

 Leicestershire, Lincolnshire and Northamptonshire Screening and Immunisation Team

**Ongoing issues with aTIV supplies**

We know that this has been (and continues to be) very difficult for practices, but the national advice has not changed. Until there is absolutely no chance of obtaining Fluad locally, unvaccinated patients aged ≥ 65 should be advised to wait. It might seem as if this is already the case, but we have been repeatedly told that there’s enough vaccination out there - it’s that it’s just not all in the right places.

There are still plans to move vaccine around on a local footprint, and information about this was sent to practices on 1st November. They can choose to do this via the CCG flu leads –who have copies of all the documents sent out - or informally between themselves (ideally letting the flu leads know). The cold chain must be maintained, of course, and guidance about this was included in the 1st November email, which also asked practices with a shortfall, and practices likely to have a surplus of Fluad to contact their flu lead with this information. However, no one anticipates much if any movement of vaccine until all practices have received their final deliveries and had a chance to vaccinate as many as possible of their outstanding patients. We have assumed that this would be mid-November at the earliest. We are having regular teleconferences with all CCG flu leads and sharing information.

Flu vaccination should be delivered by the end of the year – this is not new guidance, it’s just that in previous years it’s all happened much earlier. The peak of flu activity predominantly occurs from January onwards, and so vaccinating by the end of the year is considered to be clinically acceptable – whereas giving a less effective vaccine is not. So the message to patients should still be that it’s better to wait and have the most effective vaccine even if this is later than usual for them. If they request/ insist upon receiving the QIV rather than waiting then only the responsible clinician can decide whether or not this is an appropriate way to proceed against the guidance above – about which the patient must be fully informed. Again, this has been the advice from the outset.

We’re sorry that we can’t offer anything else at this time. We are still liaising with the national team about the local position and problems and we’ll let practices know as soon as possible should anything change. However, our most recent instruction from the national team (23rd November) was that local decisions should not be made - Screening and Immunisation Teams are required to promote the national plan, which is as outlined above.

If you are missing any of the information referred to above please contact us, and please be assured that we will let you have any new information as soon as we receive it.

Thank you for your continued hard work and forbearance.