

Report to:	Public Board of Directors	Agenda item:	12
Date of Meeting:	1 September 2021		

Title of Report:	Seasonal Influenza Programme: 2021/22 Checklist
Status:	Approval
Board Sponsor:	Dr Claire Radley, Director for People
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Appendices	Appendix A: RUH Flu Programme: 2021/22: Checklist Appendix B: RUH Evaluation of the 2020/21 RUH Influenza Programme

1.	Executive Summary of the Report
2021-22 Flu Vaccination Programme	
<p>The 2021/22 National Flu Immunisation Programme is the largest it has ever been. It is essential in protecting individuals, and supporting the resilience of the health and care system by reducing system pressures through effective immunity. Immunisation of staff within health and care is critical to managing staff capacity over the winter months. This has particular importance this year as it is anticipated that there will be an increased prevalence this winter of flu, RSV and other respiratory illness¹.</p> <p>The Department for Health and Social Care and Public Health England published an update to the 'The national flu immunisation programme 2020/21' letter dated 3 February 2021 (on 17 July 2021). The letter outlines the national expectations of the flu programme including: which groups are eligible for flu vaccination this autumn, and sets out actions to prepare for the 2021 vaccination campaign.</p> <p>As in previous years the RUH, Bath is committed to vaccinating 100% of all eligible individuals (which includes students, volunteers, bank and agency workers). The national target for Trusts, is to vaccinate 85% of staff who are eligible²³.</p> <p>The requirements for health providers outlined in the letter can be summarised as follows:</p> <ul style="list-style-type: none"> • providers are required to focus on achieving maximum uptake of the flu vaccine in existing eligible groups (as outlined in the two letters) 	

¹ **COVID-19: Preparing for the future: Looking ahead to winter 2021/22 and beyond**; 15 July 2021. The Academy of Medical Sciences

² www.gov.uk/government/publications/national-flu-immunisation-programme-plan/national-flu-immunisation-programme-2021-to-2022-letter

³ Unlike previous years there is no 2021-22 CQUIN for flu vaccinations (Commissioning for Quality and Innovation which is a payment framework enabling commissioners to link a proportion of providers' income to the achievement of quality improvement goals).

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- all Hospital Trusts are asked to offer vaccinations to pregnant women attending maternity appointments and to those clinically at risk eligible patients attending in- and out-patient appointments
- NHS Trusts should complete a self-assessment against a best practice checklist which has been developed based on five key components of developing an effective flu vaccination programme. The completed checklist should be published in public board papers at the start of the flu season.

This report provides the completed checklist in Appendix A. A full operational plan to support the checklist is available.

2020-21 Flu Vaccination Programme

The 2020/21 Flu Programme at the RUH achieved a 79% compliance rate against a CQUIN target of 85%. This was achieved in only 8 weeks (the campaign is usually 20-24 weeks long) due to the preparations for the Covid-19 Vaccination Programme that commenced in mid-December 2020.

A review of the 2020/21 programme is summarised in Appendix B.

2. Recommendations (Note, Approve, Discuss)

1. Board of Directors is asked to **approve** the annual Influenza Vaccination Programme for 2021/22 (Appendix A).
2. Board of Directors is asked to note the review of the 2020/21 programme (Appendix B)

3. Legal / Regulatory Implications

The Department for Health and Social Care and Public Health England set out the requirements of all providers of the 2021 annual influenza programme in two letters.

The letters indicate the commissioned requirements for Health providers in administering the flu programme.

In addition the reporting requirements for the programme include:

- Daily reporting of administered vaccines
- Weekly cumulative vaccination rate of frontline staff to BSW CCG
- Monthly reporting to Public Health England of headcount and declination rate
- February 2022: Public board paper to report performance on overall vaccination uptake rates and numbers of staff declining the vaccination (NHSE requirement)

4.	Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)
Vaccinating against influenza provides improved assurance that staffing levels with the trust not be negatively impacted by seasonal sickness absence.	
5.	Resources Implications (Financial / staffing)
The administration of the vaccine is conducted via a pool of 113 clinically and operationally based peer vaccinators.	
There are no funds for supporting the programme in terms of additional staffing; incentives e.g. coffee.	
6.	Equality and Diversity
Every member of staff (and other groups) regardless of any protected characteristic is provided with access to the flu vaccine.	
Privacy and dignity is ensured by discrete clinic space being available, in a variety of locations across the Trust sites.	
Vaccines are available to pregnant patients via the Programme.	
7.	References to previous reports
Board of Directors 28 October 2021	
8.	Freedom of Information
Public.	

