**[Insert PCN name] PCN Community Pharmacy**

**NHS Flu Vaccination Plan**

**Pharmacies providing an NHS Flu vaccination service in the PCN:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Pharmacy** | **ODS code** | **Postcode** | **By appointment** | **Walk-in (no appointment needed)** | **Evenings (after 5pm)** | **Saturdays** | **Sundays** | **Off-site provision** |
| *Example: Sample Pharmacy* | *FN345* | *TN12 5ME* | *Y* | *Y* | *Y*  *New* | *Y* |  |  |
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**Pharmacies providing vaccines at an off-site event:**

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| --- | --- | --- | --- |
| **Name of Pharmacy** | **ODS code** | **Postcode** | **Planned venue and date** |
| *Example: Sample Pharmacy* | *FN345* | *TN12 5ME* | *Station Carpark 10/10/2020* |
| *Example: Sample Pharmacy* | *FN345* | *TN12 5ME* | *Village Hall 16/10/2020* |
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*Add additional rows to table as required.*

**Pharmacies that can provide domiciliary or care home vaccinations:**

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| --- | --- | --- | --- | --- | --- | --- |
| **Name of Pharmacy** | **ODS code** | **Postcode** | **Domiciliary vaccinations** | **Were domiciliary vaccinations provided last year?** | **Care Home vaccinations** | **Were care home vaccinations provided last year?** |
| *Example: Sample Pharmacy* | *FN345* | *TN125ME* | *Y* |  | *Unsure yet* |  |
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**Other ways in which pharmacies in the PCN are supporting the NHS flu vaccination campaign:**

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| --- |
| *What additional opportunities could be considered to support the PCN with NHS flu vaccinations? Add agreed actions here.* |