







# READING HEALTH AND WELLBEING BOARD

DATE OF MEETING:	9 <sup>th</sup> OCTOBER 2020		
REPORT TITLE:	Annual Influenza Report		
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## 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This paper is to update the Health and Wellbeing Board on the performance of the influenza vaccine campaign in winter 2019-20 to summarise lessons learned and to inform the board of changes to the national flu programme for the coming flu season and how these will be implemented locally.
- 1.2 Appendices:
  - Appendix 1 Berkshire Seasonal Influenza Campaign; 2019-20 flu activity summary, final vaccine uptake figures and plans for 2020-21
  - Appendix 2 Reading's Draft Flu Communication Plan 2020-21

## 2. RECOMMENDED ACTION

- **2.1** Agree and endorse the multi-agency approach, noting the expanded cohort for 2020-21 flu vaccination campaign
- **2.2** Support respective organisations to fulfil their responsibilities asset out in the national flu plan
- **2.3** Be flu champions take every opportunity to promote the vaccine and debunk myths
- **2.4** Lead by example, take up the offer of a vaccine where eligible.

### 3. POLICY CONTEXT

- 3.1 Seasonal influenza (Flu) is a key factor in NHS winter pressures. The National Flu Plan aims to reduce the impact of flu in the population through a series of complementary measures. Flu vaccination is commissioned by NHS England for groups at increased risk of severe disease or death should they contract flu.
- 3.2 The aims of the immunisation programme in 2019-20 were to;
  - Actively offer flu vaccine to 100% of people in eligible groups.
  - Immunise 60% of children, with a minimum 40% uptake in each school

- Maintain and improve uptake in over 65s and 6 months to 64 years in clinical risk groups with at least 75% uptake for those aged 65 years and over and 75% uptake for health and social care workers
- Improve uptake over and above last season among those in clinical risk groups and prioritise those with the highest risk of mortality from flu but who have the lowest rates of vaccine uptake (i.e. immunosuppression, chronic liver and neurological disease, including people with learning disabilities); achieving at least 55% uptake in all clinical risk groups and maintain higher rates where they have previously been achieved
- 3.4 Uptake of the flu vaccination in 2019-20 in Reading was good. In those aged over 65, those under 65 but in a "risk group", pregnant women and those aged 2 and 3 uptake improved compare to 2018-19. Uptake in the school aged programme dropped by 0.5%
- 3.5 The COVID-19 pandemic has obviously had an impact on the planned 2020-21 immunisation programme. Co-infection with both Flu A and COVID-19 will lead to more severe disease and the impact on the health system of a con-current second wave of COVID-19 and heavy flu season could be extremely challenging. Therefore the Influenza Programme has been updated accordingly for the 2020/21 season. The primary changes include expansion of eligibility criteria, delivery of the vaccination programme and ambition to significantly increase uptake

# 4. THE PROPOSAL

- 4.1 Under the NHS flu vaccination programme, the following groups will be offered vaccination during the 2020/21 season (New eligible groups added for the 2020/21 NHS flu vaccination programme are denoted in bold)
  - All children aged from 2-11 on 31<sup>st</sup> August 2020
    - Year 7 children in secondary schools (aged 11 on 31<sup>st</sup> August 2020)
  - Adults aged 65 years or older as of 31<sup>st</sup> March 2021
    - Those aged from 6 months to 65 years of age, in an at-risk clinical group
      - Chronic respiratory/heart/kidney/liver/neurological condition
      - Weakened immune system (splenic dysfunction, HIV/AIDS, chemotherapy or other immunosuppressant medication)
      - o Diabetes
      - Learning disability
      - Morbidly obese (BMI 40 or above)
      - Any other condition which a clinician feels may be exacerbated by influenza infection or hospitalisation
  - Pregnant women
  - Household contacts of those on NHS Shielded Patient List or immunocompromised patients those who expect to share living conditions on most days so contact will be unavoidable
  - People living in long-stay residential care homes or other long-stay care facilities where rapid spread following introduction of the infection is likely to lead to high morbidity and mortality
  - Those who are in receipt of a carer's allowance, or who are the main carer of an elderly or disabled person whose welfare may be at risk if their carer falls ill
  - Health and social care staff, employed by a registered residential care/nursing home or registered domiciliary care provider, who are directly involved in the care of vulnerable patients/clients who are at increased risk from exposure to influenza
  - Health and care staff, employed by a voluntary managed hospice provider, who are directly involved in the care of vulnerable patients 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

• All frontline health and social care workers

Subject to vaccine supply and following prioritisation of the above eligible groups, vaccinations may also be offered to the following individuals:

