



AN RIALTÓIR CÓGAISÍOCHTA
THE PHARMACY REGULATOR

Report on the Evaluation of the Seasonal Influenza Vaccination Service in Pharmacy 2014/2015

August 2015

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Executive Summary

In October 2011, legislation was introduced which enabled pharmacists to administer the influenza vaccine at registered retail pharmacy businesses. Since this time pharmacists have participated in the Health Service Executive's (HSE) Influenza Vaccination Campaign.

Figures from the HSE Primary Care Reimbursement Service (PCRS) state that 53,047 patients were vaccinated across 691 community pharmacies in Ireland between 1st September 2014 and 30th April 2015. This is an increase of 12,604 patients compared to the 2013/2014 season and an increase of 34,093 patients compared to the 2012/2013 season. As such, the uptake of the influenza vaccine in the community pharmacy setting has increased exponentially over this time period.

In line with previous years, a concise review of the service provided in the 2014/2015 season has been undertaken. This review encompasses feedback on the service from a number of stakeholders: the training providers who delivered the accredited training courses to pharmacists, the pharmacists who provided the service and most importantly, patients who availed of the Seasonal Influenza Vaccination Service from retail pharmacy businesses.

On analysis of the feedback received it can be concluded that this service is operating safely and effectively with all patients surveyed stating that they were either very satisfied or satisfied with the service that they had received. Convenience was cited as the most common reason that patients attended their pharmacist to get the influenza vaccine. All patients surveyed stated that they would be happy to get the influenza vaccine from a pharmacist in the future and 97% stated that they would be happy to attend a pharmacy for other vaccinations.

Pharmacists stated that maintaining the required stock level of adrenaline, for the emergency treatment of anaphylactic shock arising as a result of administering the influenza vaccine, continues to be a problem. With regards to the HSE National Cold Chain Delivery Service, it was suggested that increasing the number of deliveries of the vaccine via normal wholesaler delivery channels would be beneficial to prevent running out of the vaccine between deliveries.

There were certain areas of the training courses which were identified as being inconsistent between the training providers. This did not present any safety concerns to patients however these inconsistencies are to be addressed ahead of the delivery of the training courses for the 2015/2016 season.

Strong support was expressed for investigating the feasibility of extending the influenza vaccination service to include children, and also to expand the suite of vaccinations offered in the pharmacy setting by fully trained pharmacists.

The *PSI Guidance on the Provision of Seasonal Influenza Vaccination Service by Pharmacists in Retail Pharmacy Businesses* has been reviewed in light of the feedback received and there are no suggested amendments to the guidance.

The PSI recognises the limitations of this review, particularly with regard to the size of the engagement with patients and pharmacists that was carried out to gain feedback on the service. It is recommended that a more substantial evaluation of this service is carried out for the 2015/2016 influenza vaccination season, involving engagement with a greater number of patients and pharmacists. This will provide a more in depth analysis of how this service is being operated across Ireland and potentially provide a platform to consider the further expansion of this and other vaccination services.

Background to this report

In October 2011, legislation¹ was introduced enabling pharmacists to administer the influenza vaccination at registered retail pharmacy businesses, following completion of an accredited training course. Since the introduction of this legislation, pharmacists have participated in the HSE's annual Influenza Vaccination Campaign.

Each year, following the completion of the Influenza Vaccination Campaign, the PSI Council has undertaken a review of the influenza vaccination service provided in pharmacies. This evaluation was undertaken to:

- obtain feedback on the operation of the service from key stakeholders;
- ensure that it is being operated safely;
- identify any improvements that could be made for the following season.

In 2014, the PSI Council once again committed to undertake an evaluation of the seasonal influenza vaccination service provided in pharmacies from 1st September 2014 - 30 April 2015 (the '2014/2015 season'). As well as the objectives outlined above, this evaluation will also be used to review the *PSI Guidance on the Provision of Seasonal Influenza Vaccination Service by Pharmacists in Retail Pharmacy Businesses* and inform the development of training requirements for the 2015/2016 season.

