

<p>Gateway reference : 12772</p> <p>TO: All Chief Executives in NHS Trusts in England, All Chief Executives in Primary Care Trusts in England, All Chief Executives in NHS Foundation Trusts in England, All Chief Executives in Strategic Health Authorities in England</p> <p>CC: All Chairs in NHS Trusts in England, All Chairs in Primary Care Trusts in England, All Chairs in NHS Foundation Trusts in England, All Chairs in Strategic Health Authorities in England All Flu Lead Directors in Strategic Health Authorities in England All Chief Executives in Local Authorities in England Monitor Care Quality Commission Health Protection Agency</p>	<p>Richmond House 79 Whitehall London SW1A 2NS 020 7210 4340 ian.dalton@dh.gsi.gov.uk</p>
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15 October 2009

Dear Colleague

A (H1N1) Swine Influenza: Vaccination Programme Update

I am writing to update you with logistical detail to support your local vaccination programme planning. Vaccination is the surest way in which people can be protected from swine flu and is therefore an essential part of our strategy. High rates of vaccination will both save lives and reduce pressure on the NHS. All NHS boards are therefore responsible for running effective campaigns for at risk patients and staff groups and I know that you have been preparing for this.

The second wave of the flu pandemic is under way. Current figures suggest that so far the virus is spreading more slowly than could have been the case. This is good news and gives added importance to our work to get the vaccine to as many people as we can, as soon as we can.

In this context I am pleased to be able to give you details of when the public and NHS staff vaccination campaign will commence.

Delivery of vaccine

The first batches of licensed vaccine are now in the NHS distribution network and it is anticipated that the amount of vaccine available to the NHS will increase rapidly over the next few weeks.

The first supplies will reach NHS acute hospitals from 21 October. All NHS acute hospitals should receive supplies shortly thereafter. These supplies should be used to protect frontline NHS staff as well as any in-patients in at-risk groups in hospital who clinicians feel need to be vaccinated. The supply to each hospital will be scaled to size so that larger hospitals receive more vaccine.

Deliveries to Ambulance Trusts and Mental Health Trusts are dependent on the further shipment of vaccine supply being received in the UK. We shall continue to work with you over the coming 48 hours to firm up delivery points and addresses. A supply of vaccine will also be sent to each PCT in the week beginning 26 October.

The earliest possible delivery date for the first supplies of vaccine to general practices is from the week beginning Monday 26 October 2009. Initially practices will receive one box of Pandemrix (GSK) vaccine containing 500 doses. It is likely to take around 3-4 weeks to complete the distribution of first supplies to all GP practices because of the nature of the distribution logistics. A supply of Pandemrix (GSK) vaccine will be sent to every Primary Care Trust (PCT), Ambulance Trust and Mental Health Trust, in the week beginning 26 October. A stock of Celvapan (Baxter) vaccine for use in patients with confirmed anaphylaxis to egg will also be sent to PCTs in the week beginning 26 October. After this date PCTs and Acute Trusts will be able to order additional supplies of vaccine subject to supply from manufacturers. We will ensure that PCTs will be provided with advance warning as to when GP practices will receive delivery of vaccine boxes to enable them to organise clinics appropriately. We need to ensure that delivery points for PCTs do not duplicate deliveries to GP practices. Also, the effectiveness of vaccines is dependent on the maintenance of the cold chain during their supply and storage. Expert pharmaceutical advice should be sought to ensure all the necessary arrangements and facilities are in place.

Although the UK is now receiving supplies of vaccine, we are dependent on a biological process for manufacture and so these dates remain subject to change.

Who has been prioritised for vaccination and who will vaccinate them?

The Joint Committee on Vaccination and Immunisations has recommended that high-risk groups from the general population and frontline health and social care staff are to be prioritised for vaccination against swine flu

(http://www.dh.gov.uk/en/Publichealth/Flu/Swineflu/InformationandGuidance/Vaccinationprogramme/DH_105455).

In line with previous guidance, all NHS organisations should have developed plans to vaccinate staff directly involved with patient care and now be moving to mobilise them.

When they receive their vaccine supplies, I expect PCTs to assist in vaccinating frontline social care staff as well as putting into place their plans to vaccinate NHS front line community staff. Social care organisations will receive their supply from their local PCT. Directors of Adult Social Services will be able to advise PCTs on quantities required. Roy Taylor, National Director for Social Care Flu Resilience, has today written to all Directors of Adult Social Services to update them on the vaccination programme.

There are also a range of materials which have been produced by our Immunisation team including patient information forms, consent forms and key facts which will be available on the Department of Health website shortly. These materials will be available at www.dh.gov.uk/swineflu.

Data collection on vaccinations for frontline staff

The Department will be collecting vaccine uptake data for those staff involved in direct patient care. Returns will be needed from each NHS and NHS Foundation Trust (including acute, mental health and ambulance), PCT and Care Trust. For PCTs, this includes GPs, GP practice staff and dentists, as well as PCT staff. Each Trust will be responsible for providing their own data and I ask that you ensure that your returns of this important information are accurate, complete and timely.

Funding arrangements

The vaccines will be made available and distributed to the NHS users free of charge. Roy Taylor, in his letter, sets out the funding arrangements for local authority social services departments.

Following successful negotiations between the Department of Health, General Practitioners Committee (GPC) of the British Medical Association (BMA) and NHS Employers, the vaccination of the clinical risk groups will be administered by general practitioners. The new deal will mean that general surgeries will receive £5.25 per dose of vaccine given. It will help surgeries to contact patients, administer the vaccine and, if necessary, take on extra staff.

The Department of Health will transfer appropriate funding to SHA / PCT budgets for the general practitioners administration costs of the swine flu vaccination programme to priority groups.

SHAs and PCTs are familiar with arrangements for paying general practitioners for the delivery of services and appropriate arrangements for swine flu vaccination payments will be made locally under a national Directed Enhanced Service (DES).

Chief Medical Officer / Chief Nursing Officer / Chief Pharmaceutical Officer letter

The Chief Medical Officer, Chief Nursing Officer and Chief Pharmaceutical Officer are also writing today to all GPs, medical and nursing directors, A&E departments, obstetricians and pharmacists. The annex to their letter contains information on dosage, storage, use of vaccines in pregnancy, consumables and wastage, administration, adverse reactions, data collection and information resources.

Communications resources

It is important that all organisations ensure that their staff have a sound understanding of the rationale behind staff vaccination, so that they can make an informed decision about taking it. Your local communications team will currently be in the process of planning a campaign to encourage frontline staff vaccination and it is important that you lend your support to their work.

The Department of Health has produced a range of communication products to support staff engagement. These include core scripts which you could use to brief staff, a Q&A which responds to the questions frontline staff are asking about the vaccines and a mythbuster. These are available at http://www.dh.gov.uk/en/Publichealth/Flu/Swineflu/DH_107125.

Finally, I wish to thank you all once again for all your hard work to ensure that the NHS is as resilient as possible as we enter the winter months. As a result of all these efforts the NHS is at a higher state of readiness than ever before. I am confident that delivering an effective vaccination programme will go a long way to ensuring this.

Yours sincerely,



Ian Dalton
National Director of NHS Flu Resilience
Department of Health

Annex A

SHA Flu Lead Directors

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