

<b>Meeting title:</b>	Public Trust Board	<b>Paper P</b>
<b>Date of the meeting:</b>	6 <sup>th</sup> October 2022	
<b>Title:</b>	<b>Flu Vaccine &amp; Covid Autumn Booster</b>	
<b>Report presented by:</b>	Clare Teeney- Chief People Officer	
<b>Report written by:</b>	Charles Goss – Head of Service Occupational Health	

<b>Action – this paper is for:</b>	Decision/Approval		Assurance	x	Update	
<b>Where this report has been discussed previously</b>	N/A					

<b>To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which</b>
This report provides assurance that planning has taken place to address the requirements of the Covid-19 autumn booster and seasonal flu vaccine for the UHL workforce and that these are now being deployed.

<b>Impact assessment</b>
<p>This report relates to:</p> <ul style="list-style-type: none"> <li>• Workforce/ Staff Health</li> </ul> <p>And the beneficial impact on staff health, workforce absence, and infection prevention and control in patient groups/service users that a comprehensive vaccination strategy will bring.</p>

<p>Acronyms used:</p> <p>OH- Occupational Health</p> <p>NBS- National Booking System (for Covid vaccinations)</p> <p>QIV(c)- Cell cultured quadrivalent influenza vaccine</p> <p>NIVS- National Immunisation and Vaccination System</p> <p>CQUIN – Commissioning for Quality and Innovation</p>
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## **Purpose of the Report**

This report aims to:

- Introduce the necessary background to the Covid-19 autumn booster campaign and seasonal influenza vaccination campaign for healthcare workers
- Give an overview of current plans, strategy and deployment
- Sigh the committee to two potential risks

## **Recommendation**

The Board is recommended to:

Be assured that sufficient planning has taken place to address the requirements of the Covid-19 autumn booster and seasonal flu vaccine for the UHL workforce.

## **Summary**

This report provides the committee with a high-level overview of the initial plans and deployment in place to address the requirements of the Covid-19 autumn booster and seasonal flu vaccine for the UHL workforce.

Covid-19 autumn boosters will be offered via the UHL Hospital Hubs to all eligible Cohorts, including healthcare workers, under the provisions of a new contractual arrangement with NHSEI.

In addition, the UHL Hospital Hubs will support the OH service with delivery of the seasonal flu vaccine to the UHL workforce. After a bias towards use of the Hospital Hubs as a venue for delivery for flu vaccinations last season, we propose a hybrid approach where we will re-establish the successful peer vaccinator model, with no cap on the number of vaccinators that can be trained. With additional mobile OH vaccinators operating evening and weekend sessions and 'targeted walkabouts', the opportunities for flu vaccination will be greater than in any previous year and we hope that this will encourage and enable the uptake.

## **Main report detail**

### **Background**

The annual Flu vaccination programme for UHL staff is again slightly different this year as:

- UHL Vaccine Hubs will be offering autumn Covid-19 boosters to **all** eligible cohorts (public and healthcare workforce) in line with the national campaign
- We intend to offer flu vaccines to UHL staff alongside the autumn Covid-19 booster (co-administration) to maximise access and exploit efficiency where possible, as well as single vaccines if preferred.
- There is no current expectation that UHL will be asked deliver Flu vaccines to occupational groups beyond our own employees/ workforce or public cohorts

There is concern about a 'worse' flu season this year after negligible levels of circulating flu virus last year are expected to result in reduced immunity this year. The Flu season in Australia started early with a surge in children and is generally regarded as a bellwether for what follows in the northern hemisphere.

## **Current planning information**

### **Vaccines and dates**

Two flu vaccines will be available for staff: Seqirus QIV(c) for those < 65 years, and Flud Tetra for >65's as per national recommendations (16,500 + 200 Doses purchased). Initial delivery schedules were accurate, and first delivery was received on 20<sup>th</sup> September.

