<tr>
<td>Those in long-stay residential care homes</td>
<td>No specific target but 75% for those 65 years and over and 55% for those under 65 years in a clinical risk group.</td>
<td>Unknown</td>
</tr>
<tr>
<td>Carers</td>
<td>No target set</td>
<td>40%</td>
</tr>
<tr>
<td>Social care workers**</td>
<td>75% (part of Front-line Health Care Workers)</td>
<td>~49%</td>
</tr>
<tr>
<td>Front-line Health Care Workers</td>
<td>75% (reflecting WHO targets)</td>
<td>63%</td>
</tr>
</tbody>
</table>

*Chronic respiratory disease, COPD, chronic heart disease, chronic kidney disease, chronic liver disease, chronic neurological disease, diabetes, splenic dysfunction, weakened immune system, morbidly obese (BMI of 40 or above)
A recent announcement has been made by NHS England to continue to make funding available in 2018/19 to support the vaccination of social care workers that offer direct patient/client care. This will supplement any established occupational health schemes that employers have in place to offer the flu vaccination to their workforce. In addition, funding is to be extended to include health and care staff in the voluntary managed hospice sector that offer direct patient/client care. Detailed guidance is awaited.

1.1.3 Timing

Ideally vaccine should be completed before the end of November; however in general it is appropriate to still offer vaccination to eligible patients at any subsequent point in the flu season. This can be particularly important if it is a late flu season or when newly at risk patients present. The decision to vaccinate should take into account the level of flu-like illness in the community, bearing in mind that the immune response can take about two weeks to develop fully.

1.1.4 Communications and marketing

An integrated communications strategy will be produced for the national flu immunisation programme 2018/19. The strategy is led by PHE and will provide communications colleagues in partner organisations with information and resources to assist the delivery of the programme. Template letters and information will be made available for GPs, schools, healthcare practitioners delivering the vaccine and different eligible groups. All materials will be made available on the GOV.UK website at: https://www.gov.uk/government/collections/annual-flu-programme.

1.2 Regional Overview

The South West 2018/19 Vaccination Plan is awaiting sign off and will be circulated imminently by NHS England and Public Health England. This will provide a robust operational plan to be used across the South West to support health and social care partners to deliver the 2018/19 annual flu immunisation programme effectively and safely. Local plans will hinge on this South West plan.

System leadership and oversight for the planning and implementation of the 2018/19 season flu immunisation programme will be managed through the North and South Strategic Flu Groups. Group membership includes NHS England Commissioning, Public Health England, Local Authorities/Public Health, CCGs, Local Pharmaceutical Committee (LPC) and the Local Medical Committee (LMC). The groups will meet monthly throughout the flu season (September to February) and local organisations will be required to feedback as relevant. An example of local authority feedback is included in Appendix 3.

1.3 Local Overview

The South West 2018/19 Vaccination Plan is the main plan which Torbay and South Devon organisations will be working towards as a system. Locally the Torbay Public Health team, with CCG colleagues, convened a Torbay and South Devon flu planning group for 2018/19. The main objectives are to:

- Agree priority areas for additional local targeted action; and
- Support Torbay contributions to the South West Strategic Group planning process and implementation of the South West Flu Plan.
Membership of this group includes representatives from the Local Authority, Integrated Care Organisation (ICO), CCG, LPC, and LMC. Teleconference meetings are held on a 4-6 weekly basis. Priority areas for action are outlined below and detailed further under heading 4 of this report:

- Care home and domiciliary care staff – this will help to protect the vulnerable groups they care for;
- People with a chronic health condition aged 6 months – 65 years;
- Children 2-3 years; and
- Frontline health and care staff

2 What has been achieved in the past six months?
- Torbay and South Devon multi-agency flu planning group established to help coordinate and support local action;
- Devon-wide online survey co-created with colleagues in Devon and Plymouth to retrospectively estimate numbers of staff vaccinated during the 2017/18 flu season. This provides a template for this year. Summary report provided in Appendix 4.

