

August 2016

## PSNC Briefing 040/16: Guidance on the Seasonal Influenza Vaccination Advanced Service 2016/17

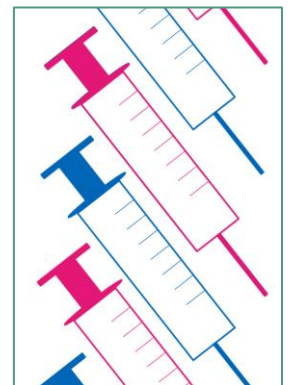
This PSNC Briefing provides guidance for community pharmacy contractors and their teams on the NHS Seasonal Influenza Vaccination Advanced Service 2016/17. Information and resources to support the service are also available at [psnc.org.uk/flu](http://psnc.org.uk/flu).

### a) Introduction

On 20th July 2015, NHS Employers (on behalf of NHS England) and PSNC announced that a seasonal influenza vaccination service would be added to the Community Pharmacy Contractual Framework (CPCF) as an Advanced Service. This service is the fifth Advanced Service in the CPCF. In May 2016, NHS England announced it would re-commission the seasonal influenza vaccination service programme in 2016/17.

Pharmacists and contractors practising in Wales should visit the [Community Pharmacy Wales website](#) for information on flu vaccination services in Wales.

This document provides detailed guidance for contractors and their teams on the service and highlights other resources which may support them to provide the service.



### b) Background and aims of the service

Each year from September through to January the NHS runs a seasonal flu vaccination campaign aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. These include people aged 65 years and over, pregnant women and those with certain health conditions.

Community pharmacies have offered flu vaccinations as a private service for many years, often to a range of patients who would not qualify for NHS vaccinations and some who would but were prepared to pay for it anyway. The accessibility of pharmacies, their extended opening hours and the option to walk in without an appointment have proved popular with patients seeking vaccinations.

In recent years many pharmacies have also been commissioned to provide NHS flu vaccination services. These services sit alongside the nationally commissioned GP vaccination service, giving patients another choice of venue for their vaccination and helping commissioners to meet their local NHS vaccination targets. Many schemes

demonstrated high levels of patient satisfaction and evidence that pharmacy vaccination is accessible, often capturing 'hard to reach' patients who would not otherwise take up the offer of vaccination.

PSNC worked to persuade the NHS of this success and of the value that a national service could bring and NHS England subsequently decided that in 2015/16 all community pharmacies should be allowed to vaccinate patients 18 years and over in at-risk groups against flu with the commissioning of a new Advanced Service. The successful implementation of the national 2015/16 service has led to the service being re-commissioned in 2016/17.

Immunisation is one of the most successful and cost-effective health protection interventions and is a cornerstone of public health. High immunisation rates are key to preventing the spread of infectious disease, complications and possible early death among individuals and protecting the population's health through both individual and herd immunity.

For most healthy people, influenza is an unpleasant but usually self-limiting disease. However, children, older people, pregnant women and those with underlying disease are at particular risk of severe illness if they catch it.

The aim of the seasonal influenza vaccination programme is to protect those who are most at risk of serious illness or death should they develop influenza, by offering protection against the most prevalent strains of influenza virus.

The Community Pharmacy Seasonal Influenza Vaccination Advanced Service (Flu Vaccination Service) will support NHS England, on behalf of Public Health England (PHE), in providing an effective vaccination programme in England and it aims:

- a. to sustain and maximise uptake of flu vaccine in at risk groups by building the capacity of community pharmacies as an alternative to general practice;
- b. to provide more opportunities and improve convenience for eligible patients to access flu vaccinations; and
- c. to reduce variation and provide consistent levels of population coverage of community pharmacy flu vaccination across England by providing a national framework.

### c) Commencement and duration of the service

This service will commence from 1st September 2016 and the service ends on the last day of March (31st March 2017), but focus should be given to vaccinating eligible patients between 1st September 2016 and 31st January 2017, with eligible patients being vaccinated as soon as the vaccine is available.

Widespread vaccination may continue until December in order to achieve maximum impact, but where possible, it should be completed before flu starts to circulate in the community. However, flu can circulate considerably later than this and pharmacists should apply clinical judgement to assess the needs of individual patients who are eligible for vaccination under this service to receive immunisation beyond 31st January 2017. This should take into account the level of flu-like illness in the community and the fact that immune response following immunisation takes about two weeks to fully develop<sup>1</sup>.

The Directions specify that the service will end on 31st March 2017 as they also reference the national Patient Group Direction (PGD) for the service, which has an expiry date set by PHE of 31st March 2017.

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<sup>1</sup> <https://www.gov.uk/government/statistics/weekly-national-flu-reports>

## d) The service specification and Directions

The [service specification](#) describes the requirements for provision of the service and it should be read and understood by all pharmacists providing the service.

