

**EXECUTIVE SUMMARY****Report to the Board of Directors****Held on 28<sup>th</sup> September 2021**

<b>Subject</b>	STH Influenza Staff Vaccination Programme 2021/22
<b>Supporting TEG Member</b>	Michael Harper
<b>Author</b>	Kris Wujkiw
<b>Status<sup>1</sup></b>	A*

**PURPOSE OF THE REPORT**

To brief the Board on the outcome of the Influenza Staff Vaccination Programme Self Assessment process undertaken as per the guidance issued by DHSC dated 17<sup>th</sup> July 2021.

**KEY POINTS**

- DHSC require the Trust to undertake a best practice self-assessment for public assurance via the Trust Board at the start of flu season.
- The assessment has been undertaken and the majority of areas are Complete. Areas to sign off by the Board which will result in all areas being complete are:
  - The Board is required to confirm its collective commitment to achieving the ambition of 100% of frontline healthcare workers being vaccinated (A1); and individual commitment to being vaccinated (A5 & B3); and then all areas will be complete.
  - It is noted that TEG have reviewed the options for incentives to staff (D1). Previously the “Jab for a Jab” incentive scheme was used but having reviewed last year’s programme where incentives were not used, the proposal to the Board is again that no incentives are provided this year.

**IMPLICATIONS<sup>2</sup>**

<b>AIM OF THE STHFT CORPORATE STRATEGY 2017-2020</b>		<b>TICK AS APPROPRIATE</b>
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Deliver Excellent Research, Education & Innovation	

**RECOMMENDATIONS**

The Board is asked to:

- Agree the self-assessment undertaken, noting the recommendations to Board to allow all areas to be marked as complete.
- Publish the outcome of the self assessment in the Board minutes
- Note the need for members of the Board to access a flu vaccination.

**APPROVAL PROCESS**

<b>Meeting</b>	<b>Date</b>	<b>Approved Y/N</b>
TEG	14/10/20	Y
Public Board of Directors	28/10/20	

<sup>1</sup>Status: A = Approval  
 A\* = Approval & Requiring Board Approval  
 D = Debate  
 N = Note

<sup>2</sup>Against the five aims of the STHFT Corporate Strategy 2017-20

## 1. Introduction

On the 17<sup>th</sup> July the Trust received further detailed guidance on this years 'Flu vaccination programme from the Department of Health and Social Care (DHSC). In keeping with the last few years there is a requirement for the organisation to publish a self-assessment best practice checklist within our public Board papers

## 2. Self-Assessment Checklist

Acknowledging the previous Influenza programme paper submitted to TEG (1<sup>st</sup> September 2021) below is the current compliance against the checklist:

<b>Healthcare Worker Flu Vaccination Best Practice Management Checklist</b>		
<b>A</b>	<b>Committed Leadership</b>	<b>Trust Self-Assessment</b>
A1	Board record commitment to achieving the ambition of vaccinating all frontline healthcare workers	Board to record commitment against 100% frontline uptake
A2	Trust has ordered and provided a quadrivalent (QIV) flu vaccine for healthcare workers	Quadrivalent Influenza Vaccine (cell) procured for all staff regardless of age. This vaccine is also suitable for those with egg allergies. Recommended by the JCVI across all age groups
A3	Board receive an evaluation of the flu programme 2020 to 2021, including data, successes, challenges and lessons learnt	Paper submitted to TEG on 3 <sup>rd</sup> March 2021
A4	Agree on a board champion for flu campaign	Michael Harper designated as board 'Flu champion
A5	All board members receive flu vaccination and publicise this	Board members to support by receiving the jab at the trust / feedback from GP vaccination
A6	Flu team formed with representatives from all directorates, staff groups and trade union representatives	The trust's Outbreak and System Resilience Group assumes this responsibility
A7	Flu team to meet regularly from September 2021	Complete
<b>B</b>	<b>Communications Plan</b>	
B1	Rationale for the flu vaccination programme and facts to be published – sponsored by senior clinical leaders and trades unions	Complete
B2	Drop-in clinics and mobile vaccination schedule to be published electronically, on social media and on paper	Complete
B3	Board and senior managers having their vaccinations to be publicised	As above (A5)
B4	Flu vaccination programme and access to vaccination on induction programmes	Induction no longer delivered in the same way post COVID-19 therefore opportunity no longer available
B5	Programme to be publicised on screensavers, posters and social media	Complete
B6	Weekly feedback on percentage uptake for directorates, teams and professional groups	Live reporting dashboard developed in 2020 fed by trusts in house data collection application 'VacTrack'
<b>C</b>	<b>Flexible Accessibility</b>	
C1	Peer vaccinators, ideally at least one in each clinical area to be identified, trained, released to vaccinate and empowered	Complete
C2	Schedule for easy access drop-in clinics agreed	Complete
C3	Schedule for 24-hour mobile vaccinations to be agreed	Complete
<b>D</b>	<b>Incentives</b>	
D1	Board to agree on incentives and how to publicise this	Complete
D2	Success to be celebrated weekly	Complete / Plan in place

## 3. Recommendations

The Board is asked to:

- Agree the self-assessment undertaken, noting the recommendations to Board to allow all areas to be marked as complete.
- Publish the outcome of the self assessment in the Board minutes
- Note the need for members of the Board to access a flu vaccination.