The Provision of the Influenza Vaccination Service in Pharmacies

As part of the HSE's Influenza Vaccination Campaign the influenza vaccine is provided free for those aged 65 years and over, those in 'at-risk' groups and healthcare staff (full list provided in Appendix 1). The HSE National Cold Chain Service provides scheduled deliveries of the vaccine direct to registered retail pharmacy businesses partaking in the vaccination

¹ Medicinal Products (Prescription and Control of Supply) (Amendment) Regulations 2011 (S.I. No. 525 of 2011).

service. Vaccines for individuals outside of these groups are obtained through the private market.

Medical card or GP visit card holders in the groups outlined in Appendix 1 can receive the vaccine free of charge from pharmacies; with pharmacists claiming back the cost of these vaccines from the PCRS. Pharmacists are permitted to charge a fee to vaccinate patients that do not have a medical card or GP visit card.

It has been highlighted by the HSE that maximising uptake among 'at-risk' groups and front-line healthcare workers is critical in the prevention of influenza-related morbidity and mortality. The PSI '[Report on the Evaluation of the Seasonal Influenza Vaccination Service in Pharmacy 2013-2014](#)' showed that a very significant percentage (85%) of those vaccinated in pharmacies who had not been previously vaccinated were in at-risk groups. This shows the value that pharmacists have added to increasing uptake in at-risk groups in previous years.

Training Requirements

Pharmacists administering the seasonal influenza vaccine must have successfully completed appropriate training which meets the PSI's accreditation and quality assurance standards and which is approved and recognised by the PSI Council in line with the requirements of the regulations¹. At its meeting on 15th May 2014, the Council of the PSI agreed the mandatory training requirements for pharmacists wishing to participate in the delivery of the 2014/2015 influenza vaccination service to meet the requirements under the regulations. The approved training requirements can be found in Appendix 2. The PSI Council approved and recognised two training providers, Hibernian Healthcare Ltd. and Boots Retail (Ireland) Ltd ('Boots') for the provision of influenza vaccination training for pharmacists for the 2014/2015 season, for the vaccination of adults aged 18 years and over. Both training providers were approved to provide the following courses:

- *Ab initio* training;
- Refresher Level 1 training;
- Refresher Level 2 training;
- Anaphylaxis Management and CPR training.

Pharmacists were informed about the mandatory training requirements to participate in the service via Issue 4, 2014 of the PSI newsletter, which was sent out in April 2014. The course that a pharmacist was required to attend was dependent upon both the previous training undertaken by the individual pharmacist and his/her vaccination experience. A tool for pharmacists to assess their training needs was provided on the PSI website.

Aim

The aim of this evaluation is to review the influenza vaccination service provided by pharmacists in retail pharmacy businesses during the 2014/2015 season, to ensure that the service is operating safely and effectively and identify any improvements that could be made to the service for the 2015/2016 Influenza Vaccination Campaign.

Methodology

Feedback on the influenza vaccination service was obtained from the following stakeholders:

- Pharmacy representatives: The Irish Pharmacy Union (IPU), 3 pharmacy chains
- Training Providers: Hibernian Healthcare Ltd. and Boots
- HSE National Immunisation office (NIO)
- HSE Primary Care Reimbursement Service (PCRS)
- HSE Health Protection Surveillance Centre (HPSC)
- Health Products Regulatory Authority (HPRA)

An example of the email sent requesting information and feedback from stakeholders is provided in Appendix 3.

With the help of a number of superintendent pharmacists, 35 patients who had received the influenza vaccination in a community pharmacy during the 2014/2015 season agreed to take part in the evaluation by providing their feedback on this service. (The letter given to patients asking them to take part in this evaluation is provided in Appendix 4). A survey which consisted of 11 questions was used to gather the patient's views and comments; this was carried out over the telephone by a non-pharmacist. (This survey can be viewed in Appendix 5).

The Fitness to Practice and Legal Affairs Unit of the PSI carried out an internal review of complaints and concerns received by the PSI for the period 1st September 2014 - 30th April 2015 to identify any which related to the influenza vaccination service.

