



UK Health
Security
Agency

Seasonal influenza vaccine uptake in frontline healthcare workers (HCWs) in England Winter season 2021 to 2022

Final data for 1 September 2021 to 28 February 2022

Contents

Executive summary	3
Notes on the report	4
Glossary	5
Background	6
Methods	8
Results	10
Discussion	19
Acknowledgements	21
Appendix A. Staff group definitions	22
Appendix B. Monthly data collection schedule for 2021 to 2022	26
Appendix C. Survey form for 2021 to 2022	27

Executive summary

The UK Health Security Agency (UKHSA) influenza surveillance team has responsibility to coordinate and facilitate the national collection and reporting of influenza vaccine uptake data.

This document reports on the uptake of seasonal influenza vaccination among frontline healthcare workers (HCWs) during the 2021 to 2022 vaccination campaign in England, for vaccinations administered from 1 September 2021 up to 28 February 2022.

Frontline HCWs are encouraged to receive seasonal influenza vaccination annually to protect themselves and their patients from influenza¹. For the final survey on cumulative influenza vaccines administered from 1 September 2021 to 28 February 2022, 78.5% out of 214 NHS Trusts and 22.7% out of 6,596 GP practices including independent sector health care providers (ISHCPs) returned data.

Data was collected by staff group (doctors, qualified nurses, other professionally qualified clinical staff and clinical support staff) at each organisation and aggregated by Trust, region and nationally. The 2021 to 2022 season saw 61.4% of all frontline HCWs with direct patient care (from all organisations submitting data) receiving the influenza vaccine in England, down from 76.8% in the 2020 to 2021 season.

In 2021 to 2022 the vaccine uptake ambition for frontline HCWs was 100% offer with an 85% ambition as outlined in the annual flu letter.¹ Seasonal influenza vaccine uptake in NHS Trusts ranged from 26.6% to 90.2%. The proportion of NHS Trusts that achieved vaccine uptake of 85% or more was 2.3% (5 out of 214). Seasonal influenza vaccine uptake in GP practices (including ISHCP's) ranged from 5.0% to 100.0%. A total of 741 (11.2%) GP practices reported vaccine uptake of 85% or more, including 308 (4.7%) GP practices reporting uptake of 100.0%.

The highest vaccine uptake in NHS Trusts by staff group was 63.8% in other professionally qualified clinical staff, and the lowest vaccine uptake was 56.8% in clinical support staff. In GP practices (including ISHCP's) the highest vaccine uptake was 80.6% in doctors, and the lowest uptake was 70.7% in other professionally qualified clinical staff.

¹ [National influenza vaccination programme 2021 to 2022](#)

Notes on the report

Intended audience

This report is aimed at health professionals directly involved in the delivery of the influenza vaccine or those with an interest in the influenza vaccination programme in England.

Aim of the report

This report provides an evaluation of the national influenza vaccination programme in frontline HCWs involved in direct patient care using data on influenza vaccine uptake from Trusts and GP practices (including ISHCPs) in England. The data is presented to understand influenza vaccine uptake amongst frontline HCWs by staff group compared to the previous seasons. This report will also support the future planning of seasonal influenza vaccination amongst frontline HCWs.

Glossary

Term	Explanation
CCG	NHS Clinical Commissioning Group
COSSH	Control of Substances Hazardous to Health
CQUIN	Commissioning for Quality and Innovation
DHSC	Department of Health and Social Care
GP practice	general practice
GPSS	GP (information technology) system suppliers
Green Book	'The Green Book' is 'Immunisation against infectious disease', a UKHSA publication on vaccines, vaccine-preventable infectious diseases and vaccination procedures. Chapter 19 refers to influenza.
HCWs	Frontline healthcare workers
ISHCP	Independent sector healthcare providers
ImmForm	ImmForm is a website that provides a secure online platform for vaccine uptake data collection for several immunisation surveys, including the seasonal influenza vaccine uptake collection.
JCVI	The Joint Committee on Vaccination and Immunisation
NHS	National Health Service
PHE	Public Health England – Replaced by UKHSA in October 2021
STP	Sustainability and Transformation Partnership
UKHSA	UK Health Security Agency

Background

Frontline HCWs involved in direct patient care are encouraged to receive a seasonal influenza vaccine annually, to protect themselves and their patients from influenza.² To assess vaccine uptake for the 2021 to 2022 winter season among frontline HCWs, a seasonal influenza vaccine uptake survey of all 214 NHS trusts and 6,596 GP practices in England was undertaken. NHS trusts comprise acute, ambulance, care, mental health and other NHS Trusts, and primary care comprises GPs and independent sector healthcare providers (ISHCP).

The UKHSA, formerly Public Health England (PHE), co-ordinated and managed the data collection and produced monthly provisional data on vaccinations allowing the National Health Service (NHS) and Department of Health and Social Care (DHSC) to track the progress of the programme during the 2021 to 2022 influenza season. This collection received approval as a mandatory collection from Data Alliance Partnership Board (DAPB) under the reference DAPB2204 Amd 37/2021 Influenza and COVID-19 vaccine uptake in frontline HCWs survey.

The Commissioning for Quality and Innovation (CQUIN) scheme was introduced in the 2016 to 2017 season with the intention to providing clinical quality improvements and drive transformational change. One of the indicators under the NHS Staff health and wellbeing is improving the uptake of influenza vaccination for frontline staff within providers by introducing payment incentives to Trusts who reach high uptake rates. Since the introduction of the CQUIN scheme, vaccine uptake in all Trusts (excluding in primary care organisations) rose from 50.5% in 2015 to 2016 to 75.2% in the 2019 to 2020 season. However, due to the coronavirus (COVID-19) pandemic, the CQUIN scheme was suspended for the 2020 to 2021 and 2021 to 2022 season.

