



Dear Colleagues,

SEASONAL INFLUENZA (FLU) IMMUNISATION PROGRAMME 2024-25: CONFIRMATION OF ADULT AND CHILD COHORTS

1. The Seasonal Flu Immunisation Programme is essential to protect those who are most vulnerable to severe illness from flu.
2. Despite the challenges across the programme, you successfully delivered flu vaccines to over 2.18 million individuals during the 2023-24 season. Thank you to everyone who was involved and contributed to this success.
3. Winter 2023-24 in Scotland saw 53.7% of the entire eligible adult population receive a flu vaccine. Vaccination uptake rates in the 65 years and over cohort remained high, reaching 79.8%. This is above the World Health Organization's target ambition of 75%. This key objective in health protection was only accomplished because of your professionalism, commitment and hard work.
4. 59.3% of the entire eligible childhood population received a flu vaccine, with primary school uptake our strongest group at 69%.

Key Objectives

5. The key objectives of the Seasonal Flu Immunisation Programme are:
 - To protect those most at risk of severe illness from flu and to support the resilience of the health and care system, particularly during the winter months.

**From Chief Medical Officer
Chief Pharmaceutical Officer
Interim Chief Nursing Officer**
Professor Sir Gregor Smith
Professor Alison Strath
Anne Armstrong

04/06/2024

SGHD/CMO(2024)10

Addresses

For action

Chief Executives, NHS Boards
Medical Directors, NHS Boards
Directors of Nursing & Midwifery, NHS Boards
Chief Officers of Integration Authorities
Chief Executives, Local Authorities
Directors of Pharmacy
Directors of Public Health
School Nurses
Immunisation Co-ordinators
CPHMs
Scottish Ambulance Service

For information

Chairs, NHS Boards
General Practitioners
Practice Nurses
Primary Care Leads, NHS Boards Infectious
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Further Enquiries

Flu Policy Issues

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Medical Issues

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Vaccine Supply Issues

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- To further increase flu vaccine uptake across all eligible groups, with particular focus on those at highest risk such as those of pre-school age, where good uptake is also important for protecting us all.
- To improve where uptake has recently been low, such as those in a clinical risk group, pregnant women (at all stages of pregnancy) and Health and Social Care Workers.

Eligibility for winter 2024-25

6. Eligibility is based on the advice and recommendations of the Joint Committee on Vaccination and Immunisation (JCVI) and full details can be found in the [Green Book Chapter 19](#). The following groups will be eligible for the Seasonal flu Immunisation Programme in Scotland in 2024/25:

Childhood programme (start date to be confirmed):

- All children aged from 6 months to 18 years in clinical risk groups (*if not eligible in accordance with bullets below*)
- All children aged 2-5 years not yet at school
- All primary school children (primary one to primary seven)
- All secondary school pupils (years one to six)

Adult programme (start date to be confirmed):

- Those living in long-stay residential care homes or other long-stay care facilities
- All those aged 65 and over
- All those aged 18 to under 65 years in defined risk groups. This includes:
 - those in clinical at-risk groups set out in Green Book Chapter 19
 - those experiencing homelessness
 - those experiencing substance misuse
 - asylum seekers living in Home Office hotel or B&B accommodation
 - all prisoners within the Scottish prison estate
 - pregnant women
- Frontline health and social care workers
- Non-frontline NHS workers
- Poultry workers
- Unpaid carers and young carers
- Household contacts of those with immunosuppression

7. Eligibility differs to the previous winter 2023-24 and the following groups are **no longer included** as part of the national programme however people in these groups who are otherwise eligible, i.e. are included in one of the above groups, will be invited and strongly recommended to come forward for vaccination.

- Those aged 50-64 (as of September 2024)
- Teachers and pupil facing support staff
- Prison officers and prison support staff

These extended groups were added as part of the pandemic response which is no longer required. The groups recommended for vaccination this winter are in line with current JCVI advice.