Findings

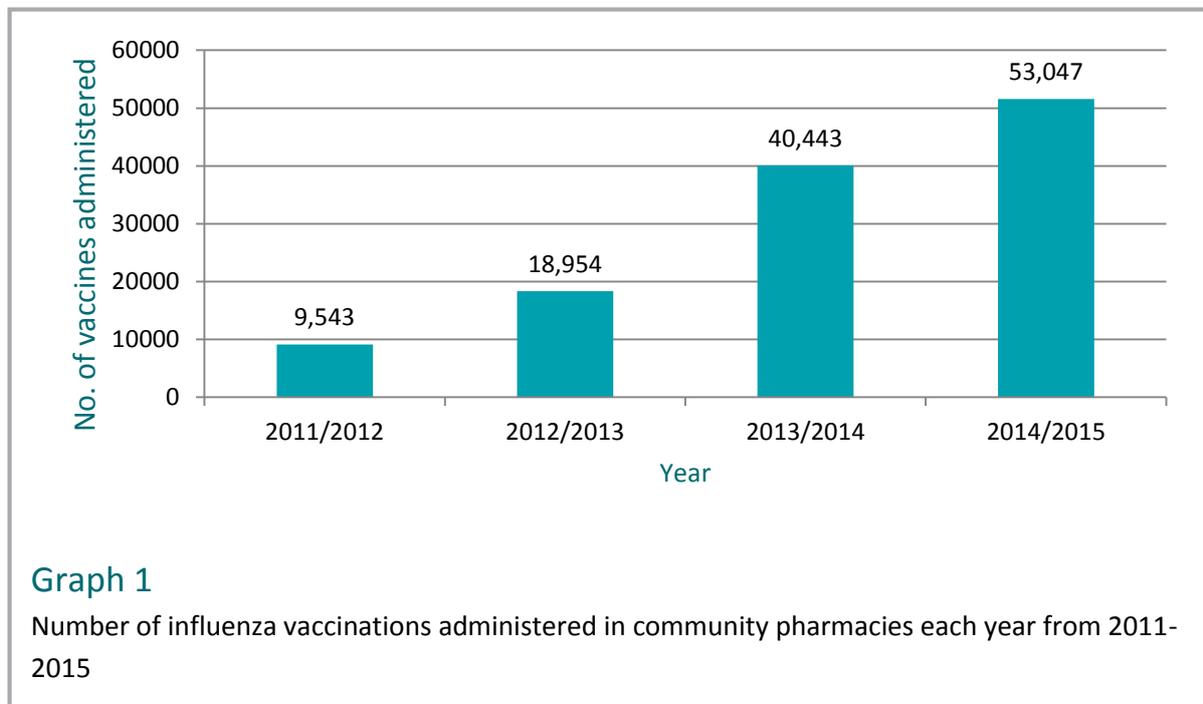
All information gathered was evaluated and examined under the headings outlined below.

Number of vaccinations administered in pharmacies

Pharmacists are required to report the administration of all influenza vaccinations to the PCRS, this applies whether the cost of the vaccine is reimbursed by the PCRS, or paid for by the patient. According to figures received from the PCRS, there were a total of 53,047

notifications, across 691 community pharmacies in Ireland, during the 2014/2015 influenza vaccination season.

Graph 1 demonstrates the increase in vaccination uptake in community pharmacy year by year since 2011.



Of the 53,047 vaccines notified to the PCRS, 24,363 were eligible for reimbursement i.e. for those patients that had a medical card or GP visit card, and are in an 'at-risk' group.

Figure 1, as provided by the HSE, shows a geographical breakdown of where these reimbursed vaccines were administered, across the country.

Approximately 9% (68,600 doses) of the total vaccines distributed were delivered to pharmacies.

In their feedback the NIO stated that they would like the PSI to explore the feasibility of extending the pharmacy based influenza vaccination service to include children in future seasons.