The aims and objectives of the 2021 to 2022 seasonal influenza vaccine uptake campaign amongst HCWs in England were to:

- monitor vaccine uptake amongst frontline HCWs to inform the management and progress of the national vaccination programme
- allow DHSC, NHS England, Screening and Immunisation Teams, NHS Trusts and STPs to review national, regional, and local vaccine programme performance and identify staff groups and local or regional areas where coverage is high (to identify best practice to inform activities to increase uptake) and low (to increase uptake further)
- gather epidemiological data to support the evaluation and future planning of seasonal influenza vaccinations amongst frontline HCWs

For 2021 to 2022 season, details on the inclusion and exclusion criteria of frontline HCWs continued to be included in the user guide. Alongside efforts by participating NHS Trusts to

² [National influenza vaccination programme 2021 to 2022](#)

ensure accuracy of provided data, PHE and UKHSA continued to carry out additional data validation to ensure the minimisation of double counting by contributing organisations (see [Appendix A.](#))

The Health and Social Care Act 2008 code of practice on the prevention and control of infections and related guidance, emphasise the need to ensure so far as is reasonably practicable that HCWs are free of and are protected from exposure to infections that can be caught at work, and that all staff are suitably educated in the prevention and control of infection associated with the provision of health and social care. Registered providers should therefore ensure that policies and procedures are in place in relation to the prevention and control of infection such that:

- all staff can access occupational health services or appropriate occupational health advice
- occupational health policies on the prevention and management of communicable infections in care workers are in place
- decisions on offering immunisation should be made on the basis of a local risk assessment as described in Immunisation against infectious disease (The Green Book)
- employers should make vaccines available free of charge to employees if a risk assessment indicates that it is needed (COSHH Regulations 2002)
- there is a record of relevant immunisations

Further information on the Code of Practice can be found on the [DHSC website](#).

Methods

Cumulative data on seasonal influenza vaccine uptake was collected from all NHS Trusts³ and GP practices (including ISHCP's) in England, using the ImmForm website. Monthly data was collected on frontline HCWs involved with direct patient care for vaccinations administered between 1 September 2021 and 28 February 2022 (inclusive). This included doctors, qualified nurses, other professionally qualified clinical staff and clinical support staff, and are the same groups that were monitored in previous seasons. Staff group definitions are described in detail in [Appendix A](#). Trusts identify frontline HCWs eligible to receive seasonal influenza vaccine (the denominator) and record all those that are vaccinated (the numerator) to calculate their overall vaccine uptake.

Each monthly survey on the ImmForm website was opened for data submission over the first 9 working days of each survey month, (with adjustments and extensions made to allow for public holidays in some weeks). The 2021 to 2022 monthly data collection schedule with original survey deadlines is provided in Appendix B. Trusts had 7 working days to submit data manually onto the ImmForm website. NHS England and Screening and Immunisation teams were allocated an additional 2 working days to amend and validate data, and to follow up with non-responding organisations to ensure data was submitted. Additional follow-up was undertaken by UKHSA of non-responding Trusts or for data validation as required. This year was the first time we collected and published data a month earlier for vaccinations given to the end of September therefore no comparable data for previous years is available for this initial month. The data collection this year combined influenza and COVID-19 vaccinations with the aim of reducing data burden where it was possible for organisations to submit data for either vaccination programme with the same denominator of frontline HCWs with direct care.

The data in this report is as submitted by the above organisations and has not been altered except by specific request from data providers.

ImmForm website

One of the functions of the ImmForm website is to provide a secure platform for vaccine uptake data collection for several immunisation surveys, including this collection. It allows data providers to:

- provide information on the trust type, trust status and survey coverage
- view vaccine uptake rates by staff group allowing data providers to review and assess progress for their own organisation

³ This included acute, ambulance, care, community, mental health and other NHS Trusts, and primary care

- allow local NHS England and Screening and Immunisation teams to view a ‘non-responder’ report that highlights trusts and primary care providers in their region that have not yet submitted data, thus allowing follow-up

Data limitations

Reported uptake is based on responses from organisations. Non-responding organisations are not included in uptake figures.

All the data needed to calculate vaccine uptake was entered manually directly onto the ImmForm website by Trusts and GP practices (including ISHCPs). The number of ISHCPs included is 65 as ISHCPs need to register with ImmForm to be included. This number is less than the number of ISHCPs licensed. All Trusts were asked to submit cumulative influenza vaccine uptake data monthly over 6 months. This manual element means there is the possibility of human error or misinterpretation. The ImmForm survey form has basic automated validation checks to ensure logical consistency. For example, ensuring that the sum of the figures for individual staff group match the total for all frontline HCWs, and that the number vaccinated must be less than or equal to the number of reported frontline HCWs. As part of an exercise to improve data quality and remove input errors, the submitted data was then manually checked and validated before publication.