- Adults aged between 50-64 years
- 4.2 Responsibility for the flu immunisation programme are as follows
- 4.2.1 Local authorities, through their DsPH have responsibility for:
  - providing appropriate advocacy with key stakeholders and challenge to local arrangements to ensure access to flu vaccination and to improve its uptake by eligible populations
  - providing leadership, together with local resilience partners to respond appropriately to local incidents and outbreaks of flu infection
  - promoting uptake of flu vaccination among eligible groups, for example older people in residential or nursing care, either directly or through local providers
  - promoting uptake of flu vaccination among those staff providing care for people in residential or nursing care, either directly or through local providers
- 4.2.2 <u>CCGs</u> are responsible for
  - quality assurance and improvement which extends to primary medical care services delivered by GP practices including flu vaccination and antiviral medicines
  - it is now established that 'CCGs will commission appropriate primary care clinicians to respond to flu outbreaks, by assessing exposed persons for the antiviral treatment or prophylaxis and completing a patient specific direction for this purpose'. In Berkshire, both CCGs have commissioned out of hours providers to provide this service
- 4.2.3 <u>GP practices and community pharmacists</u> are responsible for;
  - educating patients, particularly those in at-risk groups, about the appropriate response to the occurrence of flu-like illness and other illness that might be precipitated by flu
  - ordering the correct amount and type of vaccine for their eligible patients, taking into account new groups identified for vaccination and the ambition for uptake
  - storing vaccines in accordance with national guidance
  - ensuring vaccination is delivered by suitably trained, competent healthcare professionals who participate in recognised on-going training and development in line with national standards
  - maintaining regular and accurate data collection using appropriate returns
  - encouraging and facilitating flu vaccination of their own staff
  - In addition, GP practices are responsible for:
    - ordering vaccine for children from PHE central supplies through the ImmForm website and ensuring that vaccine wastage is minimised
    - $\circ~$  ensuring that all those eligible for the flu vaccine are invited personally to receive their vaccine
- 4.2.4 Locally, <u>Berkshire Healthcare Foundation Trust</u> Schools Immunisation Team is commissioned to deliver the flu immunisation programme to children in school years Reception to Year 7 through a schools-based delivery model
- 4.3 Uptake ambitions for 2020-21 are as follows

Eligible Groups	Uptake Ambition
Aged 65 years and older	At least 75%
At-risk clinical group	At least 75%
Pregnant women	At least 75%
Children aged 2-3 years	At least 75%
All primary school aged children and Year 7	At least 75%

aged secondary school children	
Frontline health and social care workers	100% offer

4.4 Reading Borough Council has committed to supporting staff under its employment to access the flu vaccination this winter. For those not in an NHS eligible group the cost of vaccination can be reimbursed via the usual expenses system. This helps to ensure the resilience of the workforce within the local Integrated Care Partnership, essentially mirroring the offer made to NHS employed staff.

## 5. CONTRIBUTION TO READING'S HEALTH AND WELLBEING STRATEGIC AIMS

- 5.1 The annual flu campaign contributes to the following 2 strategic aims of the health and wellbeing board
  - Supporting people to make healthy lifestyle choices (with a focus on tooth decay, obesity, physical activity and smoking)
  - Increasing breast and bowel screening and prevention services

#### 6. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

- 6.1 The Council declared a Climate Emergency at its meeting on 26 February 2019 (Minute 48 refers).
- 6.2 The supply chain for flu vaccination is coordinated nationally and Reading Borough Council is not responsible for its organisation. Staff will be encouraged to undergo vaccination locally to their home residence via local community pharmacy and as such the carbon footprint associated with travel to access healthcare services will be as minimal as possible.

#### 7. COMMUNITY & STAKEHOLDER ENGAGEMENT

7.1 Formal community consultation is not required for this ongoing annual national programme. However, stakeholder engagement is undertaken each summer to understand how the programme ran in the previous year and lesson that can be learned and take forward into planning for the future years.

## 8. EQUALITY IMPACT ASSESSMENT

8.1 Equality Impact Assessment (EIA) is not relevant to the running of this ongoing annual national programme. However, efforts are taken each year to promote uptake each year in population sub-groups less likely to access vaccination.

#### 9. LEGAL IMPLICATIONS

- 9.1 Not applicable
- 10. FINANCIAL IMPLICATIONS
- 10.1 Not applicable

#### 11. BACKGROUND PAPERS

11.1 <u>https://www.gov.uk/government/collections/annual-flu-programme</u>