



Flu vaccination service FAQs

November 2021

The PDA Advice Line receives numerous calls from members each season around the provision of the flu service. We list below the most common questions together with updates on the current season considering specific changes that we are aware of. We will refresh this page regularly. However, if you need specific advice, please contact our support team.

This document has recently been updated and replaces the version published in September 2021.

Questions around legal basis of administration

1. What are the legal mechanisms by which a pharmacist can administer a flu vaccine?

A pharmacist can administer an influenza vaccine by way of:

- a signed Prescription / a signed Patient Specific Direction (PSD)
- a Patient Group Direction (PGD)
- a national protocol* (applies to influenza and COVID-19 vaccines only)

The pharmacist must be suitably trained and must have met the training requirements for each home nation (links to training requirements for each home nation are given below).

1a. Within Community Pharmacy settings:

The administration of the inactivated influenza vaccine for eligible patients by community pharmacists is made under the authority of the national PGD. The PGD must be signed and authorised by the superintendent or the pharmacy manager or the owner. Each individual pharmacist providing flu vaccinations must read and sign the PGD.

Patients that are not eligible for the NHS funded programme (for example those under 50 years of age) can still be vaccinated by way of a separate distinct private PGD.

A pharmacist may also administer a flu vaccine by way of prescription issued by an independent prescriber (which can also be termed a PSD or patient specific direction).

For the 2021-2022 season, a pharmacist may also administer a flu vaccine under the national protocol.

1b. Within GP surgery settings:

The administration of the inactivated influenza vaccine can be under a PSD or a PGD or the national protocol. However, ALL the criteria for a PGD or PSD and national protocol to be legally valid still apply.

An independent prescribing pharmacist may compile a list of patients eligible for vaccination (a PSD) and who may be vaccinated by a suitably trained member of the surgery staff (for example a registered nurse).

A good summary from the CQC can be found [here](#).

Questions around training

1. What training materials do I need to be familiar with?

All pharmacist vaccinators should have the knowledge and skills detailed in the National Minimum Standards and Core Curriculum for Immunisation Training for Registered Healthcare Practitioners (NMS). This can be accessed [here](#).

Pharmacists should also be fully conversant with the initial 12 general chapters of the Green Book and also Chapter 19 which specifically relates to influenza vaccination. The Green Book can be accessed [here](#).

2. What training should I complete before undertaking flu vaccinations?

Vaccinators need to refresh their training according to the requirements of their authorised PGD or service specification. The overarching training requirements for the 4 home nations are linked below:

Details for England can be accessed [here](#)

Details for Scotland can be accessed [here](#)

Details for Wales can be accessed [here](#)

Details for Northern Ireland can be accessed [here](#)

2a. For Community Pharmacy Vaccinations:

Details about training requirements for England can be found [here](#)

Details about training requirements for Wales can be found [here](#)

Details about training requirements for Scotland can be found [here](#)

Details about the influenza immunisation programme 2021-2022 and information for healthcare professionals (including links to resources) for Northern Ireland can be found [here](#)

*Please note that the links are for the representative contractor organisations flu page except for Scotland where CPS has no overarching home page specific for the flu service and we have linked the main TURAS flu training resource page.

2b. All vaccinators working within a primary care setting should follow the recommendations as detailed in the Guidance [here](#).

You must satisfy the [National Minimum Standards and Core Curriculum for Immunisation Training for Registered Healthcare Practitioners](#).

[Appendix A](#) details the requirements for both new and experienced vaccinators.

[Appendix B](#) covers the Suggested content to be covered in flu immunisation training (theoretical and/or work-based) – details about e-learning can be found by following the links in Q3 above.

[Appendix C](#) is the flu vaccinator competency assessment tool. This should be completed and signed off by your supervisor and kept on file as evidence of your competency.

Questions around insurance

1. What Insurance needs to be in place in order for me to provide flu vaccinations?

It is a [professional requirement](#) that every pharmacist undertakes activities that have some sort of indemnity arrangement to cover that activity. This cover may be individual cover or that which is provided by way of the employer (for example a business policy by the pharmacy owner which covers all staff for all activities that are provided within that pharmacy).