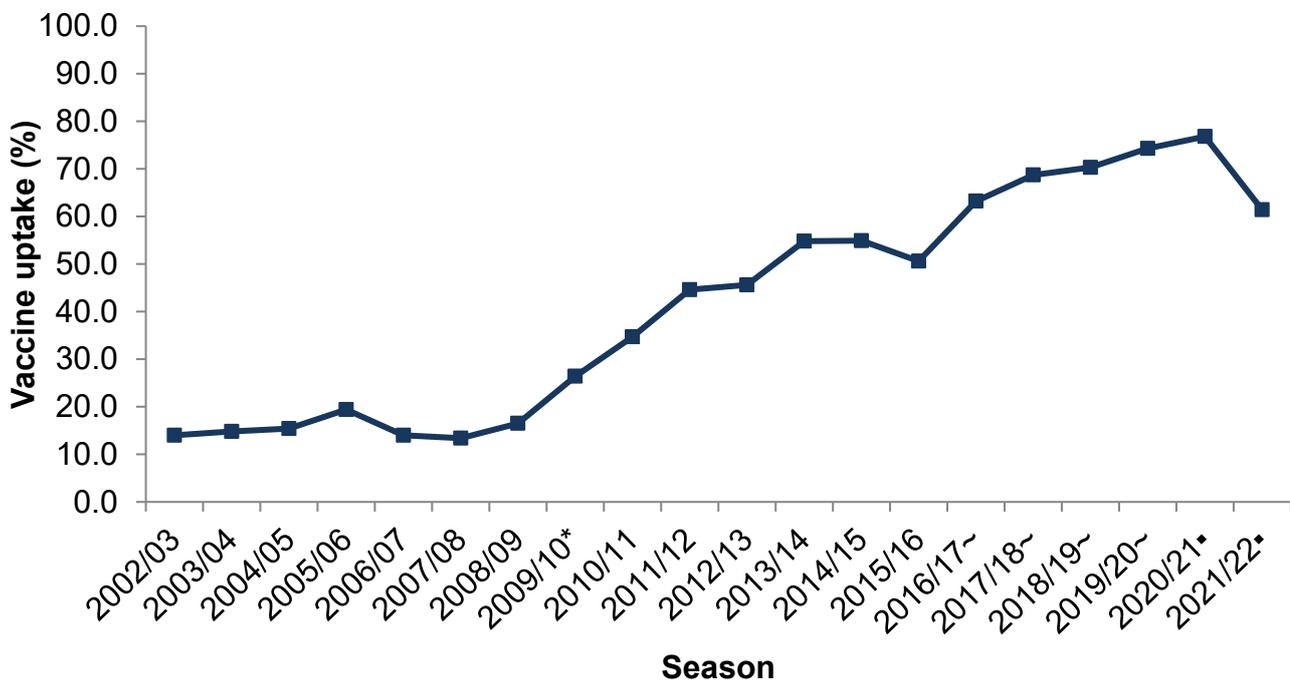
Results

A total of 168 out of 214 NHS trusts (78.5% response rate) and 1,510 out of 6,596 GP practices (including ISHCPs) (22.7%) submitted data on seasonal influenza vaccinations administered up to 28 February 2022. In comparison, last year, a total of 213 out of 217 NHS trusts (response rates of 98.2%) submitted data. Since the 2020 to 2021 influenza season, GP practices are no longer aggregated by Sustainability and Transformation Partnerships (STPs) therefore the total number of organisations submitting data is now 6,619 organisations (sum of NHS Trusts, GP practice and ISHCPs). The number of organisations should not be compared to previous years as this was aggregated by summing the number of Trusts and STPs or Area Teams.

National vaccine uptake rates

Overall, based on submitted data, 61.4% (561,833 out of 915,773) of frontline HCWs received the seasonal influenza vaccine during the 2021 to 2022 season, compared with 76.8% in the previous season (2020 to 2021), 74.3% in 2019 to 2020, 70.3% in 2018 to 2019 and 68.7% in 2017 to 2018⁴ (Figure 1).

Figure 1. Seasonal influenza vaccine uptake in frontline HCWs in England for season 2021 to 2022 compared with previous seasons

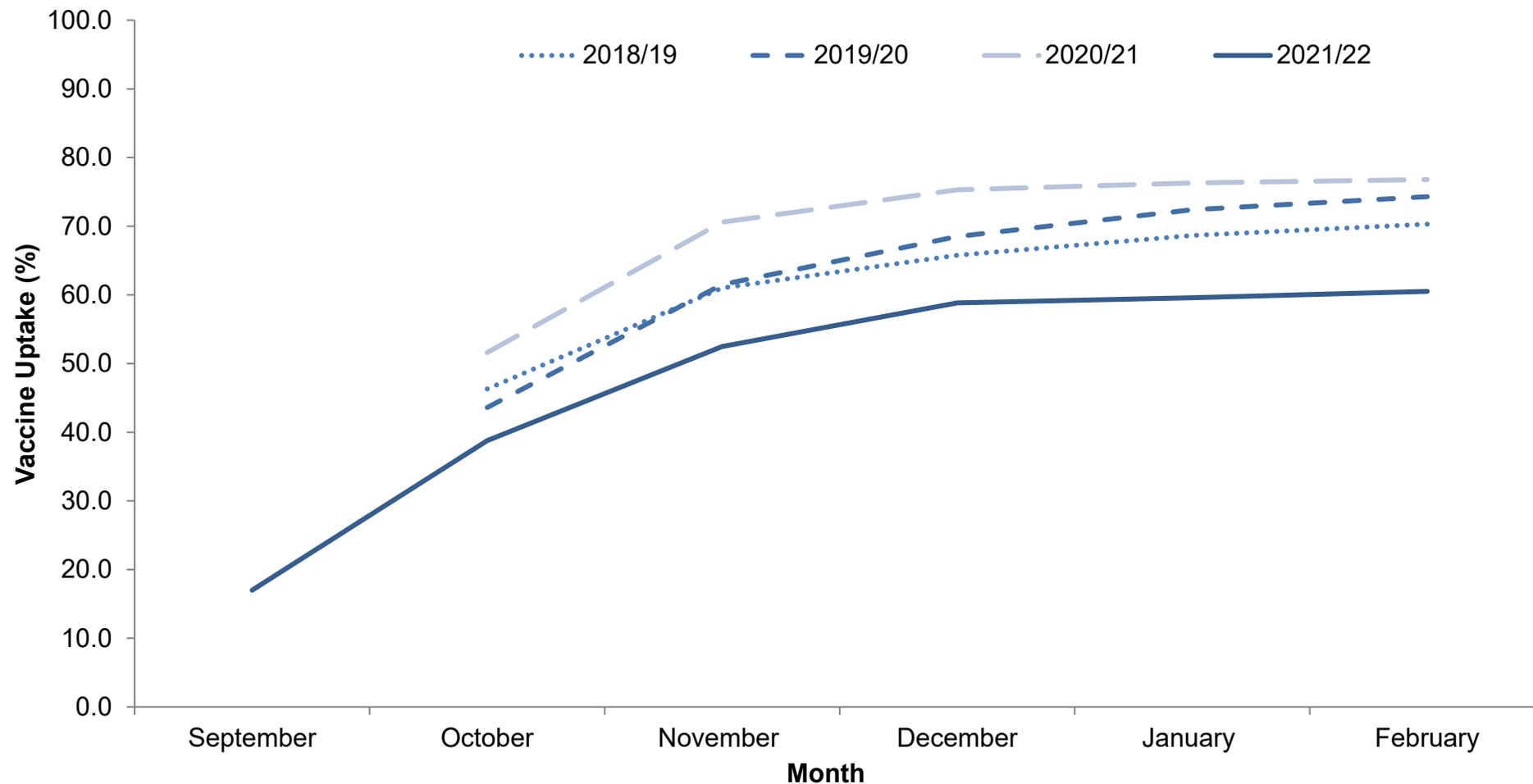


* 2009/10 influenza pandemic year in which the HCWs vaccine uptake survey expanded from acute trust only to include other Trusts, such as ambulance, mental health, and primary care trusts.
 ~ CQUIN scheme was introduced or continued.
 • COVID-19 pandemic when CQUIN scheme was suspended.

⁴ [Seasonal influenza vaccine uptake amongst frontline healthcare workers \(HCWs\) in England, 2012 to 2020](#)

During the 2021 to 2022 season vaccine uptake increased during the first 3 months of vaccination and then began to plateau from December onwards. At all points in the season, vaccine uptake was lower than corresponding times in previous seasons (Figure 2).

