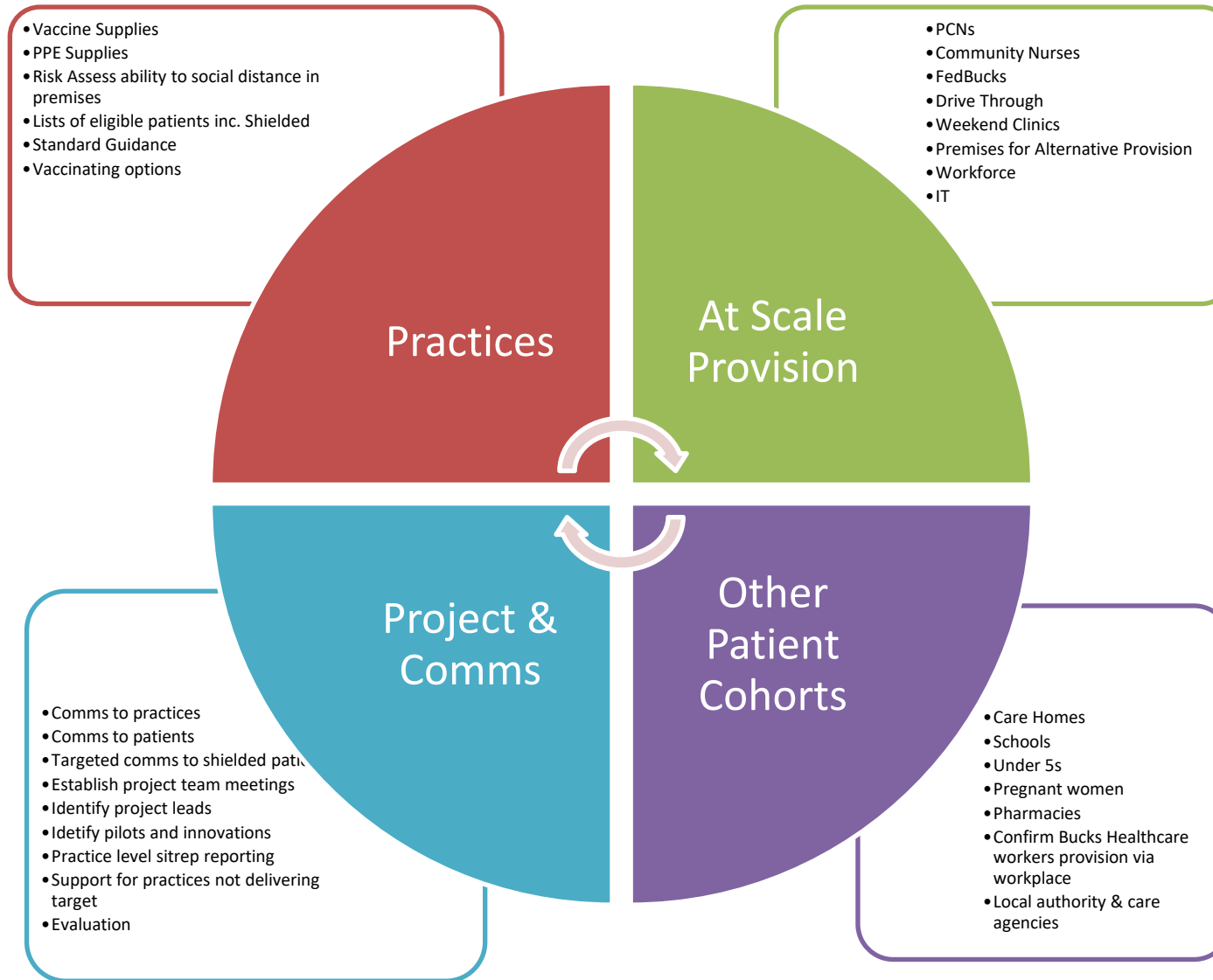


BUCKINGHAMSHIRE FLU 'PLAN ON A PAGE'



Buckinghamshire Flu Project Plan 2020/21

Ref	Milestone	Action / Task
1	Project Initiation	
1.1	Set up a Bucks project team meeting to discuss the Bucks Flu plan and expectations	This meeting was decided by the group to be run fortnightly
1.2	Compile a contact list and email distribution list to communicate to GP flu leads across BOB	Flu leads to provide this information from their CCG
1.3	Compile a list of Bucks GP practice flu leads	For Bucks CCG comms distribution and to collate practice feedback for assurances etc. Share with Hilary Munube as required
1.4	Attend and request invites for the CCG leads Influenza stake holders meetings led by NHS England.	These NHSE led stakeholders meetings bring together primary and secondary care, CCG's, School Nurse teams, community pharmacists, PHE, Local authorities, Care Home Support services, Independent providers (OxFed,PML,Fed Bucks)
1.5	Arrange weekly short (half hour) meeting updates with Flu leads in Berks and Bucks leading up to the programme start, review meeting frequency as required.	Discuss if weekly is appropriate frequency
1.6	Provide guidance and opportunities to raise issues, concerns and successes to improve vaccine uptake	Arrange a webinar pre-season (July-August) and early season (October), inviting all GP practices for a Flu programme presentation, compare vaccine updates and discuss successful models and problem areas
1.7	Explore innovative ideas for vaccine delivery	
1.7.1	Explore innovative ideas for vaccine delivery at scale	Consider alternative providers to deliver vaccine for specific groups. Eg SCAS
1.7.2	Delivery for weekend flu clinics	CCG to agree mode of use of Fedbucks banked IPA slots eg for delivery of weekend, mop up clinics, 50-64 cohorts, housebound if DNs cannot deliver etc and whether Fedbucks can deliver
1.7.3	Training for primary care	Berkshire West and Oxfordshire CCG rely on vaccine training - there will be increased demand for vaccine training (on a virtual basis)
1.8	Ensure previous successful pilot projects are planned across BOB for 2020/21	Liase with NHSE and CSU regarding the letter sent to 2-3 yrs. olds that was particularly successful last year
2	GP Practices	
2.1	Supplies	
2.1.1	Check all GP's have ordered sufficient vaccines for their population in each CCG -	Sufficient vaccine to deliver 75% of the over 65s, but not too achieve 75% in at risk under 65s and wider identified cohorts.
2.1.2	Adequate quantity of PPE	Ensure practices know how to order PPE stock and Emergency Hub options if still available. Share IPC flu guidance once available and all awaiting guidance for impact on demand and implications for national stock levels.
