



**All Community Pharmacies**

Department of Integrated Care  
12-22 Linenhall Street  
Belfast  
BT2 8BS

Tel : 028 95363926  
Fax: 028 95363126

13<sup>th</sup> August 2020

Dear Colleague,

**RE: Community Pharmacy Seasonal Influenza Vaccination (CPFV) Service for Frontline Health and Social Care Workers (HSCWs)**

The purpose of this letter is to advise you that HSCB in agreement with CPNI are launching the CPFV Service for Frontline HSCWs. The HSCB is seeking expressions of interest from contractors to participate in this service. The service has been developed in partnership with DoH, CPNI and PHA. It is a regional service, offered to those community pharmacies who are already providing or planning to provide a private flu vaccination service in 2020/21 and meet the necessary training and contract requirements outlined.

**Background**

Although influenza (flu) is usually a self-limiting condition for those people who are 'healthy', it can put older people, pregnant women and those with underlying health conditions at risk of severe illness and even death. Morbidity and mortality attributed to flu is a key factor in HSC winter pressures and a major cause of harm to vulnerable individuals. Flu immunisations help to reduce GP consultations, unplanned hospital admissions, pressure on emergency departments as well as staff sickness and are therefore a critical element of the system-wide approach for delivering robust and resilient health and care services during winter.

The COVID-19 pandemic has highlighted the importance of ensuring frontline staff are protected against disease. While there is currently no vaccine against COVID-19, there is a vaccine against seasonal influenza and it is important that frontline staff have access to this vaccine.

The Joint Committee on Vaccination and Immunisation (JCVI) recommends that the flu vaccine is offered and provided to all Health and Social Care Workers (HSCWs) **who are in direct contact with patients/clients (known as frontline) to protect themselves, their families and their patients.**

Morbidity and mortality attributed to flu is a key factor in HSC winter pressures and a major cause of harm to vulnerable individuals. It is therefore essential that uptake in frontline staff is encouraged to protect their patients and reduce winter pressures.

The flu vaccine is recommended for all frontline HSCWs working in NI including Trust and non-Trust employed staff. , However to date, vaccine uptake monitoring is has only been published for frontline HSCWs who are employed by HSC Trust organisations. The 2019/20 end of season uptake rate for HCWs was 41.2%, whilst, an improvement compared to 2018/19 (35.4%) the rate was still below the DoH target of 50%. The vaccine uptake in SCWs was low at 22.8%.

In light of the ongoing COVID-19 pandemic, the **target for 2020/21 has been raised to 75% for all health and social care staff in NI.** In order to increase uptake and meet this target, it is important to encourage frontline staff to have the vaccine and remove barriers to accessing the vaccine by making it more easily accessible.

### **Aim of the Service**

The aims of this service are to:

- Run alongside the Seasonal Influenza Vaccination Programme 2020/21 to sustain and maximise the uptake of the flu vaccine in frontline HSCWs by building the capacity of community pharmacies, as an additional alternative to current arrangements.
- Provide improved accessibility and convenience for frontline HSCWs to access flu vaccinations.

### **Service Outline**

This service will be available from community pharmacies across Northern Ireland who are already providing or planning to provide a private flu vaccination service in 2020/21. It is anticipated the service will run from late September 2020 until 31<sup>st</sup> March 2021.

- The Quadrivalent Influenza Vaccine (cell grown) (QIVc) will be available free of charge within the community pharmacy to all frontline Health and Social Care Workers aged 18 (lower age limit to be confirmed) or above registered with a GP in Northern Ireland (see Appendix 1).

- A Patient Group Direction (PGD), service specification and other relevant material will follow.

## **Personal Protective Equipment (PPE)**

The HSCB continue to liaise with PHA and DoH around PPE requirements and guidance will follow. Any PPE requirements for the delivery of this service will be provided by HSCB.

## **Training Requirements**

Pharmacists providing the CPFV Service must:

- be working in line with the [National Minimum Standards and Core Curriculum for Immunisation Training<sup>1</sup>](#) and service specification.
- be familiar with the latest relevant information from the PHA website on [influenza immunisation<sup>2</sup>](#) when updated for 2020/21.
- be declared competent in the recognition and management of anaphylaxis.
- have attended face-to-face training for both injection technique and basic life support (including administration of adrenaline) at least every three years.

However, for any pharmacist who has undertaken the face-to-face training before and is due to undertake face-to-face training this year (2020) as part of training requirement every 3 years, in the current circumstances with the COVID-19 pandemic, the PHA has confirmed that it is willing to follow the pragmatic approach adopted by PHE (<https://psnc.org.uk/services-commissioning/advanced-services/flu-vaccination-service/>) whereby anyone in this position can undertake [online training<sup>3</sup>](#) instead, delaying the face-to-face requirement until next year.