Figure 2. Seasonal influenza vaccine uptake in frontline HCWs in England by month during the 2021 to 2022 season compared with the previous 3 seasons

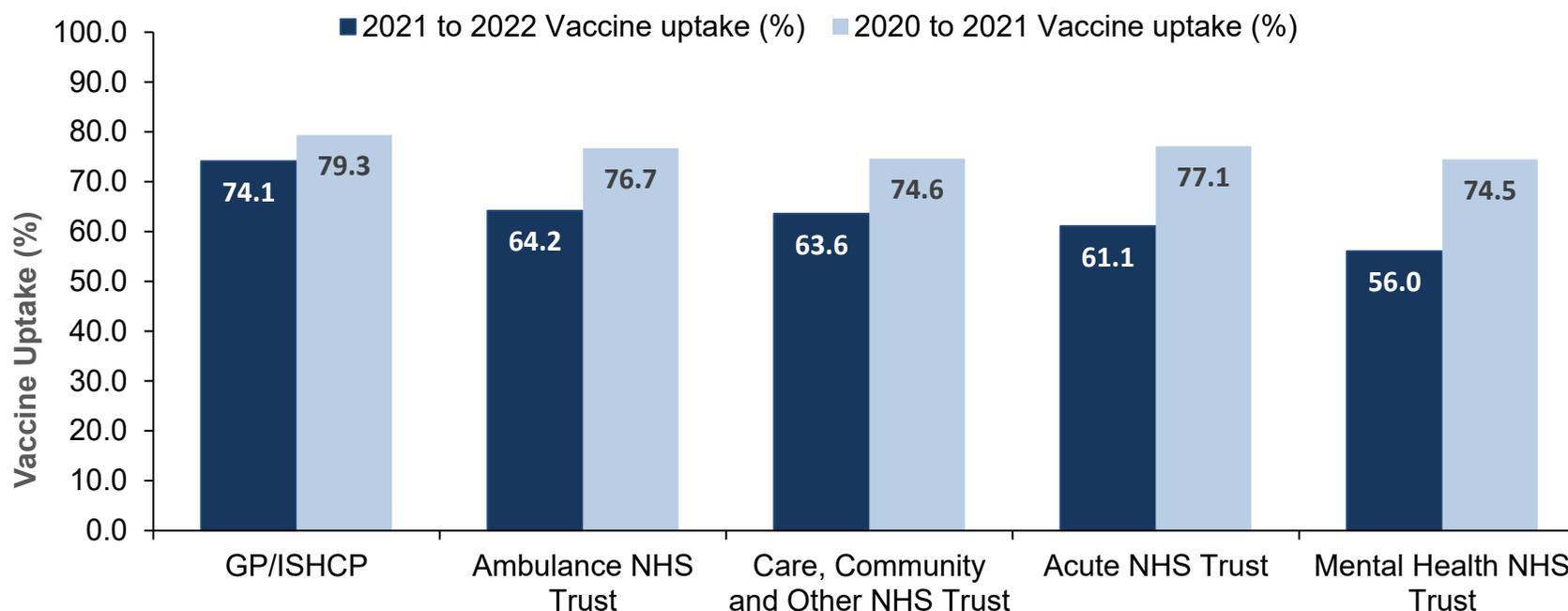


Please note historic data for September is not available as this was the first time that data had been collected this early in the season.

Vaccine uptake rates by organisation type

Seasonal influenza vaccine uptake by Trust type ranged from 56.0% for staff in Mental Health NHS Trusts compared to 74.1% in those working in GP practices and ISHCPs (Figure 3). The vaccine uptake by all organisation types decreased compared to the previous year.

Figure 3. Seasonal influenza vaccine uptake in frontline HCWs by organisation type 2021 to 2022 compared to 2020 to 2021

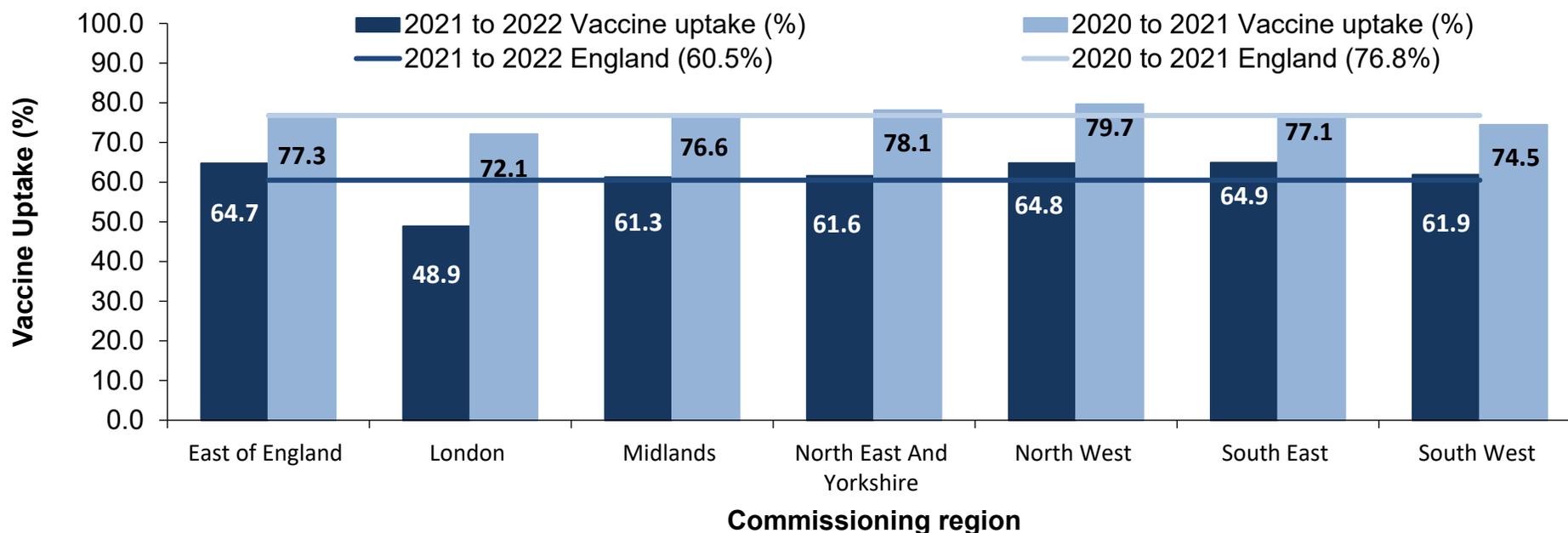


Vaccine uptake for all Trusts

For the 2021 to 2022 season vaccine uptake in frontline HCWs in Trusts was 60.5% compared to 76.8% in the previous season (a decrease of 16.3 percentage points). Vaccine uptake by commissioning region ranged from 48.9% in London to 64.9% in the south-east, with none of the commissioning regions achieving the national vaccine uptake ambition of 85% or more (Figure 4).

