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Subject: IMPORTANT - please read

Attachment:

• [PSNC-Briefing-050.18-Flu-Vaccination-Service-2018-19-aTIV.pdf](#)

This is an unusual, challenging flu vaccination season with the introduction of adjuvant trivalent flu vaccine (Fluad). Some deliveries have been received so far, many have not, and this places pressure on both pharmacies and surgeries from patients keen to be vaccinated. However, the current guidance - summarised by the PSNC, and attached here- reinforces the message that at this stage of the season it would be inappropriate to use quadrivalent flu vaccine in the 65+ age group. To do so risks both action by NHSE, and may even open a pharmacy - or surgery - to legal action.

From the early figures, it is apparent that SOME pharmacies have been vaccinating the 65+ group with quadrivalent vaccine.

Please be mindful of the guidance, for your own protection. The relevant section of the PSNC guidance - please read it carefully.

You may also be aware that there is the option to provide domiciliary vaccination this season. If this is something you intend to do, please make sure you have read the National Flu Service Specification carefully, and comply with all the conditions - in particular, a DBS certificate will be required!

Jeff Forster

Regional LPCs

Taken from

PSNC Briefing 050/18: Flu Vaccination Service 2018/19: Adjuvanted trivalent inactivated influenza vaccine (aTIV)

-Full guidance attached-

Action to take where a pharmacy has temporarily run out of aTIV

If a pharmacy is awaiting further supplies of aTIV, from their expected deliveries in October and November, patients aged 65 and over should be encouraged to return when those supplies become available. If the patient wants to be vaccinated immediately, they should be referred to their GP practice (if they have aTIV in stock) or another local pharmacy that has stock available.

If a GP practice has temporarily run out of aTIV, they are likewise being advised by NHS England to ask patients to return for vaccination when stocks become available, or they may refer patients to local pharmacies that have stock available.

Action to take where a pharmacy will not receive any aTIV

Where a pharmacy has not been able to obtain aTIV, they should direct patients to a locally available source of aTIV at their GP practice or another local pharmacy that has stock available.

What happens where GP practices will not receive any aTIV?

NHS England local teams, together with local public health commissioning teams, are working with CCGs to coordinate local plans for vaccination of patients where there are GP practices that will not receive any aTIV. In this circumstance, NHS England is advising that the GP practice should work closely with local pharmacies to direct patients to contractors that have aTIV in stock and that are able to vaccinate patients. In this circumstance, the practice issuing prescriptions for aTIV would not be appropriate.

Exceptional use of QIV for patients 65 years and over

Only if there is no locally accessible supply of aTIV, and no further supplies are expected, would it be clinically appropriate to offer QIV to patients 65 years and over; this is only likely to occur in late November.

If offering QIV to individuals not recommended to have it, when gaining consent for immunisation, pharmacists should ensure they inform the individual the vaccine is not one nationally recommended for them. Pharmacists should ensure they explain to the individual the possible lower efficacy of the vaccine being offered to them, why it is being offered instead of the recommended vaccine and why it may still offer protection against seasonal flu or attenuate the progression of the infection should they get it. The discussion should be documented in the patient's record. Further information on consent to immunisation

is available in *The Green Book*.

Contractual ramifications of inappropriate administration of QIV to patients 65 years and over
The current service specification (published on 20th August 2018) is clear that pharmacy contractors participating in the service will not be reimbursed or remunerated for vaccines administered to patients outside of the eligibility criteria set out in Annex A of the service specification.

The vaccine is administered under the authority of the NHS England Patient Group Direction, which sets out in section 5 the recommended vaccine choice for the two cohorts of patients. Where despite this advice, a contractor seeks reimbursement for vaccine other than the recommended vaccine choice, NHS England may make enquiries to understand how the evidence of clinical efficacy of aTIV and QIV was taken into account and how the clinical judgement to use the relevant vaccines was reached.

Where an appropriate clinical justification cannot be provided, NHS England may seek to take action against a contractor for breach of the terms of service for failing to provide the service and exercise their professional judgement consistent with standards generally accepted in the pharmaceutical profession.

Further information, resources and answers frequently asked questions are available at psnc.org.uk/flu.