## **Eligible Pharmacies**

In order to be eligible to participate in the CPFV service, the pharmacy must:

- Already be providing or planning to provide a private flu vaccination service in 2020/21.
- Have access to HSC NI secure email.
- Meet the requirements set out in the service contract and specification in

---

<sup>1</sup> <https://www.gov.uk/government/publications/national-minimum-standards-and-core-curriculum-for-immunisation-training-for-registered-healthcare-practitioners>

<sup>2</sup> <https://www.publichealth.hscni.net/directorates/public-health/health-protection/respiratory-diseases/influenza/flu-faqs-healthcare>

<sup>3</sup> <https://www.e-lfh.org.uk/programmes/flu-immunisation/>

relation to:

- Having an appropriate area in the pharmacy or premises from which the service is planned to be delivered and has in place appropriate vaccine storage facilities, which will maintain the cold chain<sup>4</sup>.
- Staff who meet the specified training requirements as above.

Although the preferred model, under normal circumstances would be to deliver the CPFV Service in the pharmacy consultation area, given the pandemic situation, some contractors may wish to explore alternative models to facilitate social distancing and/or optimal use of PPE. Alternative models could be provision in the pharmacy (outside the consultation area) or “off-site” delivery.

Where contractors intend to deliver the CPFV Service in an alternative model other than the preferred model of the pharmacy consultation area, the points outlined in Appendix 2 and 3 will need to be carefully considered.

### **Remuneration**

- Remuneration rates for 2020/21 are still to be confirmed, however, rates for last year were £8.08 per administered dose of vaccine plus an additional fee of £1.50 per vaccination (therefore a total payment of £9.58 per dose of vaccine administered).

The payment of £1.50 per vaccination was made in recognition of expenses incurred by community pharmacies in providing this service.

The fee payable for service provision will be processed by the BSO on receipt of a claim form, submitted on a monthly basis. Further details will follow.

**For those wishing to participate in this service, please return by email your completed contract to your local office contact by close of play Monday 24<sup>th</sup> August 2020.**

---

<sup>4</sup> [https://www.psni.org.uk/wp-content/uploads/2012/09/standards\\_on\\_sale\\_and\\_supply\\_of\\_medicines-revised1mAR2016.pdf](https://www.psni.org.uk/wp-content/uploads/2012/09/standards_on_sale_and_supply_of_medicines-revised1mAR2016.pdf)

Contact Details for HSCB Local Integrated Care Offices			
Belfast & South Eastern Pharmacy Services  Business Support  Integrated Care  12-22 Linenhall Street Belfast BT2 8BS Tel: 028 9536 3926  Belfast email: <a href="mailto:pharmacyservicesbelfast@hscni.net">pharmacyservicesbelfast@hscni.net</a>  South Eastern email: <a href="mailto:pharmacyservicesesse@hscni.net">pharmacyservicesesse@hscni.net</a>	South  Pharmacy Services  Business Support  Integrated Care Tower Hill Armagh  BT61 9DR Tel: 028 9536 2104  Email: <a href="mailto:pharmacyservicessouth@hscni.net">pharmacyservicessouth@hscni.net</a>	North  Pharmacy Services  Business Support  Integrated Care County Hall 182 Galgorm Road Ballymena BT42 1QB Tel: 028 9536 2812  Email: <a href="mailto:pharmacyservicesnorth@hscni.net">pharmacyservicesnorth@hscni.net</a>	West Pharmacy Services  Business Support  Integrated Care  Gransha Park House 15 Gransha Park Clooney Road Londonderry BT47 6FN Tel: 028 9536 1082  Email: <a href="mailto:pharmacyserviceswest@hscni.net">pharmacyserviceswest@hscni.net</a>

If you have any queries in relation to this service, please contact:

Helen Creighton  
HSCB Pharmacy Co-ordinator  
Normal Working Hours: Monday to Friday: 9.00am to 5.00pm  
Email: [helen.creighton@hscni.net](mailto:helen.creighton@hscni.net)

Yours sincerely,

Mr Joe Brogan  
Assistant Director – DOIC  
Head of Pharmacy and Medicines Management

**Appendix 1:**



## **Community Pharmacy Seasonal Flu Vaccination (CPFV) Service**

### **Frontline Health and Social Care Workers (HSCWs)**

The national flu immunisation programme aims to provide protection to those who are at higher risk of flu associated morbidity and mortality. Department of Health policy recommends the flu vaccine for all frontline Health and Social Care Workers (HSCWs) working in Northern Ireland. This includes HSCWs working in Trusts, in community HSC services or registered independent sector health/social care providers.

<b>Definitions</b>	
<b>Frontline</b>	HSCWs that work in direct contact with patient care
<b>Trust employed</b>	Employed by Belfast, South-Eastern, Northern, Southern, Western HSC Trusts or Northern Ireland Ambulance Service (NIAS).
<b>Non-Trust employed</b>	Employed by a registered care home, domiciliary care provider or a voluntary managed hospice provider or HSC community services such as primary care, community pharmacy, community dentist, HSCB and PHA staff.
<b>Health Care Workers (HCWs)</b>	Directly involved in provision of health-related care of vulnerable patients/clients and include doctors and dentists, nurses and midwives, allied health professionals, pharmacists, paramedics and other ambulance technicians, other qualified staff and other support staff to above professional groupings.
<b>Social Care Workers (SCWs)</b>	Directly involved in provision of social care to vulnerable patients/ clients and includes social workers, workers providing social care at home (home help), in care homes or other long-term care facilities.