Pharmacist training

The total number of pharmacists who completed training for the 2014/2015 season was:

- 208 with Boots
- 473 with Hibernian Healthcare

Hibernian Healthcare stated that they were satisfied that no major issues were identified during the training sessions or subsequently brought to their attention during the vaccination season. This was mirrored in feedback from pharmacists with one large chain stating that the training was thorough and well organised, and that no concerns or negative feedback was received from their colleagues.

Some variances were identified between the training programmes provided by the two training providers, Hibernian Healthcare and Boots, in particular with regard to the Intramuscular (IM) vaccination technique taught in the accredited courses. The technique taught by Hibernian Healthcare involved 'stretching' the skin at the point of IM injection, whereas the technique taught in the programme provided by Boots to date, has been the 'Z track' administration method. Although there are no patient safety concerns regarding the use of either technique, it was agreed that harmonisation of training is required in order to achieve a standardised approach and to align with national guidelines² in this area, which currently recommend the 'stretching' technique. This will be addressed ahead of the 2015/2016 vaccination season.

It was questioned whether there is an on-going need for Refresher-Level 2 training on an annual basis for pharmacists who have been vaccinating for two seasons or more. It was also suggested that it would be useful if the training material available through the Irish Institute of Pharmacy (IloP) portal site (i.e. Refresher Level 2) was compatible for use on iPads, androids or other mobile devices.

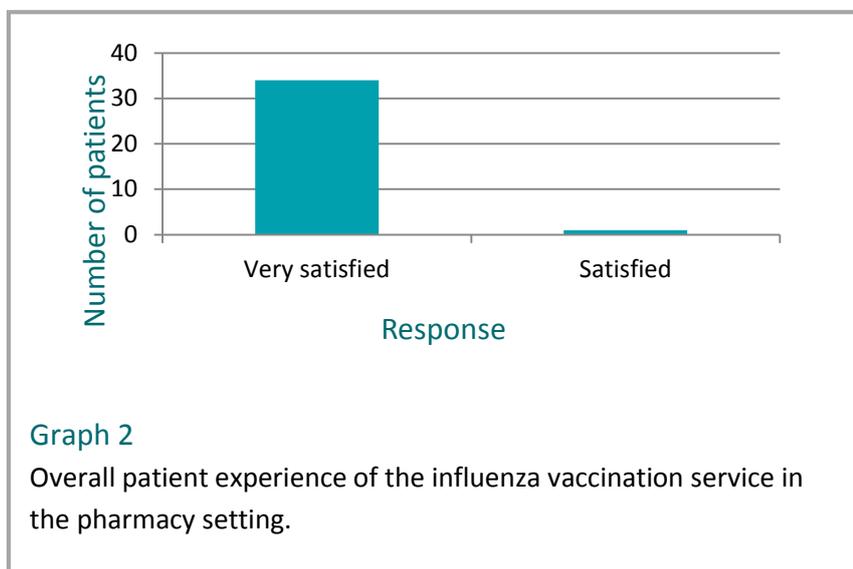
Both training providers stated that it has been proven that safe administration of vaccines by pharmacists within the pharmacy can be assured, and therefore expansion of this role to provide other vaccinations should be considered, with the examples of Pneumococcal, Hepatitis A & B, MMR and Shingles vaccines given. It was suggested that a working group should be established to research the potential and viability of such an expansion of

² National Immunisation Advisory Committee (NIAC) Immunisation Guidelines for Ireland, 2013, updated August 2014

pharmacy services and recommend next steps towards achieving this goal. It was also suggested that the establishment of an internationally recognised professional training qualification in vaccinations could be explored in the context of Irish community pharmacy.

Patient Feedback

A short telephone interview of 35 patients who had received the influenza vaccination from a pharmacist during the 2014/2015 season was carried out. (See Appendix 5 for a copy of the questions asked during the telephone interviews). A summary of the results are provided below.