The median seasonal influenza vaccine uptake for Trusts was 60.7% amongst those submitting data. The highest seasonal influenza vaccine uptake reported by a Trust was 90.7%. This season 2.3% of all Trusts (5 out of 214) achieved the national vaccine uptake ambition of 85% or more compared with last season where 19.3% (42 out of 217) achieved 85% or more. The lowest seasonal influenza vaccine uptake reported by a Trust was 26.6%. Vaccination data by Trust are available in the data tables that accompany this report.

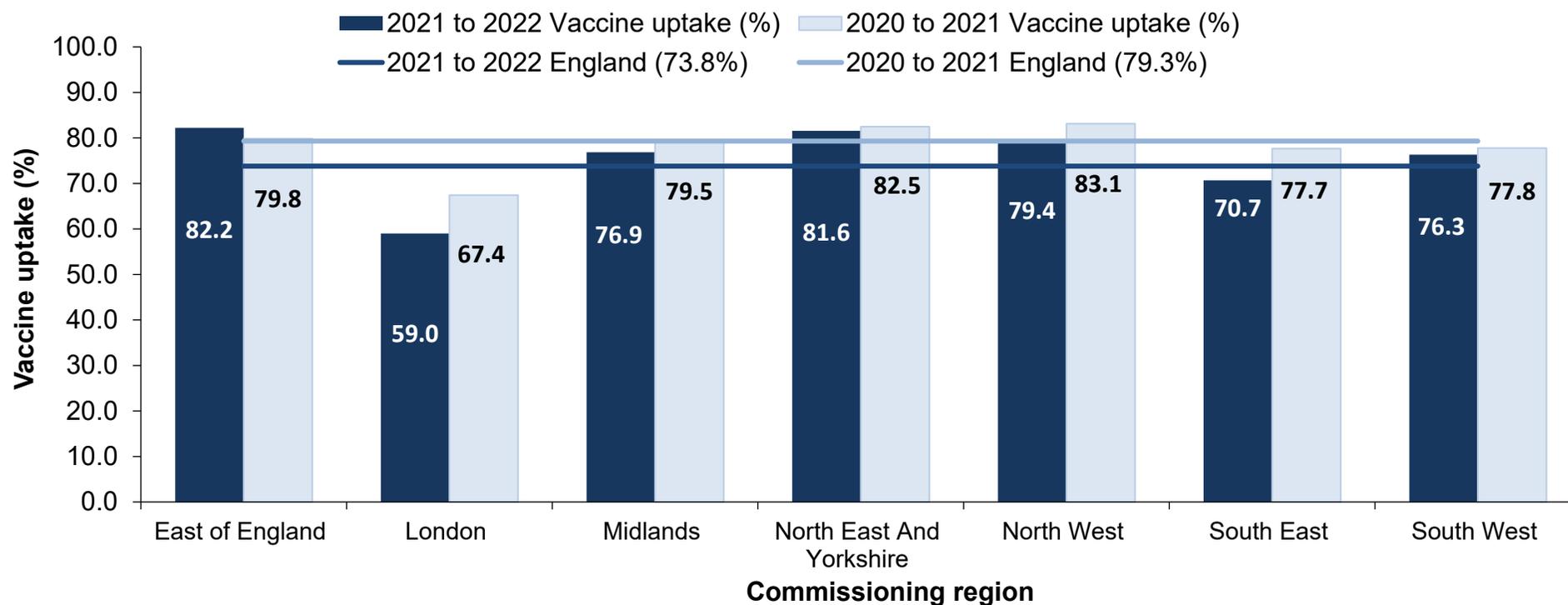
Figure 4. Seasonal influenza vaccine uptake in frontline HCWs in Trusts by commissioning region in 2021 to 2022 compared to 2020 to 2021



Vaccine uptake for GP practices and independent sector health care providers (ISHCPs)

Seasonal influenza vaccine uptake in GP practice and ISHCPs settings was 73.8% compared to 79.3% in 2020 to 2021 season. Vaccine uptake in GP practices and ISHCPs aggregated by commissioning region ranged from 59.0% in London to 82.2% in the East of England; none of the commissioning regions achieved the national vaccine uptake ambition of 85% or more (Figure 5). Vaccine uptake decreased in all regions except in the East of England, which was 2.4 percentage points higher.

Figure 5. Seasonal influenza vaccine uptake in frontline HCWs in primary care (GP and ISHCP) in England by commissioning region 2021 to 2022 compared to 2020 to 2021



National vaccine uptake rates by staff group

Vaccine uptake in frontline HCWs varies by staff group and across Trust and GP practices. Vaccine uptake in frontline HCWs in GP practice (including ISHCP) (74.1%) is higher than those in Trusts (60.5%), and this trend is consistent across all staff groups (Tables 1 and 2). Vaccine uptake by staff groups varies more in Trust settings compared to GP settings. The highest vaccine uptake in NHS Trusts by staff group was 63.8% in All Other Professionally Qualified Clinical Staff; and the lowest vaccine uptake was 56.8% in Total Support Staff (Table 1). In GP Practices (including ISHCPs) the highest vaccine uptake was 80.6% in all Doctors, and the lowest uptake was 70.7% in All Other Professionally Qualified Clinical Staff (Table 2).

Table 1. Seasonal influenza vaccine uptake in NHS Trusts based HCWs by staff group in England for 2021 to 2022 compared with 2020 to 2021

NHS Trust staff group	2021 to 2022			2020 to 2021		
	Number of HCWs involved with direct patient care	Numbers vaccinated	Percentage vaccine uptake	Number of HCWs involved with direct patient care	Numbers vaccinated	Percentage vaccine uptake
All doctors	104,465	66,425	63.6	133,253	103,114	77.4
All nurses	297,364	182,750	61.5	368,463	281,316	76.3
All Other Professionally Qualified Clinical Staff	158,720	101,305	63.8	185,609	146,091	78.7
Total support staff	299,110	169,758	56.8	325,650	244,352	75.0
Frontline HCWs (Total)	859,659	520,238	60.5	1,012,975	774,873	76.5

Figure 6. Seasonal influenza vaccine uptake in NHS Trusts based frontline HCWs by staff group in England for 2021 to 2022 compared with 2020 to 2021

