

Prenatal pertussis vaccine uptake surveys 2012/13

User guide for submitting data via the ImmForm website

This collection has received approval from the Review of Central Returns Steering Committee (ROCR) – ROCR/OR/2175/001MAND

| | |
|---------|-----------------|
| Version | 1.0 |
| Date | 19 October 2012 |
| Status | FINAL |

DH INFORMATION READER BOX

| | | |
|---------------------------|----------------------------|-----------------------------------|
| Policy | Clinical | Estates |
| HR / Workforce Management | Commissioner Development | IM & T |
| Planning / Performance | Provider Development | Finance |
| | Improvement and Efficiency | Social Care / Partnership Working |

| | |
|----------------------------|--|
| Document Purpose | For Information |
| Gateway Reference | 18262 |
| Title | Prenatal Pertussis Vaccine Uptake Surveys 2012/2013: User Guide for submitting data via the ImmForm Website |
| Author | DH/HPA |
| Publication Date | 19 October 2012 |
| Target Audience | PCT prenatal pertussis vaccine uptake coordinators PCT immunisation leads SHA immunisation leads |
| Circulation List | |
| Description | <p>This document provides guidance for PCT Prenatal Pertussis vaccine-uptake coordinators on how to enter the vaccine uptake data for the temporary prenatal pertussis vaccine uptake survey 2012/13.</p> <p>This mandatory collection has received approval from the Review of Central Returns Steering Committee (ROCR) – ROCR/OR/2175/001MAND</p> |
| Cross Ref | N/A |
| Superseded Docs | N/A |
| Action Required | Monthly data to be returned on: 21/11/2012, 21/12/2012, 22/01/2013, 21/02/2013, 21/03/2013 |
| Timing | N/A |
| Contact Details | Chris Lucas Room 507 Wellington House London Email: pertussis@hpa.org.uk |
| For Recipient's Use | |

Contents

| | |
|--|----|
| 1. Change history | 4 |
| 2. Purpose of this document | 4 |
| 3. Overview of the prenatal pertussis immunisation programme | 5 |
| 4. Data collection | 6 |
| 4.1 Identifying the eligible cohort..... | 6 |
| 4.2 Determining the denominator | 6 |
| 4.3 Determining the numerator | 6 |
| 4.4 Data collection and collation options..... | 6 |
| 4.5 Local variation | 7 |
| 4.6 Data entry..... | 8 |
| 4.7 Read codes | 8 |
| 4.8 Dataset to be submitted to ImmForm..... | 9 |
| 4.9 ImmForm data collection frequency and dates | 9 |
| 4.10 Timely return of data | 10 |
| 4.11 Ensuring data quality..... | 10 |
| 4.12 How collected data will be used | 10 |
| 4.13 Publishing the data..... | 11 |
| 4.14 Questions and answers for PCT coordinators | 11 |
| 5. Overview of the ImmForm website | 13 |
| 6. Guide to submitting and reviewing data online | 14 |
| 6.1 Entering a return | 14 |
| 6.2 Reports..... | 18 |
| Appendix A Prenatal pertussis immunisation programme background | 19 |
| Appendix B Quick reference guide to collecting and submitting pertussis vaccination survey data..... | 21 |
| Appendix C Other guidance | 22 |
| Appendix D NHS organisation code amendments | 23 |
| Appendix E Key contacts..... | 24 |

1. Change history

| Version | Date | Description | Author |
|---------|----------|-------------|-------------|
| 1 | 19/10/12 | Final draft | Chris Lucas |

2. Purpose of this document

This document outlines guidance on the collection of data to inform prenatal pertussis public health actions. This collection is not designed to be used to inform GP payments.

This document provides high-level guidance on how a PCT might collect and collate data on the prenatal pertussis vaccination programme and specific instruction on how to submit vaccine coverage data via the ImmForm website. It also provides suggestions on how PCT immunisation coordinators and primary care will work together to collect local data. However, each PCT is responsible for implementing the prenatal pertussis vaccination programme according to its local needs. This guidance includes:

- an overview of the prenatal pertussis immunisation programme (section 3);
- an overview of the collection process and definitions of the data PCTs need to collect (section 4);
- the pre-requisites for using the ImmForm website (section 5);
- details on how to submit and review the data on-line (section 6);
- further background on the programme (Appendix A)
- a quick reference guide to collecting and submitting data (Appendix B)
- links to other guidance (Appendix C);
- NHS organisation code amendments (Appendix D); and
- key contacts for this survey (Appendix E).