2.2	Practice Vaccination Delivery	
2.2.1	Provide standardised flu communication for Bucks that is relevant and timely.	Co-ordinate and cascade flu communication to provide up to date materials via the weekly updates Comms to be cascaded down through Maria David and then sent out to Practices through the PC bulletin or lead nurses as appropriate
2.2.2	List of eligible patients and identification of housebound and shielded patients and delivery of vaccines for relevant cohorts.	Ensure practices complete searches for patient cohorts including housebound and shielding patients Discuss delivery process for housebound and shielding patients with relevant community teams.
2.2.3	Identify GP practices ability to deliver flu vaccination programme inline with COVID rules	Comms/survey to Practice Managers/flu leads for assurance and collate list of practices who may need to use alternative delivery options example car parks, council property drive thru working In conjunction with relevant council teams (e.g premises/estates) to secure suitable venues
3	Community Pharmacists	
3.1	Confirm Pharmacists able to deliver required flu vaccination programme inline with covid restrictions	
3.2	Ensure Community Pharmacists record patients vaccinations so it enters their GP record	
3.3	Ensure pharmacist signpost eligible patients for their Pnevovax and Shingles vaccination	
4	Communication and Monitoring	
4.1	Communication	
4.1.1	Ensure early publicising of the flu campaign/highlighting the importance of having the vaccine given the recent Covid crisis- posters/websites/texts/phone calls	began on 15 Sept with basic info to new winter website. Issues with supply caused slight halt as we need to ensure vaccine is available before we advise people to ring up GP or pharmacist.
4.1.2	Targeted communication to Shielded patients, Under 65s and 2-3 year olds to encourage them to get their vaccine	Use all available channels to promote to key groups. Target where possible and see where flu jabs can link with other health or suitable campaigns. Advised not to comment to any comments via local press around vaccine supply but to refer over to pressofficenewsdesk@dhsc.gov.uk
4.2	Monitoring	
4.2.1	Plan to review with the Flu leads areas of opportunity to improve vaccine uptake across BOB	Review uptake success areas and discuss new ways of working, particularly those that have come about from the Covid situation, such as additional work force opportunities i.e. Care Home staff that have learned new skills of IM injections, drive through immunisation/vaccination set ups, shared tasks across PCN's.
