##

## 2025/2026

## Service Level Agreement (SLA)

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| **Community Pharmacy****Seasonal Influenza Vaccination** **Service** |

* **See appendix B of SLA for full detail on eligible patient groups**

**Contents**

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| Section |
| 1. | Key steps for contractors |
| 2. | Service description and background |
| 3. | Aims and intended service outcomes |
| 4. | Service specification |
| 5.  | Training and premises requirements |
| 6.  | Service availability |
| 7. | Data collection and reporting requirements |
| 8. | Payment arrangements |
| Appendices |
| A | Community Pharmacy Good Practice Summary |
| B | Patient groups included in this pilot  |
| C | Patient Consent Form |
| D | Community Pharmacy Evaluation Form |
| E | Notification of administration of influenza vaccine to Patient’s GP Practice |
| F | Letter to explain mass vaccination to patients presenting that are ineligible for community pharmacy vaccination due to future appointment. |

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| **1.** | **Key Steps for Contractors** |
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|  | 1.1 | Ensure you are fully conversant with the content of this SLA to assist you in adhering to the agreed procedures. We have provided a good practice summary at **Appendix A** of this document.  |
|  |
|  | 1.2 | Ensure that a standard operating procedure (SOP) is in place that accurately describes your service model. |
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|  | 1.3 | Ensure training of all Pharmacists or pharmacy technicians providing vaccinations on behalf of the pharmacy is up to date and that support staff are aware of the service and of the patient cohorts eligible for flu vaccination in community pharmacy. Eligible cohorts are listed in **Appendix B.** |
|  |
|  | 1.4 | Ensure that all Pharmacists and pharmacy technicians providing vaccinations on behalf of the pharmacy have signed the relevant Patient Group Directions (PGD’s) and completed the MS form accompanying the PGD to confirm this.  |
|  |
|  | 1.5 | Be fully aware of the supply and storage requirements for vaccines to ensure these and the principles of maintaining cold chain supply are adhered to. It is a professional responsibility to maintain the cold chain and regularly monitor and record the temperature of any storage used for vaccines. |
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|  | 1.6 | Maintain adequate quantities of consent forms and any other relevant paperwork that is not being completed electronically and that all records are stored securely on completion. |
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| **2. Service Description and Background** |
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|  | 2.1 | For most healthy people, influenza (flu) is an unpleasant but usually self-limiting disease. However, older people, pregnant women and those with an underlying medical condition are at particular risk of becoming more adversely affected should they succumb to the illness. |
|  |
|  | 2.2 | Flu is a key factor in NHS resilience. It impacts on those who become ill, the resultant NHS services that provide direct care as a consequence, and on the wider health and social care system. The annual immunisation programme helps to reduce unplanned hospital admissions and pressure on the Emergency Departments. It is therefore a critical element of a system-wide approach in maintaining the resilience of healthcare services during the critical winter period. |
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|  | 2.3 | This service will operate within NHS Ayrshire & Arran in Community Pharmacies who wish to participate allowing accredited personnel to administer influenza vaccine to eligible patients in the agreed cohorts as a free NHS service. |
|  |
|  | 2.4 | During the seasonal flu vaccination campaign period, pharmacy staff will identify people eligible for flu vaccination and encourage them to be vaccinated ***only*** if they have not already been vaccinated in this season or are ***not scheduled to be vaccinated at another NHS site providing immunisation***.  |
|  |
|  | 2.5 | The Community Pharmacy Seasonal Flu Immunisation Service will run from **15th September 2025 to March 31st 2026**, subject to vaccine availability, complementing other NHS services which will commence in **September 2025**. |
|  |
|  | 2.6 | The vaccination is to be administered to eligible patients meeting the criteria specified in the NHS Ayrshire & Arran PGD and who do not have any contraindications to vaccination. The PGDs will be available on the NHS Ayrshire & Arran Community Pharmacy website at: <https://www.communitypharmacy.scot.nhs.uk/nhs-boards/nhs-ayrshire-arran/patient-group-directions/> |
|  |
| **3. Aims and Intended Service Outcomes** |
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| The aims of this service are: |
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|  | 3.1 | To sustain and maximise uptake of influenza vaccine in specified eligible groups by building the capacity of Community Pharmacies as an alternative option complementary to other seasonal influenza immunisation options in the Health Board area. |
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|  | 3.2 | To utilise the ease of access to extended opening hours that Community Pharmacies present in providing more opportunities and greater convenience for eligible patients to access free NHS flu vaccinations. |
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| **4. Service Specification** |
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|  | 4.1 | The Pharmacy Contractor is required to offer eligible patients the opportunity to receive a flu vaccination at the pharmacy. The Contractor will receive a payment per eligible vaccination from NHS Ayrshire & Arran. The vaccine is to be administered by an appropriately trained person under the authority of the NHS Ayrshire & Arran PGD and in line with any national protocol |