Of those surveyed, 89% (n=31) of patients had received the influenza vaccine in previous years. Of those that had previously received the influenza vaccine 39% (n=12) had received it from a pharmacist, 19% (n=6) from a GP, 3% (n=1) from a nurse, and 39% (n=12) had received it numerous times attending a mixture of the three healthcare professionals above. 97% (n=34) of patients thought that the area in the pharmacy in which they were vaccinated was appropriate for providing this service, with many stating it was “*very comfortable*”. One patient stated that the room was “*very small and it could have been cleaner*”, another was surprised that the same room was used for the administration of methadone, but stated that the service was all done very professionally. When asked why they attended a pharmacy to receive the vaccine this year, the majority of patients (83%) stated that it was due to convenience, citing that the pharmacy “*was open longer hours*”, “*handy and fast*”, “*fitted in with work schedule*”. Cost was the next most frequent reason for attending a pharmacy for the vaccination i.e. the pharmacy was less expensive than the GP. All patients surveyed stated that they were happy with the information they were given by the pharmacist when receiving the vaccine, and that they would be happy to attend a pharmacist again for influenza vaccination. When asked if they would be happy to attend the pharmacy for other vaccinations, 97% (n=34) stated that they would, with one patient stating that it would depend on what the vaccine was for. When asked what their overall experience was in receiving the influenza vaccination in the pharmacy setting this season, 34 patients stated that they were ‘very satisfied’, and 1 patient stated that they were ‘satisfied’ with this service (shown in Graph 2). Other comments received stated that they

were very happy with the service and overall experience, that it was efficient, straightforward and painless, and that the pharmacist was very confident and professional.

Pharmacist Feedback

Feedback was obtained from the IPU as well as from one smaller pharmacy chain and two large pharmacy chains.

Feedback confirmed that patient awareness of the availability of the influenza vaccine from pharmacies had improved this year compared to the previous years and this was evidenced by the attendance in the pharmacy of many repeat patients. It was suggested that by using a PR campaign this could easily be built upon to provide further improvement on patient uptake of this service. It was also suggested that it would be beneficial to collaborate with the Medical Council and Irish Medical Organisation, to improve relationships between doctors and pharmacists providing the vaccine and to ultimately work together in this important public healthcare initiative.

It was highlighted that there was an issue with the supply of vaccines from the HSE National Cold Chain Service across the Leinster area during the first two weeks of service provision and it was suggested that it would be beneficial if pharmacies received the vaccines at the same time as doctors' surgeries. It was also commented that when the new strain of influenza emerged in February/March 2015, it was not possible to get more vaccines quickly, as supply was organised on a calendar basis; it was felt that pharmacists should be able to obtain vaccines within 2/3 days in this situation. It was stated that it was difficult to estimate stock levels needed between deliveries from the HSE National Cold Chain Service (which were generally every 2 weeks) to meet patient demand, and also to accommodate this volume of vaccine stock in the pharmacy fridge. This resulted in pharmacies running out of stock at certain times and it was suggested that the feasibility of increasing delivery frequency of the vaccine stock via normal wholesaler delivery channels be explored.

The regulations¹ require that a copy of the particulars in the vaccine administration record is forwarded to the patient's GP by electronic or other means, within seven days of the administration, where the patient has provided the doctor's details on request by the pharmacist. Feedback stated that this creates a significant administrative burden. It was suggested that a system whereby details entered into the PCRS web portal could be directly transmitted or accessed by the patient's doctor would help to decrease this work load. It was also suggested that it would be helpful to liaise with the Medical Council to inform GPs of this legal requirement as GPs are often unaware of it. There were no issues of note reported with the operation of the PCRS web portal. However, there was a minor issue reported at the start of the season with regard to the vaccine entry portal not being fully updated to include the details for all available vaccines; this was rectified soon thereafter. The portal also failed at times to recognise individual patient's PPS numbers which

introduced an additional administrative burden for pharmacists as these details had to be faxed to the PCRS.

Due to the fact that the vaccine is supplied in a pack size of 10 with only one patient leaflet provided, it was suggested that it would be of benefit if additional patient leaflets were provided at the outset by suppliers to enable one to be provided to each patient.

