



London

rammya.mathew@nhs.net Follow
 Rammya on Twitter: @RammyaMathew
 Cite this as: *BMJ* 2020;370:m3180
<http://dx.doi.org/10.1136/bmj.m3180>
 Published: 18 August 2020

TAKING STOCK

Rammya Mathew: Planning for this year's flu vaccination programme

Rammya Mathew *GP*

My colleagues and I have spent the past few weeks thinking about how we'll deliver this year's flu vaccination programme, to maximise coverage while ensuring the safety of our staff and patients. Like many others, we concluded that supporting neighbouring practices to help deliver the programme at scale was a sensible starting point.

Yet, when we got into the detail of how this might work, there have been innumerable challenges, many of which we're still trying to overcome. Unlike the beginning of the pandemic, when red tape was stripped back and money poured in, it seems that GPs and their teams are now expected to deliver the largest and most comprehensive flu vaccination programme in UK history, in less than four weeks—with no extra resource or support confirmed by the government or arm's length organisations.

If this is to become a reality and not just a glorified public relations exercise, there's much work to be done. Local government needs a mandate to secure large, open plan indoor spaces and car parks where swathes of people can be vaccinated in quick succession. This negotiation can't be left to individual practices or primary care networks. In addition, if non-practice sites are used for flu vaccinations there's currently a requirement to register them with the regulator, but this process is shrouded in mystery. We must ensure that any new set-up is safe, but we need clarity and pragmatism about how this is done, given the tight timelines.

There's also the small matter of how we secure additional staff to vaccinate the extra 15 million people we expect to request a flu jab this year. Locally, we've looked into collaborating with our community pharmacy teams to secure extra staff, but restrictions currently prohibit pharmacists from vaccinating patients away from their own premises. Workforce aside, I'm perhaps naively assuming that our government has ordered sufficient additional vaccines and personal protective equipment—and that a distribution plan is in place. We can only hope that mistakes from earlier in the pandemic won't be repeated.

Finally, we're grappling with how to invite thousands of patients for their vaccinations, when general practice IT systems aren't adequately set up for this task. The best current proposal involves posting a letter to every patient, with an individually generated barcode—which seems entirely out of sync with the "digital NHS" championed by Matt Hancock. I'm certain that better solutions are out there, but they need to be procured en masse and once again can't be left to individual GPs to sort out.

This is arguably one of the most important preventive exercises we'll undertake in this pandemic, and the same energy that went into setting up the Nightingale hospitals also needs to be channelled into making this year's flu vaccination programme a success. Let's hope that it's not just rhetoric and that the government will help us overcome these challenges, so that we're not overwhelmed this winter by a double blow of flu and covid-19.

bmj.com Helen Salisbury: How will we run flu clinics in a pandemic? (*BMJ* 2020;370:m3033, doi:10.1136/bmj.m3033)

Competing interests: I co-lead Islington GP Federation's Quality Improvement Team.

Provenance and peer review: Commissioned; not externally peer reviewed.

This article is made freely available for use in accordance with BMJ's website terms and conditions for the duration of the covid-19 pandemic or until otherwise determined by BMJ. You may use, download and print the article for any lawful, non-commercial purpose (including text and data mining) provided that all copyright notices and trade marks are retained.