## **Community Pharmacy Seasonal Flu Vaccination (CPFV) Service**

### **Frontline Health and Social Care Workers (HSCWs)**

#### **Provision in Pharmacy (outside the consultation area) Considerations**

\*Please note this list is not exhaustive but includes some main points necessary to consider.

<b>Considerations</b>	<b>Questions to consider, possible actions or mitigations</b>
Identifying a suitable area within pharmacy premises	<ul style="list-style-type: none"> <li>• How will confidentiality be maintained? Do you need a screen to provide visual privacy? How will auditory privacy be maintained?</li> <li>• Are there other rooms in the pharmacy that could be used for the consultation?</li> <li>• What IT equipment and infrastructure would be needed for provision of the service outside the consultation room and is that available or feasible?</li> <li>• How will patients be informed of how the service provision has been changed in line with minimising infection risk and what to expect when they arrive for vaccination?</li> <li>• Verbal confirmation should be obtained that the patient is happy to be vaccinated in the proposed location and a note made about this in their clinical record.</li> <li>• SOPs will need to be amended to cover provision of the service at this location.</li> </ul>
Main service operations	<ul style="list-style-type: none"> <li>• Can normal services operate while vaccines are being administered in this way?</li> <li>• Considering the number of people who can safely be in the pharmacy, do you need to operate periods of the day or week for flu vaccination only?</li> <li>• Can you extend opening hours / days to provide vaccination only periods?</li> <li>• Can you extend lunch closures to 2 hours and provide flu vaccinations for one of those hours (if the flexibility to do this exists in the regulations)?</li> </ul>

## **Community Pharmacy Seasonal Flu Vaccination (CPFV) Service**

### **Frontline Health and Social Care Workers (HSCWs)**

#### **“Off-site” Considerations**

\*Please note this list is not exhaustive but includes some main points necessary to consider.

Consideration	Questions to consider, possible actions or mitigations
Suitable venue	<ul style="list-style-type: none"> <li>• What facilities are there near the pharmacy which could be used?</li> <li>• What is the cost of use of these venues and therefore would it be economic to use?</li> <li>• How will patients be informed of how the service provision has been changed in line with minimising infection and what to expect when they arrive for vaccination?</li> <li>• What is the minimum number of patients needed to make off-site provision a success?</li> <li>• How will confidentiality be maintained? Do you need a screen to provide visual privacy?</li> <li>• SOPs will need to be amended to cover provision “off-site”.</li> </ul>
Managing access to the service	<ul style="list-style-type: none"> <li>• Appointment only or can facilities be provided to support walk-in patients?</li> <li>• What would patient flow look like?</li> </ul>
Infection control	<ul style="list-style-type: none"> <li>• What pre-cleaning is needed?</li> <li>• What cleaning between patients is needed?</li> <li>• How will PPE be disposed of?</li> <li>• How would hand hygiene be maintained for the pharmacist and for patients accessing the service?</li> <li>• What post vaccination session cleaning would be required?</li> </ul>
Health and Safety	<ul style="list-style-type: none"> <li>• A risk assessment will need to be carried out on the potential venue.</li> <li>• Review of how resuscitation may be provided, particularly if offering a drive-through service. Is there space for people to wait in their cars or elsewhere post-vaccination?</li> </ul>

	<ul style="list-style-type: none"> <li>• What arrangements would be made for disposal of clinical waste, including transfer of waste from the site of vaccination back to the pharmacy premises for subsequent safe disposal?</li> <li>• SOPs will need to be amended to cover provision of the service at this location.</li> </ul>
Indemnity	<ul style="list-style-type: none"> <li>• Does your indemnity insurance cover this sort of provision?</li> <li>• Does your employer's liability insurance cover your staff off-site at this venue?</li> </ul>
Data Entry	<ul style="list-style-type: none"> <li>• If internet access is needed will it be available at the venue?</li> <li>• What IT equipment and infrastructure would be needed for provision of the service outside the pharmacy?</li> </ul>
Patient Safety	<ul style="list-style-type: none"> <li>• Additional consideration should be given in conducting risk assessments to the safety considerations for post-vaccination monitoring of patients in more unusual off-site settings such as car parks or drive-through services. In the unlikely event someone had an extreme reaction and needed CPR, the risk assessment needs to consider what the pharmacist might need to be able to do and how that would work in that setting.</li> </ul>
Other points to consider	<ul style="list-style-type: none"> <li>• How many support staff would be required to support the provision of the service at the chosen site?</li> <li>• How would the cold chain be maintained at the chosen site?</li> <li>• If considering the drive-through option: How would you minimise the risks associated with an adverse reaction post-vaccination? Would the patient need to get out of the car to be safely vaccinated, therefore the car just functions as a waiting room? (Note that any right-handed patients sitting in the driving seat would not be able to be vaccinated in their left deltoid, without leaving the car).</li> </ul>