

## **Briefing note from Central and Eastern Cheshire Primary Care Trust**

### **Swine flu update and preparing for future outbreaks of pandemic flu**

#### **Operating Framework 2010/11**

The Operating Framework 2010/11 requires Boards of NHS organisations to consider their responsibilities in preparing for threats and hazards including future outbreaks of pandemic flu. It also requires Boards to prepare plans for vaccination delivery strategies and ensure NHS command and control arrangements are robust. This report describes the “Next Steps” as well as giving an update on the local response.

In September 2009 CECPCT Board received a paper outlining the statement of readiness to, and the implementation of the swine flu (H1N1 influenza) response locally.

The local responses have, and are continuing as the national pandemic has progressed and subsided. It is important that CECPCT Board are assured that we have delivered what has been required and are managing the “stand down” effectively whilst continuing to deliver a consistent and smooth transition for patients whilst retaining appropriate access to vaccination and anti-virals for those who continue to need them.

- The number of anti-virals provided locally (May 2009 to March 2010) was: 13,984

- The number of anti-virals collections points locally (May 2009-March 2010) was:

2 AVCPs in July/August

18 AVCPs in August (including community pharmacies)

33 AVCPs August – February 2010

3 AVCPs February – March 2010

- Patients admitted/treated for flu as in-patients:-

MCHFT – 66 (but only 12 positive) + 3 paediatric

ECT – 5

CWP – 0

- Patients treated in CCU/ICU:-

MCHFT – 4 (but only 1 positive)

ECT – 3

- July – December 2009 cumulative sickness absence % rates including swine flu in CECPT (including CECH):-

sickness – 6.19%  
carer responsibilities – 0.08%  
influenza – 0.17%

commissioning PCT - sickness 4.18%  
- carer 0.01%  
- flu 0.05%

provider CECH - sickness 6.73%  
- carer 0.07%  
- flu 0.12%

- The management of the 2009 outbreak was led by Fiona Field, Lead Director for flu alongside a core team internally of Head of Governance, Consultant in Public Health, Medical Director, Emergency Planning Manager, Assistant to Chief Executive and 6 members of staff drawn from teams within the PCT ie Head of Medicines Management, pharmacy lead, Primary Care Manager, Quality Manager, Health and Safety Manager and ICT Manager.

An operational group met daily during initial phases to implement AVCP's. CECH were heavily involved in this part of the planning and delivery stages across all teams and services. It should be noted by the Board that all staff in PCT and CECH were delivering swine flu response services (AVCPs, vaccination, ICT, HR and training, communication, planning etc) throughout the summer and autumn and should be congratulated for huge additional commitment over and above the "normal" responsibilities.

The operational group also drew in joint working with both local authorities, 2 acute trusts and the 3<sup>rd</sup> sector.

A strategic group was formed alongside the operational group particularly concerning the implementation of the vaccination campaign to ensure.

## **Next Steps**

CECPCT has prepared a written debrief (attachment 1) to Cheshire Gold for 9 March 2010 exercise (included within this report) as well as carried out a review of our emergency preparedness plans (including flu) for the future. Lessons learned over the 10 month period of the pandemic are being incorporated into our plans to improve our responses in the future.

- 1 The National Pandemic Flu Line (telephone service) stood down on 11 February 2010 and patients requiring access to anti-virals returned to a primary care led consultation approach via their GP. CECPT had already made arrangements with our local 35 ACP's (community pharmacies plus CECPT HQ building) to "stand down" from 11 February although we are continuing with 3 pharmacies across the

patch who are able to issue anti-virals available through a voucher from a GP. We had also ensured primary care clinicians were fully informed of the changes in advance and had the correct processes in place for patients as necessary. This change over has gone very effectively locally.

2 Vaccination of priority groups, under 5's and healthcare workers:-

Priority groups – this campaign is delivered through primary care

Numbers vaccinated locally are:-

42.3% at risk 65+, 40.3% at risk – 65, 21.1% pregnant women

6 months to under 5's – delivered through primary care numbers vaccinated locally are: 34.7%

These campaigns are continuing but take-up rates have continued to decline despite attempts to raise awareness

Healthcare workers – delivered in-house and through occupational health

Total CECPT – 41.6%

(including GPs) + GP's – 74.4%

- practice nurses – 66.4%

- support staff primary care – 40.4%

- community nurses – 49.1%

- other qualified staff – 26.6%

- support staff – 25.7%

We are still continuing a staff vaccination programme as there is an expectation that H1N1 may return in the autumn 2010.

3 We are reviewing our healthcare workers vaccination programme to ensure positive take up of both seasonal, and pandemic flu vaccines for the future. We noted a far higher uptake of swine flu vaccination in primary care and acute services than was evident in our community services (CECH) or CWP in 2009/10 despite an assertive and clinically led approach in community services.

4 CECPT has carried out a local review as a part of the debriefing to Cheshire Gold to ensure that improvements to our local plans are made quickly based on lessons learned through 2009 pandemic. The Major Incident Plan, Flu Strategy and Business Continuity Plan are being revised currently and will be presented to the Board for agreement in May 2010.