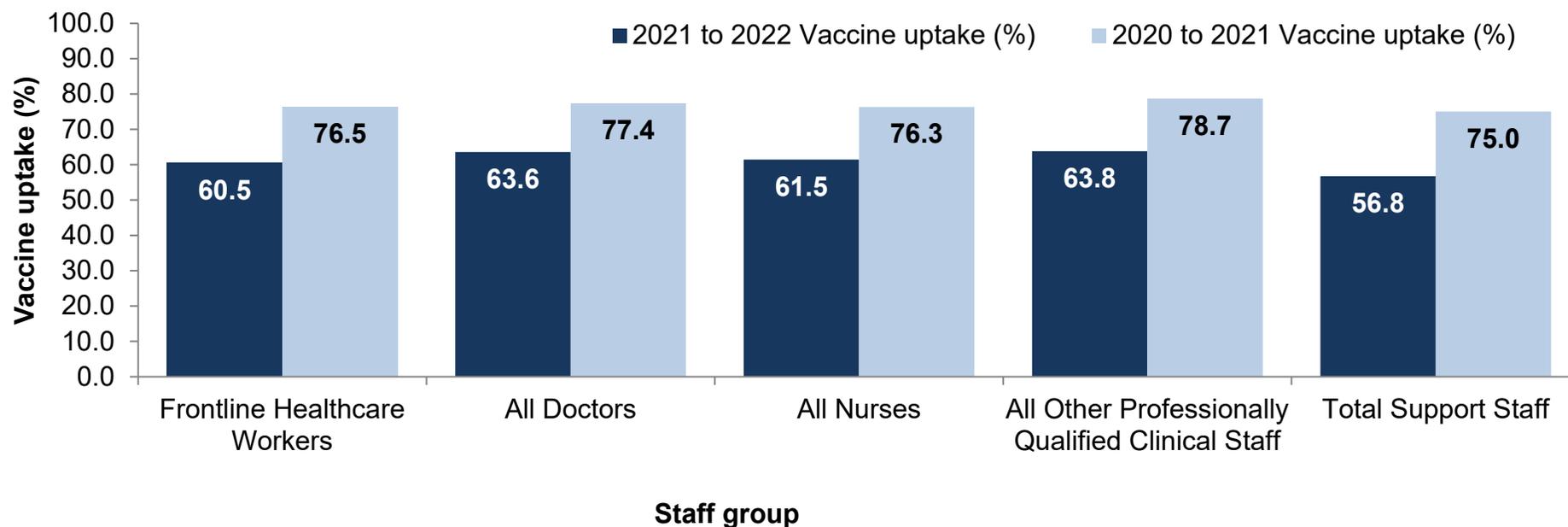
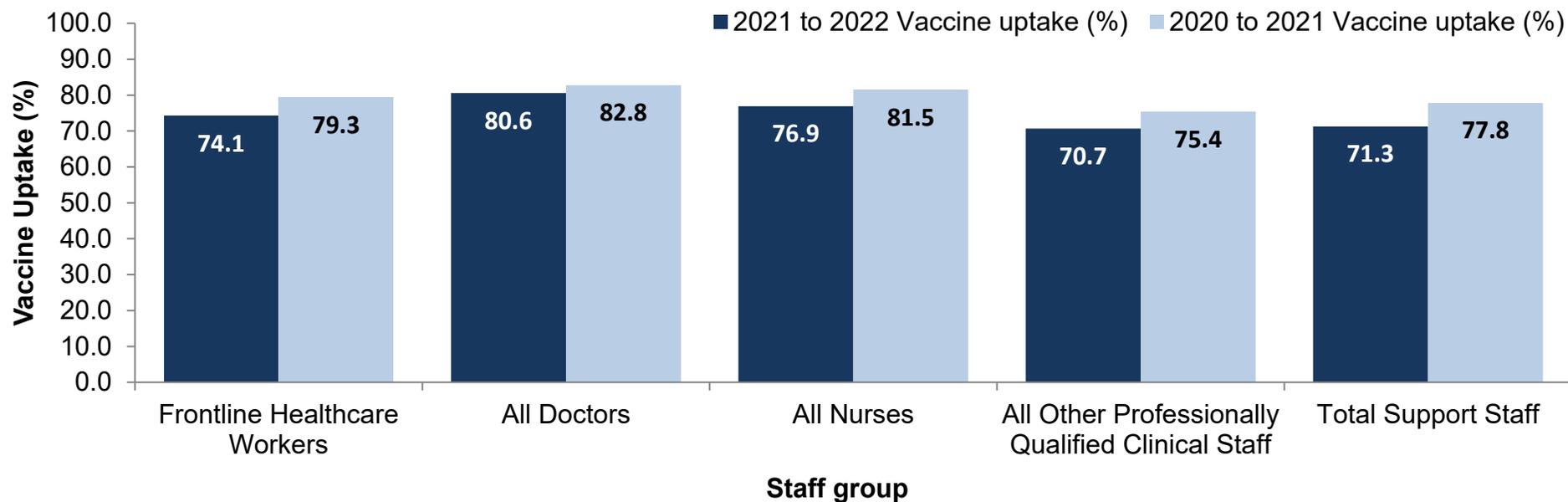


Table 2. Seasonal influenza vaccine uptake in GP practice and ISHCP-based frontline HCWs by staff group in England for 2021 to 2022 compared with 2020 to 2021

GP practice staff group	2021 to 2022			2020 to 2021		
	Number of HCWs involved with direct patient care	Numbers vaccinated	Percentage vaccine uptake	Number of HCWs involved with direct patient care	Numbers vaccinated	Percentage vaccine uptake
All Doctors	11,649	9,385	80.6	24,656	20,404	82.8
All Nurses	9,676	7,443	76.9	21,408	17,457	81.5
All Other Professionally Qualified Clinical Staff	4,226	2,987	70.7	8,055	6,075	75.4
Total Support Staff	30,563	21,780	71.3	64,589	50,252	77.8
Frontline HCWs (Total)	56,114	41,595	74.1	118,708	94,188	79.3

Figure 7. Seasonal influenza vaccine uptake in GP practice and ISHCP-based frontline HCWs by staff group in England for 2021 to 2022 compared with 2020 to 2021



Discussion

Influenza vaccines protect frontline HCWs and their patients. The 2021 to 2022 influenza season recorded a seasonal influenza vaccine uptake of 61.4% amongst frontline HCWs in England, a decrease in uptake by 15.5 percentage points (76.8% achieved in 2020 to 2021 season). This represents the first drop in vaccination of frontline health care workers since the 2015 to 2016 season. The data was collected alongside COVID-19 returns for the first time this year to reduce data burden on data providers; however, response rates to the surveys were lower than last season. The uptake is reported based on data provided by organisations and the reduced response rate from organisations this season is not the cause of the reduction in reported uptake. The responding organisations are considered to be broadly representative of all NHS organisations of the same type; it is readily conceivable that non-responding organisations may have lower uptake than organisations that have provided data.