4.2.2	Monitor uptake across BOB and Care Home Outbreak activity to provide reassurance at Board level	Provide Flu report to meetings such as Winter Planning and Quality Committee covering vaccine uptake, Care Home Outbreaks and any supply/distribution issues. This would be in the form of one report for BOB that each CCG to review
4.2.3	During flu season, monitor influenza activity and vaccine uptake across BOB CCG's and support practices not reaching target	Provide to BOB CCG executives weekly or fortnightly updates (depending on work load) of influenza activity and vaccine uptake across BOB for all patient groups to flu leads (this may need some admin support). Where individual practices require support, Flu Lead in the CCG to contact practice
4.3	Evaluation	
4.3.1	Evaluate the new BOB co-ordinated approach	Produce an End of season report to share across BOB to reflect vaccine uptake, Care Home Outbreak management and Flu activity
4.3.2	The CCG to collect financial and contractual impact information from commissioned providers	
5	Other Patient Cohorts	
5.1	Care Homes	
5.1.1	Review optimum ways to provide anti-viral services to Care Homes during an outbreak	Discuss Care Home support during Outbreaks, how Bucks CCG is able to provide this service with guidance from national HP team
5.1.2	To agree vaccine delivery for care home residents between Pharmacy and Primary Care	Agree who will be delivering the vaccine for each care home
5.1.3	Promotion of NHS scheme to domiciliary care agencies	Promote access to NHS scheme to domiciliary care agencies so that eligible staff access the vaccine and to enable staff to promote the scheme to eligible service users.
5.1.4	Promotion of NHS scheme across commissioned providers	Promote access to NHS scheme across commissioned health and social care services to: support eligible staff to access the vaccine; support staff and volunteers to encourage eligible service users to access the vaccine. This promotion would include commissioned day opportunities services for adults, respite services for adults and children (would target service users with a wide spectrum of needs as well as their carers), commissioned carers service (would target the carer and the cared for person) as well as a range of other commissioned services.
5.2	Paediatrics	
5.2.1	Ability to vaccinate all eligible school aged children including the additional year 7 cohort	School nurses have provisionally booked appointments in schools for all cohorts
5.2.2	Contingency plan for delivering school vaccination programme if schools closed	

Ref	Milestone	Action / Task
5.2.3	Availability of vaccines for preschool children	Confirmed that 50% of vaccine allocation will be available in September - this is an uplift from last year.
5.2.4	Alternative provision of vaccine for school aged children unable to take the nasal vaccination	Discuss with school nurses vaccine provision and if required identify alternative provider for vaccine - i.e., FedBucks improved access clinics
5.3	Acute Provider	
5.3.1	Discussions with acute trust to deliver vaccine to pregnant women via maternity care	BHT able to provide flu vaccinations in maternity outpatient clinics on both Stoke Mandeville and Wycombe sites once vaccine available in the Trust. Pregnant women will be advised and asked if they would like to uptake the vaccine on arrival at the outpatient department. All midwives and doctors will be advised to recommend flu vaccine at each contact both inpatients and outpatients.
5.3.2	Acute trust to support vaccinations of at risk groups	Look at opportunity at risk patients attending the hospital for other appointments. For example, Renal, Chemotherapy and Chronic Liver. We also need to make sure that the vaccinations given at BHT link into our overall system reporting somehow as we will be closely monitored on achieving the 75% vaccination rate for these population groups.
5.4	Key Workers	
5.4.1	BHT staff flu vaccination	Exploring digital solution to register, consent, record and report staff flu vaccinations – IT solution to be explored first and external solutions to be considered - to be discussed at first flu meeting 11 August
5.4.2	Healthcare worker flu vaccination best practice management checklist	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 for public assurance in trust public board papers by December 2020 - see Appendix C of Annual Letter
5.4.3	BHT Flu CQUIN 2020/2021	<input type="checkbox"/> Achieving an 90% uptake of flu vaccinations by frontline staff with patient contact <input type="checkbox"/> Total number of front line healthcare workers between 1 September 2020 and February 28th 2021 <input type="checkbox"/> Exclusions <ul style="list-style-type: none"> o Staff working in an office with no patient contact o Social care workers o Staff out of the provider for the whole of the flu vaccination period (e.g. maternity leave, long term sickness)
5.4.4	Confirm with Bucks local authority that their front line staff, and care workers they commission have access to vaccine	
5.4.5	Confirm eligibility for vaccination for the wider health and social care staff group	Await guidance on enabling access