The [signed amendments to the Pharmaceutical Services \(Advanced and Enhanced Services\) \(England\) Directions 2013](#) (the Directions) provide the legal basis for provision of the service. A consolidated version of the Directions is available on the PSNC website.

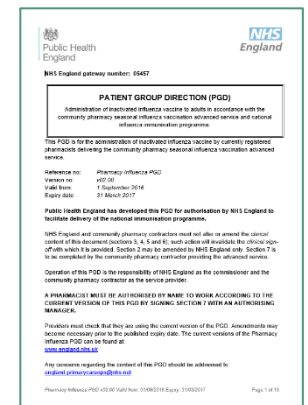
## e) The national Patient Group Direction

The administration of a flu vaccine - a Prescription Only Medicine – as part of the Flu Vaccination Service is legally authorised by a national Patient Group Direction (PGD). The [national PGD for the Flu Vaccination Service](#) has been developed and clinically approved by PHE, and NHS England has authorised its use by community pharmacists providing the Advanced Service; it cannot be used to authorise administration of flu vaccines under any other NHS or private services.



Pharmacists who will administer flu vaccines under the authority of the national PGD must:

- Download a copy of the latest version of the PGD from the NHS England website;
- Read the PGD and ensure they fully understand the content of the PGD, including the eligible patient groups, the inclusion and exclusion criteria and the record keeping requirements;
- Print off a copy of the PGD and complete the Practitioner declaration to confirm they have read and understood the content of the PGD and that they are willing and competent to work to it within their professional code of conduct – if there is more than one pharmacist in the community pharmacy who will be providing the Flu Vaccination Service, one copy of the PGD can be printed and all pharmacists can complete the Practitioner declaration on this one copy;
- The Authorising Manager declaration must then be completed. The Authorising Manager's role is to confirm the pharmacist:
  - a. is aware of the service specification and requirements for provision of the service;
  - b. has completed the Declaration of Competence (DoC) self-assessment framework and has printed and signed the statement of declaration; and
  - c. confirm that the pharmacist has the organisation's approval to provide the service.
- In certain circumstances, for example, a community pharmacy where the pharmacist who will administer vaccines is also the superintendent pharmacist or contractor, it may be necessary for the authorising manager to be the same person as the practitioner, though this situation should be avoided wherever possible.



These steps **must** be completed before an individual pharmacist is authorised to administer flu vaccines as part of the Flu Vaccination Service.

## f) Patient eligibility to receive the service

This service covers those patients most at risk from influenza **aged 18 years and older**, listed in Annex A of the service specification (and also listed below).

The selection of these eligible groups has been informed by the target list from the [NHE England, PHE and the Department of Health annual flu plan](#).

**Pharmacists are not authorised to administer flu vaccines to other patient groups as part of the Flu Vaccination Service.** If a vaccine is administered to patients in other groups, the contractor will not be paid for that vaccination and the administration will have been undertaken outside the authority of the national PGD.

Eligible groups	Further details
All people aged 65 years or over	Including those becoming age 65 years by 31 March 2017.
People aged from 18 years to less than 65 years of age with one or more serious medical condition(s) outlined below:	
Chronic (long term) respiratory disease, such as severe asthma, chronic obstructive pulmonary disease (COPD) or bronchitis	Asthma that requires continuous or repeated use of inhaled or systemic steroids or with previous exacerbations requiring hospital admission. Chronic obstructive pulmonary disease (COPD) including chronic bronchitis and emphysema; bronchiectasis, cystic fibrosis, interstitial lung fibrosis, pneumoconiosis and bronchopulmonary dysplasia (BPD).
Chronic heart disease, such as heart failure	Congenital heart disease, hypertension with cardiac complications, chronic heart failure, individuals requiring regular medication and/or follow-up for ischaemic heart disease.
Chronic kidney disease at stage three, four or five	Chronic kidney disease at stage 3, 4 or 5, chronic kidney failure, nephrotic syndrome, kidney transplantation.
Chronic liver disease	Cirrhosis, biliary atresia, chronic hepatitis.
Chronic neurological disease, such as Parkinson's disease or motor neurone disease, or learning disability	Stroke, transient ischaemic attack (TIA). Conditions in which respiratory function may be compromised due to neurological disease (e.g. polio syndrome sufferers). Clinicians should offer immunisation, based on individual assessment, to clinically vulnerable individuals including those with cerebral palsy, learning disability, multiple sclerosis and related or similar conditions; or hereditary and degenerative disease of the nervous system or muscles; or severe neurological disability.
Diabetes	Type 1 diabetes, type 2 diabetes requiring insulin or oral hypoglycaemic drugs, diet controlled diabetes.
A weakened immune system due to disease (such as HIV/AIDS) or treatment (such as cancer treatment)	Immunosuppression due to disease or treatment, including patients undergoing chemotherapy leading to immunosuppression, bone marrow transplant, HIV infection at all stages, multiple myeloma or genetic disorders affecting the immune system (e.g. IRAK-4, NEMO, complement deficiency). Individuals treated with or likely to be treated with systemic steroids for more than a month at a dose equivalent to prednisolone at 20mg or more per day (any age). It is difficult to define at what level of immunosuppression a patient could be considered to be at a greater risk of the serious consequences of influenza and should be offered seasonal influenza vaccination. This decision is best made on an individual basis and left to the patient's clinician. Some immune-compromised patients may have a suboptimal immunological response to the vaccine.

