

CHILDREN'S SEASONAL FLU VACCINATION SERVICE



Your health challenge

- Less than 65% of eligible children were vaccinated in 2018/19; this rate decreases to <60% as children get older¹; this is lower than Public Health England's ambition of 65% uptake rate for school-aged children¹
- Children can face serious complications from flu, including a painful ear infection, acute bronchitis and pneumonia, as well as infecting vulnerable relatives²
- Healthy children under five are more likely to have to be admitted to hospital with flu than any other age group²

How can community pharmacies help?

Community pharmacies provide a professional, convenient and accessible service to the community. Many pharmacies are already providing flu jabs and other vaccinations (for example, travel or chickenpox vaccines) and are therefore competent in this area.

Community pharmacy teams in Leicestershire have been taking part in a 'mop-up' programme³ allowing them to vaccinate children in school Years 1-6 against flu.

After an initial successful pilot in 2015/16, the service has been recommissioned every year since.

The service was evaluated³ in 2016 and in 2015/16 a total of 240 children (70% of those that responded to the initial invitation letter) had the vaccine administered at one of the 14 community pharmacies participating in the service.

The evaluation found that all parents stated that they found it easy to have their child vaccinated in the community pharmacy, rated the experience as extremely good and would definitely use the service again if the opportunity was available.

1. PHE, Seasonal influenza vaccine uptake in children of primary school age: winter season 2018 to 2019 (2019).

2. PHE, Protecting your child against flu leaflet (2019)

CHOOSEPHARMACY

What the experts say

"This is a highly valued service as it provides busy parents a choice of pharmacies to have an appointment, at a time convenient to them. The majority of vaccinations were delivered in the evening and on Bank Holidays showing the effective utilisation of pharmacy services outside of normal hours at times convenient to parents and kids".

Luvjit Kandula, previous Chief Officer, Leicestershire and Rutland LPC

What the patients say

All parents stated that they were happy with the length of time they waited to gain an appointment at their pharmacy.

All parents felt that the pharmacist fully explained what to expect, both to them and their child. All vaccinations were offered in a private consultation room.³

3. Leicestershire Partnership NHS Trust, Pilot for the Administration of Nasal Flu Vaccine by Community Pharmacy Evaluation Report (2016)

THINKPHARMACY

Potential benefits of a community pharmacy children's flu vaccination service

1. Highly accessible for patients

Community pharmacy has a greater density in the most deprived areas. Community pharmacies are highly accessible locations; research has shown that 89.2% of the overall population and 99.8% of people from the most deprived areas live within just a 20-minute walk of a community pharmacy.⁴ This is consistently higher when compared with the population living within a 20-minute walk of a GP practice.⁵ Many community pharmacies are also open for extended hours in the evenings and weekends, again ensuring accessibility for patients.

2. No appointment needed

No appointments are needed to see a pharmacist and pharmacies generally have longer opening hours than GP practices and other clinics, including many being open at weekends. Since pharmacies are located on the high streets, near schools, where people shop and live, they are perfectly placed for many busy parents who may struggle to get an appointment during the traditional opening hours of a GP practice.

3. Reduces workload for overstretched GP practices

GP practices are struggling to cope with their increasingly demanding workload so a community pharmacy flu vaccination service for children helps lessen this by reducing the number of patients visiting their GP practice for the service. This helps ensure GPs are only seeing patients who need to be seen.

4. Helps to protect vulnerable relatives

Vaccinating children each year protects them but also aims to reduce transmission across all age groups, protecting those who are at increased risk of becoming seriously ill from the virus, lessening levels of flu overall and reducing the burden across the population.³ It also reduces the likelihood of working parents having to take time off work or other activities because they need to look after their sick children.

How might your local service work?

The purpose of the service is to ensure patients and their parents/guardians have convenient access to a 'catch-up' service. There are occasions where children are unable to get vaccinated at school, for example, if on the day of the vaccination they have a severely blocked nose, are wheezing, or if they are absent.

In this instance, children whose parents consented for the vaccine but did not receive it in school could be sent a letter to their home to offer their child a flu vaccine at a community pharmacy. The letter can outline all the pharmacies that offer the service, so the parents can choose the location that is most convenient to them, for example, the pharmacy closest to where they live or the child's school.

When they attend, the pharmacist will undertake a clinical check (for example, by accessing the child's Summary Care Record) to determine whether the child is suitable and well enough on that day to receive the vaccine.

4. Todd et al. *The positive pharmacy care law: an area-level analysis of the relationship between community pharmacy distribution, urbanity and social deprivation in England*, (2014)

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The parent would be required to complete a medicine information form to make known any allergies the child has, family history, medical conditions or medicines the child is currently taking to ensure the vaccine is clinically appropriate. The full inclusion and exclusion criteria would be outlined in the Patient Group Direction.

Once the vaccine is administered, the pharmacist would complete a form detailing the relevant information. This could be captured using an electronic software system, with a copy of the form sent to the child's GP practice.

Stock of the vaccines could be managed by the commissioner and delivered to the pharmacies in batches under cold chain arrangements.

The start of the service should be timed with the school's vaccination programme to ensure children are identified and followed-up promptly before flu starts circulating in the community.

5. Todd A et al, *Access all areas? An area-level analysis of accessibility to general practice and community pharmacy services in England by urbanity and social deprivation*, (2015)

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