|  |
|  | 4.2 | The pharmacy based service is to be operational from **15th September 2025 to 31st March 2026** vaccinating eligible patients presenting at a community pharmacy. Regular reports on the prevalence of flu like illness are provided by Public Health Scotland (PHS) throughout the season. (<https://www.hps.scot.nhs.uk/publications/>) |
|  |
|  | 4.3 | The patient groups eligible for seasonal flu vaccination as listed in **Appendix B** and included in the CMO letter. **People in long-stay residential care or care homes are excluded and out with the scope of this service**. Pregnant women are eligible for the service but should be directed to maternity services in the first instance where appropriate. Contraindications to the vaccine are listed in the PGD and in the Summary of Product Characteristics (SPC) for each vaccine. |
|  |
|  | 4.4 | The seasonal flu vaccines to be administered under this service are those indicated by the Scottish Government Seasonal Influenza Vaccination Programme 2025-2026 and covered by the PGD’s and national protocol: **PGD’s will be issued separately as an adjunct to this SLA when they are published by the Scottish Government and approved for use in NHS Ayrshire & Arran.** |
|  |
|  | 4.5 | Pharmacy Contractors must ensure that vaccinations offered under this service are provided in line with Immunisation Against Infectious Disease (The Green Book), which outlines all relevant details on the background, dosage, timings and administration of the vaccination including disposal of clinical waste. |
|  |
|  | 4.6 | The Pharmacy Contractor must have a SOP in place for this service, which includes procedures to ensure cold chain integrity. All vaccines are to be stored in accordance with the manufacturer’s instructions and all refrigerators in which vaccines are stored are required to have a calibrated maximum/minimum thermometer capable of recording temperatures to one decimal place.**Readings are to be taken and recorded from the thermometer on all working days**. The HPS Scotland Vaccine Ordering, Storage and Handling Guideline must be followed. This recommends twice daily monitoring of temperature and an annual servicing of the fridge. The vaccines should not be used after the expiry date shown on the product. |
|  |
|  | 4.7 | Each patient being administered a vaccine should be given a copy of the manufacturer’s Patient Information Leaflet (PIL). |
|  |
|  | 4.8 | Patients who are eligible for COVID-19 vaccinations should be advised to have flu and COVID-19 vaccines co-administered by NHS Ayrshire & Arran vaccination services. A letter has been prepared to give to patients in order to facilitate the delivery of this message by community pharmacy teams – Appendix G |
|  |
|  | 4.9 | Details of patients vaccinated within the community pharmacy will be notified to their GP practice through the vaccine management tool (VMT). Community pharmacies need only capture the relevant details on the VMT system and the transfer will be done without any need for further action. In the event that VMT is not available, a hard copy of the record of administration should be completed and uploaded to the VMT at the first available opportunity. This is available at **Appendix C**. The consent covers the administration of the vaccine and sharing the patient’s details with the GP Practice and NHS Ayrshire & Arran. Where the VMT entry cannot be made, **Appendix E** should be completed and sent securely to the patients GP.  |
|  |
|  | 4.10 | If required, paper copies of the VMT entry should be retained for an appropriate period of time, but for the purposes of post-payment verification, the forms should be kept for a minimum of two years after the vaccination takes place. As Pharmacy Contractors are the data controller, it is for each Contractor to determine what the appropriate length of time is, beyond two years. Decisions on this matter must be documented and should be in line with ‘**Scottish Government Records Management: NHS Code of Practice (Scotland) Version 2.1.**<https://www.gov.scot/publications/scottish-government-records-management-nhs-code-practice-scotland-version-2-1-january-2012/> |
|  |
|  | 4.11 | Where VMT forms are scanned into a third-party data transfer software solution, care must be taken to ensure that the scanned copy is of a good quality and is a true copy of the original. |
|  |
|  | 4.12 | The information contained in the VMT form may be shared on request with NHS Ayrshire & Arran for the purpose of post-payment verification. |
|  |
|  | 4.13 | The Pharmacy Contractor must maintain appropriate records to ensure effective ongoing service delivery and post-payment verification.  |
|  |
|  | 4.14 | Where a patient presents with an adverse drug reaction following the initial vaccination and the Pharmacist believes this is of clinical significance, such that the patient’s GP practice should be informed, this information should be shared with the GP practice as soon as possible This notification may be by telephone, clinical email or by a means agreed with the local GP practice. |
|  |
|  | 4.15 | The Pharmacy Contractor is required to record and report any patient safety incidents to the NHS Ayrshire & Arran Community Pharmacy Team on 01292 513831. |
|  |
|  | 4.16 | The Pharmacy Contractor is required to comply with arrangements in place for the removal and safe disposal of any clinical waste related to the provision of this service. Staff providing the service must also have in place the appropriate arrangements for the use of Personal Protective Equipment (PPE) identified as being required to immunise patients. |
|  |
| **5. Training and Premises Requirements** |
|  |
|  | 5.1 | Under this service, vaccinations will be administered on the pharmacy premises utilising a consultation room or appropriate designated space. Infection control measures must be in place to ensure the vaccination area remains safe.* Any area of pharmacy premises used for this service should meet the General Pharmaceutical Council (GPhC) Standards for Registered Premises -