Splenic dysfunction	This also includes conditions such as homozygous sickle cell disease and coeliac syndrome that may lead to splenic dysfunction.
All pregnant women (including those women who become pregnant during the flu season)	Pregnant women aged 18 or over at any stage of pregnancy (first, second or third trimesters).
People living in long-stay residential care homes or other long-stay care facilities	People aged 18 or over living in long-stay residential care homes or other long-stay care facilities where rapid spread is likely to follow introduction of infection and cause high morbidity and mortality. This does not include, for instance, prisons, young offender institutions, or university halls of residence.
Carers	People aged 18 or over who are in receipt of a carer's allowance, or those who are the main carer of an older or disabled person whose welfare may be at risk if the carer falls ill.
Household contacts of immunocompromised individuals	People who are household contacts, aged 18 and over, of immunocompromised individuals, specifically individuals who expect to share living accommodation on most days over the winter and, therefore, for whom continuing close contact is unavoidable.

## g) Pharmacy eligibility to provide the service

There are a number of conditions specified in the Directions which contractors must comply with prior to provision of the service. These are described below:

- 1) Notification of NHS England of the contractor's intention to provide the service; contractors must undertake this notification via the [NHS Business Services Authority \(NHS BSA\) website](#). **This must be done annually before the contractor starts to provide the service.** Therefore, even if a contractor provided the service in 2015/16 they must complete this sign-up process again in 2016/17. Contractors need to complete this form for all their pharmacies from which the Flu Vaccination Service will be offered. If the form is not completed before provision of the service, claims for payment will not be accepted by the NHS BSA.
- 2) Contractors must be satisfactorily providing all Essential Services and be compliant with the clinical governance requirements of the CPCF.
- 3) Pharmacists who will provide the service must be competent to provide the service (see section h for further details).
- 4) Contractors must have a Standard Operating Procedure (SOP) in place for provision of the service, having regard to the requirements of the national PGD and service specification of which all pharmacy staff are aware and which covers the following points as a minimum:
  - the provision of the service to patients and the roles of different staff members;
  - the ongoing conditions under which the service needs to be provided (specified in the service specification);
  - cold chain integrity;
  - needle stick injuries;
  - pharmacists undertaking vaccinations should be advised to consider being vaccinated against hepatitis B;
  - the identification and management of adverse reactions; and
  - the handling, removal and safe disposal of any clinical waste related to the provision of the service.

If the contractor is to provide the service in a care home, the SOP must also detail provision of the service and the role of staff members in that location.

- 5) If the contractor is to provide the service in a care home, they must have notified the patient's GP practice that they intend to vaccinate the patient and they must have sought permission to undertake vaccinations in the care home from the local NHS England team (see section I for further details).
- 6) The pharmacy must have a consultation room which meets the following requirements:
  - is clearly designated as a room for confidential consultations;
  - is distinct from the general public areas of the pharmacy premises; and
  - is a room where both the person receiving the service and the pharmacist who is to administer the vaccine are able to sit down together and talk at normal speaking volumes without being overheard by any other person (including pharmacy staff).

These requirements do not prevent the presence of other persons where the patient requests, or consents to this. For example, where the pharmacist uses a chaperone, or wishes to include a pre-registration trainee in the consultation as part of their training, this would be allowed if the patient consents. Similarly, the patient may prefer that they are accompanied by another person during the consultation.

Where a contractor is to provide the service at a care home it must be undertaken in a room where both the person receiving the service and the pharmacist who is to administer the vaccine are able to sit down together and talk at normal speaking volumes without being overheard by any other person, other than a person whose presence the person receiving the service requests or consents to (such as a carer).

## h) Training and competency requirements

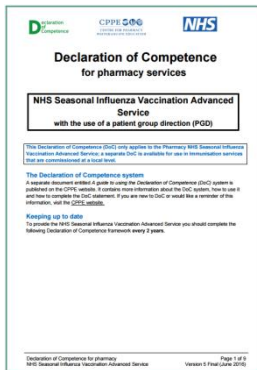
All pharmacy staff involved in the provision of the Flu Vaccination Service should receive appropriate training relevant to the role they will undertake. Contractors are required to demonstrate that all pharmacists providing the service in their pharmacy have the skills needed to do so.

Flu vaccination services have been widely commissioned from community pharmacies over the last few years and as a consequence many pharmacists have already received regular training on the provision of a vaccination service. There are a number of organisations offering training and support for provision of flu vaccination services and contact details can be found on the [PSNC website](#).

