Flu immunisation for social care staff

This information is for social care providers. It gives details on the benefits of providing staff flu vaccination and options for providing the service to increase uptake.

Introduction

Flu can be a serious illness, particularly for the elderly or those with other health conditions. Care workers are working with some of the most vulnerable people in our communities, so it’s important that they help protect themselves and those receiving care and support against flu.

Flu spreads easily and can be passed from staff to people they care for when the staff member has mild or even no symptoms. In 2016/17 there were a large number of flu outbreaks in care homes despite elderly residents having high flu vaccination rates. This is because as people age they don’t produce a good immune response to vaccination. This makes vaccination of staff who work with older people in any setting, including those who receive care in their own home, even more important.

All social care providers, including homecare, nursing, residential homes and other services, should offer vaccination to all staff directly involved in delivering care as part of their occupational health responsibilities. By getting vaccinated, staff protect the people they care for, themselves and their own families and communities.

As well as the health impact on cared-for people, flu related sickness absence puts additional strain and cost on social care providers: the low cost of vaccination compared with the impact it can have on the service should be an important consideration for employers.

The potential benefits of immunising staff against flu

Immunisation of care workers has been shown to protect them, provide indirect protection to patients and is cost-effective.¹ Staff flu vaccination plays a key part of an effective infection prevention and control strategy. The potential benefits are a reduction in:

- disease spread and patient mortality in long term elderly patients²
- staff absenteeism (ensuring business continuity)³,⁴
- the costs of providing cover for absent staff
- the healthcare costs of managing a flu outbreak.
Funding the vaccine

Providing staff flu vaccination may be cost effective if the cost of managing outbreaks (may include having to close the premises to admissions) and covering staff absenteeism are taken into account. As with NHS healthcare workers the vaccination should be funded by employers at local level as part of their occupational health responsibilities. There is no central provision of vaccine for either NHS or social care services.

With many local national pharmacies and even supermarkets offering flu vaccinations, the process can be very easy and undertaken at a low cost. Further options are included on the following page.

The vaccination is required every year

Flu viruses can change over time. The vaccines are made in advance of the flu season and protect against the strains of the virus that are most likely to circulate that year. Flu viruses usually circulate from around late December to late March or even early April. Health and social care workers should receive the vaccine as soon as possible once it’s available, usually in September or October. Immunisation is the single best way of protecting people from flu and preventing its spread.

The flu vaccine is safe and effective

The flu vaccine has a good safety profile. The injectable vaccine doesn’t contain any live viruses and so cannot cause flu.

During the last ten years the vaccine has generally been a good match for the circulating strains. The flu vaccine is less effective with advancing age, so vaccination of staff is an important strategy in providing indirect protection for elderly residents and clients.

Regulations and code of conducts

Workplace safety regulations require employers to prevent or reduce exposure to hazardous substances, including pathogens such as influenza. This includes providing vaccination where appropriate. Employees should not be charged for this.

The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance, states that control of influenza virus includes immunisation.

Registered health professionals such as nurses, physiotherapists, dieticians, occupational therapists and social workers are required by their codes of practice to take all reasonable steps to reduce the risk of harm to service users, carers and colleagues.

Potential options for providing vaccination for staff

The nature of shift working, and the likely high proportion of part-time workers, makes achieving high uptake amongst care home and social care staff challenging. A multi-component approach is recommended to ensure all staff have easy access to the vaccine. Some staff may be eligible for free vaccination via their general practice if they’re in an existing flu ‘at risk’ group (see here for further information).
There are a number of options for consideration:

