Ministry of Health Policy Statement – Annual Influenza Immunisation Programme Start Date

From 2019 the Annual Influenza Immunisation Programme (the Programme) will start from 1 April each year

This start date differs from previous years when the Programme started as soon as the influenza vaccine became available, generally by early March. The Ministry has considered a range of factors in making this decision including: emerging evidence on the effectiveness of influenza vaccines, influenza surveillance data, the impact of the start date on service delivery and feedback from the sector.

The start date from 1 April will be subject to the vaccine being available for distribution across New Zealand by then. Changes to vaccine strains can result in longer manufacturing lead time and the arrival of vaccines in late rather than early March.

Duration of influenza vaccine protection

New evidence shows that vaccine effectiveness begins to decline after influenza vaccination. Maximum protection from influenza is observed around two weeks after vaccination and starts to decline by about 7 percent every month. The decline in protection is more prominent and rapid in those aged 65 and older and the very young. For those aged 65 and older the vaccine is less effective in comparison to healthy adults aged 18 to 64.

Influenza surveillance data shows influenza activity later in the year

Influenza activity may occur throughout the year with the peak incidence during the winter months. New Zealand’s surveillance data shows that the peak has moved to August in recent years. Influenza surveillance data and the shift in peak influenza activity, in conjunction with declining vaccine effectiveness supports a change in the start date. The Programme start date from 1 April ensures better protection against influenza during the peak incidence particularly for our most vulnerable populations.

Impact on service delivery

Consultation with the sector showed wide support for a start date from 1 April with many providers agreeing that not only is this the right clinical decision but a change in start date will also allow better planning and implementation of the Programme.

For the reasons outlined above, the Ministry’s expectation is that private influenza immunisation providers also consider starting service delivery from 1 April.

Monitoring the impact of this change

The Ministry will monitor this change to the start date over the next few years and will review its impact on service delivery and influenza immunisation coverage as required.
The Ministry consulted with key immunisation stakeholders on the proposed change in start date. We appreciate the effort people took to respond to the consultation. The table below summarises the main themes raised in feedback.

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<th>Theme</th>
<th>Ministry comment</th>
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<td>Most respondents were supportive of a change in start date to 1 April, as it would:</td>
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| • allow for better planning of resources, staff and influenza clinics to suit their population  
  • provide certainty around a standardised start date for the Programme  
  • provide better protection of the whole population especially for vulnerable populations. |                                                                                                                                                                                                              |
| Some respondents were concerned that starting the Programme later would increase the strain on general practice to deliver vaccinations within a tighter timeframe before the peak of the season. | In recent years the majority of influenza immunisation has taken place in the first eight weeks of the programme, regardless of the start date, well in advance of the beginning of the seasonal increase in influenza. |
| Some respondents were concerned that influenza season could come early. | This decision was made in consultation with influenza epidemiologists with reference to New Zealand data from multiple recent influenza seasons. Influenza levels are monitored throughout the year. |
| Some respondents were concerned that a split delivery model between private market and funded influenza vaccine availability may create an equity issue and undermine the funded programme | The Ministry will discuss further with vaccine suppliers and private providers about the impact of a change in start date to the Programme. The Ministry’s expectation is that private immunisation providers consider starting service delivery from 1 April. |
| Respondents also provided comments on implementation considerations, including providing the sector with reassurance that the vaccine would be available for delivery by 1 April, as delays impact on their planning, resourcing and their coverage. | Since 2005, the influenza vaccine has only been delayed until later in April twice. Each year there is a risk influenza vaccine availability is delayed. Vaccine availability is dependent on the time it takes to manufacture the vaccine, especially with the addition of new influenza vaccine strains for that particular year. This issue affects all |
influenza vaccines types, not just the funded vaccine. The role of PHARMAC and the Ministry is to ensure the sector is well informed about the vaccine availability and contingencies are put in place to minimise the impact on providers. The Ministry and PHARMAC will communicate to the sector about delays in vaccine availability and a revised start date as soon as they are made aware.