SEASONAL INFLUENZA CAMPAIGN

Title of Report: 2015-16; NATIONAL AND LOCAL

ACTIONS

Report to be considered by:

The Health and Wellbeing Board

Date of Meeting: 26th November 2015

Purpose of Report: To update the Health and Wellbeing Board on local implementation of national Flu plan for 2015-16.

Recommended Action: For information only.

When decisions of the Health and Wellbeing Board impact on the finances or general operation of the Council, recommendations of the Board must be referred up to the Executive for final determination and decision.				
Will the recommendation require the matter to be referred to the Council's Executive for final determination?	Yes:	No:		
Is this item relevant to equality?	Please tick relevant boxes	Yes	No	
Does the policy affect service users, employees or the wider community and: Is it likely to affect people with particular protected characteristics differently? Is it a major policy, significantly affecting how functions are delivered? Will the policy have a significant impact on how other organisations operate in terms of equality? Does the policy relate to functions that engagement has identified as being important to people with particular protected characteristics?				
Outcome Where one or more 'Yes' boxes are ticked, the item is relevant to equality. In this instance please give details of how the item impacts upon the equality streams under the executive report section as outlined.				
Health and Wellbeing Board Chairman details				

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Executive Report

1. Introduction

1.1 For the Board to note progress of local implementation and to consider their role in promoting uptake of flu vaccine among staff and residents of care homes, for example through Health Watch.

2. KEY POINTS:

- The national Flu Plan was published in March 2015; immunisation of at-risk groups is a key component of the Flu Plan.
- Immunisation is commissioned by NHS England and delivered by a mix of providers.
- Following a Berkshire workshop in June 2015, local stakeholders have worked together to develop and implement flu plans
- Local authorities have a key role in promoting and increasing vaccine uptake among eligible groups and are responsible for provision of vaccine to frontline health and social care workers they employ
- Other employers of health and social care staff, (e.g. care home staff and other carers) have a responsibility to provide vaccine to frontline staff they employ
- NHS employers have a responsibility to provide vaccine to all frontline staff
- Flu vaccine is available from October to March 2015, eligible individuals are encouraged to get vaccinated as early as possible
- Uptake and flu diagnoses are monitored throughout flu season and fed back to local stakeholders to enable appropriate response

3. BACKGROUND

3.1 Seasonal Flu

Flu is a key factor in NHS winter pressures. It impacts on both those who become ill, the NHS services that provide direct care, and on the wider health and social care system that supports people in at-risk groups. Flu occurs every winter in the UK. The National Flu Plan aims to reduce the impact of flu in the population through a series of complementary measures. These measures help to reduce illness in the community and unplanned hospital admissions, and therefore pressure on health services generally and A&E in particular. The plan is therefore a critical element of the system-wide approach for delivering robust and resilient health and care services throughout the year. Successful local implementation of the flu plan depends on partnership working; the roles and responsibilities of DH, NHS, PHE and Local Authorities in response to Flu are shown in

Figure 1.

3.2 The national flu immunisation programme

Flu vaccination remains the best way to protect people from flu. People in certain groups are at increased risk of severe symptoms if they contract flu, these groups are eligible for free flu vaccine.

- Adults aged 65 or above
- Children aged 2 to 4 years or in school years 1 and 2
- Pregnant women
- Paid and unpaid carers
- Frontline health and social-care workers
- People living in long-stay residential care homes,
- Adults and children (6 months to 64 years) with one or more of the following conditions;
 - o a heart problem
 - o a chest complaint or breathing difficulties, including bronchitis, emphysema or severe asthma
 - kidney disease
 - o lowered immunity due to disease or treatment (such as steroid medication or cancer treatment)
 - liver disease
 - stroke or a transient ischaemic attack (TIA)
 - diabetes
 - o a neurological condition, e.g. multiple sclerosis (MS), cerebral palsy or learning disability

It is important to continue to communicate the benefits of the vaccine among all recommended groups and to make vaccination as easily accessible as possible, including for frontline health and social care workers, including those employed by private organisations.

Figure 1: Roles and responsibilities response to seasonal flu	of local authorities and	l partner organisations	in

DH

- ·policy decisions on the response to the flu season
- holding NHS England and PHE to account through their respective framework agreements, the mandate, and the Section 7A agreements
- · oversight of the supply of antiviral medicines and authorisation of their use
- · authorising campaigns such as 'Catchit, Kill it, Bin it'

PHE

- planning and implementation of the national approach
- ·monitoring and reporting of key flu indicators
- •procurement and distribution of flu vaccine for children
- oversight of vaccine supply and the strategic reserve
- •advising NHS England on the commissioning of the flu vaccination programme
- •managing and co-ordinating the response to local incidents and outbreaks of flu
- public communications to promote uptake of flu vaccination and other aspects of combating flu such as hand hygiene

Local Authorities (through DPH)

- 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 independent scrutiny and challenge to the arrangements of NHS
 England, PHE and local authority employers of frontline social care staff and other
 providers of health and social care
- 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

CCG's

 quality assurance and improvement extending to primary medical care services delivered by GP practices including flu vaccination and antiviral medicines

Providers

- 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
- ordering vaccine for children from PHE central supplies through the ImmForm website and ensuring that vaccine wastage is minimised
- •storing vaccines in accordance with national guidance
- ensuring that all those eligible for the flu vaccine are invited personally to receive their vaccine
- 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

3.3 Aims of the flu immunisation programme

The aims of the immunisation programme are to;

- 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 immunosuppression, chronic liver and neurological disease, including people with learning disabilities

4. LOCAL ACTIONS

Across West Berkshire residents can access flu vaccine in a number of ways as set out in Table 1

Table 1: Access to flu vaccine for eligible groups

Group	Provider
Children aged 2 to 4	Primary Care
School years 1 and 2	School based programme, Berkshire
	Healthcare Trust
Special Schools	School based programme , Berkshire
·	Healthcare Foundation Trust
Adults aged 65 or above	Primary Care or Pharmacy
Adults in clinical risk groups	Primary Care or Pharmacy
Children in clinical risk groups	Primary Care (or through special school
	programme)
Paid and unpaid carers	Primary Care or Pharmacy
Pregnant Women	Maternity Unit at Royal Berkshire Hospital or
	Primary Care
Health and social care workers	Via occupational health arrangements

Local Flu Timeline

March 2015: Annual Flu letter and National Flu Plan published

June 2015: Berkshire Flu Workshop (Berkshire stakeholders)

July 2015: Berkshire Local Authority Flu Plans Produced (Berkshire Shared PH Team)

June – August 2015: Commissioning (NHS England)

July 2015: Local Communications Plan available (NHS England)

July-October 2015: Local communications and promotion campaigns developed

September 2015; Schools poster competition (Oxford Academic Health Sciences Network)

October 2015: Vaccine available to order

October 2015: National communications materials available

October-2015-March 2015: Flu campaign in operation

March 2015: Local review planned

5. Equalities

5.1 This item is not relevant to equality.

Appendices

There are no Appendices to this report.

Consultees

Dr Lise Llewellyn, Strategic Director of Public Health Lesley Wyman, Consultant in Public Health West Berkshire Council

Stakeholder workshop held in June 2015 including Dr Chris Cook and Harpal Aujla, Screening and Immunisation Team NHS England South - South Central and representatives from Berkshire West CCGs, GP practices, NHS provider organisations, Public Health England and public health teams across Berkshire.