3. Overview of the prenatal pertussis immunisation programme

Background information on the prenatal pertussis immunisation programme is available at **Appendix A** and also in the CMO letter at:

<http://www.dh.gov.uk/health/2012/09/whooping-cough-information/>

Please note that following feedback from the field and further investigation of the recording capabilities of GP IT systems, the denominator and numerator definitions have changed slightly to those specified in sections 4.2 Determining the denominator and 4.3 Determining the numerator. This guidance document supersedes the detail in the CMO letter.

To inform and monitor the temporary vaccination programme, it is important to collect data on vaccine uptake/coverage. This will allow:

- monitoring the progress of the temporary vaccination programme by DH, SHAs and PCTs
- support assessment by DH, SHAs and PCTs of the delivery and continuation of the programme until March 2013
- identification of areas where coverage is low
- provision of epidemiological data to allow assessment of the impact of the programme
- provision of information to the public and ministers.

4. Data collection

4.1 Identifying the eligible cohort

From 1 October 2012, the temporary prenatal pertussis vaccination programme will offer the pertussis-containing vaccine Repevax® to all pregnant women at or past week 28 of their pregnancy. GP practices will need to identify the eligible cohort through patient records. No new read codes will be used.

4.2 Determining the denominator

As part of the prenatal pertussis vaccination programme, GPs will have identified those women in their practice that are eligible for vaccination. The monthly denominator to be reported is pregnant women with an estimated date of delivery (EDD) in that month. GP records should record EDD in the woman's electronic health record. It is therefore important that, where women are vaccinated by alternate providers, such as maternity departments, records should be passed rapidly to the relevant GP practice and entered on to the GP system.

This denominator is different from that outlined in the CMO letter from 26 September 2012 and this document supersedes that definition.

4.3 Determining the numerator

The monthly numerator is the number of women identified in the denominator defined in 4.2 above who received a dose of Repevax® before the EDD. Data searches should be for read codes for pertussis-containing vaccine (see section 4.7) given since 1st October 2012 – this will exclude women who have had a pertussis-containing vaccine as a child or prior to the start of the programme.

This numerator is different to that outlined in the CMO letter from 26th September 2012 and this document supersedes that definition.

The monthly return should only include in the numerator doses given to women in the PCT's denominator. If a woman is the responsibility of PCT X, but receives her dose at a service (e.g. maternity) outside the PCT from PCT Y, her GP record should be updated and she should be included in the numerator for PCT X.

4.4 Data collection and collation options

The collection of prenatal pertussis vaccine uptake is mandatory under the terms of the ROCR Licence (ROCR/OR/2175/001MAND).

For the purposes of this collection, the PCT 'responsible population' is defined as follows:

- All pregnant women registered with a GP practice regardless of where they are resident, plus
- Any pregnant women not registered with a GP, who are resident within the PCT's statutory geographical boundary.

Cross-boundary working is a common practice within the NHS, and PCTs will already have processes for sharing information when people move from one PCT to another.

Women will be entitled to NHS services in accordance with their GP registration (or their area of residence should they not be registered with a GP). As GP delivery for the vaccine is recommended (with an option to involve midwives where appropriate), PCTs are encouraged to make arrangements for all eligible women to be immunised through GPs.

The required data may be collated from several sources identified by the PCT immunisation co-ordinator (or other designated person) and aggregated before manual entry by the PCT onto the ImmForm website.

The **most appropriate source of data is GP systems**. GPs should take reasonable steps to ensure that the medical records of all pregnant women in their practice have the following fields completed:

- (i) the EDD field and
- (ii) date of receipt of a pertussis-containing vaccine at or after week 28 of their pregnancy, regardless of the setting where the vaccine was administered.

Where vaccine has been given outside of the GP setting, a report should be returned to the woman's GP so her medical record can be updated in a timely manner. PCTs could then aggregate their GP datasets before manual entry onto the ImmForm website.

Alternatively, PCTs could collect the denominator and numerator data via maternity units, but these data would also need to include information on vaccines delivered in primary care before manual entry onto the ImmForm website. In this circumstance, the maternity units should also be instructed to pass on the record of the vaccination to the GP to make sure that the mother and child's vaccination history is complete on the GP system.

