

## Administration of nasal flu vaccine via community pharmacy

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Clinical Pharmacist 30 AUG 2016 By Tejas Khatau , Suzanne Leatherland

In 2012, the Joint Committee on Vaccination and Immunisation recommended that the routine annual influenza vaccination programme should be extended to children aged from 2 years to 17 years of age. These children would receive the nasal flu vaccine.

Locally, Leicestershire Partnership NHS Trust was commissioned to offer and provide vaccination to children between year 1 and year 6 in primary schools, or aged from around 5 years to 11 years. There are occasions where children, for whom we have a positive consent form, cannot be vaccinated in school because they are unwell. In the past we have used community clinics to offer these children a second opportunity to be vaccinated, but these community clinics have proven cumbersome to set up and staff and have had poor uptake.

Community pharmacy provides a professional and accessible service to the community. Furthermore, many pharmacies are already providing injectable flu vaccinations and therefore competent in this area.

In 2015–2016, a project was set up whereby parents were offered a second opportunity to have their child vaccinated in a community pharmacy if they did not receive it in school. The aim was to explore feasibility, acceptability and impact of using community pharmacy to provide a second offer of vaccination.

A meeting was set up with a representative of the Leicestershire and Rutland Pharmaceutical Committee to discuss the pilot, patient pathway and pricing. The initiative was endorsed by the committee, which then assisted in emailing out to all contractors for expression of interest. Interested contractors were required to complete a form which asked for certain competencies. This information was used to select the most appropriate pharmacies.

There were 37 pharmacies that expressed interest, of which 14 were selected following a transparent selection process.

A total of 1,050 letters were sent out to parents offering them a second opportunity to have their child vaccinated. Of these, 344 parents responded – a 33% response rate. Of those who responded, 70% (n=240) went on to have the vaccine administered. Of all patients who were sent a letter, 23%, or 240, had a vaccine administered.

The pilot relied on the administration team and, in the future, we need to look at ways to streamline the process to ease this burden (e.g. have this as an option on the certificate that is sent home to parents rather than sending a separate letter afterwards).

All three pharmacists interviewed had a positive experience and would like to continue providing the service. There were some problems encountered with the faxing process so, in the future, we need to look at other means to transfer forms (e.g. secure emails). There were occasions when parents telephoned their nominated pharmacy for an appointment when the pharmacy had not yet received the faxed information. This resulted from parents telephoning earlier than instructed.

The eight parents who were interviewed said that they found it easy to have their child vaccinated in the pharmacy, rated the experience as extremely good and would definitely use the service again if the opportunity was available.

Overall, this pilot suggests that working with community pharmacy to provide a second opportunity for nasal flu vaccination is a viable option. Community pharmacy represents an accessible, convenient, professional service for parents, which led to a positive patient/parent experience.

This service has been recommissioned this year, with a view to extend and add further services in the near future.

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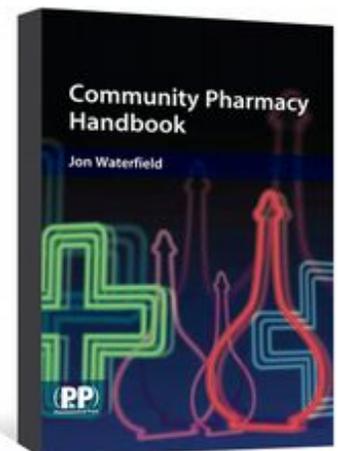
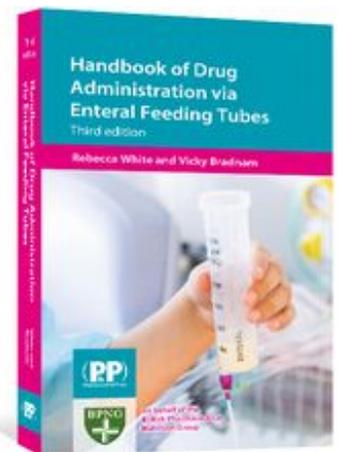
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