Child Flu

8. Health Boards should make arrangements so that pupils who miss out on vaccination during the school session, are recalled and offered subsequent opportunities to get the vaccine. Likewise, Health Boards should offer the opportunity for those few children under 9 years of age who require a second dose to be vaccinated accordingly. Children who are eligible and who may be home educated, or clinically at risk children who may not be attending school at the time should also be offered vaccination through local arrangements.

Pregnant women

9. Most Health Boards and Health and Social Care Partnerships (HSCPs) will be delivering flu vaccines to pregnant women through their local maternity services again this season. In maternity services where flu vaccination isn't offered at maternity appointments, midwives will encourage women to attend their local vaccination clinic and give details on how to book an appointment.

Health and Social Care Workers (HSCWs)

10. It is imperative that timely flu immunisation of all frontline health and social care workers in direct contact with patients/clients remains a central element in our objective to protect the most vulnerable in our society. In addition, non-frontline NHS staff are eligible for the seasonal flu vaccine in 2024/25. They will be encouraged to book their vaccination using the online portal or national vaccination helpline. Health Boards are also asked to make vaccines as easily accessible as possible, including offering HSCW drop in clinics and workplace vaccination where possible.
11. Last year, staff flu vaccination uptake rates dropped significantly from the previous year, with uptake amongst healthcare workers falling from 55.7% to 42.2%, and uptake in social care workers dropping from 36.4% to 25.9%. Flu vaccination not only protects individual staff members but reduces the risk of transmission of flu viruses within health and social care settings, helping to protect those under their care.
12. Senior clinicians, NHS managers, Directors of Public Health, Local Authorities and Integration Authorities should ensure this work aligns with the prioritisation already being given to our planning response for the health and social care sector this coming winter.

Prisoners, Substance Misuse, Homelessness and Asylum Seekers

13. Health Boards are encouraged to use their judgement and local knowledge, to vaccinate prisoners, people experiencing substance misuse, asylum seekers in Home Office hotel or B&B accommodation and people experiencing homelessness, including all those in temporary accommodation and rough sleepers. It is likely that a significant proportion of these people will have underlying chronic medical conditions, sometimes undiagnosed, and are at high risk of flu related complications. Furthermore flu could spread rapidly in the close conditions experienced in those groups and settings. These groups will be

challenging to deliver to therefore it will involve active outreach and on site delivery to ensure they have access to vaccination.

Timings – adult programme

14. The [JCVI met on 10 October 2023](#) to discuss timings for the flu programme where they assessed the waning of protection from flu vaccines for adults and children and historic timings of the flu seasons.
15. Based on evidence of flu vaccine effectiveness waning over time in adults, the JCVI supported moving the start of the programme to the beginning of October, provided there would be timely completion of the majority of the vaccinations by the end of November, in order to provide the best potential protection to this group over the peak winter period, which typically occurs in December and January. The programme will aim to complete the majority of vaccinations by early December 2024.
16. The exception to this is pregnant women, where the JCVI advised no changes in the timing of their offer. Pregnant women will be offered the flu vaccine from the beginning of September (supply dependant).
17. Optimum programme timings should align with the JCVI advice, with the adult programme starting at the beginning of October. However, in some cases it may not be possible for Health Boards to complete vaccinating their adult cohorts between early October and early December and there may be a need to begin the programme in September to facilitate timely programme completion. Exact programme timings will be confirmed prior to programme start, through the Scottish Vaccination and Immunisation Programme (SVIP).

Timings – child programme

18. The JCVI noted that the LAIV vaccination gives greater length of protection, compared to the adult vaccine. As such, they recommend that the childhood flu programme should commence as early in September as possible, supply dependant. We will work with SVIP and Health Boards to maximise uptake across the childhood groups.
19. As per the adult programme, the child programme will be required to complete the majority of vaccinations by early December 2024, but there should be a concerted effort on behalf of Health Boards to get the childhood groups, and particularly the pre-school group, vaccinated as early as is operationally possible, preferably in September and October 2024. The early vaccination of the childhood groups is especially important to protecting wider society by helping prevent onwards transmission.
20. Exact programme timings will be confirmed to the Health Boards, prior to programme start, by the SVIP.