PCTs can decide what data collection to undertake, either through electronic patient data returns or paper returns. PCTs may wish to work with their IT providers to develop systems and processes to electronically capture data on pertussis-containing vaccines delivered to pregnant women through this programme and to enable an electronic submission of monthly data to the PCT co-ordinator (or other designated person) who can then manually submit PCT level data to the ImmForm website.

4.5 Local variation

As previously mentioned, there are potentially a number of scenarios for how data on prenatal pertussis vaccine coverage will be collected, collated and submitted by PCTs. This is because PCTs will implement this immunisation programme according to local needs. Although most PCTs will commission GP practices to provide this service, some may commission midwifery services as well where appropriate.

4.6 Data entry

Manually entering the data on-line via the ImmForm website is covered in detail in section 6.

4.7 Read codes

There are existing read codes to support the administration of Repevax®, across all versions of the terminology.

For the vaccine itself (for example):

- Read V2 and CTV3: n45q. | REPEVAX suspension for injection 0.5mL prefilled syringe

Additionally, there are codes for the vaccination procedure, for example:

- Read V2: '65I8.' | Low dose diphtheria, tetanus, five component acellular pertussis and inactivated polio vaccination
- CTV3: 'XaK4w' | Low dose diphtheria, tetanus, five component acellular pertussis and inactivated polio vaccination
- SNOMED CT: '414620004' | Low dose diphtheria, tetanus, five component acellular pertussis and inactivated polio vaccination (procedure)

However, to ensure a more complete data capture when extracting data on pertussis immunisation it may be advisable to use the higher hierarchical level codes for pertussis immunisation if available, as well as the codes above, such as:

- Read V2: '65I.' | DTP (triple) + polio vaccination
- CTV3: '65I.' | Diphtheria, pertussis and tetanus triple and polio vaccination (please note that 'XaK4w' above does not fall into this set so you will need to search for both).
- SNOMED CT: '170399005' | Pertussis vaccination (procedure)

4.8 Dataset to be submitted to ImmForm

An illustration of the monthly dataset is shown below. The blue fields are mandatory (i.e. PCTs will not be able to submit data without all blue fields being complete).

| No. of pregnant women with an estimated date of delivery in the survey month | No. of pregnant women with an estimated date of delivery in the survey month that received a dose of Repevax® | % Uptake (calculated) |
|--|---|-----------------------|
| X | Y | Z |
| Comments (optional) | | |
| | | |

To calculate vaccine uptake (Z) we require a count of all eligible women - 'X' (the denominator), and a count of all eligible women that received a dose of Repevax® - 'Y' (the numerator).

Key

The blue fields are enterable items that must be provided by PCTs.

The 'Comments' field in green is optional and may be left blank or used by the PCT to submit a comment.

The grey field is not enterable and is calculated automatically.

4.9 ImmForm data collection frequency and dates

Monthly surveys will run from the start of the programme (1 October 2012) to March 2013. Should the survey be extended past March 2013, it is likely that responsibility for data collection will pass from PCTs to the new NHSCB Local Area Teams.

There will be five monthly surveys during the 2012/13 financial year. Each monthly survey opens on the first day of each month, for the previous month's data. It will be open for 15 working days (i.e. adjustments will be made for weekends and public holidays). PCTs may wish to give providers a submission date before the survey 'End date' in order to allow time of data collation and checking.

| Survey month | Data from date (inclusive) | Data to date (inclusive) | Survey collection start date | Survey collection end date |
|---------------|----------------------------|--------------------------|------------------------------|----------------------------|
| October 2012 | 01 October 2012 | 31 October 2012 | 01 November 2012 | 21 November 2012 |
| November 2012 | 01 November 2012 | 30 November 2012 | 03 December 2012 | 21 December 2012 |
| December 2012 | 01 December 2012 | 31 December 2012 | 02 January 2013 | 22 January 2013 |
| January 2013 | 01 January 2013 | 31 January 2013 | 01 February 2013 | 21 February 2013 |
| February 2013 | 01 February 2013 | 28 February 2013 | 01 March 2013 | 21 March 2013 |

NOTES

1. All surveys are from the **start of the calendar month** (inclusive)
2. Each survey includes **data up until the survey month end** (inclusive)
3. The survey collection start date starts on the **first working day** of the month following the survey month
4. Note that these survey collection dates supersede those stated in the CMO letter.

4.10 Timely return of data

Accurate and complete data on the number of pregnant women in the denominator and the number of doses administered needs to be returned in a timely manner, to give an early indication of how well the programme is being implemented.

