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**20 December 2019**

Dear Colleagues,

**Implementing the Joint Committee on Vaccination and Immunisation advice on vaccines in the NHS annual seasonal flu vaccination programme and reimbursement guidance for 2020/21**

In September 2019 the Joint Committee on Vaccination and Immunisation (JCVI) published its scientific advice and recommendations on the use of influenza vaccines in the UK for the 2020/21 season. (https://app.box.com/s/t5ockz9bb6xw6t2mrrzb144njplimfo0)

***For vaccination of those aged 65 years and over***

The JCVI indicated an additional benefit from the use of aTIV or TIV-HD in those aged 65 years and over, compared with standard dose egg-culture inactivated trivalent and quadrivalent vaccines (TIVe/QIVe). When considering a preference between TIV-HD and aTIV the JCVI believed the level of uncertainty in the available evidence is considered too great to allow for a preferential recommendation between the vaccines.

JCVI advises the use of the following vaccines:

- **Adjuvanted trivalent inactivated influenza vaccine (aTIV)**
- **high-dose trivalent vaccine (TIV-HD)**
- **Quadrivalent influenza cell-culture vaccine (QIVc) is also suitable for use in this age group if aTIV or TIV-HD is not available.**

JCVI advise that the QIVc is considered preferable to standard egg-culture influenza vaccines (TIVe/QIVe).

As was the case for the 2019/2020 annual flu immunisation programme, the **high-dose trivalent vaccine (TIV-HD)** still has a significantly higher list price for 2020/2. **This vaccine will not be commissioned by NHS E&I and will not be reimbursed by NHS E&I in 2020/21.**

***At-risk adults (including pregnant women) and at-risk children for whom live attenuated influenza vaccine (LAIV) is unsuitable***

*For vaccination of those aged 9 to less than 65 years of age in a clinical at-risk group (including pregnant women)*

The JCVI advice states that evidence from recent influenza seasons indicate a clear additional benefit in the use of quadrivalent influenza vaccines in those under 65 years of age in a clinical at-risk group, compared with trivalent influenza vaccines.

There is a potential advantage to using cell-culture influenza vaccines compared with egg-culture influenza vaccines, due to the possible impact of “egg-adaption” on the effectiveness of influenza vaccines, particularly against A(H3N2) strains. The evidence on additional

benefit is reasonably consistent, but available for only very few seasons. The available limited evidence supports a **slight preference** for QIVc over QIVe, because any impact will likely be limited to seasons in which the influenza season is dominated by well-matched H3N2 strains.

Quadrivalent egg-culture inactivated vaccine (QIVe) can also be considered for use in this group.

JCVI advises the use of the following vaccines:

- **Quadrivalent influenza cell-culture vaccine (QIVc)[1]**
- **Quadrivalent influenza egg-culture vaccine (QIVe)** (as an alternative to QIVc subject to the JCVI considerations outlined above)

*GP and Pharmacy delivery*

GPs and Pharmacists should consider the use of QIVc vaccine in the first instance for at-risk adults aged less than 65 years (including pregnant women). QIVe vaccine should also be considered as an alternative to QIVc subject to JCVI considerations outlined above.

Locally procured QIVc and QIVe vaccines will be reimbursed by NHS E&I in 2020/21.

GPs should also consider the use of QIVc for at-risk children aged 9 years and over for whom LAIV is unsuitable. GPs offering QIVc to at-risk children aged 9 years and over should do so using their own locally procured QIVc vaccine stocks which will be reimbursed by NHS E&I in 2020/21.

Where QIVc is unavailable, GPs can either:

a) offer QIVe for at-risk children aged 9 to 17 years using centrally supplied free of charge vaccine by Public Health England, or
b) use their own locally procured QIVe vaccine stock which will be reimbursed by NHS E&I in 2020/21.

GPs using their own locally procured QIVc/QIVe vaccines for at-risk children aged 9 to 17 years will be reimbursed by NHS E&I in the same way as for all adult flu vaccines.

*School delivery*

It is acceptable for school aged providers to offer QIVe vaccine to those at-risk children aged 9 years and over for whom LAIV is unsuitable, and who are not referred to General Practice to avoid delay in protection. School aged providers can continue to order QIVe vaccine free of charge from Public Health England via ImmForm.

## The Childhood flu immunisation programme

JCVI advises the use of the following vaccine:

- **Live attenuated influenza vaccine (LAIV)**

[1] QIVc vaccine is licensed for adults and children aged 9 years and over

LAIV vaccine will be centrally supplied free of charge by Public Health England for all eligible children aged 2 to 17 years via ImmForm.

*For vaccination of those aged 6 months to less than 9 years of age in an at-risk group*

JCVI advises the use of the following vaccine for whom there are contraindications for use of LAIV:

- **Quadrivalent influenza egg-culture vaccine (QIVe)**

QIVe vaccine for those aged 6 months to less than 9 years for whom LAIV is unsuitable will be centrally supplied free of charge by Public Health England via ImmForm. GPs should **not** use their own locally procured QIVe vaccines for these children.

## Vaccines reimbursed as part of the NHS Annual Flu immunisation programme in 2020/21

NHS E&I will reimburse the following vaccines in 2020/21:

- aTIV for those aged 65 years and over
- QIVc for those aged 65 years and over (where aTIV is not available)
- QIVc and QIVe for those at-risk adults aged 18 to less than 65 years (including pregnant women) and at-risk children aged 9 to 17 years for whom LAIV is unsuitable and where locally procured vaccine stock has been used.

**Please note, NHS E&I will not reimburse LAIV or QIVe vaccines that are centrally supplied free of charge by Public Health England.**

## Flu vaccine ordering and planning

We encourage all providers delivering flu immunisation services (excepting school aged providers who will be centrally supplied by Public Health England) to procure vaccines from more than one flu vaccine supplier, where this is an option to do so, to minimise any potential risk to vaccine supply.

In planning for the forthcoming flu season, all providers should identify and work closely with the designated CCG flu lead or the regional NHS E&I commissioning team to ensure the effective planning and delivery of the annual flu immunisation programme.

Yours faithfully



Professor Stephen Powis
National Medical Director
NHS England and NHS Improvement

**Annex A**

| Product | Suitable for use in clinical at-risk / eligible adults under 65 years | Suitable for use in adults 65 years and over | Licensure status | Recommended and reimbursed by NHS England | NHS Cost per dose<br><br>*See link for further detail on vaccines, cost and supplier |
|---|---|---|---|---|---|
| Standard egg-grown quadrivalent vaccines (QIVe) | **YES** | NO | Licensed from 6 months | **YES** (only reimbursed for adults under 65 and at-risk children aged 9 years and over where LAIV is unsuitable and QIVc is unavailable) | Products available at £8.00 and £9.94 |
| Adjuvanted trivalent vaccine (aTIV) | NO | **YES** | Licensed (for those aged 65 years and over) | **YES** | £9.79 |
| Cell-grown quadrivalent vaccine (QIVc) | **YES** | **YES** | Licensed (aged 9 years and over) | **YES** Noting for those over 65 only if aTIV not available; and for 9-17 year olds only if LAIV is unsuitable | £9.94 |
| High-dose trivalent vaccine (TIV-HD) | NO | **YES** | Licensed (for those aged 65 years and over) | **NO** This vaccine is not eligible for reimbursement | £20.00 |

*Prices and suppliers of the vaccines can be found here: https://bnf.nice.org.uk/medicinal-forms/influenza-vaccine.html.