

2016/17 Barnet Immunisation Action Plan

Background:

Immunisation is the most effective method of preventing disease and maintaining the public health of the local population and vaccination and immunisation service exists to ensure the safe and effective delivery of all vaccine programmes. Barnet Immunisation Plan sets out actions to be undertaken by all key stakeholders in support of coordinated immunisation activities thereby ensuring that vaccines are available and given to the eligible groups at the recommended times.

NHS England, Public Health England, Clinical Commissioning Groups (CCG) and Local Authorities all have defined role to play, with NHS England assuming the lead commissioning role in line with Section 7A mandate.

The roles and responsibilities of the partners are:

NHS England (NHSE):

- Commissioning of all national immunisation and screening programmes described in Section 7A of the mandate
- Commission immunisation and vaccination services from primary care, community providers (e.g. school nursing teams) and other providers which are specific to national standards
- Monitoring of provider's performance and for supporting providers in delivering improvements in quality and changes in the programmes when required
- Accountable for ensuring local providers meet agreed population uptake and coverage levels against the national service specification and as specified in the Public Health Outcome Indicators and KPIs
- Work with the Department of Health and Public Health England in national planning and implementation of immunisation programmes and in quality assurance
- Emergency Planning Responses and Resilience (EPRR) where this involves vaccine preventable diseases.

Public Health England (PHE):

- Lead the response to outbreaks of vaccine preventable disease and provide expert advice to NHS England in cases of immunisation incidents. PHE will provide access to national expertise on vaccination and immunisation queries.
- Professional support to the PHE staff embedded in the NHSE Area Teams including access to continuing professional appraisal and revalidation system

- Provide information to support the monitoring of immunisation programmes
- Publishes Cohort of Vaccination Evaluated Rapidly (COVER) data

Clinical Commissioning Groups (CCGs):

- Have a duty of quality improvement and this extends to primary medical care services delivered by GP practices (such as immunisation and screening) – as such, they should be able to provide support where NHSE need to liaise or contact specific primary care facilities.
- CCGs have a crucial role in commissioning pathways of care that effectively interface with screening services, have adequate capacity to treat screen positive patients and meet quality standards
- CCGs hold the contracts for maternity services, and are providers of antenatal and new-born screening (neonatal BCG and infant Hepatitis B). Barnet CCG have contracts with Central London Community Health (CLCH) who are commissioned by NHS E to provide the local Child Health Information System (CHIS) service.

Local Authorities:

- Leader of the local public health system and is responsible for improving and protecting the health of local population and communities.
- Provide information and advice to relevant bodies within its areas to protect the population's health (whilst not explicitly stated in the regulations, this can reasonably be assumed to include immunisation)
- Provide local intelligence information on population health requirements e.g. JSNA
- Independent scrutiny and challenge of the arrangements of NHSE, PHE and providers.
- Local authorities will need to work closely with Area Teams including arrangements for the NHS response to the need for surge capacity in the cases of outbreaks.

General Practitioners (GPs):

- General practices are contracted by NHSE to deliver the Childhood Routine Immunisation Schedule to their registered child population. They are the main mode of delivery in England.

Community Services Providers:

- Child Health Information System (CHIS) is housed within community service providers and incorporates the child health records department which holds clinical records on all children and young people. COVER data is submitted from CHIS to PHE.
- The community provider may have an immunisation team that provides outreach or 'catch-up' for childhood immunisations (e.g. for unregistered populations) and for BCG.

- Health visitors have a role to play in promoting the importance of vaccinations to parents.
- Many community services providers have immunisation clinical leads or coordinators who provide clinical advice and input into immunisation services locally.

Barnet Immunisation Action Plan

- Achieving high levels of immunisation coverage in London remains challenging.
- This action plan has been developed as part of NHS England's ongoing work to improve immunisation coverage in London and outlines ways in which partner organisations could contribute to the work to ensure high levels of immunisation coverage are achieved and sustained in Barnet. This is in recognition of the key elements and partnerships that are essential to the delivery of an effective, equitable and quality assured immunisation service.
- The 2016/17 Barnet Immunisation Action Plan is underpinned by NHS England's immunisation strategic objectives which are:
 1. To achieve improved immunisation coverage across London.
 2. To reduce inequalities in immunisation uptake between GP Practices and populations.
 3. To improve patient choice and access to immunisations across London.

To achieve 85% for MMR2 Barnet only needs to vaccinate an average of another 69 children per quarter, across all practices.

To achieve 40% for child flu this season each practice needs to vaccinate between 8 and 16 more children for 2, 3 and 4 year olds.

Key Area	Output	Outcome	Actions	Due Date	Led by	Risks to completion & Mitigation
Commissioning & Performance Management	All practices are signed up to QMS to improve the recording of immunisation data	COVER submissions reflect an accurate increase in recorded uptake rates. Stabilisation of reported immunisation rates in Barnet	Ensure Barnet GP Practices have access to I.T. for support. Follow up practices monthly who fail to upload immunisation data to CHIS. There is now only one persistently non submitting practice each month of which the CCG are aware.	Monthly	Barnet NHSE/Barnet CCG Beverly Wilding	Practices do not submit data to CHIS monthly therefore there are gaps in published data.