3. What are the blockages?

3.1 Barriers to increasing vaccination uptake are multiple and complex. Some of the key areas are:

- Public awareness of eligibility for vaccination;
- Individual reluctance to be vaccinated or lack of understanding of the effectiveness of the vaccine in protecting against flu (myth busting);
- Understanding the crucial importance of staff vaccination in helping to protect vulnerable clients and patients;
- Operational issues – finding time and convenient GPs/Pharmacies for vaccination, having enough trained staff available to deliver vaccine, vaccine supply/storage issues and financial constraints.

3.2 Identified risks

- Financial constraints mean that Torbay Council will not be in a position to provide staff with free flu vaccination vouchers for the 2018/19 season. This is at odds with recommendations as an employer to provide a flu vaccine for children’s social care staff (https://www.gov.uk/government/publications/flu-vaccination-who-should-have-it-this-winter-and-why) and has implications in terms of staff business continuity during the flu season.

- Potential vaccine supply issues for aTIV: GPs and Community Pharmacies will receive 40% of their aTIV order in September, 20% in October and 40% in November. Appropriate planning is required to ensure all patients aged 65 years and over receive their vaccine before the flu season starts (generally December, although sometimes earlier). NHS England has suggested prioritisation is as follows in descending priority order: 75 years and over and those in care homes; 65-74 year olds in clinical risk groups and 65-74 years NOT in a clinical risk group.
### 4. What is the planned activity for the next six months?

<table>
<thead>
<tr>
<th>Priority</th>
<th>Action</th>
<th>When</th>
</tr>
</thead>
</table>
| Increase vaccination coverage in: **6 months to under 65 years clinical risk groups** | • Send promotional flu material (including myth busting quiz slides) to patient support groups for conditions that fall under a clinical risk group.  
• Targeted CCG, ICO, LA, CDT and Healthwatch communications to individual risk groups including those amongst their own staff. | Oct  
Oct-Nov |
| Increase vaccination coverage in: **children 2-3 years** | • Send promotional flu material via early year’s settings distribution lists.  
• Some GP practices (e.g. Chilcote Practice) running incentivised ‘flu parties’ for 2-3 year olds in low coverage areas. | Oct-Nov  
Sep-Nov |
| Increase vaccination coverage in: **Care home and Domiciliary Care Staff** | • Update Care Homes and Domiciliary Care Managers at the Care Managers Forum of current vaccine arrangements, further promote the NHS Care Home Toolkit, myth busting and request total staff and vaccination numbers for regional monitoring purposes.  
• Ongoing promotion via newsletter to Care Homes and Domiciliary Care Providers.  
• iBCF business case to fund a small team to vaccinate staff on-site or in convenient locations, at times suitable for staff. To be used this year if possible (and vaccine refund can be provided by NHSE) or in preparation for next year as it is likely that NHSE will not continue to fund care staff vaccination year on year. | Oct  
Oct-Jan  
Aug-Sep |
| Increase vaccination coverage in: **ICO staff (Front-line Health Care Workers)** | • Recruitment of voluntary peer vaccinators who will cover clinics and opportunistic vaccination across ICO hospital settings.  
• Workforce comms promoting flu vaccination via emails, screensavers and staff newsletters.  
• Potential to incentivise vaccination with the ‘Get a Jab. Give a Jab’ scheme which offers vaccinations to third world countries every time a staff member is vaccinated and/or be | Aug-Feb  
Sep-Jan  
Sep-Feb |
<table>
<thead>
<tr>
<th>Priority</th>
<th>Action</th>
<th>When</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>enrolled in a competition for additional annual leave.</td>
<td></td>
</tr>
<tr>
<td>Multi-agency</td>
<td>• Torquay museum is running a flu exhibition on the 100th anniversary of</td>
<td>Oct-Feb</td>
</tr>
<tr>
<td>communications strategy</td>
<td>Spanish Flu from October to February. Agencies are encouraged to link their</td>
<td>Sep/Oct</td>
</tr>
<tr>
<td></td>
<td>comms with the museum to promote local delivery of flu vaccination.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• LA, ICO and CCG communication leads to link up to coordinate messages and delivery channels throughout the flu season in accordance with national communications and marketing materials.</td>
<td>Sep/Oct</td>
</tr>
<tr>
<td></td>
<td>• Potential for Councillor Flu Champions to promote vaccination and ‘myth bust’ in their communities.</td>
<td></td>
</tr>
</tbody>
</table>