The [National Minimum Standards for Immunisation Training](#) and the associated [Core Curriculum for Immunisation Training](#) set out the knowledge and skills that healthcare professionals undertaking vaccination services need to have. Pharmacists who will provide the Flu Vaccination Service must have completed practical training in vaccination that meets these requirements. **NHS England has determined that pharmacists providing the Flu Vaccination Service need to attend face-to-face training for both injection technique and basic life support training every two years.**

This requirement means that a pharmacist who undertook face-to-face training for both injection technique and basic life support in 2015 would not need to undertake face-to-face training in 2016. Assuming the service continues to be commissioned in 2017, the pharmacist would then need to undertake face-to-face training in 2017 in order to continue to provide the service. Pharmacists who last undertook face-to-face training in 2014 would need to undertake face-to-face training in 2016, prior to providing the Flu Vaccination Service.





The [Declaration of Competence](#) (DoC) approach (developed by the Community Pharmacy Competence Group) has been agreed by NHS England, NHS Employers and PSNC as being the way by which pharmacists providing the Flu Vaccination Service must demonstrate their competence to the contractor who is contracted to provide the service and to NHS England.

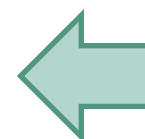
The [NHS Seasonal Influenza Vaccination Advanced Service DoC](#) has been published by the Centre for Pharmacy Postgraduate Education (CPPE)/the Community Pharmacy Competence Group and pharmacists who intend to provide the Flu Vaccination Service must use this DoC to demonstrate their competence to provide the service to employers and NHS England.

Pharmacists should note that completion of the Immunisation DoC does not provide acceptable evidence of their competence to provide the Advanced Service.

**To complete the DoC process:**

1. Visit the CPPE website [Declaration of Competence page](#) and select the **NHS seasonal influenza vaccination ADVANCED service**. You will then be asked to log in to the CPPE website.

Do **NOT** select the Immunisation (NOT ADVANCED Flu service) DoC



2. Following logging in you will see the following page:

### NHS seasonal influenza vaccination **ADVANCED**

Declaration of Competence for Rosemary Taylor (2058193)

The new NHS Influenza Vaccination Advanced Service DoC is now live on the cppe website. You can start to reflect on your competencies to provide this service and complete any outstanding training, learning and assessment requirements. Please be aware that you cannot sign your Declaration statement until you have read and understood the service specification and PGD and signed the latter. These documents will be available later in the summer.

Are you confident you know how to complete the DoC system?

[Download A guide to using the Declaration of Competence \(DoC\) system here.](#)

Tick the box to confirm you have read this before you complete your DoC

**Save**

**CPPE viewer**

With our CPPE viewer facility you can allow other people to view the list of learning programmes and assessments you have accessed. This can show commissioners the learning you have completed for pharmacy services and employers can see the learning you have completed for your CPD.

Tick this box to enable your CPPE viewer.

**Save changes**

**PharmOutcomes**

If you are completing the Declaration of Competence system in order to deliver a commissioned service which is supported by [PharmOutcomes](#) you will need to share data relating to your CPPE learning and assessment record.

Tick this box to allow your data to be shared with PharmOutcomes.

**Save changes**

You can select a different service using the dropdown "Select a different service".

- ▼ Step 1: Print the Declaration of Competence self-assessment framework
- ▼ Step 2: Recommended learning
- ▼ Step 3: Supporting assessments
- ▼ Step 4: Print your statement of declaration
- ▼ Step 5: Update your CPPE learning record
- ▼ Select a different service

If you are not familiar with the DoC process you can download [A guide to using the Declaration of Competence \(DoC\) system](#)

Click on **Step 1.** to download and print a copy of the DoC self-assessment framework

▼ Step 1: Print the Declaration of Competence self-assessment framework

This self-assessment tool provides a framework to self-assess competence to deliver the *NHS seasonal influenza vaccination ADVANCED* service.

[Download the self assessment framework for NHS seasonal influenza vaccination ADVANCED](#)

In addition to the specific competences linked to the service, it is expected that pharmacy professionals will meet the core competencies within each framework.

[Look at this example of a completed DoC for emergency contraception.](#)

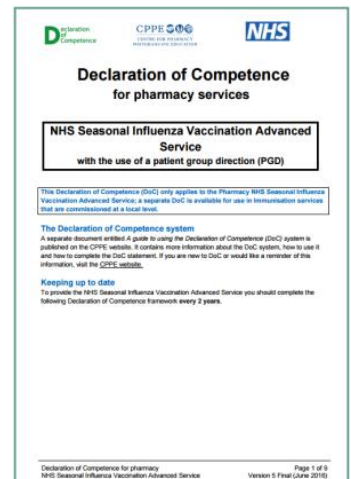


- Read and work through the DoC self-assessment framework which explains the competency requirements for pharmacists providing the Flu Vaccination Service.

