SERVICE SPECIFICATION

Surrey County Council (SCC) Influenza Vaccination Scheme

Service	Surrey County Council Influenza Vaccination Scheme for Employees
Provider	Community Pharmacies within the boundaries of SCC
Period	1 st October 2023 – 31 st March 2024

Purpose

SCC is adhering to the annual recommendations and best practice guidance set out by the Department of Health and The Chief Medical Officer (CMO) in **The national flu immunisation programme 2023 to 2024**¹ to protect the local population against influenza and support the resilience of the health and care system.

The national flu immunisation programme continues to include frontline health and social care workers as recommended to receive flu immunisation to reduce the transmission of influenza to vulnerable people in both residential and community settings.

Eligible health and social care workers include the following:

- 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/clients who are at increased risk from exposure to influenza.
- Health and social care workers employed through Direct Payments (personal budgets) and/or Personal Health Budgets, such as Personal Assistants, to deliver domiciliary care to patients and service users.

SCC has agreed to extend the flu immunisation programme to eligible SCC employees. SCC employees eligible to receive the free flu vaccination will be notified by their line manager. Surrey Heartland ICB colleagues are also included under this scheme through partnership working between the Surrey County Council and Surrey Heartlands Integrated Care Board.

The vaccinations will be administered to individual staff presenting at community pharmacies commissioned to provide the service. All eligible staff (Council, ICB and SCC Schools) must provide their Identification (ID) badge or payslip as proof of eligibility for the service.

Please note: Employees who meet the criteria for a FREE NHS flu vaccination (see Annex A) will be redirected by the Community Pharmacy Seasonal Influenza Vaccination Advanced Service. Flu vaccination - ICS (surreyheartlands.org)

Aims

The aims of this Community Pharmacy Service Specification are:

- To extend the national flu immunisation programme to eligible Surrey County Council, Surrey Heartlands ICB and SCC school employees
- To reduce the morbidity and mortality rates from influenza disease by reducing the transmission of influenza to vulnerable people
- To maintain business continuity by protecting front-line workers within the local authority and care settings.

 To maximise the uptake of influenza vaccinations to reduce pressure on the NHS and social care sectors in line with national guidance.

Evidence Base

Vaccination of staff with direct service user contact against influenza has been shown to significantly lower rates of influenza-like illness, hospitalisation and mortality in the elderly in healthcare settings and other vulnerable groups including special educational needs and disabilities and pregnant women.

Service Outline

- Pharmacy Contractors must also be offering the Community Pharmacy Seasonal Influenza Vaccination Advanced Service to be eligible to provide the SCC locally commissioned service (LCS).
- SCC will notify pharmacy contractors of the eligibility criteria for SCC employees to receive a vaccine via the locally commissioned service.
- The service will operate from the 1st October 2023 until the 31st March 2024 or as soon thereafter as vaccines are available).
- SCC employees eligible to receive a vaccine under the locally commissioned service must book an
 appointment with the community pharmacy from the list of commissioned pharmacies provided by SCC
 and follow the process required by the pharmacy to receive the vaccination.
- Employees must present their ID at the booked appointment to be eligible to receive a free vaccination under the LCS.
- It is a requirement of the scheme that the contractor undertakes in accordance with their service specification, Patient Group Direction (PGD) and Standard Operating Procedures(SOPs) to offer immunisation from the beginning of the scheme until the end of the scheme as stated above unless a shortage of vaccines causes the scheme to end prematurely.
- Pharmacists must be authorised to work under PGDs provided by their own organisation. The NHS Inactivated Vaccine PGD cannot be used for the SCC locally commissioned service.
- The seasonal flu vaccination to be administered under this service is one of the flu vaccines listed in the NHS England and NHS Improvement, Public Health England and Department of Health and Social Care annual Flu Plan².
- Pharmacy contractors must ensure that vaccinations offered under this service are provided in line with Immunisation against infectious disease (The Green Book)³, which outlines all relevant details on the background, dosage, timings and administration of the vaccination, and disposal of clinical waste.
- The pharmacy contractor must have a standard operating procedure (SOP) in place for this service, which
 includes procedures to ensure cold chain integrity. All vaccines are to be stored in accordance with the
 manufacturer's instructions and all refrigerators in which vaccines are stored are required to have a
 maximum / minimum thermometer. Readings are to be taken and recorded from the thermometer on all
 working days. Where vaccinations are undertaken off the pharmacy premises, the pharmacy contractor
 must ensure that appropriate measures are taken to ensure the integrity of the cold chain.
- Each person being administered a vaccine should be given a copy of the manufacturer's patient information leaflet about the vaccine or be directed to a web-based version of the leaflet.
- Prior to vaccination, consent must be sought from each person. This consent should cover the administration of the vaccine and be recorded in the pharmacy's clinical record for the service. All paperwork must be managed in line with Records Management Code of Practice for Health and Social Care.⁴
- Where a person 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.