**Appendices**

1) The National Flu Plan 2018/19:  

2) The National Flu Letter (flu letter: no.1):  

[Appendices continued over the page]

3) Example Local Authority feedback table for regional flu monitoring

<table>
<thead>
<tr>
<th>Local Authority: Enter name of LA name &amp; job title of person providing report</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Progress report</td>
</tr>
</tbody>
</table>

[Appendices continued over the page]
### Employee vaccination rates*

### Care Homes Staff rates

### Campaigns – e.g. Carer’s Networks

### Promotion with hard-to-reach groups

## Issues to report

### Insert details of issue

### Insert commentary on key issues and developments

## Any challenges or requests for support from the Flu Group

### Insert details of challenge

### Insert comments

4) Post-season flu vaccination uptake in care home and domiciliary care staff. Devon, Plymouth and Torbay (see next page).
Post-season flu vaccination uptake in care home and domiciliary care staff
Devon, Plymouth and Torbay

In May 2018, two online surveys were sent to care home and domiciliary care providers in wider Devon to retrospectively measure flu vaccination uptake in their staff for the 2017/18 flu season. The surveys were run over a one to two week period (17th May to 1st June) dependent on the local authority area.

35 care homes and six domiciliary care providers responded to the surveys – giving an extremely low response rate overall. Please note that due to the low number of responses from domiciliary care providers, it is recommended that percentages (unless based on individual staff) should not be directly compared with care home provider percentages.

The follow report summarises the responses received from the surveys in question order and, based on the data, gives recommendations for the 2018/19 flu season.

Respondent demographics – care homes

Which local authority area is your care home in?

Fig1: Percentage of care home respondents split by their Local Authority area

The majority of respondents (51.4%, n=18) were from Plymouth, 11 from Torbay and 6 from Devon.

This question is not reported for domiciliary care providers due to small numbers.

What is your nursing home type?

Fig2: Count of care home type

The majority of care homes (62.9%) were classified as residential homes.

The description for ‘Other’ is as follows: ‘Residential with nursing for dementia/mental health’.

Staff flu vaccination uptake
Did you/your care home provide flu vaccines for staff last flu season (September 2017 to March 2018)?

<table>
<thead>
<tr>
<th>Answer choices</th>
<th>Care home</th>
<th>Domiciliary care provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>27 (77.1%)</td>
<td>5 (83.3%)</td>
</tr>
<tr>
<td>No</td>
<td>8 (22.9%)</td>
<td>1 (16.7%)</td>
</tr>
<tr>
<td>Total</td>
<td>35 (100.0%)</td>
<td>6 (100.0%)</td>
</tr>
</tbody>
</table>

Table 1: Responses by provider type

The majority of respondents provided flu vaccines for their staff.

If ‘Yes’, how were they offered?

29 (82.9%) care homes and 5 (83.3%) domiciliary care providers answered this question. The majority offered free NHS England funded vaccinations as shown in Table 2 below.

<table>
<thead>
<tr>
<th>Answer choices</th>
<th>Care home</th>
<th>Domiciliary care provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Free NHS funded vaccinations (via GP or pharmacy)</td>
<td>22 (75.9%)</td>
<td>4 (80.0%)</td>
</tr>
<tr>
<td>Combination of free NHS England funded vaccinations and care home offer to staff</td>
<td>4 (13.8%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>Solely funded by the care home/domiciliary care provider</td>
<td>2 (6.9%)</td>
<td>0 (0.0%)</td>
</tr>
<tr>
<td>Other</td>
<td>1 (3.5%)</td>
<td>1 (20.0%)</td>
</tr>
<tr>
<td>Total</td>
<td>29 (100.0%)</td>
<td>5 (100.0%)</td>
</tr>
</tbody>
</table>

Table 2: Responses by provider type

The descriptions for the answer ‘Other’ are as follows:
- ‘The home didn’t provide vaccinations, but staff were advised to go to the pharmacy or the GP’
- ‘Most were free as the regs changed, but also paid for 1 member of staff. There were also staff that were eligible due to health reasons’

If ‘No’, why not?