<table>
<thead>
<tr>
<th>Option</th>
<th>Advantages</th>
<th>Considerations</th>
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<tbody>
<tr>
<td><strong>Occupational health</strong></td>
<td>■ Trained and experienced immunisers.</td>
<td>■ Cost.</td>
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<tr>
<td>Larger providers may have access to services.</td>
<td>■ Experience of medicine ordering and cold chain maintenance.</td>
<td>■ Logistics of immunising across multiple sites, lack of flexibility for shift workers.</td>
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<td></td>
<td>■ Prescribing issues responsibility of occupational health services.</td>
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<tr>
<td><strong>Local contracts with healthcare providers</strong></td>
<td>■ Immunisation provided at the workplace.</td>
<td>■ Logistics.</td>
</tr>
<tr>
<td>Employer contracts with local community providers such as GPs, pharmacies or nursing services. The Healthcare provider visits the workplace to provide immunisation.</td>
<td>■ Trained and experienced immunisers.</td>
<td>■ Lack of flexibility for shift workers if staff not on the premises at the time of the session(s). <a href="#">Some back up provision should be made for these staff.</a></td>
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<tr>
<td></td>
<td>■ Experience of medicine ordering and cold chain maintenance.</td>
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<td></td>
<td>■ Employers don’t have to obtain and store vaccines.</td>
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<td></td>
<td>■ In care homes, residents and staff vaccines could be given at the same time.</td>
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<td></td>
<td>■ Prescribing issues responsibility of providers.</td>
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<tr>
<td><strong>Staff flu vouchers</strong></td>
<td>■ Provides more flexibility for shift workers.</td>
<td>■ Staff have to be motivated to attend for vaccination outside the workplace.</td>
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<tr>
<td>Employer makes agreement with community pharmacies to provide flu vaccination to staff.</td>
<td>■ Employers don’t have to obtain and store vaccines.</td>
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<tr>
<td><strong>Staff reimbursement</strong></td>
<td>■ Staff can get vaccine from any pharmacist.</td>
<td>■ Staff may be less likely to attend for vaccination if they have to pay up front and claim money back.</td>
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<tr>
<td>As above but employee pays for vaccine and claims money back from employer.</td>
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<tr>
<td><strong>Peer vaccinators</strong></td>
<td>■ Very flexible, enables shift workers to obtain the vaccine easily.</td>
<td>■ Purchase and storage of vaccines.</td>
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<td>Employer would purchase the flu vaccines and staff would vaccinate each other.</td>
<td></td>
<td>■ Cold chain maintenance required.</td>
</tr>
<tr>
<td></td>
<td>■ Cold chain maintenance required.</td>
<td>■ Immunisation training required for staff.</td>
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<td></td>
<td>■ Prescribing issues to be considered.</td>
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Plan for success

A multi-component approach is recommended to ensure all staff have easy access to the vaccine.

- Have written, up to date flu vaccination policy either as a stand-alone document or as part of another policy e.g. Infection Control. These should cover both resident and staff vaccination.
- Identify an enthusiastic lead member of staff with responsibility for running the flu immunisation campaign.
- Plan the campaign early so that all staff members are aware of the process and can access the vaccines as soon as possible after it becomes available. Set a target for uptake - see the NHS flu fighter planning guide.
- Use resources such as posters, leaflets, ‘I have had my vaccination’ stickers to promote staff vaccination. Social care specific examples can be found here.
- Some NHS trusts have successfully used incentives such as hot drink vouchers, raffle tickets etc. Some organisations signed up to the UNICEF ‘Get a jab, give a jab’ scheme which provides vaccinations for people in developing countries for every staff member vaccinated.
- Consider using a ‘declination’ form where staff sign and give a reason for non-vaccination. This can improve uptake as it makes refusal a conscious decision rather than ‘not getting round to it’. It can also provide useful information to inform planning for future seasons.
- Record the number of employees with direct patient contact and the number receiving the vaccine so that uptake can be measured.
- At the end of the season review the campaign, discuss and record successes, challenges and learning points for next year - see the NHS flu fighter evaluation guide.

Resources

- National Flu immunisation letter and plan 2017/18
- Flu fighter website
- Join flu fighters on social media: Twitter and Facebook
- Healthcare worker vaccination clinical evidence
References


9. Health and Care Professions Council, Standards of conduct, performance and ethics.