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## PRIMARY COLOUR

## Helen Salisbury: How will we run flu clinics in a pandemic?

Helen Salisbury *GP*

In previous years, the queue for our flu vaccine clinic has been in place well before we open the doors. Patients pile into the waiting room, register with the reception staff, and roll up their sleeves in anticipation. There's jolly banter between neighbours and occasional harrumphing if people think they've been kept waiting too long. Doctors and nurses try not to be drawn into too much conversation before giving the injection, preceded by the traditional warning, "Sharp scratch" (although, as it really isn't a scratch, I've resorted to saying, "Sharp, now").

We've been thinking about how to run our clinics this year, considering the need for enhanced infection control precautions. I'm imagining a queue of people two metres apart, faces covered, entering the building by one door, being directed to one of several consulting rooms for the vaccine, and then leaving by a different exit (I hope it doesn't rain). Clinicians will change their gloves between patients, all doors will be kept open, and no one will sit down. We'll have to advertise these clinics as suitable only for patients who are comfortable standing for at least 20 minutes, arranging separate appointments for patients who need to sit.

I'd just started formulating this plan, working out how many extra sessions we might need to run to cover the eligible population, when I heard on the radio that the flu vaccination programme would be expanded to cover everyone over 50 and children up to school year 7. In any normal year 15 million people take up the vaccine, of the 25 million eligible to receive it.<sup>1</sup> We have to estimate in January how many doses we're likely to need from September, and we're reimbursed only for the vaccines we use. There's a fine balance to be struck: we don't want to waste money or vaccines by over-ordering, but it's usually impossible to obtain extra doses if we run short.

A month ago, before the recent expansion of eligibility criteria, a shortage of vaccine was predicted, as more people are likely to take up the invitation than previously. Suppliers were already expressing doubts about their capacity to meet demand.<sup>2</sup> We've been reassured that the government has successfully secured contracts for 30 million doses of flu vaccine.<sup>3</sup> Given the recent governmental track record of awarding contracts to companies that lack the capacity to deliver the goods across a range of domains—from ferries to probation services, tracking apps, and personal protective equipment (PPE)—many GPs are feeling less than confident.<sup>4-7</sup>

Will we receive the vaccines we need to cope with the expansion in eligibility? I anticipate some angry and disappointed patients if these don't

materialise—and their anger is likely to be directed at GPs.

Competing interests: See [www.bmj.com/about-bmj/freelance-contributors](http://www.bmj.com/about-bmj/freelance-contributors).

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