Seven (20%) care homes and one (16.7%) domiciliary care provider answered this question. The main reason flu vaccines were not provided was that staff went to their own GP surgeries/arranged vaccines for themselves.

Responses by care home providers:
- ‘All staff who wanted the vaccines did so after receiving the information supplied by the appropriate people from own GP surgeries. Staff that were experiencing financial difficulties had the vaccines paid by the home’
- ‘We surveyed the Staff and those who wanted one arranged their own vaccines’
- ‘Staff went to own surgeries’
- ‘staff were informed to have vaccination’
- ‘Each clients surgery sent nurses out’
- ‘Care staff independently went to their own GP’
- ‘Majority of staff went to their surgeries to get a vaccine done prior to the home trying to access any due to a shortage of vaccines’

Response by domiciliary care provider:
- ‘costs involved, unaware of any support that could have helped’

How many health and social care staff do you employ and of these how many received a flu vaccination during September 2017 and March 2018?
A significantly higher percentage of care home staff had a flu vaccination than domiciliary care staff.

107 of the 283 domiciliary care staff had a vaccine. 555 of the 1063 care home staff had a vaccine.

The percentage of staff in each care home who received the vaccine ranged from 0% to 100% with a mean of 51%. The percentage working for each domiciliary care provider who received the vaccine ranged from 10% to 67% with a mean of 40%.

Please indicate whether this uptake information was collected throughout the season or if you have provided a retrospective estimate?

Around half of care homes and domiciliary care providers provided a retrospectively estimated figure of the number of staff that were vaccinated as shown in Table 3 below.

Table 3: Responses by provider type

<table>
<thead>
<tr>
<th>Answer choices</th>
<th>Care home</th>
<th></th>
<th>Domiciliary care provider</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>%</td>
<td>Number</td>
<td>%</td>
</tr>
<tr>
<td>Recorded throughout the season as staff were vaccinated</td>
<td>17</td>
<td>48.6%</td>
<td>3</td>
<td>50.0%</td>
</tr>
<tr>
<td>Retrospective estimate</td>
<td>18</td>
<td>51.4%</td>
<td>3</td>
<td>50.0%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>35</strong></td>
<td><strong>100.0%</strong></td>
<td><strong>6</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

Promotion of staff flu vaccination

Did you use any of the following resources to promote flu vaccination to your employees?

Table 4: Responses by provider type

<table>
<thead>
<tr>
<th>Answer choices</th>
<th>Care home</th>
<th></th>
<th>Domiciliary care provider</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>%</td>
<td>Number</td>
<td>%</td>
</tr>
<tr>
<td>NHS Employers Flu Fighter Campaign</td>
<td>13</td>
<td>37.1%</td>
<td>3</td>
<td>50.0%</td>
</tr>
<tr>
<td>NHS England/Public Health England Infection Control and Winter Readiness Pack for Care Homes</td>
<td>19</td>
<td>54.3%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>The winter checklist within the NHS England/Public Health England Infection Control and Winter Readiness Pack for Care Homes</td>
<td>14</td>
<td>40.0%</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other resources</td>
<td>9</td>
<td>25.7%</td>
<td>3</td>
<td>50.0%</td>
</tr>
<tr>
<td><strong>Total respondents</strong></td>
<td><strong>35</strong></td>
<td></td>
<td><strong>6</strong></td>
<td></td>
</tr>
</tbody>
</table>

Respondents could choose multiple answers to this question. The majority of care homes used the Infection Control and Winter Readiness Pack provided by the NHS and Public Health England. Domiciliary care providers used a mix of the NHS Employers Flu Fighter Campaign and ‘other’ resources – mainly posters and flyers. Two providers answered ‘None’.