Two Covid-19 booster vaccines will be available, with adults being offered the new bivalent (original/omicron) Moderna Spikevax and a supply of Pfizer vaccine will be offered to <18's or those who need a primary dose of Pfizer. The autumn booster campaign commenced the week commencing 19<sup>th</sup> September.

### **Targets**

**Flu-** The national targets set for staff are across a bandwidth from 70-90%, incentivised as part of the CQUIN scheme. However, in UHL we have not included staff flu uptake in the locally negotiated CQUIN scheme so there is no financial penalty applicable. Nevertheless, uptake will be under close monitoring and our goal is to achieve as close to **90%** as possible.

**Covid-19-** there is no nationally set target for staff for the autumn booster.

### **Strategy- overview (subject to additions and revisions)**

The flu steering group has been reinstated and met for the first time on 25 August 2022. This group oversees the planning and delivery of flu vaccines to staff, and will collaborate closely with the UHL Vaccine Hub T&F group.

- Flu and Covid-19 boosters will be available in the vaccine hubs at the three main UHL sites:
  - One UHL Hub will be open each day for Covid-19 boosters for all Cohorts, for six days per week.
  - Covid-19 boosters can be booked on Swiftqueue or via NBS.
  - There will be ringfenced days/ slots for staff for Covid-19 boosters.
  - On staff only days the Flu vaccine will be offered simultaneously.
  - Additional 'Flu only' days will be offered to staff with the Hubs being operated by the occupational health team for 'drop ins'. These will be communicated flexibly to match operational capacity.
- Peer vaccinators will be trained and will be operational in all clinical areas – there is no cap on how many we can train as all training is online. We have had a good initial response to the invitation to train as a peer vaccinator, with the next step being able to convert these expressions of interest into fully signed off vaccinators. We aim to train well over 200 vaccinators, as we did in years prior to the pandemic. The only rate limiting step is how much time peer vaccinators can volunteer.
- OH mobile vaccinators will operate evening and weekend sessions and 'targeted walkabouts' and hold the 'Flu- phone' later in the season when better data regarding "cold spots" exists.
- Cross working with LPT peer vaccinators in a reciprocal arrangement. This ensures staff in community sites have more access to the Flu Vaccination.

## **Incentives**

We are offering a 'sandwich meal deal' voucher to all UHL staff who take a flu vaccine via UHL routes. Flu branded pens are the most popular token offering and will be provided. A prize draw for high street vouchers for all recipients of the flu vaccine will be held at the end of the season. Special prize draws with generous high street vouchers will be held for peer vaccinators.

## **Communications**

Our UHL Communications team will support all messaging and promotion of how to access vaccinations as in previous years. Weekly data will be published to promote healthy competition between staff groups and CMG's. Opportunity for board members to be vaccinated and engage in publicity, as in previous years.

Julie Hogg has kindly volunteered to be our Clinical Board Champion.

## **Data**

Both flu and covid-19 vaccines will be recorded on the national point of care system 'NIVS' as in previous years.

Analysis of uptake by staff groups and geographical area will help inform 'targeted' activity of peer vaccinators and OH staff in lower uptake areas, as in previous years. Access to data for staff who have been vaccinated elsewhere (GP's/Pharmacies) will be important but there are national issues about access to this data.

Vaccination uptake by UHL colleagues will be reported to the People and Culture Sub Committee and Board of Directors.

## **Risks**

The uptake of the flu vaccine and third dose of Covid-19 in staff cohorts last year was adversely affected by the government's Vaccination as a Condition of Deployment (VCOD) strategy, which was later abandoned. There was a much higher than expected degree of distress in the workforce about this. There may be a legacy effect of this.

UHL can extract data on vaccinated staff to provide the necessary data returns for staff vaccinated in the hubs, by peer vaccinators and by OH. However, clarification is awaited as to if/ how we can extract data on staff vaccinated elsewhere e.g. by their GP. This disparity could lead to a significant underreporting of uptake and was still an unresolved issue last year. This is a national issue and has been raised via regional forums.

**ENDS**