Research
Health professionals findings
March 2005 -
Awareness and knowledge of pandemic flu

- **Varied widely** across sample:
  - HPA Comms Leads, CCDCs and Immunisation Co-ordinators were very aware and involved in planning for the situation
  - Low level awareness and limited knowledge amongst GPs, District Nurses, Community Pharmacists and A & E Consultants

“I’ve read about Asian Flu in the papers and one article in a pharmaceutical journal” (Community Pharmacist)

“We’re dealing with priorities on a day to day basis – little known about this” (A & E Consultant)
 Importance of communication

- All respondents supported communication on this issue, specifically for frontline health professionals.
- Building awareness amongst health professionals was considered a priority:
  - references to SARS video
  - alerts/updates on NHS websites accessed
Importance of communication (2)

- Communication with the public needs to be carefully considered – panic leading to immediate demand on services a big concern, particularly for GPs and Community Pharmacists
  - some feel short-term “panic” is worthwhile
  - others thought “less is more” – principle should be pursued

  “I’ll have a line of people at my surgery – all convinced they have pandemic flu” (GP)
Current pandemic flu leaflet

- A majority of health professionals thought that **the leaflet was clear and simple**, the comparison page received a lot of praise.

- The **key messages** conveyed were:
  - what pandemic flu is
  - how it starts/likelihood of reaching UK
  - how it differs from “normal” flu
  - why it is thought to be coming
  - the impacts on individual and UK
  - what treatments are (not) available
  - where to get more information
At the outset of a pandemic

- Respondents discussed the need for consistent, regular communications with the general public backed-up with clear guidelines for service providers
- Respondents focused on the following messages:
  - who is in control of the situation
  - what the public can do/their responsibility
At the outset of a pandemic (2)

“...misuse of services will be an issue, we will need to be direct and clear and provide step-by-step alternatives through helplines, interactive websites, local newspapers” (CCDC)

- how to limit spread, re-emphasising hygiene measures and containment
- symptoms and what to do if concerned
- vaccine situation, emphasise difference with antivirals and development rather than lack of a vaccine
Conclusions

General public findings:

- Many challenges face the communication strategy on pandemic flu but the findings of this research indicate that the process must begin:
  - the general public have limited understanding of the threat posed by pandemic flu
Conclusions (2)

- Health professionals were concerned about “alarming” the general public and were divided on the need to specifically focus on the vaccine and antiviral issue.

- Many frontline professionals were unclear about the threat and potential consequences.
Conclusions (3)

- The general public information needs are as follows:
  - outline what pandemic flu is and how it compares with ordinary flu
  - stress the monitoring and planning work underway by the government and WHO
  - highlight the difficulties with a vaccine - but emphasise “work” on the issue
  - emphasise hygiene measures and the importance of infection control
Conclusions (4)

- Health professionals concluded a “drip feed” approach to communication be adopted
- HPA Comms Leads, CCDCs and Immunisation Co-ordinators were most concerned about current level of contingency planning:
  - higher prioritisation across the country is needed
  - consistent/cohesive plans with DH very important
  - clear lines of communication throughout is crucial
Conclusions (5)

- Overall, it was felt that the communication strategy needs to provide both the public and health professionals with a **strong sense of leadership, reassurance, guidance, direction** and a **sense of purpose**:

  “if we go down the doom laden route, what good will it do?”