1 Matching the individual response for staff receiving the vaccine with the individual response for total staff employed has been carried out using the date, time and order the responses were input, but there is a possibility of mismatching.
The comments for ‘Other resources’ were:

**Responses by care home providers:**
- ‘Our own flu campaign - notice board / flyers etc.’
- ‘Caring for care homes flu special’
- ‘www’
- ‘Risk assessment and catch it, bin it, kill it posters etc.’
- ‘contacted by the pharmacy we put a notice up’
- ‘Discussed importance of Flu Vaccine at Staff Meeting’
- ‘in house poster’
- ‘unknown’

**Response by domiciliary care providers:**
- ‘Emailed staff with info’
- ‘Our own in house awareness’

**Do you have any comments about the resources listed in the previous question?**

23 (65.7%) care homes and six (100%) domiciliary care providers made no comment. Themed responses from the remaining care homes that answered this question are shown below.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Examples of responses by care home providers:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Useful, helpful information (10 responses)</td>
<td>‘All these provided useful information and toolkits. It was very easy to download and order flyers / posters etc. from the internet and other Flu sites to support a campaign’</td>
</tr>
<tr>
<td></td>
<td>‘Very useful resources to provide my staff with information and guidance’</td>
</tr>
<tr>
<td>Suggestions for improvement (2 responses)</td>
<td>‘Single approach please’</td>
</tr>
<tr>
<td></td>
<td>‘Maybe resources should be sent through the post without applying for them’</td>
</tr>
</tbody>
</table>

**Did you undertake any additional activity to promote flu vaccination to your staff?**

Six care homes (17%) and four domiciliary care providers (66%) answered ‘no’ to this question. Themed responses from the remaining care and domiciliary providers are shown below*.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Examples of responses:</th>
</tr>
</thead>
<tbody>
<tr>
<td>At supervision and staff meetings (12 responses)</td>
<td>‘Advised staff through staff meetings, having been to the forum gaining feedback from there and communicating with staff the importance if the flu vaccine’ (CH)</td>
</tr>
<tr>
<td></td>
<td>‘During individual supervision flu vaccines were actively discussed’ (CH)</td>
</tr>
<tr>
<td>Posters and written information (10 responses)</td>
<td>‘Notice board and leaflet drop’ (CH)</td>
</tr>
<tr>
<td></td>
<td>‘Yes we provided information to Staff as to who was eligible for the Vaccines and where they could get Vaccinated, we also put up</td>
</tr>
</tbody>
</table>
posters for Staff and told them the importance of having a Flu Vaccination’ (CH)

| Verbal communication and recommendation (8 responses) | ‘Personal recommendation’ (CH)
| | ‘Spoke to staff individually and recommended the vaccine…’ (CH)
| In house awareness (4 responses) | ‘In house information’ (DC)
| | ‘Made staff aware about protecting Residents and their own families’ (CH)
| Worked with the pharmacy (2 responses) | ‘Partnership with local pharmacy in relation to cost and drop in times…’ (CH)

*CH denotes a response from a care home provider and DC shows a response from a domiciliary care provider

Do you have any other comments, particularly in terms of how we can support you with promoting uptake of flu vaccinations next season (2018/19)?

16 (45.7%) care home and three (50%) domiciliary care providers responded ‘no, none or not sure (one response)’ as their comment to this question. Themed responses from the remaining care and domiciliary providers are shown below*.