 <https://www.pharmacyregulation.org/standards/standards-registered-pharmacies> |
|  |
|  | 5.2 | The HPS Vaccine Ordering, Storage and Handling Guideline must be followed.If a vaccine or cold chain incident occurs the Health Protection Scotland Vaccine Incident Guidance should be followed [vaccine-incident-guidance-actions-to-take-in-response-to-vaccine-errors](https://www.hps.scot.nhs.uk/web-resources-container/vaccine-incident-guidance-actions-to-take-in-response-to-vaccine-errors/). Any clinical vaccine incident should be reported to the NHS Ayrshire & Arran Community Pharmacy Team on 01292 513831.Any cold chain incident should be reported to the NHS Ayrshire & Arran Community Pharmacy Team on 01292 513831. |
|  |
|  | 5.3 | Pharmacists should demonstrate to the pharmacy contractor that they have the necessary knowledge and skills to provide the service by completing flu vaccination service training requirements as stipulated in the PGDs. The professional signing the PGD paperwork accepts personal responsibility for having undertaken all the mandatory requirements outlined in the PGDs including accredited immunisation training. |
|  |
|  | 5.4 | The Pharmacy Contractor must ensure that pharmacists and pharmacy technicians providing the service are aware of the National Minimum Standards in relation to vaccination training, and are compliant with the training requirements within those Standards that apply to pharmacists and pharmacy technicians providing the service.  |
|  |
|  | 5.5 | The Pharmacy Contractor should ensure that they have reviewed **Section 4 relating to the Service Specification** and associated documents. |
|  |
|  | 5.6 | The Pharmacy Contractor must ensure that staff are appropriately trained and made aware of the risks associated with the handling and disposal of clinical waste and that correct procedures are used to minimise those risks. A needle stick injury procedure must be in place. |
|  |
|  | 5.7 | The Pharmacy Contractor must ensure that staff involved in the provision of this service are advised that they should consider being vaccinated against Hepatitis B and be advised of the risks should they decide not to be vaccinated. The responsibility for providing access to Hepatitis B immunisation remains with the Contractor or employer. |
|  |
|  | 5.8 | The Pharmacy Contractor must ensure that their professional indemnity insurance is sufficient to cover this service. |
|  |
|  | 5.9 | Vaccine waste from the service should be consigned to the dedicated containers provided and set aside for collection by the appointed waste contractor. |
|  |
|  | 5.10 | A good practice summary is available at **Appendix A.** |
|  |
| **6. Service Availability** |
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|  | 6.1 | The Pharmacy Contractor will limit promotion of the service to patients attending their pharmacy and only provide the service to those eligible to receive the vaccine through the community pharmacy service and in accordance with the PGD. |
|  |
|  | 6.2 | The facility will be available by arrangement at agreed times convenient for the patient when the accredited Pharmacist is available on site to provide this service. |
|  |
|  | 6.3 | The Pharmacy Contractor must ensure the service is accessible, appropriate and sensitive to the needs of all service users. No eligible patient shall be excluded or experience particular difficulty in accessing and effectively using this service due to their race, gender, disability, sexual orientation, religion or belief, gender reassignment, marriage or civil partnership status. |
|  |
| **7. Data Collection and Reporting Requirements** |
|  |
|  | 7.1 | The Contractor must maintain appropriate records to ensure effective ongoing service delivery.  |
|  |
|  | 7.2 | Where record forms are scanned into either a patient’s notes or into a third-party data transfer software solution, care must be taken to ensure that the scanned copy is of a good quality and is a true copy of the original. |
|  |
|  | 7.3 | **Appendix C** is the VMT record form. If such forms have to be utilised in the absence of VMT, they must be retained irrespective of whether immunisation was subsequently provided. The information from these forms will be used by NHS Ayrshire & Arran to evaluate the service. All patient identifiable data should be held securely. |
|  |
|  | 7.4 | Each participating pharmacy must complete an evaluation form **(Appendix D)** at the conclusion of the annual service. All Pharmacists providing the service should be invited to contribute to this form which will be used by NHS Ayrshire and Arran to evaluate this service and modify any subsequent service. |
|  |
| **8. Payment Arrangements** |
|  |
|  | 8.1 | Prior to provision of the service, the Pharmacy Contractor must ensure that both their premises and all Pharmacists administering NHS flu vaccinations meet the requirements outlined in this service specification. |
|  |
|  | 8.2 | Claims for payments for this programme will be generated electronically using the vaccine management tool. This will generate payment automatically and obviate the need to submit further claims. The frequency of submission may vary to determine the level of uptake although payments will be paid monthly, two months in arrears to allow suitable time for activity levels to be accurately captured. Where vaccines have been administered and are not uploaded onto the VMT (due to technical issues) contact NHS Ayrshire & Arran Community Pharmacy Team on 01292 513831 who will log activity and ensure payment is made. |
|  |
|  | 8.3 | Payment will be **£288.75** per contractor for agreeing to provide the service and **delivering at least 10 doses**. **£9.12** per administered dose of vaccine to cover the costs associated with provision of the service will also be paid. The vaccines to be used will be supplied to Contractors through MOVIANTO from NHS Ayrshire and Arran procured stock.  |
|  |
|  | 8.4 | Under this service, the Pharmacy Contractor will not be reimbursed or remunerated for vaccines administered to patients outside of the eligibility criteria set out in **Appendix B**. |
|  |
|  | 8.5 | Unused vaccines may be collected by NHS Ayrshire and Arran for destruction at the end of the campaign. NHS Ayrshire and Arran receive credit for unused vaccines. Detail will be communicated at the end of the campaign. |