Action

21. Health Boards, Health and Social Care Partnerships and GP practices which are participating in the programme are asked to note and implement the arrangements outlined in this letter, noting that more detailed operational guidance will be made available from Public Health Scotland (PHS) to delivery teams closer to programme start.

22. We have procured sufficient vaccine to support uptake for the coming season, however ongoing effective management at a local level is essential, to avoid unnecessary wastage.

23. As many people as possible should be vaccinated prior to December. The benefits of flu vaccination should be communicated and vaccination appointments made as easily accessible as possible, especially for those in historically less well served groups.

Yours sincerely,

Gregor Smith

Alison Strath

Anne Armstrong

Professor Sir Gregor Smith
Chief Medical Officer

Professor Alison Strath
Chief Pharmaceutical Officer

Anne Armstrong
Interim Chief Nursing Officer

ANNEX A: RECOMMENDED ADULT FLU VACCINES, VACCINE COMPOSITION AND ORDERING INFORMATION

Flu vaccines for 2024/25

The adult flu vaccines that have been centrally procured for the forthcoming flu season are in line with the recommendations of the Joint Committee on Vaccination and Immunisation (JCVI) and are set out in the table below.

Eligible Groups	JCVI Recommended Vaccine
Aged 65 years and older	Adjuvanted Quadrivalent Influenza Vaccine (Seqirus)
Aged 18 – 64 Years	Cell-based Quadrivalent Influenza Vaccine (Seqirus)
6 months - 17 Years (alternative for those where LAIV vaccine is unsuitable)	Cell-based Quadrivalent Influenza Vaccine (Seqirus)

Vaccine ordering and delivery arrangements

Information on ordering and delivery arrangements for the flu vaccine will be provided to Boards within operational guidance from PHS and National Services Scotland (NSS).

Sites participating in the programme should plan appropriately and place the minimum number of orders needed, taking into consideration available fridge capacity. NHS Boards are charged for each delivery made to locations participating in the programme.

Sites participating in the programme must ensure adequate vaccine supplies before organising vaccination clinics.

ANNEX B: RECOMMENDED CHILD FLU VACCINES, VACCINE COMPOSITION AND ORDERING INFORMATION

- The following child flu vaccines have been centrally procured for the forthcoming season, in line with the recommendations of the JCVI:

Eligible Groups	JCVI recommended vaccine
At risk children aged 6 months – 2 years	Cell-based Quadrivalent Influenza Vaccine (surface antigen, inactivated), Seqirus Vaccine (QIVc)
Children aged 2 – 17 years who cannot receive LAIV	Cell-based Quadrivalent Influenza Vaccine (surface antigen, inactivated), Seqirus Vaccine (QIVc)
Pre-school children aged 2-5	Live attenuated influenza vaccine (LAIV)
Primary school children	Live attenuated influenza vaccine (LAIV)
Secondary school pupils	Live attenuated influenza vaccine (LAIV)

- A very small number of pupils may be aged 18 years at the time they receive the vaccine, and they should also be offered the LAIV off-label. This will be included in the national Patient Group Direction (PGD) template.
- Children who have a contraindication to LAIV and at risk children aged 6 months – 2 years should be offered cell based quadrivalent influenza vaccine (Seqirus Vaccines) (QIVc), which is now licensed for all children aged six months and above.
- LAIV has a shorter shelf life (18 weeks) compared to other flu vaccines. The expiry date on the nasal spray applicator should always be checked before use.
- The delivery schedule for LAIV for 2024/25 has not yet been confirmed, as this is subject to manufacturing and ongoing regulatory processes. As LAIV has a shorter shelf life than other vaccines it will be delivered into the national stockpile in several consignments, in order to ensure that there are in date supplies available throughout the period vaccine can be offered.
- To support efficient delivery of the programme, it is anticipated that the delivery schedule will result in most of the vaccine becoming available to order in the initial weeks of the programme.
- Sufficient vaccine has been procured for the 2024/25 flu season to ensure adequate vaccine supply is available. Vaccination teams must secure adequate vaccine supplies before organising vaccination clinics.

