

Flu vaccination: increasing uptake

Expert testimony

NICE guideline NG103

Expert paper 1: carers

22 August 2018

Final

*Developed by Public Health – Internal
Guideline Development team*

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Expert Testimony

A. Introduction

Expert testimony is an important source of evidence for guidelines. Experts may be called upon when evidence from published literature is insufficient, where there are gaps in published evidence meaning that review questions may not be fully answered or, where information on context or current practice is needed to inform recommendations.

B. Expert Testimony Paper 1

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Guideline title:	Flu vaccination – increasing uptake
Guideline Committee:	Public Health Advisory Committee B - Meeting 29
Subject of expert testimony:	Influenza immunisation uptake in carers
Evidence gaps or uncertainties:	[Research questions or evidence uncertainties that the testimony should address are summarised below]

Section B: Expert to complete

Summary testimony: [Please use the space below to summarise your testimony in 250–1000 words. Continue over page if necessary]

Carers UK estimates that there are 6.5 million unpaid carers in the UK, with this number rising to 9 million by 2037.¹ Women and people aged 50-64 are most likely to be giving unpaid care. However there are an estimated 178,000 carers under 18 years in the UK. Half of working age carers live in a household where no-one is in paid work and many carers have a disability themselves.

Carers are eligible for free influenza immunisation. However a questionnaire survey of a sample of carers in Wales carried out in 2006² indicated that a significant proportion of carers were unaware of this, and uptake was consequently low, particularly in younger carers. Those who were offered immunisation were likely to take up the offer, so if uptake is to be improved it is important that carers are identified and offered immunisation. Many general practices do not routinely register patients' carer status. They are therefore not able to readily identify carers and offer them flu immunization. The authors concluded that UK departments of health, carers organisations and general practices should consider how best to raise awareness of the benefits of influenza immunisation amongst carers to increase uptake.

More recent community survey data are not available. However, it is likely that in the following decade, awareness of influenza immunisation has increased amongst carers, carers' organizations and health services. Data from Public Health Wales indicate that uptake of influenza immunisation in people recorded as a carer on practice clinical management systems in Wales is around 50%. However, the denominator only includes those carers identified and recorded, and is likely to be a gross overestimate of true uptake.

There have been some policy changes in relation to carers' health and wellbeing, and attempts to improve uptake should be seen in the context of the wider needs of carers. A number of local initiatives have led to a raising of awareness of carers' health. An example of innovative practice to raise the profile of carers health is the 'Investors in Carers' scheme run by Hywel Dda University Health Board. This scheme, a partnership between the health board, local authorities and third sector, has been running since 2013. It is an awareness raising scheme which awards general practice, pharmacy and secondary schools with bronze, silver, and gold awards depending on the service provided. It requires a named carer lead at each site. Currently 53 practices, 9 pharmacies, 3 schools and 1 hospital are at bronze level, 4 GP practices at silver. An assessment and revalidation process occurs with measured outcomes including: carers registered and carer referrals. In this scheme the link between the offer of an influenza immunisation and the recording of carer status is recognised.

Public Health Wales data indicate an increase both in the number of carers recorded by general practice clinical management systems in Wales (from 17,700 in 2011/12 to 27,040 in 2015/16) and the number of those vaccinated (from 9,314 in 2011/12 to 13,285 in 2015/16). Whilst promising, this represents only a small proportion of carers in Wales (estimated at around 370,000).¹

Another change since the 2006 survey is the increased use of community pharmacy in delivering the seasonal influenza immunisation programme. Between 2012/13 and 2015/16 the number of community pharmacists in Wales providing seasonal

influenza vaccine increased from 127 to 328 and the number of vaccinations delivered increased from 1,568 to 19,786. Average number of vaccinations given by pharmacies in 2015/16 was 60.³ Use of community pharmacy can assist in widening access and can reduce the burden on general practice. In the London pharmacy pilot, no significant increase in uptake was observed but the highest fraction of doses administered were in carers.⁴ A qualitative study of pharmacists attitudes to the influenza immunisation programme identified practical concerns as well as concerns about GP-pharmacy relations and linking data back to the patient's health record.⁵

Whilst evidence is lacking, interventions most likely to improve uptake specifically in carers will be multi-level (complex) involving:

1. Better recording of carer status in GP systems, with robust offer processes (eg. letter, phone, text)
2. Increased awareness of benefits of flu vaccination amongst carers and increased awareness of eligibility of carers for immunisation amongst health service providers
3. Continued provision of flu vaccination by community pharmacy to supplement GP vaccination, with a possible targeting younger carers
4. Good communication between service providers, including data sharing between pharmacy and general practice
5. Higher priority for carers welfare in policy/legislation

Carers do not prioritise their own health, and often do not self-identify as a carer. A 'make every contact count' approach may be useful to identify carers through their and their cared-for person's contact with health and care professionals and offer them influenza immunisation.

References to other work or publications to support your testimony' (if applicable):

1. Carers UK. Facts about carers 2015 <https://www.carersuk.org/for-professionals/policy/policy-library/facts-about-carers-2015>
2. Thomas et al. Immunisation uptake in carers. Letter to the Editor / Vaccine 26 (2008) 6746–6748
3. Welsh Government, Community pharmacy services in Wales, 2015-16, 19 October 2016 SFR140/2016
4. Atkins et al. Seasonal influenza vaccination delivery through community pharmacists in England: evaluation of the London pilot BMJ Open 2016; 6: e009739
5. AM Evans, FC Wood, B Carter. National community pharmacy NHS influenza vaccination service in Wales: a primary care mixed methods study Br J Gen Pract 2016; DOI: 10.3399/bjgp16X684349