There are **three parts**:

**Section A** - This is the DoC framework, which highlights the key competencies expected of all pharmacy professionals providing the service.

- Work through the DoC framework;
- Review the competencies and complete each section with evidence of and information on the learning, experience and assessment, and other training you have completed to meet each competency. By doing this you will identify any gaps in competence. If you cannot answer a question to your own satisfaction, then you should undertake some extra learning – refer to **section B**.
- If you intend to provide the Flu Vaccination Service in long-stay residential care homes or other long-stay facilities, then you must also complete **Level 2 in Section A**.



**Section B** - This part of the DoC process includes the suggested learning and assessments you should consider, linked to the core and service-specific competencies for the Flu Vaccination Service.

- Review the suggested learning and assessments;
- Reflect on your previous learning, experience and assessments;
- Consider what learning has recently been completed as part of your CPD and which areas of learning and development may need updating; and
- Identify the learning and assessment resources required to fill any gaps in competence from **Section A** and complete the relevant learning and assessment.

Then revisit and complete the DoC framework in **Section A**, noting down the additional learning completed as appropriate.

**Section C** – This is a reference guide and includes professional standards and frameworks referred to in *A guide to using the Declaration of Competence (DoC) system*.

**Declaration** – The final part is the DoC statement that you must print and sign to acknowledge professional responsibility that you are competent to provide the Flu Vaccination Service.

- Access, print and sign the DoC statement from the CPPE website. This is pre-populated with the CPPE learning and assessments you have completed for the service, with the dates of completion. Add the details of other learning to the declaration (for example, training provided by your employer);

▼ **Step 4: Print your statement of declaration**

Print your statement of declaration for *NHS seasonal influenza vaccination ADVANCED*.

- A copy of this signed DoC statement should be retained at each pharmacy where the pharmacist provides the Flu Vaccination Service and this should be attached to the Flu Vaccination Service PGD.

Local NHS England teams may ask to see copies of pharmacists' DoC statements when they visit pharmacies to undertake contract monitoring;

- Pharmacists should retain their completed DoC self-assessment framework so they can make that available to their employer or NHS England on request.

4. Once you have signed the DoC statement, confirm this on the CPPE website to update your CPPE learning record.

**▼ Step 5: Update your CPPE learning record**

Confirm that you have signed your statement of declaration for *NHS seasonal influenza vaccination ADVANCED* and indicate the date the document was signed.

By completing step 5 you are confirming that you meet all the competencies in the DoC framework and you can provide evidence to that effect. Making a declaration whilst not meeting the competencies may constitute or be treated as a fitness to practise issue.

I confirm that I have signed my Declaration of Competence statement for *NHS seasonal influenza vaccination ADVANCED*.

Date signed:

Pharmacists providing the Flu Vaccination Service should work through the DoC system every two years.

### i) The vaccines to be used in the service

The vaccines which can be used in the service are those listed in [The Annual Flu Letter – The national flu immunisation programme 2016/17 \(DH/NHS England/PHE\)](#) and authorised for use by the PGD:

Product Name	Manufacturer
Fluarix® Tetra – Split virion inactivated virus	GSK
Influvac® – Surface antigen, inactivated virus	Mylan (BGP Products Ltd)
Imuvac® –Surface antigen, inactivated virus	Mylan (BGP Products Ltd)
Influenza vaccine, surface antigen, inactivated – Surface antigen, inactivated virus	Mylan (BGP Products Ltd)
CSL inactivated Influenza Vaccine – Split virion, inactivated virus	Pfizer Vaccines
Enzira® – Split virion Inactivated virus	Pfizer Vaccines
Inactivated influenza Vaccine (Split Virion) BP – Split virion, inactivated virus	Sanofi Pasteur MSD
Agrippal® – Surface antigen, inactivated virus	Seqirus Vaccines Ltd

The PGD does not cover the use of the intradermal vaccine Intanza®.

### j) Providing the service

This section of the guidance covers some of the practical requirements related to provision of the Flu Vaccination Service. A checklist to help contractors and their teams to prepare for and to provide the service can be found at the end of this Briefing.

### *Notifying NHS England of service commencement*

Prior to provision of the service, contractors must notify NHS England that they intend to provide the service. This notification must be done via submission of a declaration on the [NHS BSA website](#). **This must be done annually before the contractor starts to provide the service.** Therefore, even if a contractor provided the service in 2015/16 they must complete this sign-up process again in 2016/17. Contractors need to complete this form for all their pharmacies from which the Flu Vaccination Service will be offered. If the form is not completed before provision of the service, claims for payment will not be accepted by the NHS BSA.

### *Storage of vaccines*

Vaccines should be stored in line with the requirements set out by their manufacturer in the [Summary of Product Characteristics](#). The National Patient Safety Agency issued an alert in 2010 giving [guidance on vaccine cold storage](#) for all healthcare providers, including community pharmacies.

