

Dear Colleague

**SEASONAL INFLUENZA IMMUNISATION 2015-16:
VACCINE SUPPLY ARRANGEMENTS
SUMMARY FOR NON DISPENSING GP PRACTICES**

Summary

1. **This Circular is intended to provide a summary for non dispensing GP practices only** of the actions for them related to the ordering of influenza vaccines for the 2015-16 flu season. These actions are the same as those published in [NHS Circular PCA \(P\) \(2014\) 28](#)/ [NHS Circular PCA \(M\) \(2014\) 13](#) which provides the full context of vaccine supply arrangements for the seasonal influenza immunisation programme for the 2015-16 season for all stakeholders.

Context

2. NHS Circular PCA (P) (2014) 28/ NHS Circular PCA (M) (2014) 13 provides the full context of vaccine supply arrangements for the seasonal influenza immunisation programme for the 2015-16 season and consequential actions for all stakeholders. The only substantive change from the arrangements promulgated for the 2014-15 flu season, which affects non dispensing practices is:

- **the deadlines for each GP practice to advise community pharmacies of their requirements, and for community pharmacies and dispensing practices to place orders have been brought forward to better help the planning of vaccine manufacturers (see paragraph 19 below for details).**

18 December 2014

Addresses

For action
Chief Executives, NHS Boards

For information
Chief Executive, NHS NSS

Enquiries to:

Brian O'Donnell
1st Floor East Rear
St Andrew's House
EDINBURGH
EH1 3DG

Tel: 0131-244 2524
Fax: 0131-244 2326

Brian.O'Donnell@scotland.gsi.gov.uk

www.scotland.gov.uk

3. Non dispensing GP practices have responsibilities in respect of timely placing of vaccine orders with a Scottish community pharmacy contractor, and timely provision of consequential data to their Health Board co-ordinator. Practice co-operation is accordingly sought in placing orders as soon as possible within the stated deadline.

4. Policy in respect of vaccination for seasonal flu is subject to ongoing development and any changes or developments are publicised by professional letter or Circular as soon as advice from JCVI on at risk groups is available and/or policy decisions are taken.

5. It is however necessary for orders for vaccine to be made as far as possible in advance of the flu season concerned to ensure that Scotland has adequate arrangements in hand for the season ahead so GPs and community pharmacy contractors are being advised to start to place orders according to a published time table.

Cohort of patients in respect of whom generic flu vaccine orders should now be placed

6. The arrangements in respect of vaccine provision for at risk children for the 2015-16 season remain unchanged. All vaccine required for at risk children will again be purchased centrally. **Accordingly, no vaccines for at risk children should be placed.**

7. GP practices and community pharmacies are advised to start the ordering process now in respect of vaccine provision for all other targeted patients, i.e. all adults, who represent the overwhelming majority of patients for whom vaccines will be required.

8. **The cohort of patients in respect of whom orders should now be placed for generic flu vaccines to allow them to meet national vaccination uptake target rates is the following:**

-all patients over the age of 65

-all at risk adult patients aged 18 or over (i.e. adults within at risk groups promulgated for 2014-15)

9. Community pharmacy contractors will normally order inactivated trivalent vaccines for these patient groups.

10. A provision for egg free vaccines should however be made where clinically appropriate.

11. No orders for attenuated nasal vaccine should be placed at this time pending advice on policy in respect of the childhood vaccination programme.

Contingency arrangements for the redistribution of available vaccines

12. Practices should plan on having vaccine available in accordance with the delivery schedule which they agree with the community pharmacy ordering vaccine on their behalf.

13. They should however be aware of contingency arrangements for the redistribution of available vaccines which may be activated as a consequence of supply chain difficulties which may arise.

14. **In normal circumstances** where Health Board flu vaccine co-ordinators identify **localised supply difficulties** which need to be addressed they may advise vaccine purchasing contractors to redirect available vaccines to target patients in greatest need. In any case where they take such action they will arrange for a replacement delivery of vaccines, if necessary from any national reserve which may have been put in place so that GP practice orders are fulfilled.

15. Additionally **in circumstances of a more serious aggregate national shortage of vaccine or delay to deliveries** the provisions of the Protocol for Distribution of Available Vaccines which is detailed at Annex B in NHS Circular PCA (P) (2014) 28/ NHS Circular PCA (M) (2014) 13, which all contractors involved in the placing of vaccine orders would be deemed to have accepted, may be invoked. In such circumstances GP practices should be aware that part of their ordered vaccine may be delayed as a consequence of the arrangements prescribed in any Chief Professional Officers' letter declaring such an aggregate national shortage of vaccine or delay to deliveries and local vaccination arrangements would have to reflect any revisions to national priorities, which may be deemed necessary by the Chief Professional Officers.

