

**PWYLLGOR STRATEGAETH A CHYNLLUNIO
STRATEGY AND PLANNING COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	28 August 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Seasonal Influenza and COVID-19 Vaccination Programmes: Delivery Plan 2025/26
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Dr Ardiana Gjini, Executive Director of Public Health
SWYDDOG ADRODD: REPORTING OFFICER:	Bethan Lewis, Assistant Director of Public Health Strategic Business and Operations; Glenna Jones, Head of Nursing – Health Protection & Public Health Nursing

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The purpose of the report is to present the Strategy and Planning Committee (SPC) with the current position in terms of planning for the Hywel Dda University Health Board (HDdUHB) delivery of the Seasonal Influenza (Flu) and COVID-19 vaccination programmes for 2025/26. The report builds on the lessons learnt from previous programmes ensuring local systems are established to develop robust delivery plans, to achieve high level of coverage as early as possible in the programmes; and to monitor progress closely, taking early remedial action where trajectories are not being achieved.

Cefndir / Background

Respiratory viruses thrive in winter putting the health and care system under significant pressure every year. The impact of this is seen both in terms of staffing absence and in the volume of people who need to access services across primary and secondary care during the season. These programmes are critical to protecting vulnerable populations and maintaining NHS resilience during the winter period. Notably, the Flu and COVID-19 programmes will now operate as separate but coordinated initiatives, with a strong emphasis on maximising uptake and addressing health inequalities.

Transition of maximising alignment of the COVID-19 and Flu vaccination programmes commenced in 2022/23. This enabled Health Boards to coordinate the planning of both programmes and where possible streamline delivery by co-administration. Our hybrid approach to delivery over the last three years supported our population to maximise their opportunity to access both vaccines closer to home.

Uptake in 2024/25 saw a reduction across both COVID-19 and Flu immunisation programmes for all eligible groups. All delivery teams identified challenges in uptake levels with considerable hesitancy in acceptance of both vaccines, but predominantly COVID-19. The focus for learning from last year's programme will be to ensure we improve on the uptakes seen last year as per tables below by maximising opportunities for access and acceptability.

COVID-19 Immunisation Uptake 2024/25 - Table 1

Eligible Group	Denominator	HDdUHB	All Wales
Severely Immunosuppressed	11,558	54.1	60.4
Care Home Resident	2,198	82.3	83.4
Care Home Workers	3,253	24.2	22.6
80 years and over	24,861	69.0	77.4
Healthcare Workers	17,473	29.3	35.0
Social Care Workers	7,375	24.1	30.5
75-79 years old	21,080	67.7	76.6
70-74 years old	22,482	63.6	74.0
65-69 years old	22,457	53.5	64.7
P6 other moderate risk	35,068	24.2	35.5
P6.1 vulnerable based on risk	4,598	25.9	31.8
TOTAL OVERALL	172,403	48.2	55.3

Influenza Immunisation Uptake 2024/25 - Table 2

Eligible Group	Denominator	HDdUHB	All Wales
65 years and over	101,461	69.2	72.5
6mth to 64 years at risk	56,067	35.9	39.1
Children aged 2 & 3 years	6,719	35.8	42.8
Primary school children aged 4-10 yrs	27,221	71.6	61.9
High school children aged 11-15 yrs	21,283	61.8	49.7
Healthcare Staff (See below table)			
Total NHS Staff	11,724	25.6	25.8
NHS Staff with direct patient contact	7,979	25.0	25.0

Healthcare Staff Uptake 2024/25 -Table 3

Staff Group	ESR	Received elsewhere */ Not on WIS**	Total	Denominator	Uptake %
Add Prof Scientific and Technical	128	16	144	423	34.04%
Additional Clinical Services	690	42	732	2660	27.51%
Administrative and Clerical	679	116	795	2408	33.01%
Allied Health Professionals	250	40	290	830	34.93%
Estates and Ancillary	250	10	260	1023	25.41%
Healthcare Scientists	59	2	61	212	28.77%
Medical and Dental	297	39	336	708	47.45%
Nursing and Midwifery Registered	1069	126	1195	3703	32.27%
Grand Total	3422	391	3813	11,967	31.86%

Updated Welsh Health Circulars (WHC) were distributed to Health Boards setting out the COVID-19 and Flu vaccination programmes for 2025/2026 season.