4.11 Ensuring data quality

Each PCT is responsible for the quality of the data they submit. In order to help PCTs submit accurate data there is in-built validation on the on-line entry forms on the ImmForm website. This includes a check that the numerator must always be less than or equal to the denominator and that these two items are entered as integers.

The Department of Health team will also run quality checks, querying uptake figures that appear significantly higher or lower than other PCTs, or are inconsistent with previous returns.

4.12 How collected data will be used

The data will allow DH and HPA to:

- monitor vaccine uptake in a timely manner
- in the longer term, evaluate the effectiveness of prenatal pertussis vaccination against disease in infants to inform the continuation/cessation of the programme.

4.13 Publishing the data

Once the monthly data has been collated it is intended for publication by DH and HPA.

4.14 Questions and answers for PCT coordinators

4.14.1 Why are there two vaccine data collections for this programme?

The purposes of the two data collections are different; one is for monitoring coverage (set out in the CMO letter), the other for GP payments (set out in the NHS Deputy Chief Executive letter), and the two sets of data will be submitted in different ways.

The current system for vaccine uptake data collection was briefly outlined in the letter 'Temporary programme of pertussis (whooping cough) vaccination of pregnant women' sent by the Chief Medical Officer, Professor Dame Sally C Davies on 26 September 2012. The denominator was defined as 'The number of women delivering a live infant (28 weeks and over) in the survey month' in the PCT. The numerator was 'The number of women delivering a live infant (28 weeks and over) in the survey month who received a dose of Repevax®'. **Following feedback from the field and further investigation of the recording capabilities of GP IT systems, the denominator and numerator definitions have changed to those specified above (see 4.2 Determining the denominator and 4.3 Determining the numerator).**

Additionally, the letter 'Commissioning the pertussis (whooping cough) vaccination programme for pregnant women' sent by David Flory CBE Deputy NHS Chief Executive outlined the data collection required for NES payments, as such:

X. Providers will monitor and report activity information via the locally approved PCT form on a monthly basis to be submitted by the deadline notified by the PCT. The activity information shall include:

a. A denominator 'Number pregnant patients (28 weeks and over)' which is the count of all pregnant women on the contractors register who reach or were already at the 28th week of their pregnancy from the start of the programme, updated periodically. Women who reached or were already at the 28th week of their pregnancy but were no longer pregnant by the time a vaccination was arranged should still be included in the denominator, as they were eligible at some point in time as per paragraph 9.1.

b. A numerator 'Number vaccinated with Repevax®' which is the count of all those within the denominator that were vaccinated with Repevax®.

4.14.2 Is it mandatory for PCTs to provide the data?

Yes. See section 4.4 Data collection and collation options above.

4.14.3 What are 'News items'?

The *News items* section of the ImmForm website (left hand side of the home page) is where we can post timely information to particular users about arising matters.

Please regularly check this section, as we will post important messages here for PCT coordinators regarding this and other surveys.

4.14.4 Can I amend data after I've entered it?

Yes, but you can only do this during the period the survey is open (see 4.9 ImmForm data collection frequency and dates).

4.14.5 Can I see a summary of the data submitted and the calculated uptake?

Yes, once you have typed data into the fields, the uptake expressed as a percentage will be calculated and displayed next to it. If you alter the data, the uptake will be recalculated. You can go back to this page in the survey form to view your figures, even once the survey is closed.

4.14.6 Can I see how my PCT is doing in comparison with others?

Yes. The anonymous bar graph report is available on the ImmForm website, see section 6.2.2 Anonymous comparison report. This function will be accessible on the main survey menu page. You will be able to see your own PCT in relation to other PCTs (anonymously).

4.14.7 Can these data be used to help PCTs performance manage prenatal pertussis immunisation?

Yes. PCTs are encouraged to examine uptake rates and identify the differences in terms of completion rates and access. Closer examination of data may help prioritise action needed to improve uptake rates. PCTs may wish to use local indicators and targets to help monitor services and quality.

4.14.8 Are data being collected on the number of people that decline the offer of a prenatal pertussis vaccination?

No. Experience with other immunisation campaigns indicate these data are not reliable since they are not nationally representative.

DH does not collect consent data for immunisation programmes. Instead, DH uses targeted research to investigate why uptake is low. This is a tried and tested process that has been used for previous immunisation programmes.

4.14.9 Can I send paper returns?

No. We are not accepting paper returns. All data has to be submitted via the ImmForm website. Data sent via any means other than through the ImmForm website, will NOT be accepted.