- The pharmacy contractor is required to report any patient safety incidents in line with the Clinical Governance Approved Particulars for pharmacies.
- The pharmacy contractor is required to make arrangements for the removal and safe disposal of any clinical waste and PPE related to the provision of this service (including where the vaccination is undertaken off the pharmacy premises).

Training and premises requirements

- Vaccinations under this service must take place in a private area. In order to provide the service, pharmacies must have a consultation room, this service can also be conducted offsite in line with standards operating procedures. Vaccinations can be offered in any area of the pharmacy where suitable facilities are available and patient confidentiality is able to be respected. However, the vaccination must take place in the consultation room wherever the patient expresses this preference. The consultation room must comply with the minimum requirements set out below:
 - the consultation room must be clearly designated as an area for confidential consultations
 - o it must be distinct from the general public areas of the pharmacy premises
 - it must be a room where both the person receiving services and the pharmacist providing those services are able to sit down together and talk at normal speaking volumes without being overheard by any other person (including pharmacy staff), other than a person whose presence the patient requests or consents to (such as a carer or chaperone)
 - o it must be a room where infection control standards can be maintained
- The pharmacy contractor must ensure that individuals providing the service are competent to do so. Registered pharmacy professionals should demonstrate to the pharmacy contractor that they have the necessary knowledge and skills to provide the service by completing the vaccination service Declaration of Competence (DoC)^{5.} The pharmacy contractor must keep on the pharmacy premises copies of each DoC completed by any registered pharmacy professionals that they employ/engage to deliver the service.
- The pharmacy contractor must ensure that individuals providing the service are aware of the National Minimum Standards⁶ in relation to vaccination training and are compliant with the training requirements within those Standards that apply, including the requirements for face to face training and refresher training for injection technique and basic life support (including administration of adrenaline for anaphylaxis).
- The pharmacy contractor must 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.
- The pharmacy contractor must ensure that staff 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 Availability

- The pharmacy contractor should ensure that locums, relief pharmacists, and other staff are adequately trained, so as to ensure continuity of service provision.
- If the pharmacy temporarily or permanently ceases to provide the service, they should notify the commissioner as soon as possible.
- The pharmacy contractor must ensure the service is accessible, appropriate and sensitive to the needs of all service users. No eligible person shall be excluded or experience particular difficulty in accessing and effectively using this service due to their race, gender, disability, sexual orientation, religion or belief, gender reassignment, marriage or civil partnership status, pregnancy or maternity, or age.

Data collection and reporting requirements

- The pharmacy contractor must maintain appropriate records to ensure effective ongoing service delivery. The minimum requirements for the information which should be included in a contractor's record of provision of the service to a patient are as follows: Name and address of patient, date of birth, GP practice, name of vaccine including batch number and expiry date, date, site and route of administration, adverse effects (if applicable) and name and GPhC registration of pharmacist administering the vaccine.
- The pharmacy contractor must record the employee place of work is County Council or ICB. This information must be recorded on PharmOutcomes.

Payment arrangements

- Claims for payments for this programme should be made via the PharmOutcomes platform provided by SCC.
- A professional fee of £11.60 plus the drug cost in line with the Drug Tariff determination per administered dose of vaccine. This amount includes a contribution in recognition of expenses incurred by community pharmacies in providing this service including admin, data sharing and PPE cost. These include training and disposal of clinical waste. Such costs are not reimbursed elsewhere within the Community Pharmacy Contractual Framework.
- The pharmacy contractor will also be reimbursed for the drug Tariff price of the vaccine. An allowance at the applicable VAT rate will also be paid.
- The pharmacy contractor will not be reimbursed or remunerated, under this locally commissioned service, for vaccines administered to patients outside of the eligibility criteria set out in the service specification.