All refrigerators in which vaccines are stored must have a maximum / minimum thermometer. Readings must be taken and recorded from the thermometer on all working days.

### *Consent*

As with the provision of any pharmacy service, the patient must consent to being vaccinated. The General Pharmaceutical Council's [Guidance on Consent](#) provides information on consent for pharmacists and their teams.

Patients who consent to participate in the Flu Vaccination Service must complete a consent declaration before being administered the vaccine; this consent declaration is part of the national [Flu Vaccination Record and Consent Form](#) (Annex D of the service specification).

Completion of this form grants consent to the administration of the vaccine and the sharing of information about the administration of the vaccine with the patient's GP practice. It also grants consent for the sharing of relevant information, where appropriate with NHS England and the NHS BSA for the purpose of post payment verification.

### *Information for patients*

Each patient being administered a vaccine should be given a copy of the manufacturer's patient information leaflet about the vaccine.

### *Referral of patients eligible for other vaccinations*

Patients who are eligible for other vaccinations, for example, pneumococcal and shingles vaccines, should be referred to their GP practice for these vaccinations (or they can be administered by the pharmacy if they are contracted to do so under the terms of a Local Enhanced Service).

### *Clinical waste*

Contractors are required to make arrangements for the removal and safe disposal of any clinical waste related to the provision of this service; NHS England will not make these arrangements on behalf of contractors.

Contractors must also ensure that staff are appropriately trained and made aware of the risks associated with the handling and disposal of clinical waste and that correct procedures are used to minimise those risks. A needle stick injury procedure must be in place.

### *Occupational health*

Contractors must ensure that pharmacists involved in the provision of this service are advised that they should consider being vaccinated against hepatitis B and be advised of the risks should they decide not to be vaccinated.

### *Service records and IT support for the service*

It has not been possible for NHS England to put in place a national IT solution to support provision of the service and electronic notification of GP practices of vaccination of their patients. However, in many areas LPCs and local NHS England teams have been able to arrange IT support for the service. Contact your LPC to find out whether that is the case in your area.

The national [Flu Vaccination Record and Consent Form](#) should be used to maintain a clinical record for the Flu Vaccination Service and to record patient consent. If a contractor has access to an IT system which allows capture of the data elements within the Flu Vaccination Record and Consent Form, this can be used to maintain the clinical record for the service, but a printed version of the form will need to be produced from the system to allow the patient's consent to be recorded in writing.

### *Patient questionnaire*

Patients must be asked to complete a copy of the [national patient questionnaire](#) following administration of the vaccine.

NHS England has had an [IT platform](#) developed to enable patient questionnaires to be completed electronically either by the patient themselves or with help from the pharmacy team. Where patients complete a paper version of the patient questionnaire, contractors should utilise the functionality available on the IT platform to submit the patient's responses to the questionnaire so that these responses can be collated and analysed along with those submitted electronically. A [guidance document](#) on how to complete this process is available on the IT platform.

Information from these completed patient questionnaires will be used by NHS England to evaluate the Flu Vaccination Service.

### *Communicating with GP practices*

Contractors must ensure that a notification of the vaccination is sent to the patient's GP practice on the same day the vaccine is administered or on the following working day. This can be undertaken by post, hand delivery, fax, secure email or secure electronic data interchange.

If an electronic method is used to transfer data to the relevant GP and a problem occurs with this notification platform, the contractor should ensure a hard copy of the paperwork is sent or faxed to the GP practice.

Where the notification to the GP practice is undertaken via hardcopy/fax the [national GP Practice Notification Form](#) must be used.

The information sent to the GP practice should include the following details as a minimum:

- a. the patient's name, address, date of birth and NHS number (where known);
- b. the date of the administration of the vaccine;
- c. the applicable Read V2, SNOMED CT or CTV3 codes;
- d. any adverse reaction to the vaccination and action taken/recommended to manage the adverse reaction; and
- e. reason for patient being identified as eligible for vaccination (for example, aged 65 or over, has diabetes, etc).

Where a patient presents with an adverse drug reaction following the initial vaccination and the pharmacist believes this is of clinical significance, such that the patient's GP practice should be informed, this information should be

shared with the GP practice as soon as possible either via the GP Practice Notification Form or if that has already been sent to the GP practice, by an alternative method of communication.

### *Provision of data to NHS England*

Payment claims for the service will be made to the Payment Authority (see section k for further details) and they will subsequently share data on service provision with NHS England.

Relevant information from the national Flu Vaccination Record and Consent Form may, on request, be shared with NHS England and NHS BSA for the purpose of post payment verification.

Data from the completed patient questionnaires will be shared with NHS England.

