



SCOTTISH EXECUTIVE

Health Department

Dear Colleague

1. INFLUENZA IMMUNISATION PROGRAMME FOR 2005-06

2. PNEUMOCOCCAL IMMUNISATION PROGRAMME FOR THOSE AGED 65 AND OVER – 2005-06

1. Our earlier CMO letters [SEHD/CMO \(2005\)7](#) (dated 16 August 2005) and [SEHD/CMO\(2005\)3](#) (dated 30 June 2005) set out the policy background and additional information about arrangements for this year's influenza and pneumococcal vaccination programmes.

2. This letter, which has been agreed with SGPC, provides a final update on the key elements of the vaccination programmes, and specifically:

- information of a **contingency stock** of influenza vaccine;
- details of **adverse reaction reporting**;
- details of **information materials** and how these can be obtained (Annex A);
- the finalised **text of the centrally generated letter** (Annex B);
- confirmation of **payment arrangements** for a Directed Enhanced Service (DES) for immunisation against influenza for those aged 65 and over and the relevant under 65 “clinical risk” groups and immunisation against pneumococcal infection for those aged 65 and over;
- confirmation of **payment arrangements** for the additional group added to the the Clinical at Risk Group- individuals with chronic liver disease; and individuals who are the main carer for an elderly or disabled person which are not included in the DES arrangements (Annex C).

3. Information on the publicity campaign relating to these vaccination programmes will be available in due course on the following Executive website:- www.infoscotland.com/flu. **Please note that this website will be live from 5 October** (see also Annex A.)

From the Chief Medical Officer, Chief Nursing Officer and Chief

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For action

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General Practitioners

Practice Nurses

Health Visitors

Community Pharmacists

Chief Pharmacists

Immunisation Co-ordinators

CPHMs

Directors of Public Health

Medical Directors, NHS Boards &

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Scottish Prison Service

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Specialists in Pharmaceutical Public

Health

Infectious Disease Consultants

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Health Protection Scotland

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Further Enquiries

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INVESTOR IN PEOPLE



Vaccine Supply Issues

4. As you will be aware some suppliers have delayed delivery of their flu vaccines, in some cases by 2-4 weeks. A letter was issued by John Froggatt on 9 August 2005 explaining the reasons for the delayed delivery and advising that Community Pharmacists whose orders would be affected would be contacted by their supplier and informed of their revised delivery times.

5. Patients should be reassured that they will be vaccinated. General Practitioners have been made aware of this issue and have been asked to liaise with Community Pharmacists to ensure that they have a sufficient stock of vaccine before publicising their local campaigns and scheduling patients for clinics. It is important that the integrated publicity and information campaign proceeds as planned to emphasise that those eligible still need to make arrangements to be vaccinated.

Influenza contingency stock

6. As in previous years, the Executive is in the process of securing a central stock of influenza vaccine as a contingency measure. NHS Boards' Immunisation Co-ordinators may have access to this contingency stock if influenza infection reaches epidemic proportions; guidance on related procedures will be issued separately.

Payment arrangements for vaccination

7. Under the terms of the new General Medical Services contract, there is a Directed Enhanced Service (DES) available for providing this service. A detailed specification for this DES was issued under cover of [NHS Circular PCA\(M\)\(2004\) 20](#), on 13 September 2004.

Aims

8. Throughout the UK, the target for immunising those aged 65 and over against influenza is 70%. For immunising against influenza for those in the non age related at-risk groups a target of 60% has been set for 2005/06. No target has been set for immunising those aged 65 and over against pneumococcal infection. For both influenza and pneumococcus, GPs should maximise uptake in the interests of patients. In all cases, the final decision as to who should be offered immunisation is a matter for the clinical judgement of the GP.

Eligibility

9. Payment arrangements under the scheme will apply as follows:

- (i) For influenza immunisations given to all at-risk patients who are immunised by 31 March in the relevant financial year. These include all of those who are or will be aged 65 or over on 31 March in the relevant financial year. For payment purposes, the immunisation programme will operate from 1 August to 31 March in the relevant financial year. It is for each practice to identify the patients concerned from their records and this will be consistent with the registers maintained as part of the Quality and Outcomes Framework.

(ii) For pneumococcal immunisations given to those aged 65 and over who are immunised by 31 March in the relevant financial year. These include all of those who are or will be aged 65 or over on 31 March in the relevant financial year. For payment purposes, the immunisation programme will operate from 1 April to 31 March in the relevant financial year.