16. They should also note that they would be expected to comply with all requests for information on vaccine logistics made as required in any Chief Professional Officers' letter declaring an aggregate national shortage of vaccine or delay to deliveries.

Action now required from General Practices

Non dispensing practices

17. GPs should review their vaccine storage arrangements to ensure they are fit for purpose and sufficient to accommodate all vaccine (including for vaccines other than flu) that they are likely to handle during the 2015-16 flu vaccination season.

18. GPs should write "generic influenza vaccine" on all prescription or stock order forms for generic vaccines. This is analogous to using the 'approved name' which is recommended good practice by the British National Formulary (BNF) and will ensure that community pharmacy contractors are able to make the most effective supply arrangements. Separate prescriptions or stock order forms should be used for egg free vaccines, and these should clearly state EGG FREE.

19. GPs should advise the community pharmacy contractor who will be procuring vaccine on their behalf of the volume they require of inactivated trivalent vaccine by

16 January 2015 at the latest for the following cohort of patients to allow them to meet national vaccination uptake target rates:

-all patients over the age of 65

-all at risk adult patients aged 18 or over (**i.e. adults within at risk groups promulgated for 2014-15**)

20. The Scottish Government anticipates that to maintain progress towards meeting the current national target for vaccination of at risk groups, that the overall quantity of inactivated trivalent vaccines ordered by GP practices should be no less than that ordered for the 2014-15 season, unless significant quantities of vaccine were left unused by the practice concerned at the end of that season.

21. **GPs should additionally identify any quantity of egg free vaccine required.** GPs should clearly state with their order any capacity constraints that the practice has relating to the acceptance and storage of vaccines. Any unresolved anticipated difficulty in relation to the acceptance and storage of vaccines should be discussed with the Health Board flu co-ordinator.

22. **In placing orders GP practices will be deemed to have read and understood the actions detailed in NHS Circular PCA (P) (2014) 28/ NHS Circular PCA (M) (2014) 13 and summarised above which Board vaccination co-ordinators may take in the event of either a localised or aggregate national shortage of vaccine.**

23. GPs should schedule influenza clinics and on-demand influenza vaccination arrangements to be consistent with the delivery dates advised by their community pharmacy contractor. Community pharmacy contractors should endeavour to deliver supplies of vaccines consistent with GP practice requests as fully as possible.

24. In addition to these arrangements for 2015-16, as in prior years, in early 2015 GPs are likely to be asked to respond to requests from their NHS Board flu vaccine co-ordinators on the amount of vaccine ordered for and eventually used during the 2014-15 season currently underway.

Dispensing Practices

25. Dispensing practices should take action as detailed in paragraphs 22-26 of NHS Circular PCA (P) (2014) 28/ NHS Circular PCA (M) (2014) 13.

Consultation

26. The Scottish General Practitioners Committee and Community Pharmacy Scotland have been consulted on the content of this Circular.

Action required of Health Boards

27. **NHS Boards are asked to bring this Circular to the attention of GP practices, Flu Vaccine Coordinators, community pharmacy contractors, local**

pharmacy committees, Area Medical Committees and Community Health Partnerships, and to provide such additional local advice as may be necessary.

Yours sincerely

A handwritten signature in cursive script that reads "Bill Scott".

W. SCOTT

Chief Pharmaceutical Officer and Deputy Director
Pharmacy and Medicines Division

EXTRACT FROM ANNEX B to NHS Circular PCA (P) (2014) 28/ NHS Circular PCA (M) (2014) 13

“PROTOCOL FOR DISTRIBUTION OF AVAILABLE VACCINES IN THE CIRCUMSTANCE OF AN AGGREGATE NATIONAL SHORTAGE OF VACCINE OR DELAY TO DELIVERIES”

Parties affected by this Protocol

1. This Protocol is intended to be binding on all parties involved in the provision of influenza vaccine to NHS Scotland for immunisation of patients in the community during the season 2015-16, specifically:

- GP practices placing orders with community pharmacy contractors for flu vaccines
- Community pharmacy contractors supplying GP practices with flu vaccines
- Dispensing doctors ordering flu vaccines for their own practice use
- Wholesalers providing flu vaccines to community pharmacy contractors and dispensing doctors
- Manufacturers providing flu vaccines to community pharmacy contractors and dispensing doctors

2. In particular remuneration and reimbursement of contractors in the terms of NHS Circular PCA (P) (2014) 28/ NHS Circular PCA (M) (2014) 13 is conditional on the acceptance by the community pharmacy contractor or dispensing doctor concerned of the terms of this protocol, confirmed by completion and return of the declaration form in Annex C.