## Appendix A: NHS Ayrshire & Arran Flu Vaccination Service -Community Pharmacy Good Practice Summary

**Training requirements**

* The NES flu eLearning module on TURAS is recommended for all vaccinators and covers the following modules

**The link for this e-learning will be circulated in due course when released by NES.**

**Premises requirements**

Consultation room meeting the requirements.

* The HPS Vaccine Ordering, Storage and Handling Guidelines are followed.

<https://www.hps.scot.nhs.uk/web-resources-container/guidance-on-vaccine-storage-and-handling/>

**Service availability**

* The service runs from 15th September 2025 to 31 March 2026.
* There will be two different types of vaccines available for use in this NHS Ayrshire and Arran service
	+ For adults between 18 and 64, offer Cell-based quadrivalent influenza vaccine (QIVc)
	+ Adjuvanted QIV (aQIV) should be used as appropriate for those aged 65 years and over. **(NB – use of this will be minimal this year in community pharmacy due to restrictions on cohorts – see Appendix B)**
* All staff providing the service have had up to date training covering injection technique and basic life support, including CPR and administration of adrenaline for anaphylaxis.
* Anaphylaxis kits including adrenaline should be maintained and made readily available when the flu vaccination service is being delivered.
* Staff providing the service are competent to do so as per the PGD requirements
* All staff providing vaccinations on behalf of the pharmacy have signed the NHS Ayrshire & Arran patient group direction (PGD) and completed the declaration via MS form.