Pricing

10. Payment arrangements will continue at the current existing rate uplifted by 3.225% per annum. The rates for 2005/06 will be as follows:

<u>Pneumococcal (65 and over)</u>	£7.51
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<u>Influenza (65 and over)</u>	
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if more than 50% of the age group have been immunised	£8.70
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if up to and including 10% of the age group have been immunised	£7.05
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if between 10% and 50% of the age group have been immunised a sliding scale is used	£7.05 to £8.70
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<u>Influenza (under 65 and in an at risk group)</u>	£7.51
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11. It is expected that, as is normal procedure, influenza immunisation will be concentrated in the period 1 September to 31 January of the relevant financial year. However, immunisation given at any time between 1 August and 31 March of the relevant financial year will qualify under this scheme. For pneumococcal immunisations, these can be given throughout the period 1 April to 31 March of the relevant financial year.

12. National Read codes are available and examples in use are shown below. These will be standardised as part of the UK approach to having agreed Read code definitions. If practices store information on computers, they should ensure that all staff enter the same Read code to indicate immunisations have been given or offered. The current codes are as follows:

INFLUENZA

8I2F. Influenza vaccination contraindicated (I=letter not number)

68NE. No consent - influenza imm.

9OX5. Influenza vaccine declined (O=letter not number)

65E.. Influenza vaccination

14LJ. H/O:influenza vaccine allergy

U60K4 [X] Influenza vaccine causing adverse effects therapeutic use (0=number not letter)

ZV14F [V]Personal history of Influenza vaccine allergy

8I6D. Influenza vaccine not indicated (I = letter not number)

ZV048 [V] Influenza vaccination (0=number not letter)

n47% (these are read codes attached to prescriptions)

allergy codes eg. 14LJ. only need to be entered once for the new GMS contract, rather than every 15 months for most of the other codes .

PNEUMOCOCCUS

65720 pneumococcal vaccination given (0=number not letter)
8I2E. pneumococcal vaccination contraindicated (I=letter not number)
68NX. No consent pneumococcal immunisation
8I3Q. Pneumococcal vaccination declined (I=letter not number)
ZV14G [V]Personal history of pneumococcal vaccine allergy
U60J8 [X]Pneumococcal vaccine causing adverse effects in therapeutic use (0=number not letter)
n4B.. – (read codes attached to prescriptions)

The codes ZV14G and U60J8 are new read codes and not yet available in GPASS (due in the 5.7 release).

Note that the dots after the codes are important and GPASS users need to add a dot at the beginning of the code when entering information through the Read code browser.

Measuring Uptake

13. As advised in CMO letter [SEHD CMO \(2005\)7](#), during 2005-06, Health Protection Scotland (HPS) will continue to measure uptake of influenza vaccination and provide monthly uptake data to SEHD from October 2005 to January 2006. These reports will be circulated by HPS to SEHD and NHS boards in the usual way. Final uptake figures for influenza vaccination will continue to be based on GP payment data, which will be available in final form around April 2006.

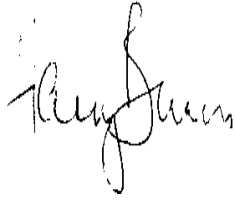
14. Assessment of uptake of pneumococcal vaccination will also be based on GP payment data, which will be available in final form around April 2006.

Adverse Reaction Reporting

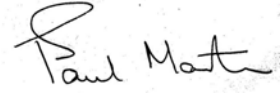
15. If a doctor, nurse or pharmacist suspects that a serious reaction to influenza or pneumococcal vaccine has occurred, they should report it to the Committee on Safety of Medicines using the Yellow Card Spontaneous Reporting Scheme. The clinical adverse reaction reporting mechanisms in Scotland for influenza and pneumococcal vaccine are the same as for all other medicines, and follow the Medicines and Healthcare Products Regulatory Agency (MHRA) 'Yellow Card' scheme – <http://medicines.mhra.gov.uk/ourwork/monitorsafequalmed/yellowcard/yellowcardscheme.htm> Information should also be sent to the Committee on Safety of Medicine's Regional Reporting Centre in Edinburgh at Committee on Safety of Medicine Scotland, CARDS, Freepost, SCO7777, Edinburgh EH3 0BR.

16. Finally, thank you for all the work you have and will undertake to ensure a successful joint campaign in 2005-06.

Yours sincerely



DR HARRY BURNS
Chief Medical Officer



MR PAUL MARTIN
Chief Nursing Officer

PROFESSOR BILL SCOTT
Chief Pharmaceutical Officer

ANNEX A

PUBLICITY AND INFORMATION

As set out in CMO letter [SEHD CMO\(2005\)7](#), arrangements for publicising this year's integrated campaigns have now been finalised.

We are pleased to announce that the annual integrated influenza and pneumococcal campaign has been refreshed. The new front for the annual integrated programme will be TV doctor, Chris Steele. To maximise the effects of the campaign we have fully integrated all TV, print and public relations activity.