If a pharmacy is providing vaccinations away from the pharmacy it may need to arrange additional cover, so you must check that this is in place before providing vaccinations in any place outside of that registered pharmacy.

1a. Within Community Pharmacy

All community pharmacies must have indemnity cover for all the services that are provided within it and for all individuals that provide the services (including locum pharmacists). However, the PDA strongly recommends that all pharmacists should also have in place their own independent insurance cover. There is no separate charge for undertaking flu vaccinations as this is covered within the general policy issued for those working within a community setting.

1b. Within General Practice

All practices will have indemnity cover in place to cover activities undertaken by staff employed within the premises. However, the PDA strongly recommends that all pharmacists should have in place their own independent insurance cover.

2. Do I need additional insurance cover if also providing Covid-19 vaccinations?

Pharmacists undertaking Covid vaccinations together with flu vaccinations are not covered by their general PDA policy unless they arrange additional cover for undertaking Covid vaccinations. You can arrange this additional cover [here](#).

Questions around number of daily vaccinations to be scheduled and their impact

1. Who should be in control of the flu diary?

The RP may have conversations with their line manager regarding the flu appointment diary but ultimately the RP has final control over the volume of flu appointments that can safely be booked each day. The RP is responsible for the overall safe and effective operation of the pharmacy business and therefore must ensure patient safety is prioritised over any targets that the company may have set. The daily professional activities and professional priorities together with how the professional areas of the pharmacy operate should not be micromanaged by a non-pharmacist store manager, an area manager, or a Head Office.

If there is an issue with management where the RP's responsibility is overridden by a non-pharmacist manager or another member of staff to the detriment of the patients and/or staff and you believe that the pharmacy is not safe, this should be brought to the attention of the Area Manager, Superintendent Pharmacist or Head Office and you should put a complaint in writing, highlighting the concerns (i.e., make a protected disclosure under the whistleblowing legislation) and the action you have taken to remedy it. You can speak to your PDAU rep in the first instance, but the PDA Union employment legal team can assist you with drafting a disclosure or, if management take detrimental action against you for doing so, advise you on your employment rights. If you need support, email enquiries@the-pda.org.

In relation to the points below, you are advised to follow this advice if you have any concerns.

2. What should I do if my store manager overrides my decision as RP regarding the flu diary?

We would hope that pharmacists were not put in this position because as noted above the RP has final control over the appointment diary, and this has already been acknowledged by one company (Boots). If the store manager tries to override this decision, the pharmacist should then escalate this to the pharmacy support manager.

3. What should I do if I turn up in a store as RP and there are more flu vaccines booked in than I think is safe for me to carry out whilst maintaining my other duties?

Initially, it would be recommended to have a discussion with your line manager to see if additional cover can be given to you on that day to enable you to safely deliver the flu service. If this is not possible, and as RP you do not believe it is possible to safely deliver

these vaccines, it would be advisable to contact patients to reschedule appointments to a more suitable time when there will be adequate cover to deliver the service.

4. Should I prioritise flu vaccines over my other daily duties as RP?

Pharmacy Contractors must carry out essential services as part of the NHS Community Pharmacy Contractual framework therefore this should be the priority for the pharmacist. Essential services include the dispensing of medicine, appliances and repeat dispensing. The flu vaccination service is an advanced service and should not take priority over essential services. Recent guidance issued by the NHS in Wales explicitly states that the flu service should be provided but not to the detriment of core contracted services.

5. What should I do if additional pharmacist cover is withdrawn, and I have a flu clinic booked in?

Any staffing amendment should always be discussed with the RP so that the RP can organise the services (including core or essential services such as dispensing) within the pharmacy to be provided safely. Initially, it would be recommended to have a discussion with your line manager to understand why the original cover has been withdrawn and to seek replacement cover to enable you to safely deliver the flu service on that day. If this is not possible, and it is not possible to safely deliver these vaccines it would be advisable to contact patients to reschedule appointments to a time when there will be adequate cover to deliver the service.

