

From the Chief Medical Officer  
**Dr Michael McBride**



HSS(MD) 12/2016

For Action:

Chief Executives, Public Health Agency/Health & Social  
Care Board/HSC Trusts/NIAS  
GP Medical Advisers, Health and Social Care Board  
All General Practitioners and GP Locums (*for onward  
distribution to practice staff*)

**Please see attached full addressee list**

Castle Buildings  
Stormont Estate  
Belfast BT4 3SQ  
Tel: 028 90 520658  
Fax: 028 90 520574  
Email: michael.mcbride@health-ni.gov.uk

Your Ref:

Our Ref: HSS(MD) 12/2016

Date: 8 July 2016

Dear Colleague

## **END OF 2015/16 FLU SEASON AND RELATED ISSUES**

### **ACTION REQUIRED**

**Chief Executives must ensure that this information is drawn to the attention of all staff involved in the seasonal flu vaccination programme.**

**The HSCB must ensure that this information is cascaded to all General Practitioners.**

### **Introduction**

1. The purpose of this letter is to draw your attention to the end of the flu season for 2015/16 and a number of related issues.
2. I would like to express my sincere appreciation to all who have worked hard to manage seasonal flu during the past winter. I recognise the considerable effort required to ensure the HSC was prepared for the normal winter pressures and to complete the annual seasonal flu vaccination programme.

### **Surveillance**

3. The Public Health Agency's regular flu bulletin is the definitive source of public health surveillance information on flu activity for Northern Ireland throughout the season. The surveillance of seasonal flu depends on accurate, timely data produced by GP sentinel practices, the labs and

collated by the PHA flu team to produce the bulletin which enables us to follow the course of the flu season and respond accordingly. I would like to thank all those involved in the production of this information.

### Use of Antiviral Medicines

4. The Public Health Agency surveillance data reported in the flu bulletin confirms that the circulation of flu virus in the community has fallen to low levels. **This means that the use of antiviral medicines for the prevention and treatment of influenza is no longer indicated.**

### Seasonal flu vaccination programme

5. As you are aware due to confirmed positive cases of influenza continuing beyond the end of March, the PHA had recommended that anyone still seeking the flu vaccine should be vaccinated during April. Subsequently, following updated data, the PHA then advised that all additional flu vaccinations should cease from the end of April 2016. **Flu vaccine is therefore not required for pregnant women or any other population group over the summer in 2016.**

### Vaccine uptake rates

6. At the end of March 2016, the proportion of people in Northern Ireland aged 65 years and over who had received the seasonal influenza vaccine was 74.4%, while the uptake in those aged under 65 in an at-risk group was 59.9%. This compares with 73.4% uptake in the over 65s, and 71.8% in the under 65 at-risk group for the same period last year.
7. For the children's programme an uptake of 50.5% for 2 to 4 year olds was achieved while for all primary 1 to primary 7 children an uptake of 76.8% was achieved. This compares with 54.4% and 79.9% achieved for both groups last year.
8. An uptake of 24.3% of front-line Health and Social Care workers was achieved. While this is up by 2% against the previous year's figures it is too low. It is important that lessons from previous vaccination programmes are learnt, and are used to significantly improve uptake by this group, to protect themselves and their patients and to maintain service capacity during a period of high demand. The Commissioning Plan now includes an indicator of performance for flu vaccine uptake by front-line HCWs, **and in 2016/17 each Trust is expected to achieve a 40% uptake by its front-line staff.**

### Primary care

9. I want to acknowledge the effort of GPs and staff working in their practices to deliver the flu vaccination programme to an increasing

cohort of patients, while also managing those who presented with flu and other illnesses.

### **Critical Care**

10. The total number of ICU admissions this season was higher than in the previous two seasons. Staff in critical care are commended for their ongoing work and the robust escalation plans that are in place should these be required.

### **HSC Staff**

11. I would wish to convey my sincere thanks to the many clinical, managerial and other staff throughout the HSC all of whom responded so admirably and professionally throughout the winter, and so minimised any potential impact on patients and clients.

### **Regional Procurement Service**

12. I would like to thank the Regional Procurement Service for all the work they did in ensuring the flu vaccines were procured, delivered, managed and distributed throughout Northern Ireland and for providing regular updates on stock levels during the flu season.

## **LOOKING AHEAD TO THE 2016/17 FLU SEASON**

### **Management of seasonal flu in 2016/17**

13. Department of Health officials are working with colleagues in the HSC to update and issue the management of seasonal flu plan for 2016/17. While the HSC coped well with the flu season for 2015/16 we still need to ensure the HSC is ready to cope with every eventuality in the coming flu season.

### **Seasonal Flu Vaccination Programme 2016/17**

14. The flu programme for 2016/17 will remain largely unchanged. In 2016/17 all pre-school children aged 2 years and above will again be offered vaccination by their GP's while all children attending a primary school (P1 to P7 inclusive) will again be offered vaccination by the school health team.
15. Further details of the vaccination programme will be included in the latest chapter on seasonal flu in the Green Book.

### **Seasonal flu vaccine supplies**

16. The process to centrally purchase seasonal influenza vaccines for the 2016/17 season is on track. I fully expect the Department, PHA, HSC organisations and GPs to build on the experiences gained from the

Director of Public Health/Executive Medical Director, Public Health Agency  
(for onward distribution to all relevant health protection staff)

Assistant Director Public Health (Health Protection), Public Health Agency

Director of Nursing, Public Health Agency

Assistant Director of Pharmacy and Medicines Management, Health & Social  
Care Board, for onward distribution to all Community Pharmacies

Directors of Pharmacy HSC Trusts

Director of Social Care and Children, HSCB

Family Practitioner Service Leads, Health & Social Care Board (for cascade to  
GP Out of Hours services)

Medical Directors, HSC Trusts (for onward distribution to all Consultant  
Obstetricians, Paediatricians and other relevant staff)

Directors of Nursing, HSC Trusts (for onward distribution to all Community  
Nurses, and Midwives)

Directors of Children's Services, HSC Trusts

RQIA (for onward transmission to all independent providers including  
independent hospitals)

Regional Medicines Information Service, Belfast HSC Trust

Regional Pharmaceutical Procurement Service, Northern HSC Trust