**Patient eligibility**

* Identify eligible patients under the NHS Ayrshire & Arran PGD
* **Patients from cohorts also entitled to a COVID vaccination are EXCLUDED from the community pharmacy service unless they have already been vaccinated for COVID but NOT seasonal flu.**
* **People in long stay residential care or homes are excluded from the service**.
* To receive flu vaccination, patients must
	+ **Not** have already had a flu vaccine this season
	+ **Not** have a future appointment from vaccination via an NHS service
	+ **Not** have any contraindication to receiving flu vaccine
	+ Confirm consent

 **Data collection and reporting requirements (documentation)**

* If required and not supported by VMT, store completed consent forms securely for a minimum of 7 years. Please refer to your own Company Policies for further details.
* A patient’s GP is informed if a patient presents with a clinically significant adverse drug reaction following administration of the vaccine.
* The pharmacy contractor records and reports any clinical patient safety incidents to the NHS Ayrshire & Arran Community Pharmacy Team on 01292 513831.
* The pharmacy contractor reports any cold chain incidents to the NHS Ayrshire & Arran Community Pharmacy Team on 01292 513831.
* Details of administration will be notified to a patients GP via VMT (manual process may be required if VMT is unavailable)

**Vaccine Supply**

* Vaccines will be available to order (without charge) from MOVIANTO. Details of how to obtain stock will be provided to participating pharmacies following completion of sign up to provide the service.
* If you have any issues ordering stock, contact Kirstie Church (Principal pharmacist) kirstie.church@aapct.scot.nhs.uk as soon as possible who will help resolve any issues.

**March 2026**

* Pharmacy contractors complete an evaluation form on conclusion of the service to evaluate and inform service development. All pharmacists providing the service are expected to contribute.
* Pharmacy contractors return any unused vaccine to Vaccine Services, NHS Ayrshire and Arran for destruction. Details will be provided in March 2026.

**Payment**

* The service is a free NHS service to eligible patients.
* Payments will be made 2 months in arrears based on activity recorded in the VMT
* Payments will be made monthly (2 months in arrears).
* The £288.75 will be paid following the 10th vaccination recorded using the VMT along with the vaccination payments for that period.
* Pharmacy contractors will not be reimbursed or remunerated for vaccines administered to patients outside the eligibility criteria.

**Appendix B: NHS Ayrshire and Arran Flu Vaccination Service –**

**Patient Groups Included in this Service 2025/26**

The community pharmacy flu service for 2025/26 is limited to the following groups of patients:

* Health and social care workers (All NHS staff frontline and non-frontline and all frontline Social Care Workers)
* Those who experience homelessness
* Those who experience substance use
* Those aged 18-64yrs "at risk" from flu and not eligible for COVID-19 vaccination
	+ This equates to approx. 9,000 citizens although we expect only 30% to take up the offer of vaccination.  Those in this cohort will initially be invited to attend a mass vaccination centre for their flu vaccination from 15th September up until the 19th October. Those citizens who did not take up the original offer in September/October to be redirected to a local participating Community Pharmacy.

**In relation to offering flu vaccination to those experiencing homelessness and/or substance misuse, please see below relating to the importance of maximising uptake amongst these citizens:**

*People experiencing homelessness encounter many challenges, some of which may be long-term health conditions, including problems with drug and/or alcohol or mental health issues.  We know that citizens who experience these vulnerabilities are at higher risk of poorer outcomes from flu.  The JCVI (joint committee on vaccination and immunisation) have recommended flu vaccination for these citizens in 2025/26, and delivery through Community Pharmacies in 2025/26 would be a welcome addition to NHS Ayrshire and Arran's wider delivery model this winter.*

Patients from other eligible categories will be appointed to have flu and COVID vaccines co-administered in a mass vaccination centre and therefore should not be vaccinated in community pharmacy. Doing so will cancel any future appointments on the vaccine appointment system and cause significant operational issues for the vaccination team as well as potential risk to patients who may not receive their COVID vaccination.