ANNEX C: VACCINE COMPOSITION FOR 2024/25

Each year the World Health Organization (WHO) recommends flu vaccine strains based on careful mapping of flu viruses as they circulate around the world. This monitoring is continuous and allows experts to make predictions on which strains are most likely to cause flu outbreaks in the northern hemisphere in the coming winter.

The vaccines that will be used for this upcoming influenza season are in line with recommendations from the [WHO](#) and the [JCVI](#).

For more information

[Frequently Asked Questions - Recommended composition of influenza virus vaccines](#)

If you would like to see the recording of the announcement made at the end of the [WHO Consultation on the Composition of Influenza Virus Vaccines for use in the 2024-2025 northern hemisphere influenza season](#) this can be viewed on YouTube [here](#)

The WHO meeting report can be found [here](#).

[Seasonal candidate vaccine viruses and potency testing reagents for development and production of vaccines](#)

Previous seasons vaccine composition can be found [here](#)

Egg-free vaccine

For individuals with egg allergy the advice in the most recent influenza chapter of the Green Book should be followed: [The Green book of immunisation - chapter 19 influenza \(publishing.service.gov.uk\)](#)

ANNEX D: FLU VACCINATION COMMUNICATIONS 2024/25

Communication Materials

Child Flu

1. Invitation letters and leaflets will be sent to parents/carers of pre-school children aged 6 months to 2 years in clinical risk groups and those aged 2 to 5 years not yet at school. They will be also sent to any children able to be identified as home educated, or at risk up to 18 years of age, who may not be attending school during the season.

For those individuals who are eligible in these categories but are not identified and invited via the national programme, they can use the clinical referral route to ensure their child is vaccinated. Parents/carers of children can call the national vaccination helpline, who will refer their child to their local Health Board to ascertain eligibility and bring them forward for vaccination, if required.

If the parent / carer is unsure they could also consult their GP practice or secondary care clinician who can refer their case through local referral pathways. If GP practices or clinicians are unsure of their local referral pathway, they should contact their local Immunisation team or co-ordinator for more information.

2. A national media campaign (radio, digital and social media) will promote the programme.
3. Posters, leaflets and other materials to support the campaign will be distributed to community settings, such as nurseries and libraries. Health Boards and HSCPs are encouraged to undertake additional local communication activity as appropriate to complement national communications.
4. For school based programmes, consent packs will be distributed to schools to be sent home in school bags. These packs will include a letter and leaflet for parents of primary and secondary school pupils as well as a consent form. Consent form guidance will also be available online and via the national helpline.
5. To support the programme in schools, PHS will ensure all schools have supporting materials on the flu vaccine for staff, parents and pupils. These will be updated and will be available for schools to download prior to the start of the programme.
6. Flu vaccine information leaflets for children will be available in other languages and alternative formats (audio and Easy Read) at www.nhsinform.scot/childflu. PHS will consider requests for other languages and formats. Please contact 0131 314 5300 or email phs.otherformats@phs.scot.
7. The public should be signposted to <https://www.nhsinform.scot/childflu> for up to date information on the programme.

Adult flu communication materials

8. A national media campaign across all key channels is being developed, and further details will be provided in due course. These will include a range of toolkits for partners.

9. PHS will produce and make available a range of national accessible information materials to support informed consent for all eligible cohorts.
10. The public should be signposted to [Flu vaccine | NHS inform](#) for up-to-date information on the programme.

Vaccines

11. Detailed information on the adult and child flu vaccines can be found in the annex A-C.

Workforce Education

12. NHS Education for Scotland (NES) and PHS will work closely with stakeholders to update workforce education materials to support the programme, and thereafter make these available to colleagues prior to the start of the flu season. These will be available on the NES TURAS Learn website. [Immunisation | Turas | Learn \(nhs.scot\)](#)