Vaccine uptake in frontline HCWs was higher in GP practice or ISHCP settings (73.8%) compared to Trusts (60.5%). The highest vaccine uptake by staff group was 84.5% achieved among GP practice nurses. Approximately 38.6% of HCWs in direct contact with patients (353,940) in organisations responding to the survey did not receive the influenza vaccine this season.

The 2021 to 2022 season was the first time that there has been a national vaccine uptake ambition of 85% or more. Only 2.3% of all Trusts achieved vaccine uptake rates of 85% or more compared with 19.3% in 2020 to 2021. In previous years, the CQUIN scheme provided a financial incentive to vaccinate frontline HCWs however the scheme has been suspended for the last 2 years due to the pandemic. The CQUIN staff flu vaccination scheme has been [reinstated for 2022 to 2023](#). It will be monitored through the data returns that UKHSA publishes monthly and form the basis for this annual report series.

The 2021 to 2022 season represented the first season where COVID-19 vaccination was available for frontline HCWs from the start of the flu immunisation season (1 September 2021). During the previous season (2020 to 2021) COVID-19 vaccination was introduced part-way through the season (December 2020). The impact this had on frontline HCW flu vaccine uptake is unknown. For context it is noteworthy that the government hosted a public consultation from 9 September to 22 October 2021 on whether or not to make COVID-19 and flu vaccination a condition of deployment within health and wider social care settings.⁵ There are no plans to introduce vaccination requirements for flu or COVID-19 at this time.

⁵ [Making vaccination a condition of deployment in the health and wider social care sector](#)

Seasonal influenza vaccine uptake amongst frontline HCWs remains important to lower the risk of influenza infection amongst HCWs themselves (who may be at increased risk of exposure to influenza compared with the general population), their patients who may have a suboptimal response to their own vaccinations, and their families. HCW vaccination also protects healthcare services by [reducing sickness absences](#).

Acknowledgements

The authors would like to thank everyone that contributed to the data collection, specifically:

- all the staff and data providers who participated in and supported the frontline HCWs seasonal influenza vaccine uptake data collection
- Influenza Surveillance Team, UKHSA
- ImmForm team and the ImmForm support team

Appendix A. Staff group definitions

1. Professionally qualified clinical staff, consisting of all professional staff with direct patient care

Data item	Definitions of staff groups
All doctors	<p>All doctors – consists of all doctors and dentists working in hospital and the community and GPs (excluding retainers). The figures include all grades of hospital, community and public health doctor or dentist, including:</p> <ul style="list-style-type: none"> Consultant Registrars senior house officers foundation years 1 and 2 staff staff grades associate specialists clinical assistants and hospital practitioners students
Qualified nurses	<p>Qualified nurses including practice nurses – consists of qualified nursing, midwifery and health visiting staff, working in the hospital, community services and general practice. These nurses have at least first level registration. They include:</p> <ul style="list-style-type: none"> nurse consultants nurse managers bank nurses students
<p>All other professionally qualified clinical staff</p> <p>This comprises:</p> <ul style="list-style-type: none"> Qualified scientific, therapeutic and technical staff (ST&T) Qualified allied health professionals (AHPs) Other qualified ST&T Qualified ambulance staff 	<p>Qualified scientific, therapeutic and technical staff (ST&T) – qualified health professionals and students including:</p> <ul style="list-style-type: none"> consultant therapists ST&T managers healthcare scientists <p>These staff work alongside doctors, nurses and other health professionals and are categorised into the following 2 groups:</p> <ul style="list-style-type: none"> Qualified AHPs – qualified allied health professionals (AHP) and students are the following staff: <ul style="list-style-type: none"> chiropractors or podiatrists dieticians occupational therapists orthoptists physiotherapists radiographers

Data item	Definitions of staff groups
	<p>art, music or drama therapists speech and language therapists In primary care, AHPs work in teams with GPs, nurses and other professionals, such as social workers, to provide quick and effective care for patients without the need for them to go into hospital.</p> <hr/> <p>Other qualified ST&T – other qualified health professionals, including: healthcare scientists pharmacists students These are other staff working in key professional roles: qualified ambulance staff ambulance paramedics technicians emergency care practitioners ambulance service managers</p>

2. Support staff – staff working in direct support of clinical or GP staff, often with direct patient care, who free up clinical staff and allow them more time to treat patients

Data item	Definitions of staff groups
<p>Support to clinical staff</p> <p>This comprises: Support to doctors and nurses Support to ST&T staff Support to ambulance staff</p>	<p>Support to doctors and nurses including: nursing assistants and auxiliaries nursery nurses health care assistants support staff in nursing areas</p> <p>Also includes clerical and administrative staff and maintenance and works staff working specifically in clinical areas, for example: medical secretaries and medical records officers support workers healthcare assistants students and trainees in central functions, as these are mainly general porters involved in moving patients around the hospital</p> <hr/> <p>Support to ST&T staff – includes: ST&T trainees and helpers or assistants healthcare assistants support workers clerical and administrative staff maintenance works staff specifically identified as supporting ST&T staff</p>

Data item	Definitions of staff groups
	<p>Support to ambulance staff – includes: ambulance personnel trainee ambulance technicians healthcare assistants support workers clerical and administrative staff maintenance and works staff specifically identified as supporting the ambulance service</p>
Support to GP staff	<p>GP practice staff – includes a variety of staff who work in practices. These include: physiotherapists occupational therapists receptionists practice managers students and trainees However, practice nurses are included as qualified nurses within professionally qualified clinical staff instead.</p>

3. NHS infrastructure support – staff directly involved in the day-to-day running of the organisation and its infrastructure

Data item	Definitions of staff groups
<p>N/A – not relevant to this data collection as these groups are not involved in direct patient care</p>	<p>Central functions – includes clerical and administrative staff working in central functions: finance IT legal services library services health education general management support services</p> <p>Hotel, property and estates – includes: clerical and administrative staff maintenance and works staff working in areas such as laundry catering domestic services gardeners caretakers labourers</p> <p>Managers and senior managers – staff with overall responsibility for budgets, manpower or assets, or accountable for a significant area of work. Senior managers include:</p>

Data item	Definitions of staff groups
	staff at executive level those who report directly to the board These staff are essential to the smooth running of hospitals, Trusts and Strategic Health Authorities. This excludes nursing, ST&T and ambulance managers in posts requiring specific clinical qualifications.

Appendix B. Monthly data collection schedule for 2021 to 2022

The table below provides monthly data collection dates for Trusts and Area Teams for the 2021 to 2022 programme.