There may be occasion where some patients present at community pharmacy for a flu vaccination AFTER they have had COVID administered by the vaccination team (normally because they choose not to have both vaccines administered at the same time). In these instances, community pharmacies CAN administer flu only as long as the patient has already attended their COVID vaccine appointment (this will be visible on the vaccine management tool).

In practice this means:

* Health and social care staff **CAN** be vaccinated at any time from the commencement of the service.
* Those who experience homelessness **CAN** be vaccinated at any time from the commencement of the service
* Those who experience substance use **CAN** be vaccinated at any time from the commencement of the service.
* Adults between 18-49 year olds in “at risk” groups **CAN** be vaccinated from **20th October 2025** Please ensure they have not already received a seasonal flu vaccination.

**Clinical risk groups who should receive the influenza immunisation**

1. Influenza vaccine should be offered to those in the clinical risk categories set out below:

|  |  |
| --- | --- |
| **Clinical risk category** | **Examples (this list is not exhaustive and decisions should be based on clinical judgement)** |
| Chronic respiratory disease | Asthma that requires continuous or repeated use of inhaled or systemic steroids or with previous exacerbations requiring hospital admission.Chronic obstructive pulmonary disease (COPD) including chronic bronchitis and emphysema; bronchiectasis, cystic fibrosis, interstitial lung fibrosis, pneumoconiosis and bronchopulmonary dysplasia (BPD).Children who have previously been admitted to hospital for lower respiratory tract disease. |
| Chronic heart disease | Congenital heart disease, hypertension with cardiac complications, chronic heart failure, individuals requiring regularmedication and/or follow-up for ischaemic heart disease. |
| Chronic kidney disease | Chronic kidney disease at stage 3, 4 or 5, chronic kidney failure, nephrotic syndrome, kidney transplantation. |
| Chronic liverdisease | Cirrhosis, biliary atresia, chronic hepatitis |
| Chronic neurological disease | Stroke, transient ischaemic attack (TIA). Conditions in which respiratory function may be compromised due to neurological disease (e.g. polio syndrome sufferers). Clinicians should offer immunisation, based on individual assessment, to clinically vulnerable individuals including those with cerebral palsy, learning disabilities, multiple sclerosis and related or similar conditions; or hereditary and degenerative disease of thenervous system or muscles; or severe neurological disability. |
| Diabetes | Type 1 diabetes, type 2 diabetes requiring insulin or oral hypoglycaemic drugs, diet controlled diabetes. |
| Immunosuppression (see contraindications and precautions section on live attenuated influenza vaccine) | Immunosuppression due to disease or treatment, including patients undergoing chemotherapy leading to immunosuppression, bone marrow transplant, HIV infection at all stages, multiple myeloma or genetic disorders affecting the immune system (e.g. IRAK-4, NEMO, complement disorder)Individuals treated with or likely to be treated with systemic steroids for more than a month at a dose equivalent to prednisolone at 20mg or more per day (any age), or for children under 20kg, a dose of 1mg or more per kg per day.It is difficult to define at what level of immunosuppression apatient could be considered to be at a greater risk of the serious consequences of influenza and should be offered influenza vaccination. This decision is best made on an individual basis and left to the patient’s clinician.Some immunocompromised patients may have a suboptimal immunological response to the vaccine.This also includes conditions such as homozygous sickle celldisease and coeliac syndrome that may lead to splenic dysfunction. |
| Pregnant women at any stage of pregnancy (first, second or third trimesters).see precautions section on live attenuated influenza vaccine |  |
| Adults with a Body Mass Index ≥40 kg/m²\* | \* Many of this patient group will already be eligible due to complications of obesity that place them in another risk category |

Appendix C: NHS Community Pharmacy

Seasonal influenza Vaccination Service -

Record of administration of flu vaccination

and consent (only required if VMT not

available)

**Appendix D: NHS Ayrshire and Arran Flu Vaccination Service -**

**Community Pharmacy Evaluation**

Thank you for participating in the NHS Ayrshire and Arran project delivering annual flu vaccination through Community Pharmacies for the flu season 2023-2024. We are keen to hear about your experiences and hope you will complete this short evaluation to help inform service development and explore its sustainability. Please return completed form to: to be confirmed.