Planning assumptions developed through Vaccination Programme Wales (VPW) Team and Welsh Government (WG) set out the priorities, ambitions and expectations of both programmes for 2025/26 which clearly sets out the programme information, and Health Boards are expected to develop plans for a coordinated and coherent programme for both vaccines.

There are important changes from the way that the programme operated in autumn 2024.

1. The Flu and COVID-19 vaccination programmes will no longer be treated as a single winter respiratory vaccination programme. Although opportunities for co-administration of these vaccines should continue to be maximised, they will be run as two programmes.
2. In line with the advice of the Joint Committee on Vaccination and Immunisation (JCVI), eligibility for the national COVID-19 vaccination programme autumn 2025 will be narrower than in previous autumn and winter campaigns, focussing only on those most vulnerable to the disease. Eligibility will now replicate the cohorts previously eligible under the 2025 spring vaccination programme (that is only those aged 75 years and older, those who are immunosuppressed and those who reside in care homes for older adults).
3. The Inactivated Influenza Vaccine (IIV) necessary to deliver the 2025 to 2026 vaccination programme has been procured centrally by NHS Wales Shared Services Partnership (NWSSP) on behalf of WG and will be supplied directly to those providing vaccinations. This is a significant departure from previous programmes, where primary care providers have procured their own supply of IIV for use with eligible patients.
4. Primary Care Providers (GMS contractors and community pharmacies) will be commissioned by Health Boards to provide Flu vaccination services under a Primary Care (Contracted Services): Immunisation Specification (for eligible groups aged 16 and over). This specification replaces the previous separate arrangements made for engaging GMS contractors and community pharmacies. In respect of community pharmacies, the specification relates to the provision of inactivated influenza vaccine, not live attenuated influenza vaccine, to eligible persons aged 17 and over.
5. All providers operating under the national programme will be required to use the newly improved Welsh Immunisation System (WIS) to digitally record Flu vaccinations administered to adults.

Asesiad / Assessment

Planning Assumptions

The eligible cohorts for receipt of Flu and COVID-19 vaccines for the winter respiratory vaccination programme have been identified in each programme outline.

Flu eligibility for 2025-26 can be summarised, as outlined in WHC (2023) 047 as follows:

- Children aged two and three years on 31 August 2025
- School aged children from reception to Year 11 (inclusive)
- People aged six months to 64 years in a clinical risk group
- People aged 65 years and older (age on 31 March 2026)
- People living in care homes or other long stay care facilities
- All adult residents in Welsh prisons
- Pregnant women
- Carers of a person whose health or welfare may be at risk if the carer falls ill
- Frontline health and care workers
- People experiencing homelessness
- Household contacts of the immunocompromised
- Poultry workers

COVID-19 eligibility, as outlined in WHC (2024) 033, is recommended as a single dose vaccine be offered to:

- Residents in a care home for older adults
- All adults aged 75 years and over (age on 31 March 2025)
- Severely immunosuppressed

To note, the JCVI has not recommended the inclusion of the following groups for the COVID-19 programme:

- Frontline Health and Social Care workers
- Unpaid Carers
- Household contacts of the immunosuppressed

Vaccine Type

Flu vaccine availability is identified within the WHC/2025/020 and detailed in table below:

Those aged 65 years and over	Those aged 18 to less than 65 years (including pregnant women)	Children aged 2 to 17 years/ who are contraindicated / decline LAIV	Children aged 6 months - 2 years in risk groups
<ul style="list-style-type: none"> • aTIV 	<ul style="list-style-type: none"> • TIVc • aTIV- (those aged 50 – 64 years and over only if aTIV is not available) 	<ul style="list-style-type: none"> • LAIV • TIVc (for all who are contraindicated or decline LAIV) 	<ul style="list-style-type: none"> • TIVc

Key:

aTIV - adjuvanted trivalent influenza vaccine

TIVc - Trivalent cell culture influenza vaccine

LAIV - Live Attenuated Influenza Vaccine

COVID-19 vaccines available for the programme will be:

Those aged 18 years and over	Those aged 12 to less than 17 years (including pregnant women)	Children aged 5 to 11 years	Children aged 6 months – 4 years
<ul style="list-style-type: none"> • Pfizer-BioNTech mRNA (Comirnaty) vaccine.- 30 micrograms 	<ul style="list-style-type: none"> • Pfizer-BioNTech mRNA (Comirnaty) vaccine.- 30 micrograms 	<ul style="list-style-type: none"> • Pfizer-BioNTech mRNA (Comirnaty) vaccine.- 10 micrograms 	<ul style="list-style-type: none"> • TIVc Pfizer-BioNTech mRNA (Comirnaty) vaccine.- 3 micrograms

Delivery schedule has been confirmed, and work is underway to facilitate a direct ordering system into our Primary Care sites supporting delivery. Delivery of Flu vaccines are likely to be in place prior to arrival of the COVID-19 vaccines, however, there are no delays expected with delivery to affect the programme commencing from the 1 October 2025.

Live attenuated influenza vaccine (LAIV) in the form of a nasal spray will be available to order for all Health Board sites and primary care contractors from 4 September 2025 with delivery into sites expected week commencing 9 September 2025.

Proposed Delivery Plan

In summary, the vaccination for the eligible groups will be delivered by a variety of health care professionals in order to maximise vaccine uptake. However, we have detailed below some primary delivery models for information:

Health Board School Nursing Service (supported by Health Board Health Protection and Immunisation Service)

- Children in primary school from reception class to Year 6 (inclusive) – Flu only
- Children in secondary school Year 7 to Year 11 (inclusive) – Flu only

There is an expectation that injectable Flu preparations will be taken into schools for those children not consenting to the Fluenz preparation to ensure an equitable offer is provided to all.

Home educated children will be able to receive their vaccine through contact with the School Nurse for Home educated children, the Health Board team or their GP Practice.

Health Board Health Protection and Immunisation Service

- Health Board Immunisation Team to deliver all COVID-19 eligible groups through local pop-up clinics. If requested by the individual, Flu will be co-administered at patients request.
 - Severely Immunosuppressed
 - Older adults resident in Care Homes
 - 75 years and over
- Two and three year old children in nursery schools – Flu only (Circa 3000 - 3500 children offering)
- Eligible population and at risk group who are an inpatient – Flu and COVID-19
- Pregnant Women – Flu (aligned to Antenatal clinics)
- Eligible population and at risk group who are housebound – Flu and COVID-19
- Homeless population – Flu
- Any eligible population of a GP Practice not opted to deliver – Flu and/ or COVID-19

GP and Community Pharmacies

- Children aged two or three years on 31 August 2025 – Flu only
- People aged 65 years and older (age on 31 March 2025) – Flu
- People aged between six months and 64 years in clinical risk groups – Flu
- Carers – Flu
- Household contacts of immunocompromised – Flu
- Frontline health and care workers – Flu
- Pregnant Women – Flu (when not received in antenatal clinic)
- Poultry workers – Flu via Community Pharmacies

Health Board Occupational Health Team (supported by Health Board Health Protection and Immunisation Service)

- Healthcare workers (including healthcare students) – Flu

It should be noted that the Health Board's Health Protection and Immunisation Service will also be able to provide support to GP and community pharmacies where needed, or where Flu

vaccine stocks are insufficient to complete vaccination of the target population. It is essential, as per guidance within WHC, that Health Board teams are providing timely mop up invitations at crucial stages across the delivery programme where uptake is not at the desired levels.

In summary, the Health Board will:

- Progress the continued support for GP practices, community pharmacies and additional resources to ensure the priority groups, as directed by the JCVI, receive their Flu vaccine and COVID-19 Booster.
- Continue to prioritise increased uptake among children in order to reduce transmission of Influenza in the community and therefore offer indirect protection to older adults and other vulnerable groups.
- Continue to work with team leads and peer vaccinators to identify and train additional champions across HDdUHB, promoting online 'Flu-2' training to minimise face-to-face training needs. To reflect the potential extension of the role of peer vaccinators to include other vaccines, e.g. COVID-19 or signposting to book their vaccination.
- Request ongoing Executive-level enhanced support for staff Flu vaccinations, including letters from Executive Directors of Nursing, Quality and Patient Experience, Public Health, Allied Health Professionals and Health Science and the Medical Director to encourage staff vaccination and support of the peer vaccinator model.
- Investigate the recording of Flu vaccines administered to pregnant women and work with Public Health Wales (PHW), primary care and midwifery colleagues to try to ensure accurate data collection and to improve working relationships across antenatal settings to vaccinate pregnant women where possible.
- Ensuring that both its school nursing team and its health protection and immunisation service are able to administer the children's nasal Flu vaccine, to ensure maximum flexibility and resilience in the system. The delivery of this workstream will replicate last year's delivery within nursery classes in primary schools in Llanelli and Pembroke Dock to continue improvement in historically low uptake areas for this age group.

Whilst there are clear discrete pieces of work and methods for increasing Flu and COVID-19 vaccine uptake in each eligible group outlined, these forthcoming vaccination programme delivery plans need to be set within the context of delivering a well-recognised annual population-level health protection intervention. On this basis, it is more important than ever that there are effective plans in place for the 2025-26 autumn / winter season, not only to improve overall respiratory health in the HDdUHB population but also to protect those at risk, prevent ill-health and minimise further impact on NHS and social care services.

Contracting Mechanism

Contracting arrangements remain unchanged for the COVID-19 delivery from previous winter programme and the more recent Spring Booster as previously shared with primary care contractors. The commissioning opportunities have been explored and may be utilised to strengthen local availability of vaccines as further finalisation of the delivery plan is achieved.

Commissioning for Flu programme delivery has changed this year and is now through the same process as for COVID-19 using a Primary Care Contracted Services: Immunisations (PCCS:I). Due to changes to the procurement regulations there are challenges to overcome to be able to complete the commissioning process required.

To date all GP Practices and Community Pharmacies have placed orders for Flu vaccine.

Ambitions and Expectations

The ambitions of the COVID-19 and Flu vaccination programmes are to deliver at least 75% uptake in all eligible cohorts. It is also noted that alongside this uptake target there is an ambition to reduce the difference in uptake between the most deprived and least deprived in our communities. Where challenges have previously been encountered in reaching 75% uptake it is expected that this campaign will demonstrate incremental increase in uptake in these areas.

The expectations for delivery are set out in the tables below:

Flu Eligible Group	2024/25 Uptake	2025/26 ambition
65 years and over	69.2%	75%
6 months to 64 years at risk	35.9%	75%
2-3 year olds	35.8%	75%
Primary School Children age 4-10 yrs	71.6%	75%
Secondary School Children age 11-15 yrs	61.8%	75%
Healthcare Staff	25.6%	75%

Covid-19 Eligible Group	2024/25 Uptake	2025/26 ambition
65 years and over	63.5%	75%
Care Home residents	82.3%	To maintain >80%
6 months to 64 years at risk	34.7%	75%

Risks and Mitigation

There are a number of risks identified based on the learning from the previous programme delivery plan for the COVID-19 and Flu programmes, which resulted in lower uptake for both immunisations across our communities, and are detailed below:

- Prioritisation of higher risk groups not achieved to realise ambition and gain maximum protection in community
- Staffing deficit due to sickness impacted across all delivery programmes and required agility in teams to support needs at short notice
- Potential risk that patients chose one or other vaccine and did not attend for both, limiting the effectiveness of community immunity to one or both viruses
- Patient communication, around appointments/venues etc leading to challenging messaging with population
- Increased levels of vaccine waste experienced
- Risk of double vaccinations if records not updated in a timely manner

A number of key enablers have been identified to mitigate the risks and facilitate the operational success of the proposed plans for the winter respiratory delivery plan. These are detailed as:

- Engagement with GMS and pharmacy contractors to ensure compliance with recording, ordering and stock levels are adhered to
- Agreement with the Local Medical Council (LMC) on the model with 2-3 year old approach to targeting ongoing offer in Nursery establishments
- Flexible approach to support continued Flu delivery through Primary Care with Health Board health protection and immunisation service staff outreaching
- Structured communications focused approach in line with National communications and clear messaging regarding each individual component of the overall plan to maximise uptake
- Health Board health protection and immunisation service to support all care home residents and housebound patients for every primary care contractor to avoid confusion and ensure timely response with offer of co-administering vaccines to maximise delivery
- Close monitoring of vaccine stock levels against ordering to ensure documentation of stock held and used up to date on weekly basis across all sites

Current Actions and Next Steps

Discussion with primary care contractors across GP practices and community pharmacies is underway. There is a need to move rapidly to signed commissioning agreements and detailed local delivery plans and to overcome the new procurement regulations.