Survey month	Data up to date	Survey start date	GP and Trusts survey end date (7 days)
September	Thursday 30 September 2021	Monday 18 October 2021	Monday 25 October 2021
October	Sunday 31 October 2021	Monday 1 November 2021	Wednesday 17 November 2021
November	Tuesday 30 November 2021	Wednesday 1 December 2021	Monday 13 December 2021
December	Friday 31 December 2021	Tuesday 4 January 2022	Monday 17 January 2022
January	Monday 31 January 2022	Tuesday 1 February 2022	Friday 11 February 2022
February	Monday 28 February 2022	Tuesday 1 March 2022	Friday 11 March 2022

Appendix C. Survey form for 2021 to 2022

1. NHS Organisation Type

Acute NHS Trust
Ambulance NHS Trust
NHS England Healthcare Workers
Care Trust (NHS Trust based)
Mental Health NHS Trust
Other NHS Trust

2. Foundation Trust Status

Foundation Trust
Non-Foundation Trust

3. Number of Healthcare Workers by Occupation Involved with DIRECT Patient Care ONLY

Occupation (HCW's that have left the Trust should be excluded)	No. of HCWs involved with direct patient care	No. of HCWs vaccinated with Influenza vaccine since 1 September 2021	Influenza Vaccine Uptake (%)	No. of HCWs vaccinated with dose 1 COVID-19 vaccine	COVID-19 dose 1 vaccine Uptake (%)	No. of HCWs vaccinated with dose 2 COVID-19 vaccine	COVID-19 dose 2 vaccine Uptake (%)	No. of HCWs vaccinated with dose 3 (booster dose) COVID-19 vaccine	COVID-19 dose 3 vaccine Uptake (%)
All Doctors (excluding GP's) ⓘ	<input type="text"/>	<input type="text"/>	--	<input type="text"/>	--	<input type="text"/>	--	<input type="text"/>	--
GP's only	<input type="text"/>	<input type="text"/>	--	<input type="text"/>	--	<input type="text"/>	--	<input type="text"/>	--
Qualified Nurses, midwives and health visitors (excluding GP Practice Nurses) ⓘ	<input type="text"/>	<input type="text"/>	--	<input type="text"/>	--	<input type="text"/>	--	<input type="text"/>	--

Survey form for 2021 to 2022 (continued)

<p>Qualified Nurses, midwives and health visitors (GP Practice Nurses only)</p> <p></p>	<input type="text"/>	<input type="text"/>	<p>--</p>						
<p>All other professionally qualified clinical staff, which comprises of:-</p> <p></p> <ul style="list-style-type: none"> • Qualified scientific, therapeutic & technical staff (ST&T), • Qualified allied health professionals (AHPs) • Other qualified ST&T • Qualified ambulance staff 	<input type="text"/>	<input type="text"/>	<p>--</p>						

Survey form for 2021 to 2022 (continued)

Support to Clinical Staff, which comprises of:- ⓘ • Support to doctors (excluding GP's) & nurses • Support to ST&T staff • Support to ambulance staff	<input type="text"/>	<input type="text"/>	--						
	<input type="text"/>	<input type="text"/>	--						
	Total Number of HCWs involved with Direct Patient Care	0	0	--	0	--	0	--	0

4. Number of Healthcare Workers NOT INVOLVED with DIRECT Patient Care (Optional)

Number of HCWs NOT involved with Direct Patient Care ⓘ	<input type="text"/>	<input type="text"/>	--						
--	----------------------	----------------------	----	----------------------	----	----------------------	----	----------------------	----

Appendix C: Survey form for 2021 to 2022 – accessible text version

1. NHS organisation type	
Acute NHS Trust	
Ambulance NHS Trust	
NHS England healthcare workers	
Care Trust (NHS Trust-based)	
Mental Health NHS Trust	
Other NHS Trust	

2. Foundation Trust status	
Foundation Trust	
Non-foundation Trust	

3. Number of healthcare workers (HCWs) by occupation involved with direct patient care only									
Occupation (HCWs that have left the Trust should be excluded)	Number of HCWs involved with direct patient care	Number of HCWs vaccinated with influenza vaccine since 1 September 2021	Influenza vaccine uptake (%)	Number of HCWs vaccinated with dose 1 COVID-19 vaccine	COVID-19 dose 1 vaccine uptake (%)	Number of HCWs vaccinated with dose 2 COVID-19 vaccine	COVID-19 dose 2 vaccine uptake (%)	Number of HCWs vaccinated with dose 3 (booster dose) COVID-19 vaccine	COVID-19 dose 3 vaccine uptake (%)
All doctors (excluding GPs)									
GPs only									

3. Number of healthcare workers (HCWs) by occupation involved with direct patient care only									
Qualified nurses, midwives and health visitors (excluding GP practice nurses)									
Qualified nurses, midwives and health visitors (GP practice nurses only)									
All other professionally qualified clinical staff which comprises: - qualified scientific, therapeutic and									

3. Number of healthcare workers (HCWs) by occupation involved with direct patient care only									
technical staff (ST&T) - qualified allied health professionals (AHPs) - other qualified ST&T - qualified ambulance staff									
Support to clinical staff which comprises: - support to doctors (excluding GPs) and nurses - support to ST&T staff - support to ambulance staff									
Support to GP staff									

3. Number of healthcare workers (HCWs) by occupation involved with direct patient care only									
Total number of HCWs involved with direct patient care									

4. Number of HCWs not involved in direct patient care (optional)									
Occupation (HCWs that have left the Trust should be excluded)	Number of HCWs involved with direct patient care	Number of HCWs vaccinated with influenza vaccine since 1 September 2021	Influenza vaccine uptake (%)	Number of HCWs vaccinated with dose 1 COVID-19 vaccine	COVID-19 dose 1 vaccine uptake (%)	Number of HCWs vaccinated with dose 2 COVID-19 vaccine	COVID-19 dose 2 vaccine uptake (%)	Number of HCWs vaccinated with dose 3 (booster dose) COVID-19 vaccine	COVID-19 dose 3 vaccine uptake (%)
Number of HCWs not involved with direct patient care									

About the UK Health Security Agency

UKHSA is responsible for protecting every member of every community from the impact of infectious diseases, chemical, biological, radiological and nuclear incidents and other health threats. We provide intellectual, scientific and operational leadership at national and local level, as well as on the global stage, to make the nation health secure.

[UKHSA](#) is an executive agency, sponsored by the [Department of Health and Social Care](#).

© Crown copyright 2022

Published: June 2022

Publishing reference: GOV-12606



You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence v3.0. To view this licence, visit [OGL](#). Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.



UKHSA supports the Sustainable Development Goals

