

NHS Board Meeting
25 November 2020

Lanarkshire NHS Board
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SUBJECT: FLU VACCINE DELIVERY UPDATE

1. PURPOSE

The purpose of this paper is to provide Board Members with an update on the Flu vaccination programme.

For assurance	<input checked="" type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input type="checkbox"/>
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2. ROUTE TO THE BOARD

This paper has been prepared by Dr Mark Russell, Associate Medical Director, North Lanarkshire, Health & Social Care Partnership.

3. SUMMARY OF KEY ISSUES

Progress and trajectory

We have reported to Scottish Government that the NHS Board remains on trajectory, as of 15 November, having delivered 167,254 vaccines - 105% of the projected number by this stage. The breakdown of the number of vaccines delivered in each category is shown below.

65 and over	86,893
Primary School Children	28,593
Under 65 at risk	29,457
Children aged 2-5	8,039
Health Care Workers	5,757
Frontline Social Care Workers	2,576
Eligible Shielding Households	1,837
Unpaid and young Carers	1,670
Pregnant Women	526

Currently, around 3,000 people per day are being vaccinated. This has fallen from the previous 4,000 - 5,000 per day, mainly due to the over 65 programme coming towards a conclusion and resulting drop in throughput from this cohort.

We expect to pass our 75% target for over 65s on Thursday 19 November. Under 65's at risk is a more challenging group to reach, and previous SIRS scheduling issues significantly delayed the start of this part of the campaign. However, we expect to surpass last year's attainment (40%) by the middle of week beginning 23 November. We have surpassed last year's attainment in the 2-5 year olds cohort (44%) this week. We will continue to work towards Scottish Government targets in all

groups. We plan to move to a patient-focussed booking approach for anyone who has not yet been vaccinated from beginning on Monday 23 November.

Issues

There have been no further issues with SIRS scheduling and this activity has now been completed, though we expect that letters will continue to arrive with patients over the next few days, for appointments at the start of December.

The call handling workforce has been maintained. The additional call volumes likely to be generated by the patient focussed booking approach are unknown, but as approximately 80% of calls are currently being answered, and calls generated by the receipt of SIRS letters will cease, we expect that the current workforce will be able to manage this. However, as a precaution, it will be augmented by two further staff from week beginning 23 November. We are now also offering email rebooking to reduce the need for patients to call.

We have not yet been advised by Scottish Government whether we will be expected to vaccinate the 55-64 year olds cohort. This would pose significant scheduling problems, as if SIRS was used then patients would now not be able to be appointed until mid-December. This would also be challenging from a workforce perspective and would also impact on our ability to deliver a COVID vaccination campaign at that time, if a vaccine is available.

Staff vaccination

Approximately 47% of NHS Lanarkshire staff, and 37% of frontline social care staff have now been vaccinated. We are significantly ahead of our projection in this area, however, mindful of the prospective availability of COVID vaccinations, we are working to accelerate this. Occupational Health colleagues are undertaking promotion activities, and delivering ongoing weekly peer vaccinator training, particularly to care home staff. Occupational Health Staff are also undertaking outreach visits to vaccinate staff in residential homes.

Vaccine supply

We have been allocated approximately 8,000 further doses of aTIV for over 65s, and have been allocated 22,000 doses of QIVe to augment our supplies of QIVc for under 65s. Overall, vaccine supply remains adequate.

Communications

MSP/MP enquiries have significantly reduced. We were able to respond positively to a request for additional clinics in one of our localities. We plan another briefing over the next few days in anticipation of our move to patient focussed booking. A weekly infographic showing number of clinics and number of people vaccinated is being utilised on social media.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	AOP	<input checked="" type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input checked="" type="checkbox"/>	Statutory requirement	<input checked="" type="checkbox"/>	AHF/local policy	<input type="checkbox"/>
Urgent operational issue	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

These are set out in the update in terms of projected activity and management of the programme.

7. FINANCIAL IMPLICATIONS

Not applicable.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

The main risk is in not having sufficient numbers of staff and public vaccinated before any COVID vaccine programme is launched. Further communication efforts are directed at ensuring that we maximise the uptake of the Flu vaccine in advance of any Covid programme.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance Management	<input type="checkbox"/>	Equality	<input type="checkbox"/>
Sustainability Management	<input checked="" type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT / FAIRER SCOTLAND DUTY

Not Applicable.

11. CONSULTATION AND ENGAGEMENT

Not Applicable.

12. ACTIONS FOR THE BOARD

Approve	<input type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

The Board is asked to

1. Note the progress being made in relation to the Flu vaccination programme; and
2. Derive assurance that trajectories are being met (in some cases exceeded) and that the plan is being delivered.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact:

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