This is in line with the NHS policy for transfers of data within the NHS to be sent electronically from 2005.

4.14.10 What happens if a woman changes PCT – which PCT's denominator/ numerator should she be recorded under

The GP practice where she is registered when she is due should be the one that includes her in the denominator and therefore returns data to the PCT.

4.14.11 Are we correct in assuming that for the monthly return we just count pregnant women at or over week 28 of their pregnancy in the PCT?

Only women with their estimated date of delivery within the survey month should be included in the denominator and numerator. Refer to paragraphs 4.2 Determining the denominator and 4.3 Determining the numerator.

4.14.12 Do we need to include females that have died during the programme?

If the woman died during the course of the month they should be excluded from the denominator and therefore excluded from the numerator.

5. Overview of the ImmForm website

The ImmForm website is used, amongst other things, to submit prenatal pertussis vaccine uptake data. Detailed guidance on a number of common functions of ImmForm have been developed and are listed below along with links to the [ImmForm Help sheets](#).

For more information about how to use ImmForm, please refer to the following help sheets.

- [Helpsheet 0: What is ImmForm? \(PDF, 97K\)](#)
- [Helpsheet 1: The ImmForm Helpdesk \(PDF, 33K\)](#)
- [Helpsheet 2: System requirements \(PDF, 35K\)](#)
- [Helpsheet 3: Troubleshooting \(PDF, 139K\)](#)
- [Helpsheet 6: Contact points \(PDF, 61K\)](#)
- [Helpsheet 8: How to register \(PDF, 673K\)](#)
- [Helpsheet 9: Changes to ImmForm registration details \(PDF, 43K\)](#)
- [Helpsheet 10: Passwords \(PDF, 70K\)](#)
- [Helpsheet 11: Printing \(PDF, 73K\)](#)

6. Guide to submitting and reviewing data online

Logging on and opening the prenatal pertussis immunisation return

1. Login to the ImmForm website

<https://www.immform.dh.gov.uk/>

2. The PCT menu looks like the screen shot below

Click on 'Surveys' found on the top toolbar. Access data entry for the appropriate month via links on the left hand side column. The screen below shows the monthly surveys and gives you the opportunity of selecting the relevant month for which you wish to enter data. On the website, only the current survey month (which the page will automatically default to) plus any other previous survey month that have already been completed, will be visible at any given time.

The screenshot displays the ImmForm website interface. At the top, there is a blue header with the 'immForm' logo on the left and the 'NHS' logo on the right. Below the header, a navigation bar contains links for 'Home', 'Surveys', 'Feedback', 'FAQ', 'Useful Links', 'About Us', and 'Change My Details'. A red banner in the center of the navigation bar reads 'You are on System Test Environment!'. The main content area is divided into a left sidebar and a main panel. The sidebar, titled 'Surveys', lists two survey options: 'November 2012 (data from 1/10/12 to 30/11/12 inclusive)' and 'October 2012 (data from 1/10/12 to 31/10/12 inclusive)'. The October 2012 option is circled in red. The main panel shows the selected survey details: 'Pertussis Vaccine Uptake for Pregnant Women 2012/13'. It indicates the 'Currently Selected Survey: October 2012 (data from 1/10/12 to 31/10/12 inclusive)' and the 'Selected Organisation: [redacted]'. Below this, there are sections for 'Survey Link' (with a 'Submit/Amend/View survey data' link), 'Reports' (listing 'PCT All Months Campaign Report', 'PCT Full Report', and 'PCT Anonymous Comparison Report'), and 'Other Surveys' (with a link to 'November 2012 (data from 1/10/12 to 30/11/12 inclusive)'). The footer contains links for 'Terms of Use', 'Privacy Policy', 'Cookie Policy', 'Help', and 'Email us', along with the 'ImmForm helpdesk: 0844 376 0040' and version information.

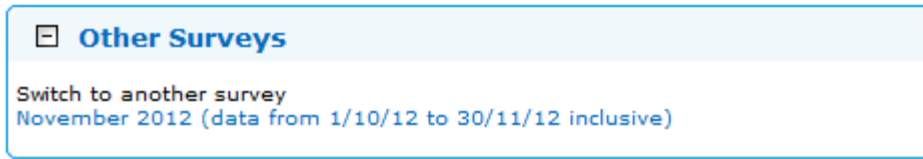
6.1 Entering a return

6.1.1 Select Pertussis pregnant women vaccine coverage campaign 2012/13 and the specific month

Click on the link for your PCT under the relevant prenatal Pertussis Immunisation monthly survey as appropriate. In the example above, the monthly survey is highlighted and the October survey selected.