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	Reduce the variation in immunisation performance between best performing and worst performing GP Practices.	Improved immunisation data quality resulting in accurate reporting of immunisation coverage	Work with practices to improve uptake of childhood immunisations in Barnet. Inform CCG when visiting practices. Identify what works in the best performing practices and share work with poor performing practices in troubleshooting the barriers to increasing uptake. Continuing national meetings to improve TPP System reporting	August 2016	NHS England / Barnet CCG/Barnet Amanda Goulden/ Beverly Wilding	GP practices may not record the data accurately. E.g. correct coding

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	<p>Performance data sent to CHIS for COVER reporting to PHE on a quarterly basis</p> <p>Children moving in/out of Barnet are managed effectively to ensure they do not miss out on public health interventions</p>	Accurate reporting of immunisation coverage for Barnet	<p>CHIS service will send Cover data 4-6 weeks prior to the final submission. Currently reports are being sent directly from GP practices via QMS due to national issues with TTP System One. Continuing national meetings to improve TPP System reporting</p> <p>Ensure CHIS follow movers in/movers out Standard Operational Procedure</p>	Quarterly	<p>CLCH- CHIS</p> <p>Manager Joy Gayle</p>	Reports not accurate. Continue to work with CHIS. Full audit of every practice not achievable by NHSE.
	To deliver roll out of child flu to years 1,2 and 3 and achieve 40% minimum	Maximum coverage of cohort	Delivery by school immunisation provider	September – December 2016	NHSE/LA	Capacity of immunisation and admin team

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	To deliver and oversee measurable improvements in quality and performance for Barnet immunisation services	Improved immunisations uptake and data quality in Barnet	<p>Set up PH Work plan meetings</p> <p>NHS England to liaise with CCGs, LA, Primary care commissioners and PHE</p> <p>CLCH to access QMS data and look for root causes of misaligning data</p> <p>Continued escalation of TTP issues nationally</p>	<p>Next meeting Oct 2016</p> <p>Ongoing work</p> <p>National time constraints</p>	<p>NHSE/LA</p> <p>CLCH</p> <p>Kenny Gibson</p>	No progress on national TTP programme
	Work with maternity to set up hospital services to deliver the neonatal BCG immunisation programme	100% of babies offered BCG immunisation at birth	Move to universal delivery. Preparing to roll out service at Barnet and Royal Free following training on October 13th	October 2016	<p>NHSE/CCG Amanda Goulden</p> <p>Maternity services</p>	The provider not delivering the service Unable to recruit long term

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	Implement recommendations to improve the Hep B antenatal and neonatal immunisation pathways	To monitor coverage by ensuring all babies have completed the programme (including 1 st dose in hospital) Ensure missed/DNA/lost to follow up are followed through. Ensure data is captured. Link in with the London Hep B Plan.	Ensure the correct pathways are followed to target at risk babies.	Barnet already delivers through GP	CCG/CHIS Joy Gayle/ Judy Mace	Neonatal programme not completed and babies lost to follow up.
	NHSE commissioned Flu vaccinations delivered and promoted throughout primary care providers	Increase in reported rates on flu vaccine uptake. Increased reported flu vaccine uptake across named at risk groups, focussing this season on 2,3 and 4 year olds	Work with GP practices to improve flu vaccine uptake, particularly in 2-4 year olds. Visits carried out to worst performing practices and action plans completed. Follow up telephone/email conversations to assure call and recall processes are being adhered to. Promote vaccination	September – December 2016	NHSE/CCG	NHSE doesn't communicate winter strategy in timely manner NHSE will inform all stakeholders re delays

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	Commission hospital to offer the flu and pertussis vaccinations to pregnant women	Increase in reported rates on flu and pertussis vaccine uptake.	to carers. Commission the flu pharmacy scheme to improve access for patients. Recruited nurses for delivery on 2 sites, Barnet and Royal Free Hospitals	October 2016	Maternity services	Unable to recruit long term
Communication, Stakeholder & Community Engagement (Including Voluntary Sector)	Information relating to immunisation programmes are disseminated to all key stakeholders e.g. changes to the schedule and introduction of new programmes across the health care system	Improved communications with all stake holders	NHSE, LA, CCG and PHE will liaise. Any communications to go out can be sent to CCG for bulletin. LA to insert links to NHS Choices from the council website.	As required	NHSE/LA- Natalia Clifford , CCG-Robin Sandler	NHSE doesn't communicate winter strategy in timely manner

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	Flu immunisations, shingles and pneumococcal vaccinations are promoted in all care homes and included as a requirement in LA contracts with providers of social care services.	Contributes to increased uptake of winter vaccination uptake i.e. flu, shingles and PPV within these populations	Leaflets promoting immunisations are included in information packs. Immunisations are promoted to care homes	Sep 2016	LA	Information is not disseminated in a timely manner
	All Ofsted registered child care providers, nurseries and preschools promote and check immunisation status of the children they care for. Children's Centres engaged in promoting immunisations and vaccinations for families	Increased numbers of children have completed the childhood immunisation programme by age 5 Greater awareness about the childhood immunisation programmes and other vaccination programmes.	LA to work with childcare providers on the importance of having children immunised and mechanisms to remind parents of the childhood immunisation programme schedule to ensure it is completed before starting school. Information sessions on immunisation; staff trained to provide information with parent/baby groups and other users.	Ongoing	LA public health	Childcare managers and providers do not see the importance – this can be mitigated by regular information sessions through existing communication mechanisms used by LA. Immunisation not high on the agenda for children's centres - availability of informal training of staff in understanding the benefits of immunisation

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