Supplies (list of materials shown below) will be distributed to healthcare professionals and related organisations **during week commencing 26 September 2005.**

As in previous years, it would be appreciated if these publicity materials could be displayed prominently, and used in preference to any alternative materials provided by vaccine manufacturers, **from the official launch date of 5 October 2005.**

List of Materials to be distributed week commencing 26 September 2005

Professional factsheet -This factsheet is intended for use by a range of healthcare professionals and may also be useful for patients where more detailed information is sought.

Patient Information leaflet for those over 65 or in an at risk group

Patient Information for protecting children at increased risk against flu

Patient Information leaflet on Pneumococcal

Patient Information leaflet for Healthcare Workers

Posters

Further Supplies of materials

From 5 October, further supplies of both patient information leaflets and the joint poster will be available after issue from the Executive's web site – www.infoscotland.com/flu or in hard copy from Chris Sinclair in Public Health Division by fax (0131 244 2157) or e-mail: (Chris.sinclair2@scotland.gsi.gov.uk)

Press, TV and radio

- National TV, Radio and Press advertising will be used to raise awareness of the influenza campaign programme from week commencing 10 October. This advertising will continue until November 2005.

TEXT OF CENTRALLY-GENERATED AWARENESS LETTER

“Free flu and pneumococcal vaccination”

As you are, or shortly will be, aged 65 or over, you are eligible to receive a free vaccination against flu (influenza). This vaccination will be available at your GP practice and will help protect you from flu over the winter months, and can stop other, more serious complications as a result.

Flu is an illness caused by a virus. For most people the flu is just a nasty experience, but for some it can lead to more serious complications, such as bronchitis and pneumonia. As people get older they become more vulnerable to these conditions. Because flu viruses are always changing, people need the new vaccine each year. This winter's flu virus will be slightly different from last winter's flu virus. NHSScotland will therefore offer free flu vaccine to everyone aged 65 years and over on or before 31 March 2006.

You are also entitled to a free vaccination against pneumococcal disease if you have not been already vaccinated. Pneumococcus is a bacteria which can cause serious illness, including pneumonia and meningitis. Unlike flu vaccine most people require only one dose of the pneumococcal vaccine and last year it was offered to all those aged 65 years and over. If you are unsure about whether you have already received the pneumococcal vaccination or unsure if you need the vaccination again, please discuss it with your GP or practice nurse at the time of your appointment for flu vaccination.

Each GP practice will make its own arrangements for offering the flu and pneumococcal vaccines, which will usually commence in October. However, if, by late October, you are not aware of these arrangements, please contact your GP practice directly.

If you wish to have further information on the vaccines, please call the NHS helpline free on 0800 22 44 88 between 8 am and 10 pm, 7 days a week or speak to your local GP practice or pharmacist. Alternatively, you can visit the website http://www.scotland.gov.uk/health/flu_pneumococcal

NHSScotland takes care of your personal information, and wants to keep it accurate. This letter was generated from a local automated listing of eligible patients in your area. If any of your details are inaccurate please write to the address on the front of this letter and your details will be updated. If you want further information on how NHSScotland uses your personal information the booklet 'Confidentiality, it's your right' is available from your NHS Board Headquarters. You can also access the booklet from the website at <http://www.scotconsumer.org.uk/hris/leaflets/confid/index.htm>

Yours faithfully

Flu/Pneumococcal Vaccination Co-Coordinator
-----NHS Board

CLAIMS FOR PAYMENT

IMMUNISATION AGAINST INFLUENZA for those aged 65 and over and relevant at risk groups, also IMMUNISATION AGAINST PNEUMOCOCCAL INFECTION for those aged 65 and over

A new claim form is been introduced this year to cover the wider range of claim types that are now available and separate guidance, including timescales, will be issued by PSD shortly explaining the claiming process.

The CHI lists of eligible patients will not be issued routinely this year, as most Practices are able to generate their own lists from their GP systems, however they will be supplied on request.

Influenza immunisation for individuals with chronic liver disease

An additional group has been added to those recommended to receive flu immunisation in the Clinical at Risk Groups.

This group is not included within the DES arrangements. As outlined in [CMO letter \(2005\)7](#), NHS Boards are required to negotiate a Local Enhanced Service (LES). It is important to note that where a patient is already covered under existing DES arrangements ie are in a clinical “at risk” group, or 65 or over, then they should not be claimed for under the arrangements for reimbursement for chronic liver disease.

Influenza immunisation for carers

Those who are the main carer for an elderly or disabled person, whose welfare may be at risk if the carer falls ill, have been added to those recommended to receive flu immunisation

This group is also not included within the DES arrangements. As outlined in CMO letter (2005)7 and John Froggatt’s letter of 24 August 2005, NHS Boards are required to negotiate a Local Enhanced Service (LES). It is important to note that where the carer is already covered under existing DES arrangements ie are in a clinical “at risk” group, or 65 or over, then they should not be claimed for under the arrangements for reimbursement for carers.