Management of Adverse Events

As with all medicines, any suspected adverse reactions which occur after administration of the influenza vaccine should be reported to the HPRA.

From 1st September 2014 - 30th April 2015, the HPRA received 34 reports of suspected adverse drug reactions in association with the influenza vaccine. Of those 34 reports, 11 were submitted by community pharmacists. The majority of reports received were very much in line with the known safety profile for these vaccines including injection site reactions, lymphadenopathy, hypersensitivity reactions/rash, paraesthesia and influenza like symptoms including headache, fever, myalgia, fatigue, malaise etc. From the data available it was not possible to identify which healthcare professional actually administered the vaccine as this information is not requested from reporters.

Most responses from pharmacists stated that there were either none, or only minor adverse effects reported to them, for example some patients reporting 'cold-like' symptoms.

However, one large pharmacy chain reported two serious incidents. The first incident involved the development of a 'seizure type' reaction by the patient while they were still in the pharmacy shortly post-vaccination. An ambulance was called and the patient was transferred to hospital. The second incident involved the patient presenting in February (following a vaccination the previous October) stating that they had been very unwell since receiving the vaccine and considered this to be a consequence of the vaccine. The patient informed the pharmacist that they been diagnosed with a 'viral infection of the central nervous system' and the symptoms described were similar to those noted in the SmPC. This incident was referred onto the HPRA and manufacturer.

From the feedback received, there were no reports of administration of epinephrine (adrenaline) following confirmed or suspected anaphylaxis post vaccination. Feedback highlighted that maintaining the required level of stock³ of adrenaline for the emergency treatment of anaphylactic shock arising as a result of administering the influenza vaccine

³ Page 8 of the PSI's Guidance on the Provision of Seasonal Influenza Vaccination Service by Pharmacists in Retail Pharmacy Businesses: *Where pharmacists ensure that a time interval of at least 20 minutes elapses between the administration of the vaccine to each patient, the pharmacy needs only to have sufficient stock of adrenaline injections for administration to one patient (per vaccinating pharmacist). In all other circumstances, there must be sufficient stock of adrenaline injections for administration to a minimum of two patients available at all times.*

continues to be a problem, and that the stock available is often short dated, which adds to the cost of delivering this service. This was also highlighted in last year's evaluation report.

PSI Internal Review

The Fitness to Practice and Legal Affairs Unit were asked to analyse the complaints and concerns received between 1st September 2014 and 30th April 2015 for any that related to the provision of the influenza vaccination service. No complaints or concerns were identified.

Key Findings

- The number of patients who were vaccinated in pharmacies continues to rise, with 53,047 patients reported to have received the vaccination from pharmacies in the 2014/2015 season.
- No major quality or safety concerns were identified regarding the seasonal influenza vaccination service provided in pharmacies in the 2014/2015 season.
- No major issues were identified during the training sessions or subsequently brought to the attention of the PSI or training providers during the vaccination season. A discrepancy between the two training courses was identified concerning the vaccination technique taught to pharmacists. This has been raised with the relevant bodies and will be addressed in time for the next vaccination season.
- All patients surveyed were *very satisfied* or *satisfied* with the service that they received and would attend a pharmacy again for their influenza vaccination.
- The availability of adrenaline and the procurement of the required level of stock to safely carry out this service continues to be an issue.
- In light of this review there are no changes suggested to the PSI *Guidelines for Pharmacists on the Provision of the Influenza Vaccination Service*.

Conclusions and Recommendations

It can be concluded that the influenza vaccination service provided by pharmacists in retail pharmacy businesses is operating safely and effectively and to the standard expected by patients.

It is recommended that the feasibility for pharmacists providing the influenza vaccine to children under the age of 18 years be explored, as well as the authorisation of pharmacists to administer other vaccines. It is recommended that a more substantial evaluation of this service is carried out for the 2015/2016 influenza vaccination season, involving engagement with a greater number of patients and pharmacists, to provide a more in-depth analysis of this service. This will not only serve to ensure that this service is being carried out safely, but it will also serve to assess the quality and robustness of this service and how it may best be expanded in order to meet patients' needs.