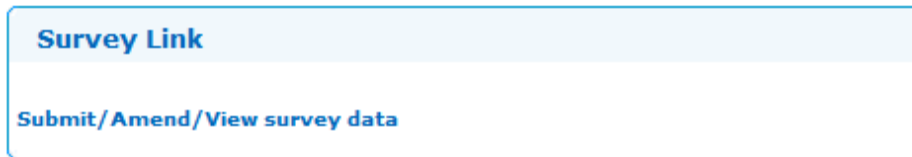
6.1.2 Select the survey month

Select the appropriate month if necessary – in the example below. The survey can be changed by clicking on any of the blue links under ‘**Switch to another survey**’.



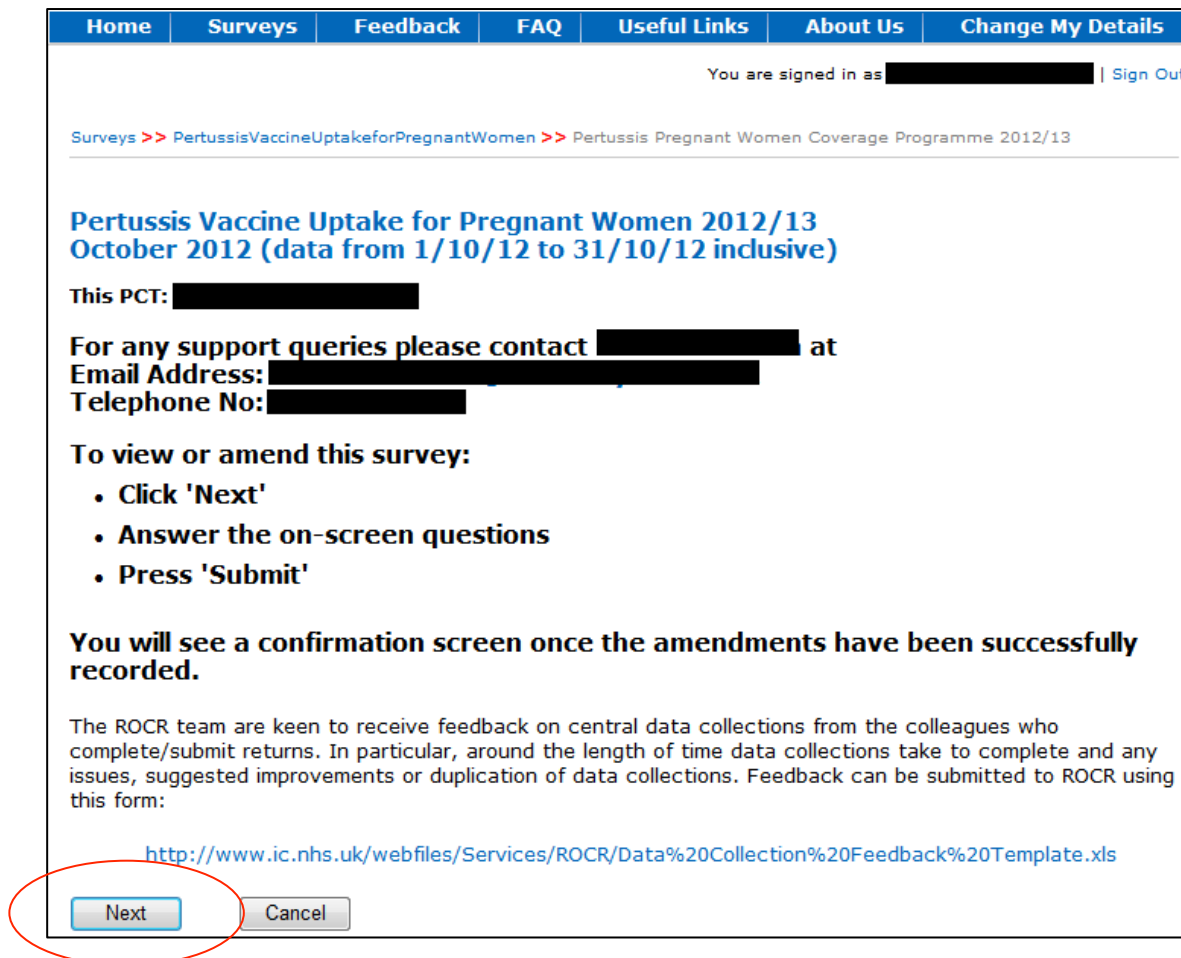
6.1.3 Select the ‘Submit/amend/view survey data’ option

To submit data or view and/or amend data you have already posted, click on ‘**Submit/amend/view survey data**’



6.1.4 Survey covering page

Confirm that the correct month and PCT are selected and Click on ‘Next’, or click on ‘Back’ to return to previous page.