References

- The national flu immunisation programme 23/24
- Annual Flu Programme National flu immunisation programme plan GOV.UK (www.gov.uk)
- The Green Book Chapter on Seasonal Influenza_ <u>https://www.gov.uk/government/publications/influenza-the-green-book-chapter-19</u>
- Records Management Code of Practice for Health and Social Care https://digital.nhs.uk/data-and-information/looking-after-information/data-security-and-information-governance/codes-of-practice-for-health-and-care/records-management-code-of-practice-for-health-and-social-care-2016
- The Declaration of Competence is available on the CPPE website: <u>Declaration of Competence (cppe.ac.uk)</u>
- Immunisation training standards for healthcare practitioners GOV.UK (www.gov.uk)

Signed Agreement

Signed agreement in providing the Surrey County Council Influenza Vaccination Scheme for Employees

Please complete and return form by email to:: public.health@surreycc.gov.uk

SIGNED AGREEMENT – SCC INFLUENZA VACCINATION SCHEME FOR EMPLOYEES

Pharmacy Name	
Pharmacy Address and phone number	
Pharmacy NHS email address	
Lead contact for the service	
I confirm that the pharmacy listed above has an appropriate private PGD, suitably trained staff	Signed:
and will provide the service in accordance with the specification listed	Dated:

Flow chart for the SCC Influenza Vaccination Scheme for Employees



Annex A: Groups included in the NHS Community Pharmacy Seasonal Influenza Vaccination Advanced Service

This service covers those patients most at risk from influenza aged 18 years and older, as listed below.

The selection of these eligible groups has been informed by the target list from the annual Flu Plan¹ and Immunisation against infectious disease: The Green Book⁵.

Eligible groups	Further details		
All people aged 65 years and over	Including those becoming age 65 years by 01 April 2023.		
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	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). Congenital heart disease, hypertension with cardiac		
disease (COPD) or bronchitis	complications, chronic heart failure, individuals requiring regular medication and/or follow-up for ischaemic heart disease.		
Chronic heart disease, such as heart failure	Chronic kidney disease at stage 3, 4 or 5, chronic kidney failure, nephrotic syndrome, kidney transplantation.		
Chronic kidney disease at stage three, four or five	Cirrhosis, biliary atresia, chronic hepatitis.		
Chronic liver disease Chronic neurological disease, such as Parkinson's disease or motor neurone disease or	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 disabilities, multiple sclerosis and related or similar		
Learning disability Diabetes	conditions; or hereditary and degenerative disease of the nervous system or muscles; or severe neurological disability.		
Immunosuppression, a weakened immune system due to disease (such as HIV/AIDS) or treatment (such as cancer treatment)	Type 1 diabetes, type 2 diabetes requiring insulin or oral hypoglycaemic drugs, diet-controlled diabetes.		
	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 disorder). Individuals treated with or likely to be treated with systemic		

	more than a month at a dose equivalent to e at 20mg or more per day.

	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.
Morbid obesity	This also includes conditions such as homozygous sickle cell disease and coeliac syndrome that may lead to splenic dysfunction.
	Adults with a Body Mass Index ≥40kg/m ²
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 who are household contacts, aged 18 and over, specifically individuals who expect to share living accommodation on most days over the winter and, therefore, for whom continuing close contact is unavoidable.
	Vaccination is recommended for 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. For the pharmacy service this only applies to those aged 18 or over.
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.
Social care workers	Health & 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. Vulnerable means those patients/clients in a clinical risk group for flu or who are aged 65 years and over.

Hospice workers	Health and care 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. Vulnerable means those patients/ clients in a clinical risk group for flu or who are aged 65 years and over.
Payments and/or Personal Health	Health and social care workers employed through Direct Payments and/or Personal Health Budgets to deliver domiciliary care to patients and service users.