### *Availability of the service*

Contractors will naturally want to ensure that their service is as accessible as possible for patients in order that they can maximise service provision. This is also of importance to NHS England and as a consequence the service specification states that contractors should seek to ensure that the service is available throughout the pharmacy's contracted opening hours (i.e. core and supplementary opening hours). Contractors will therefore want to ensure that locums or relief pharmacists are appropriately trained in order to ensure continuity of service provision across the opening hours of the pharmacy.

## **k) Payments and the process for claiming payments**

Contractors providing the Flu Vaccination Service will be paid £7.64 per administered dose of vaccine plus an additional fee of £1.50 per vaccination (i.e. a total of £9.14 per administered vaccine). The additional fee is in recognition of costs incurred relating to the provision of the service including training and disposal of clinical waste. Such costs are not reimbursed elsewhere in the CPCF.

Contractors will also be reimbursed for the vaccine costs at the basic price (list price) of the individual vaccine administered and an allowance at the applicable VAT rate will also be paid.

Funding for the service comes from the NHS vaccination budget and is in addition to and outside of community pharmacy funding for 2016/17. The total funding delivered will be dependent on uptake of the service, but no cap has been set for this.

Claims for payment for the service and reimbursement of vaccine costs are to be made via a form sent to the Pricing Authority as part of the end of month script bundle submission process. Contractors should download and print copies of the claim form from the [NHS BSA website](#). Payment claims for vaccinations administered during March **must be submitted to the Pricing Authority by the 5th of April 2017** in line with the FP34C process. Late claims will not be processed and contractors will not receive payment for vaccinations claimed for.

## **l) Provision of the service in care homes/facilities**

One of the eligible patient groups for the service is people living in long-stay residential care homes or other long-stay care facilities. The Flu Vaccination Service must be provided on the pharmacy premises in the consultation room, but where a contractor has been asked to vaccinate people in a long-stay residential care home or other long-stay care facility, and the contractor agrees to vaccinate these patients, they may do this at the care home/facility if this is approved by the local NHS England team.

The contractor must follow the protocols set out in Annex C of the service specification, which includes seeking approval from NHS England to provide vaccinations at the care home/facility using the request form included in

Annex C of the service specification. The contractor must follow appropriate cold-chain storage measures and ensure that the setting at the care home/facility used to administer the vaccinations is appropriate (see section g).

### m) Discontinuation of service provision

If a contractor ceases to provide the Flu Vaccination Service, they must notify NHS England that they are no longer providing the service via the NHS BSA as soon as possible and within one week of ceasing service provision. This should be done by completing the service cessation form, which is available on the [NHS BSA website](#).

### n) Promoting the service to patients

Materials to help promote the Flu Vaccination Service to patients are available from and via the [PSNC website](#). The National Pharmacy Association (NPA) and some LPCs have also developed materials to help contractors promote the service.

If contractors develop their own marketing materials to promote the service, they must ensure they comply with the requirements of the [Terms of Service](#) relating to promotion of services funded by the NHS.

If the NHS logo is used in materials related to the service, this must comply with [the guidelines for use of the NHS identity by community pharmacies](#).

If contractors are using social media to advertise the Flu Vaccination Service, the [NPA](#), the [Royal Pharmaceutical Society](#) and the [General Pharmaceutical Council](#) have all issued guidance on social media, which should be considered when advertising the service in this way.

### o) Frequently Asked Questions

The PSNC website contains a wide range of [Frequently Asked Questions \(FAQs\)](#) and answers and these will be updated on an ongoing basis.

### p) Further information and resources

The following links provide further information on the service and vaccinations and many are essential reading for pharmacists who will be providing the service.

[Flu Vaccination Advanced service specification](#)

[The national Patient Group Direction](#)

#### **PHE guidance / briefing documents**

[The Annual Flu Letter – The national flu immunisation programme 2016/17 \(DH/NHS England/PHE\)](#)

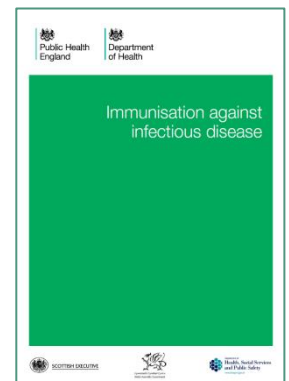
[Flu vaccines for the 2016/17 season](#)

[Public Health England flu programme website hub page](#)

[Flu plan 2016/17](#)

[Immunisation against infectious disease: the green book](#)

[Vaccine Update](#)



#getreadyforflu



[Public Health England Protocol for ordering, storing and handling vaccines](#)

**Practical resources**

Practical resources to support provision of the Flu Vaccination Service are available on the [PSNC website](#).

If having read this PSNC Briefing and the information and resources on the PSNC website you have further queries about the Flu Vaccination Service or you require more information please contact [Zainab Al-Kharsan, Service Development Pharmacist](#).