6. I am a relief /locum pharmacist so have no idea of how many flu appointments I will walk into each day?

As a relief / locum pharmacist it is advisable to speak to the different stores, prior to attending, to establish the number of flu appointments you would be comfortable to deliver in any particular working day, subject to the number of stores you have planned to work in on that day. It would be advisable to follow this up with an email confirming what has been discussed. A couple of days before working in that store, call ahead and check the number of appointments booked, if this is different to the agreed volume then ask the store manager to reschedule some of these appointments. If this request is refused, you may wish to escalate this with Pharmacy Services Manager or the Superintendent's office.

Questions around the use of consulting rooms

1. What should I do if I only have one consultation room and I also offer services such as CPCS and EHC?

Services such as CPCS and EHC need to be carried out in a consultation room and the need for these services can occur at any time throughout the day. Considering the volume of these services that you would normally provide; we would advise you to leave regular appointment spaces available throughout the day to allow you to continue these services. The flu service must not be prioritised to the detriment of other essential pharmaceutical services.

2. Can I refuse to vaccinate someone if they will not wear a mask in the consultation room.

Customers should already be wearing a face mask in the pharmacy as this is a healthcare setting, and this is especially important when in more confined spaces such as the consultation room. If the customer is not wearing a face mask, please offer them one before entering consultation room. If they refuse, you should establish whether this is for a medical reason, and if so, consider how you could lessen the risk to your health and safety by wearing PPE to protect you and the patient. If the patient has no legitimate reason for not wearing a mask and you are concerned about your own health and safety, you do not have to vaccinate but can sign post them to an alternative flu vaccination clinic. More suitable alternatives may be vaccination clinics in outside settings or with larger consultation rooms. Given the vulnerability of a disabled patient, you may consider advising them to attend such a facility for their own health and safety.

3. What can I do if I am uncomfortable sitting in a consultation room with a patient who is exempt from wearing a mask?

Whilst these patients are exempt from wearing a mask, if you are concerned for your own health and safety, you do not have to vaccinate these patients. Firstly, discuss with the customer if they would be happy to wear a mask just for the very short time you will be in the consultation room together. If this is not possible you may wish to signpost them to a more appropriate vaccination setting. Ideally, booking forms should inform patients that face masks should be worn when receiving the vaccination service. Remember to consider your obligation to someone with a disability in the way that you find a solution to this issue and if wearing PPE, yourself and sanitising the room afterwards, then this may be an appropriate solution.

Your employer has a duty of care to its employees and so if you believe that you or your staff are at risk due to members of the public not taking the necessary protection and you refuse to provide the service, you should not suffer any detriment for taking appropriate measures.

If you have a disability which puts you at a higher risk of infection, your employer should provide you with PPE for all appointments; or if you are not able to provide the service due to other effects of your condition, you should speak to your employer to see if you are able to carry out other work.

You should discuss with your manager alternative work if you have a needle phobia.

If you find that you are affected by any of the above issues, or you are disciplined or you suffer any detriment resulting from taking health and safety measures, you should raise a grievance and you are advised raise this initially with your PDAU rep, who will refer you to the employment legal team or you can contact them directly on enquiries@the-pda.org

Questions around anaphylactic reactions to the flu vaccination

1. In the case of anaphylaxis if I am struggling drawing up adrenaline from ampoules as I have never done this in an emergency setting before can I use an auto injector instead?

As part of the PGD, individuals must be trained in the immediate management of anaphylaxis and immediate access to adrenaline 1 in 1000, it does not state how this is delivered. Some larger companies have an annual refresher training to draw up adrenaline from ampoules. This may be the option specified in the refresher training.

However, in an emergency setting if pharmacists have received adequate training in using an Emerade 500mcg auto injector and feel competent to do so, the adrenaline dose could also be delivered in this way. Please remember that you should always have 2 doses of adrenaline immediately available in case of anaphylaxis

2. I am unable to obtain Emerade autoinjector, but I do have an EpiPen and Jext, can I use this instead?

The dose of adrenaline for anaphylaxis is 500mcg for adults over the age of 18 years and two doses of this should always be immediately available when carrying out flu vaccination. EpiPen and Jext have a dose of 300mcg. Whilst this is not the recommended dose for anaphylaxis if a pharmacist was struggling to draw up 500mcg of adrenaline in a lifesaving emergency situation it would be a professional decision but would be better to administer 300mcg adrenaline immediately than to wait.