Purpose of this Protocol

3. **This Protocol is intended to prescribe contingency distribution arrangements in the exceptional circumstances** of a declaration of an aggregate national shortage of vaccine or delay to deliveries of vaccine. The contingency distribution arrangements will seek to ensure an optimal distribution of those vaccines available within the supply chain for use within NHS Scotland.

4. The provisions of this Protocol would not however be invoked for lesser or local disruptions in vaccine supply, when normal arrangements would continue in place and it would be for community pharmacy contractors and dispensing doctors taking appropriate advice from the local flu vaccine co-ordinator, to manage supply (taking in accordance with paragraphs 21, 25 and 30 to NHS Circular PCA (P) (2014) 28/ NHS Circular PCA (M) (2014) 13.

Method of declaration of an aggregate national shortage of vaccine or delay to deliveries of vaccine

5. If the circumstance should arise when the Scottish Government is made aware of an aggregate national shortage of vaccine or delay to deliveries, which

necessitates formal direction of the distribution of vaccines available to NHS Scotland, **a Chief Professional Officers' letter would be issued urgently** by the Scottish Government to inform interested parties that the arrangements outlined in this Protocol plus any others which may be expedient, were being invoked.

Vaccine distribution arrangements during an aggregate national shortage of vaccine or delay to deliveries of vaccine

6. The vaccine distribution arrangements to apply during a declared aggregate national shortage of vaccine or delay to deliveries of vaccine **would depend on the precise circumstances at the time and would be detailed in the Chief Professional Officers' letter.**

7. **However, the overarching aim of contingency arrangements will be to ensure the most equitable distribution of available stock of flu vaccine in line with stated priority groups for vaccination.**

Funding arrangements during a period of a declared aggregate national shortage of vaccine or delay to deliveries of vaccine

8. The broad intention of the contingency funding arrangements would be that contractors and suppliers would continue to be paid at the rates they would have expected if vaccine had been distributed in the normal way.

9. **The Chief Professional Officers' letter would advise the arrangements** for reporting to the contractors concerned, and to Practitioner Services Division, when the vaccine used on the orders placed by each contractor are deployed. That advice to Practitioner Services Division would trigger remuneration and reimbursement payments to contractors in the normal way.

10. Any amended payment and additional funding arrangements which may be necessary would be detailed separately.

Maintenance of the cold chain

11. All contractors would be expected to place at the disposal of the Scottish Government the facilities which they would normally make available to maintain the cold chain during the distribution of vaccines within Scotland.

Summary of the impact on interested parties of this Protocol if invoked

12. The following summarises the impact on each of the stakeholders involved if this protocol is invoked:

▪ **GPs/contractors providing the vaccination programme to patients**

All/part of their ordered vaccine may be delayed as a consequence of the arrangements prescribed in any Chief Professional Officers' letter declaring an aggregate national shortage of vaccine or delay to deliveries and local

vaccination arrangements would have to reflect any revisions to national priorities, which may be deemed necessary by the Chief Professional Officers.

They would be expected to comply with all requests for information on vaccine logistics made as required in any Chief Professional Officers' letter declaring an aggregate national shortage of vaccine or delay to deliveries.

- **Community pharmacy contractors/dispensing doctors sourcing vaccines for NHS Scotland**

Delivery of all/part of their ordered vaccine may be redirected/delayed as a consequence of the arrangements prescribed in any Chief Professional Officers' letter declaring an aggregate national shortage of vaccine or delay to deliveries.

Even if their supplies are redirected under the terms of Chief Professional Officers' letter they may still be required to provide their cold chain facilities for deliveries as directed in the Chief Professional Officers' letter.

They would be expected to comply with all requests for information on vaccine logistics in accordance with any requirements in the Chief Professional Officers' letter.

They would continue to pay their supplier for vaccines delivered from their order redirected under the terms of the Chief Professional Officers' letter and would be reimbursed by PSD for such vaccines in the normal way.

Contractors would continue to be remunerated and reimbursed at the rates they would have expected if vaccine had been distributed in the normal way.

They may be eligible for any compensatory payments as may be detailed in the Chief Professional Officers' letter.

- **Wholesalers**

They may be required to deliver orders placed by community pharmacy contractors and dispensing doctors as directed in the Chief Professional Officers' letter.

They would invoice the contractor originally ordering the vaccine and be paid in the normal way but would identify in any invoice the points to which the vaccine was delivered.

- **Manufacturers**

They may be required to deliver orders placed by community pharmacy contractors and dispensing doctors as directed in the Chief Professional Officers' letter.

They would invoice the contractor originally ordering the vaccine and be paid in the normal way but would identify in any invoice the points to which the vaccine was delivered.