6.1.5 Survey form

You will then see the data entry form as below.

| | | | | | | |
|----------------------|-------------------------|--------------------------|---------------------|------------------------------|--------------------------|-----------------------------------|
| Home | Surveys | Feedback | FAQ | Useful Links | About Us | Change My Details |
|----------------------|-------------------------|--------------------------|---------------------|------------------------------|--------------------------|-----------------------------------|

You are signed in as [redacted] | [Sign Out](#)

[Surveys](#) >> [PertussisVaccineUptakeforPregnantWomen](#) >> [Pertussis Pregnant Women Coverage Programme 2012/13](#)

Pertussis Vaccine Uptake for Pregnant Women 2012/13 October 2012 (data from 1/10/12 to 31/10/12 inclusive)

This PCT: [redacted]

To record any changes you make to this form, press the submit button

Mandatory Fields

| No. of pregnant women with an estimated date of delivery in the survey month | No. of pregnant women with an estimated date of delivery in the survey month that received a dose of Repevax® | % Uptake (calculated) |
|--|---|-----------------------|
| <input type="text" value="100"/> | <input type="text" value="83"/> | 83.0 |

Comments (Optional)
test data!

Audit Records

| Date of Action | User | Action |
|---------------------|------------|--------------------|
| 16/10/2012 13:56:48 | [redacted] | Form Updated |
| 16/10/2012 11:47:31 | [redacted] | New Form Completed |

Click on the ~~Submit~~ button to save your survey details and then wait for a confirmation message.

Complete the data fields, as described. After entering the required numbers, click on the 'Submit' button at the bottom of the screen.

You should then get a confirmation message but where errors have occurred, instructions regarding the fields requiring further attention will be shown, as follows:

There has been a problem submitting your survey data. The following problems have been encountered:

The following data fields failed validation checks:

- No. of pregnant women with an estimated date of delivery in the survey month that received a dose of Repevax® must be less than or equal to No. of pregnant women with an estimated date of delivery in the survey month. Please amend this value.

To record any changes you make to this form, press the submit button

Mandatory Fields

| No. of pregnant women with an estimated date of delivery in the survey month | No. of pregnant women with an estimated date of delivery in the survey month that received a dose of Repevax® | % Uptake (calculated) |
|--|---|-----------------------|
| <input type="text" value="100"/> | <input type="text" value="183 *"/> | 183.0 |

6.1.6 Submission confirmation page

Once the data is accepted a page confirming the successful entry is displayed. It is here you have the option of extracting the data you submitted to Excel, using the 'Click here to export the data you have saved to Excel' link. This can be done in either a 'Portrait' or 'Landscape' layout.

The screenshot shows a web application interface with a blue navigation bar containing links: Home, Surveys, Feedback, FAQ, Useful Links, About Us, and Change My Details. Below the navigation bar, it indicates the user is signed in as [redacted] with a Sign Out link. The breadcrumb trail reads: Surveys >> PertussisVaccineUptakeforPregnantWomen >> Pertussis Pregnant Women Coverage Programme 2012/13. The main heading is "Pertussis Vaccine Uptake for Pregnant Women 2012/13 October 2012 (data from 1/10/12 to 31/10/12 inclusive)". Below this, it shows "This PCT: [redacted]", "Upload Result:", "Date: 16 October 2012", and "Survey: Pertussis Vaccine Uptake for Pregnant Women 2012/13 October 2012 (data from 1/10/12 to 31/10/12 inclusive)". The "Organisation:" field is also redacted. A red message says "Thank you for submitting data for this survey". Below that, it says "Please press OK to continue." and provides a URL for feedback: <http://www.ic.nhs.uk/webfiles/Services/ROCR/Data%20Collection%20Feedback%20Template.xls>. An "OK" button is present. At the bottom, two links are circled in red: "Click here to export the data you have saved to Excel(Portrait)" and "Click here to export the data you have saved to Excel(Landscape)".