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| --- |
| **Pre-Season** |
| **1.** | **Communication and Support***Were you provided with sufficient information and support?* | [ ]  Yes [ ]  No |
| **During Season** |
| **2.** | **Capacity to Deliver Service** *Did you have sufficient time to deliver the service?* | [ ]  Yes [ ]  No |
| **3.** | **Patient Demand for Service***Did you ever have to turn patients away?**Estimate frequency and provide details.*…………………………………………………………...................................... | [ ]  Yes [ ]  No  |
|  | *Did you receive any enquiries for patients not covered under the PGD? Estimate and provide details.*…………………………………………………………...................................... | [ ]  Yes [ ]  No |
| **4.** | **Data Collection and Reporting***Were you satisfied with documentation, screening form, consent, patient questionnaires etc. Please provide details ……………………………………………………………………………………* | [ ]  Yes [ ]  No |
| **5.** | **Ordering and Supply of Vaccine** *Did you have sufficient stock to deal with patient demand? If not, what date did the supply run out? ……………………………………………………………………………………* | [ ]  Yes [ ]  No |
| **6.** | **Storage and Handling of Vaccine***Was storage space in fridge sufficient for NHS stock?* | [ ]  Yes [ ]  No  |
|  | *Was any NHS stock subject to a cold chain incident?* | [ ]  Yes [ ]  No  |
| **Post Season** |
| **7.** | **Waste Disposal***Were arrangements for waste disposal satisfactory?* | [ ]  Yes [ ]  No |
| **8.** | **Vaccine Return***Did you have much NHS stock left at the end of the season?**How much?…………………………………………………………* | [ ]  Yes [ ]  No |
| **9.** | **Willingness to Participate in Future***Would you wish to be involved in this service next year?* | [ ]  Yes [ ]  No  |
| **Other**  |
| **10** | **Unintended Consequences***Was there any impact on any other pharmacy services?**Please provide details? .......................................................................................................* | [ ]  Yes [ ]  No  |

 Any other comments or suggestions for improvement?

**………………………………………………………………………………………………………………**

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**Appendix E: NHS A&A Flu Vaccination Service –**

**Notification of Administration of Flu Vaccine to Patient’s GP Practice (to be used only if the VMT is not available)**

|  |  |
| --- | --- |
| To GP |  |
| Patient Name  |  |
| Address |  |
| Patient DOB |  | CHI Number |  |
| Eligible patient group (please only tick one box, to indicate the reason the patient was initially identified as being eligible) | Age 18 to 49 years with - |
| 🞏 Chronic respiratory disease | 🞏 Chronic heart disease |
| 🞏 Chronic kidney disease | 🞏 Chronic liver |
| 🞏 Chronic neurological disease | 🞏 Diabetes |
| 🞏 Immunosuppression including household contacts | 🞏 Asplenia / splenic dysfunction |
| 🞏 Morbid obesity | 🞏 Education staff (inc Nursery) |
| 🞏 Over 50 years | 🞏 Carers |
| 🞏 Social care worker providing direct personal care |
|  | Additional comments (e.g. any adverse reaction to the vaccine and action taken/recommended to manage the adverse reaction) |
|  |  |
| This patient was administered a seasonal influenza vaccine on :  | Vaccine BNExpiry date |
| Name and Address of Pharmacy: |

**Appendix E: Letter to explain mass vaccination to patients presenting that are ineligible for community pharmacy vaccination due to future appointment.**

**These should be printed and given to patients when required.**



The community pharmacy have been unable to administer your flu

vaccine today as you are within a patient cohort eligible for a COVID

booster at the same time as your flu vaccination this year.

You will receive an appointment to attend one of the NHS Ayrshire

 & Arran vaccination centres where you will receive both vaccinations.

Community pharmacists cannot offer the flu vaccine to you at this time as doing so will result in future vaccination appointments being cancelled.

For further information on this year’s vaccination programme please visit WWW.NHSINFORM.SCOT

The community pharmacy have been unable to administer your flu

vaccine today as you are within a patient cohort eligible for a COVID

booster at the same time as your flu vaccination this year.

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