| Theme | Examples of responses:
|-------|---------------------------------------------------------|
| Written information and displays (4 responses) | ‘maybe have a flyer we could hand out to all staff and relatives to give them a better understanding of the importance of having a flu vaccination’ (CH)
| | ‘Sending Poster to Care Home ready to display well in time’ (CH)
| Staff concerns (i.e. side effects) (4 responses) | ‘General perception amongst staff is negative regarding the side effects of the flu jab. We have tried to promote the positive effect of having the vaccination for both staff and our residents. So I feel more promotion on the myths/ perceived negatives of the vaccinations would help’ (CH)
| | ‘Dispel some of the myths around the flu vaccine (making people ill being one)…’ (DC)
| Accommodating staff availability (3 responses) | ‘…dedicated Dom Care facility (roaming) to enable care workers to attend during visits (or specifically when Dom Care is not busy i.e. 2pm - 4pm)’ (DC)
| | ‘I feel staff would be more willing to have a Flu Vaccination if it was done in the Home when the District Nurses come to vaccinate the Residents as I think some staff couldn’t be bothered or never had the time to go to the Surgery’ (CH)
| Cost, and free of charge vaccines (3 responses) | ‘Due to the vaccination being provided for free I feel this encouraged staff to get the vaccination.’ (CH)
| | ‘In the past GPs have refused to provide the flu jab to domiciliary staff and the agency has had to pay for it…’ (DC)
| Advice, updates and feedback (3 responses) | ‘Regular feedback’ (CH)
| | ‘Keeping the manager up to date with any new research and best practice, and benefits with regards to the flu vaccine’ (CH)
| Promoting uptake next year (2 responses) | ‘No - uptake was better this year and we hope we can improve on that next year’ (CH)
### Theme

<table>
<thead>
<tr>
<th>Examples of responses:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Miscellaneous (4 responses)</td>
</tr>
<tr>
<td>‘Access to jabs is not easy’ (CH)</td>
</tr>
<tr>
<td>‘Further emphasis placed upon vaccinations, if not already, included within PCC Provider Contracts’ (CH)</td>
</tr>
<tr>
<td>‘Staff will listen more to other professionals for the reasons why flu vaccinations are recommended, perhaps a visiting professional could reiterate the importance of… (funding permitting of course)’ (CH)</td>
</tr>
</tbody>
</table>

*CH denotes a response from a care home provider and DC shows a response from a domiciliary care provider

### Recommendations

Based on the data presented in this report the following is a list of recommendations for the 2018/19 flu season. Please be aware that, in some cases, these are recommendations are based on a small number of responses and therefore may not be truly representative:

- The majority of care and domiciliary care providers used free NHS England funded vaccinations for their staff. This should continue to be encouraged to maintain and/or improve staff vaccination rates.

- Staff vaccination is lower in domiciliary care staff as compared with care home staff. Interventions to increase domiciliary care staff uptake should be encouraged.

- There are inconsistent messages from providers in relation to staff vaccination with some taking ownership and encouraging staff to be vaccinated and others leaving the choice to their staff. A consistent message from providers that vaccination is recommended to protect staff and service users is recommended, with potential for this to be emphasised in commissioner contracts or through business continuity plans.

- Encouragingly a large proportion of care home and domiciliary care providers make use of resources provided by NHS and Public Health England (PHE) to promote flu vaccination. These should continue to be produced and promoted (and possibly pre-printed before sending to providers – particularly posters and leaflets) with a recommendation to explore the development of a domiciliary care winter readiness pack.

- The main promotional methods used by care and domiciliary care providers were verbal via staff meetings and individual supervision and through the display of posters and distribution of leaflets. Some providers noted a general negative perception amongst staff regarding the side-effects of the vaccine and this could be an opportunity to dispel myths through future promotional material.

- Better accommodation for staff working hours and availability was sighted as barrier for vaccination. Most would prefer on-site vaccination as opposed to arranging via a GP or pharmacy. For the future there may be opportunities to combine service user vaccinations with staff vaccinations.

### Background Papers:

- The National Flu Letter (flu letter: no 1) – see appendix 2
• Post-season flu vaccination uptake in care home and domiciliary care. Devon, Plymouth and Torbay – see appendix 4
• CONFIDENTIAL TO THE PUBLIC: Draft Seasonal NHS Influenza Programme. Planning across South West 2018/19 – not included
• CONFIDENTIAL TO THE PUBLIC: DCIOS Health Protection Committee: Screening and Immunisation Quarterly Update – not included
• CONFIDENTIAL TO THE PUBLIC: Torbay flu telecom 11 April 2018 PowerPoint – not included