This initial scoping is being shared nationally with pharmacy leads to ensure we have early set up of contractor ordering systems for COVID-19 vaccines.

Review of denominator numbers will be monitored, and any updating will be built into the planning parameters for the COVID-19 and Flu vaccination programmes required to ensure achievement of programme ambitions as per WHC. Digital Health and Care Wales (DHCW) I update planned for late August 2025.

Communication plan currently underway with clear and concise messages prepared for our two to three year old and school aged Flu programmes in addition to reaching our pregnant women and population groups. This communication will be underpinned by the support of the Communication Hub.

All monitoring and governance of actions and delivery will be managed through the existing Respiratory Immunisation Delivery Group and reported to the Immunisation Oversight Group.

Workforce review of current Health Board teams has commenced taking into account the workforce and support teams required to facilitate both COVID-19 and Flu vaccination programmes, providing support to school aged children Flu campaign, facilitating vaccination of nursery children to receive Flu and ensuring in reach into Health Board sites to support peer vaccinators and occupational health team. A model of bank staff will be utilised alongside the school nursing team and occupational health team to maintain pace during the Flu programme.

Argymhelliad / Recommendation

The Committee is asked to:

- **RECEIVE ASSURANCE** that there is a delivery plan for the HDdUHB COVID-19 and Flu Vaccination Programmes

- **NOTE** the work underway to mitigate the risk to programme delivery of proposed approach
- **RECEIVE ASSURANCE** from the control measures in place through recognition of the key enablers.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1.2.5 That those arrangements in place to improve population health, prevention and wellbeing are robust and effective and delivering intended outcomes. 3.1.14. Seek assurance on plans, systems and processes to deliver health improvement and increase health equity and seek assurance on the work of the Health Board to reduce avoidable health inequalities.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risk 1773 – risk score 9.
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	6. All Apply
Amcanion Strategol y BIP: UHB Strategic Objectives:	2. Healthier communities
Amcanion Cynllunio Planning Objectives	10 Population health
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	4. Improve Population Health through prevention and early intervention, supporting people to live happy and healthy lives

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	https://www.gov.wales/national-influenza-immunisation-programme-2025-2026-whc2025020 . The national COVID-19 vaccination programme autumn 2025 (WHC/2025/022) GOV.WALES

	Public Health Wales: Influenza & COVID-19 vaccination data.
Rhestr Termau: Glossary of Terms:	Contained within the report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Strategaeth a Chynllunio Parties / Committees consulted prior to Strategy and Planning Committee:	Executive Team members, Business Executive Team Meeting

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Service model delivery of all immunisation programmes will consider any financial constraints from existing budgetary allocations
Ansawdd / Gofal Claf: Quality / Patient Care:	It is important that there are effective plans in place for the 2025/26 Winter Respiratory Vaccination Programme, not only to improve overall respiratory health in the population of Hywel Dda but also to protect those at risk, prevent ill-health and minimise further impact on health and social care services.
Gweithlu: Workforce:	As for Quality / Patient Care impact.
Risg: Risk:	Risks are detailed in the report. Areas where uptake levels are lower than target will be reflected within directorate risk register.
Cyfreithiol: Legal:	Not Applicable
Enw Da: Reputational:	Approaches already undertaken in the area to encourage vaccination uptake and target interventions at groups and communities to address health inequities and inequalities. Communication team supporting the immunisation
Gyfrinachedd: Privacy:	Not Applicable
Cydraddoldeb: Equality:	Approaches already undertaken in the area to encourage vaccination uptake and target interventions at groups and communities to address health inequities and inequalities. Strategy designed to reduce inequities further.