Questions around pharmacy technicians or other staff undertaking flu vaccinations

1. Can a suitably trained registered technician administer flu vaccinations under the national PGD?

The national influenza PGD does not list pharmacy technicians as one of the professions that can administer the influenza vaccine.

2. How can a suitably trained registered technician or other suitably trained support staff undertake vaccinations?

Registered technicians and other suitably trained staff may be able to administer flu vaccinations under a national protocol (but not the PGD) and would need to satisfy all the requisite training criteria. You can read the national protocol which details exactly which activity each member of staff can carry out (including the actual vaccination) in a pharmacy providing the flu vaccination service [here](#)

3. Can a suitably trained registered technician continue to vaccinate whilst a pharmacist is on a break?

A suitably trained registered technician may vaccinate under a Patient Specific Direction (PSD) issued by a prescriber, the national protocol but not under the national PGD.

When requesting vaccination under a PSD, the prescriber must be satisfied that the person to whom practice is delegated has the qualifications, experience, knowledge and skills to provide the care or treatment involved.

A suitably trained registered technician or other suitably trained staff may vaccinate under the national protocol but only when there is a pharmacist trained in vaccinations present on the premises.

3. Is the RP accountable for technicians and other staff that may be vaccinating? Who is responsible for delivering emergency first aid to a patient when a technician is vaccinating?

If a pharmacy technician is administering a flu vaccination under a PSD it is the responsibility of the prescriber to ensure that the pharmacy technician has the requisite training, knowledge, and skills to undertake that vaccination. This would include being able to administer emergency first aid.

Any person who administers a flu vaccine under a PGD must comply with all the requirements specified under the PGD including training requirements which would include

providing emergency first aid. Technicians or support staff CANNOT vaccinate under the National PGD.

When providing the flu service under the National Protocol, technicians or support staff that undertake the vaccination MUST have been trained in the recognition and management of anaphylaxis. However, there must also be a pharmacist who is trained in all aspects of the flu service to be present on the premises and who has to assume overall responsibility for the service.

In cases of emergency, you must always consider how you can assist irrespective of who should be able to provide that emergency assistance. If for instance a technician or support staff are unable (for any reason) to administer assistance, but you as the pharmacist are able to, then it would be incumbent on you to do so.

It is the responsibility of the Responsible Pharmacist to secure the safe running of all activities that occur in a registered pharmacy.

4a. I am a locum pharmacist and have been advised that a suitably trained registered technician and suitably trained support staff will be undertaking all the flu vaccinations under the National Protocol so there is no need for my involvement in this.

Every activity and service undertaken in a registered pharmacy has to be safely provided. This is the responsibility of the Responsible Pharmacist.

The National Protocol specifically states that the pharmacist, who must be fully trained in the providing of the flu service has to be present and assume overall responsibility for the vaccination. A pharmacy technician is **NOT** listed as a person that can assume overall responsibility for the vaccination under the national protocol.

Only named staff can undertake activities for providing the flu service under the national protocol and they must sign their declaration of competence to undertake that activity.

A locum RP is still responsible for ensuring and securing the safe and effective delivery of all activities that occur in that pharmacy so would need to be satisfied that all the provisions of providing the flu vaccination (under a National Protocol, a PGD or a PSD) are being met in full.

Questions around mass vaccination centres (MVC)

1. Who is the RP for a mass vaccination centre (MVC)?

If the mass vaccination centre is within the pharmacy premises the pharmacist signed in as RP will also be the responsible pharmacist for the MVC even if they are not involved with the vaccination process.

2. I am a sole pharmacist vaccinating in an MCV and there are back-to-back appointments booked. How should I manage if I get behind due to an incident such as anaphylaxis, fainting, needle phobia etc as the appointment time does take these situations into account?

It would be sensible to ensure adequate time is allocated for appointments but occasionally there may be unpredictable events that may cause these appointments to overrun. It would be advisable to have some allocated time available between blocks of appointments to allow pharmacists time to catch up at the end of a session.

It is vitally important that pharmacists take adequate rest breaks so they should not be expected to catch up with workload during this time. If the pharmacist has fallen behind schedule due to these unpredictable events, they may feel that the safest option is to reschedule some appointments to another day.

If you have any questions which are not included in this document, please contact enquiries@the-pda.org