Acknowledgements

The PSI would like to thank the various national bodies and pharmacists who gave their time and expertise to feed into this evaluation. The PSI would also like to thank the patients who provided their valuable feedback and comments on their personal experiences of the pharmacy based influenza vaccination service.

Appendix 1

HSE specified 'At Risk' Groups eligible to be vaccinated by pharmacists at the premises of a retail pharmacy business for the 2014/2015 Influenza Vaccination Programme

- Persons aged 65 and over.
- Those aged 18 years and older with a long-term health condition such as:
 - chronic heart disease;
 - chronic liver disease;
 - chronic neurological disease including multiple sclerosis, hereditary a degenerative disorders of the central nervous system;
 - chronic renal failure;
 - chronic respiratory disease, including cystic fibrosis, moderate or severe asthma or bronchopulmonary dysplasia;
 - diabetes mellitus;
 - down syndrome;
 - haemoglobinopathies;
 - immunosuppression due to disease or treatment, including asplenia or splenic dysfunction;
 - morbid obesity i.e. body mass index over 40.
- Pregnant women (vaccine can be given at any stage of pregnancy).
- Healthcare workers.
- Residents of nursing homes and other long stay institutions.
- Carers.
- People with regular contact with pigs, poultry or water fowl.

Appendix 2

PSI Training Requirements for the 2014-2015 'Flu Season Approved by Council of the PSI on 15 May 2014

(i) *Ab initio* training for first-time vaccinators

Pharmacists who are first-time vaccinators or pharmacists who did not train for the 2013-2014 season are required to complete a full *ab initio* course of training.

(ii) Refresher (Level 1) training for pharmacists

This training is mandatory for pharmacists who completed *ab initio* training for the first time in the 2013- 2014 season or who completed training in the 2013-2014 season but did not vaccinate patients in both the 2012-2013 and 2013-2014 seasons.

Format: Self-study, online plus live component on core practical skills of vaccine administration with assessment

Content: The content will have regard to the requirements set out in Appendix A of the PSI's Interim Accreditation Standards for Seasonal Influenza Vaccination Training Programmes for Pharmacists but with a particular focus on relevant updates since 2013. The face-to-face aspect is to enable the pharmacist to build confidence and competence in proper vaccine administration and technique (includes assessment of need for vaccine, screening for contraindications and precautions, educating patients regarding the vaccine, appropriate documentation, and proper injection technique). Familiarisation with the vaccine product specific to the 2014-15 'flu season will also feature.

(iii) Refresher (Level 2) training for pharmacists

This training is mandatory for pharmacists who completed training in the 2013-2014 'flu season and who vaccinated patients for a second consecutive year (i.e. vaccinated in both the 2012-2013 and 2013-2014 seasons). Any pharmacist in this group who self-assesses a greater need for refresher training in practical skills may, of course, opt for Level 1 training.

Format: Self-study and online delivery

Content: Relevant updates since 2013, including, but not limited to, all National Immunisation Advisory Committee and National Immunisation Office updates relevant to seasonal influenza vaccination and related matters subsequent to September 2013 and current peer-reviewed and professional literature relevant to season influenza vaccination services and related matters, such as error reporting systems. Online video demonstration of proper vaccine administration and

technique. Familiarisation with vaccine product specific to the 2014-15 'flu season will also feature.

(iv) Training on anaphylaxis management including CPR

This training is mandatory for pharmacists who did not complete training on anaphylaxis management, including CPR, in 2013.

Format: Must include a live component and assessment of CPR and adrenaline administration

Content: Responses to an emergency situation as a result of the administration of influenza vaccination, including the identification and management of anaphylaxis and other adverse events following immunisation, reporting of adverse reactions/events including reporting of medication errors, training in basic life support, management of anaphylaxis, adverse reactions, and other emergencies through use of adrenaline, other drugs and devices.