## Annex 1 - Checklist for the Flu Vaccination Service

Preparing to provide the service		Completed
1.	Visit the <a href="#">PSNC website</a> and read through the PSNC Briefings and other service information / documentation and familiarise yourself with the resources available.	<input type="checkbox"/>
2.	Read the service specification.	<input type="checkbox"/>
3.	Read the national Patient Group Direction. Each pharmacist who will provide the service must complete the Practitioner declaration and the Authorising Manager declaration must then be completed (see section e).	<input type="checkbox"/>
4.	Consider training requirements for pharmacists – a list of training providers can be found on the <a href="#">PSNC website</a> (some LPCs are also arranging training events).	<input type="checkbox"/>
5.	Ensure each pharmacist completes the Declaration of Competence (DoC) for the service. A copy of the completed DoC statement for each pharmacist providing the service must be retained at the pharmacy (see section h).	<input type="checkbox"/>
6.	Consider training requirements for other members of the team to ensure they understand the service and who's eligible for vaccination.	<input type="checkbox"/>
7.	Check whether relevant staff (including all pharmacists who will be administering vaccines) have already had a hepatitis B vaccination. If not, relevant staff should be offered this. PHE's advice in <a href="#">the Green Book</a> is that hepatitis B vaccination is recommended for healthcare workers who may have direct contact with patients' blood, blood-stained body fluids or tissues. This includes any staff who are at risk of injury from blood contaminated sharp instruments. The <a href="#">Health and Safety Executive guidance on blood borne viruses</a> provides further advice on this issue.	<input type="checkbox"/>
8.	Ensure your consultation room meets the requirements for provision of the service (see section g).	<input type="checkbox"/>
9.	Ensure your fridge meets the requirements for <a href="#">vaccine storage</a> .	<input type="checkbox"/>
10.	Develop a Standard Operating Procedure (SOP) for the service (see section g). <ul style="list-style-type: none"> <li>Decide what role support staff will have in providing the service and document this in the SOP;</li> <li>Review your working practices to ensure that the Flu Vaccination Service can be built into routine work as well as continuing to offer Medicines Use Reviews (MURs), New Medicine Service (NMS) and any local services; and</li> <li>Consider whether you will use an appointment system for the service or whether you will allow 'walk ins', as that will need to be reflected in your SOP.</li> </ul> Ensure relevant staff have read, understand and have signed up to the new SOP.	<input type="checkbox"/>
11.	Develop or complete other documentation to support the provision of the service, for example: <ul style="list-style-type: none"> <li>anaphylaxis telephone card (display near the phone);</li> <li>chaperone policy</li> <li>needle stick injury procedure; and</li> <li>guidance on infection control procedures, including hand hygiene guidance.</li> </ul> Templates to support development of these resources are available from a range of sources.	<input type="checkbox"/>
12.	If not already in place, arrange a clinical waste contract to ensure collection and safe disposal of clinical waste created as a result of provision of the service.	<input type="checkbox"/>

13.	Determine whether your local NHS England team has made an IT system available to support record keeping and notification of GP practices of vaccinations undertaken. Ensure you have the required logon credentials for the system and are familiar with how to use it.	<input type="checkbox"/>
14.	Order your vaccines (see section i for a list of vaccines).	<input type="checkbox"/>
15.	Ensure you have any necessary equipment/supplies needed for provision of the service, for example: <ul style="list-style-type: none"> <li>• a spill kit;</li> <li>• an anaphylaxis pack (check the expiry of the adrenaline injection); and</li> <li>• clinical waste bin.</li> </ul>	<input type="checkbox"/>
16.	Decide how you are going to promote the service and recruit patients in your pharmacy. Options include: <ul style="list-style-type: none"> <li>• Posters, leaflets, writing to patients, flyers – templates are all available on the <a href="#">PSNC website</a>, from the NPA and possibly from your LPC; and</li> <li>• Using social media to advertise the service – the <a href="#">NPA</a>, the <a href="#">Royal Pharmaceutical Society (RPS)</a> and the <a href="#">GPhC</a> have guidance on using social media.</li> </ul>	<input type="checkbox"/>
17.	Sign up to <a href="#">PSNC's email newsletters</a> to ensure you don't miss out on further information on the service as it becomes available.	<input type="checkbox"/>
18.	Once you are ready to provide the service, inform NHS England of your intention to provide the service via the declaration on the NHS BSA website.	<input type="checkbox"/>

Daily checks when providing the service		Completed
1	Ensure your consultation room is clean and tidy and clear of clutter and there are no trip hazards.	<input type="checkbox"/>
2	Check you have sufficient equipment/supplies needed for provision of the service.	<input type="checkbox"/>
3	Check the fridge temperature.	<input type="checkbox"/>
4	Ensure you have supplies of the relevant service paperwork.	<input type="checkbox"/>
5	Check your stock of vaccine is sufficient for likely demand.	<input type="checkbox"/>

[PSNC Briefing 046/15: Pharmacy flu vaccination process](#) provides advice on how to provide the flu vaccination service in your pharmacy.