Appendix A: Flu Programme 2021-22: Checklist RUH, Bath

Healthcare worker flu vaccination best practice management checklist

		Self-assessment	Progress
A	Committed leadership		
A1	Board record commitment to achieving the ambition of vaccinating all frontline healthcare workers	To be confirmed at BoD Meeting September 2021. Chief Nurse will champion the programme by being a vaccinator.	
A2	Trust has ordered and provided a quadrivalent (QIV) flu vaccine for healthcare workers	Completed.	
A3	Board receive an evaluation of the flu programme 2020/21, including data, successes, challenges and lessons learnt	Evaluation in appendix A. 2020/21 evaluation conducted by Flu Steering Group.	
A4	Agree on a board champion for flu campaign	Dr Claire Radley, Director for People	
A5	All board members receive flu vaccination and publicise this	All members have been offered vaccine.	In progress
A6	Flu team formed with representatives from all directorates, staff groups and trade union representatives	Established and been meeting since May 2021.	
A7	Flu team to meet regularly from September 2021	Completed as above.	
B	Communications plan		
B1	Rationale for the flu vaccination programme and facts to be published – sponsored by senior clinical leaders and trades unions	Comms plan in place and being delivered.	
B2	Drop in clinics and mobile vaccination schedule to be published electronically, on social media and on paper	Adoption of FluTrack for easy access to clinics.	
B3	Board and senior managers having their vaccinations to be publicised	Comms plan in place and will be delivered	

B4	Flu vaccination programme and access to vaccination on induction programmes	Induction programme is virtual. Bespoke Flu clinics arranged for hard to reach staff groups.	
B5	Programme to be publicised on screensavers, posters and social media	No screensaver options available. Ticker tape in place.	
B6	Weekly feedback on percentage uptake for directorates, teams and professional groups	Weekly reports to all service heads.	
C	Flexible accessibility		
C1	Peer vaccinators, ideally at least one in each clinical area to be identified, trained, released to vaccinate and empowered	133 peer vaccinators across all RUH Trust sites Sulis contacted re staff vaccinations at their site	
C2	Schedule for easy access drop in clinics agreed	Adoption of FluTrack for easy access to clinics.	
C3	Schedule for 24 hour mobile vaccinations to be agreed The national flu immunisation programme	Peer vaccinators cover shift starts and finishes. Additional provision under consideration. Weekend clinic in C32 approved.	
D	Incentives		
D1	Board to agree on incentives and how to publicise this	Flu Steering Group approved the incentives: free cup of coffee from Trust; free chocolate from TU	
D2	Success to be celebrated weekly	Adopt previous approach to comms.	In progress.

Appendix B: Evaluation of the 2020/21 RUH Influenza Programme

The following table provides a summary of the issues discussed at the Post-Flu Campaign 2020/21 meeting

2020/21	Summary	Lessons for next year
Outcomes	The Trust achieved a compliance rate of 78.9% against a target of 85% in a shortened campaign due to covid vaccination	Comms and myth busting is very important.
	The Trust secured CQUIN funding for the achievement of the contracted level of compliance.	
	Women and Childrens Division achieved 84.9% and Corporate Division achieved 83.3% Surgical Division achieved 79.2%	Divisions like the competitive aspects of reporting compliance.
	The lowest uptake in a single clinical area was 56%	Targeted campaigning is required
Contributing factors to success	Central Clinic (C32) was busy for the 8 weeks. The use of a Flu Bleep was a useful method to respond to clinical staff's requests within clinical environments to have their vaccination	Continue with central clinic and roaming clinics using flutrack to book and record
	Peer vaccinators are critical to the success of the programme as they work in clinical areas and can be flexible to staff's work-load.	Continue to recruit peer vaccinators
	Staff felt grateful for the thank-you cup of coffee and chocolate	Repeat next year.
	Individuals who wanted to opt out of the flu programme were reluctant to complete the opt-out form due to concerns about repercussions.	Consideration of wording of the form (now Nationally determined).
	Multi-disciplinary working group supported incentives; recording and peer vaccinators.	Promote involvement in the Flu Steering Group.