Appendix 3

Email sent to stakeholders requesting feedback on their experiences of the 2014-2015 'flu season

Dear X,

You may recall that the PSI produced a [Report on the Evaluation of the Seasonal Influenza Vaccination Service in Pharmacy 2013-2014](#). As the 2014-2015 season draws to a close the PSI intends to undertake an evaluation of the vaccination service provided in pharmacies for the 2014-2015 'flu season. This evaluation is intended to provide on-going assurance regarding the provision of this service and to inform future policy developments in respect of this type of service provision by pharmacists.

As part of this evaluation the PSI is providing an opportunity for key stakeholders to offer feedback of their views and experiences of the 2014-2015 'flu season. In particular the PSI would welcome feedback in the following areas:

- Any statistics available in relation to the 2014-2015 pharmacy 'flu vaccination service, such as the number of pharmacies or pharmacists participating in the service and the number of patients accessing the service through pharmacies.
- The operation and administration of the pharmacy 'flu vaccination service.
- The training provided to pharmacists.
- Any Reports of adverse events following vaccination and the management of these events.
- Proposals for the 2015-2016 influenza season and/or any service expansion or developments.
- Any other observations or comments.

We would welcome feedback on the above or any additional areas you deem relevant. In order to facilitate reporting to our Council on the service, we request a response by **Friday 1st May** if possible. Thank you for your time and expertise in contributing to this evaluation.

Please don't hesitate to contact me if I can be of any assistance.

Kind regards,

Appendix 4

Letter to patients requesting their participation in the evaluation of the 'flu service 2014-2015

Dear Patient,

The Pharmaceutical Society of Ireland (PSI) regulates pharmacists and pharmacies in Ireland. As part of its work the PSI monitors pharmacy services – in order to ensure they are being provided safely and identify any improvements that can be made to the quality of the service.

In 2011 the Irish Government introduced legislation which enabled pharmacists to administer the 'flu vaccine to patients in pharmacies. I would like to invite you to help in a review being carried out by the PSI on the 'flu vaccination service that was provided in pharmacies from September 2014 – April 2015. The experience and feedback of this service from a patient's perspective is crucial to this evaluation.

To participate in this review patients who were vaccinated in pharmacies in the 2014-2015 'flu season are being asked to take part in a short telephone questionnaire. The questionnaire will be carried out by a non-pharmacist working on behalf of the PSI.

All comments provided will not be attributed to individuals and a report outlining the general comments will be submitted as part of the PSI report to its Council. Your personal information (name and contact details) will not be used for any other purpose or given to any other parties. If you are willing to participate in this very important evaluation I would appreciate if you could return the attached patient details section to your pharmacist before 20th May.

Your views are important to us and I would like to thank you in advance for your time and your valuable input into this review

Yours Sincerely,

Patient Details

Yes, I would like to share my experience of the pharmacy vaccination service this year.

Name: _____

Contact Telephone: _____

Best time to contact: _____

Many thanks for your time and your valuable input into this review

Appendix 5

Telephone survey for patients in relation to receiving the influenza vaccination from pharmacists

Questions

1. Have you had your flu vaccination in previous years?

2. If yes, did you receive the vaccine from a Pharmacist or a GP/nurse in previous years?

3. Why did you attend a pharmacy to receive the vaccine this year?

4. Was your vaccination appointment scheduled or were you vaccinated as a walk-in patient i.e. without an appointment?

5. Were you happy with the information you received from the pharmacist when receiving the vaccination?

6. Did you give written consent before being vaccinated?

7. Would you consider the area in the pharmacy in which you were vaccinated to be appropriate for providing this service?

8. Would you attend a pharmacist again for the 'flu vaccination?

9. Would you attend a pharmacist to receive other vaccinations?

10. What was your overall experience in receiving the flu vaccination in a pharmacy this year?

Very satisfied *satisfied* *neither satisfied nor unsatisfied* *unsatisfied* *very unsatisfied*

Comments _____

11. Are there any other comments you would like to make on your experience?

Thank you very much for taking the time to take my call and giving your valuable feedback on this service.