6.2 Reports

6.2.1 PCT All months campaign report

This report shows the monthly data of the whole campaign for your PCT, by month.

Pertussis Vaccine Uptake for Pregnant Women 2012/13
October 2012 (data from 1/10/12 to 31/10/12 inclusive)
PCT All Months Campaign Report For [REDACTED]

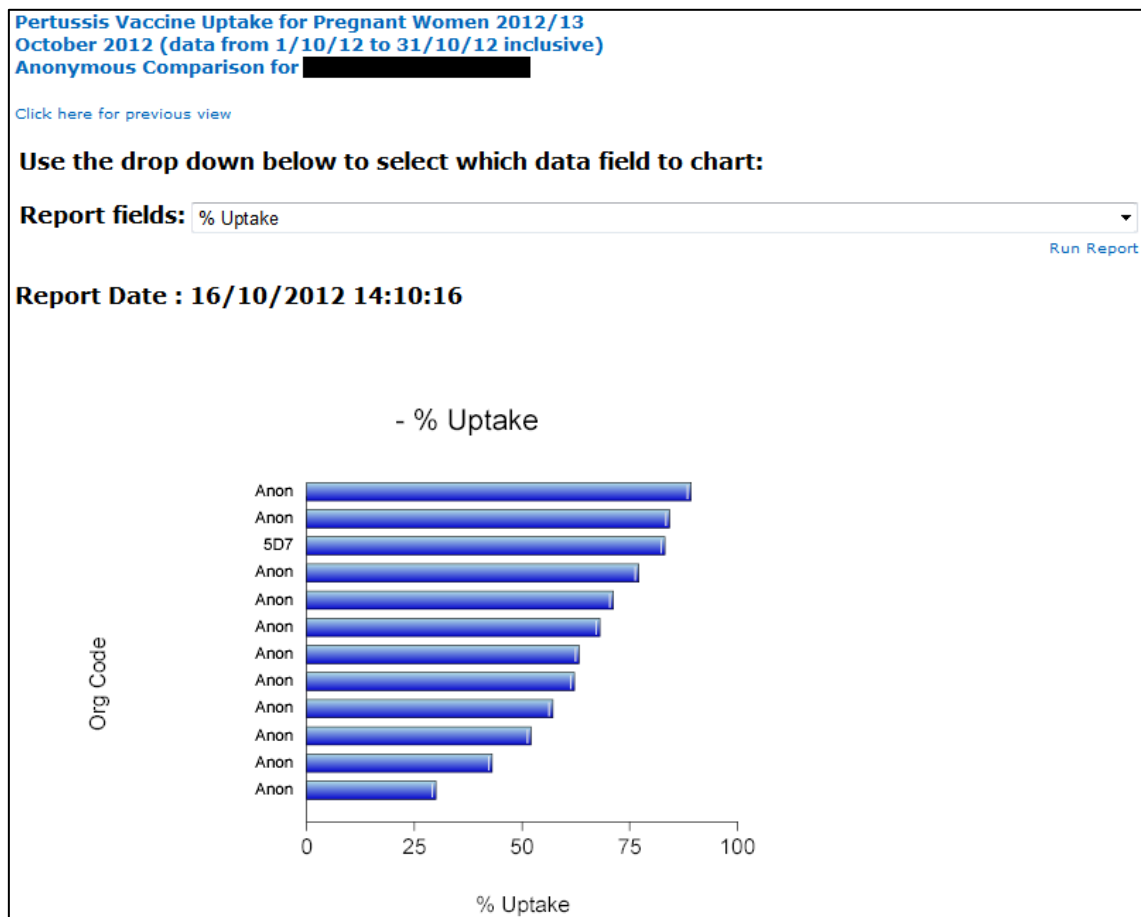
Report Date : 16/10/2012 14:01:56



| Month | No. of PCTs responding | No. of pregnant women with an estimated date of delivery in the survey month | No. of pregnant women with an estimated date of delivery in the survey month that received a dose of Repevax® | % Uptake | Comments |
|---|------------------------|--|---|----------|------------|
| October 2012 (data from 1/10/12 to 31/10/12 inclusive) | 1 | 100 | 83 | 83.0 | test data! |
| November 2012 (data from 1/10/12 to 30/11/12 inclusive) | 0 | -- | -- | -- | |

6.2.2 Anonymous comparison report

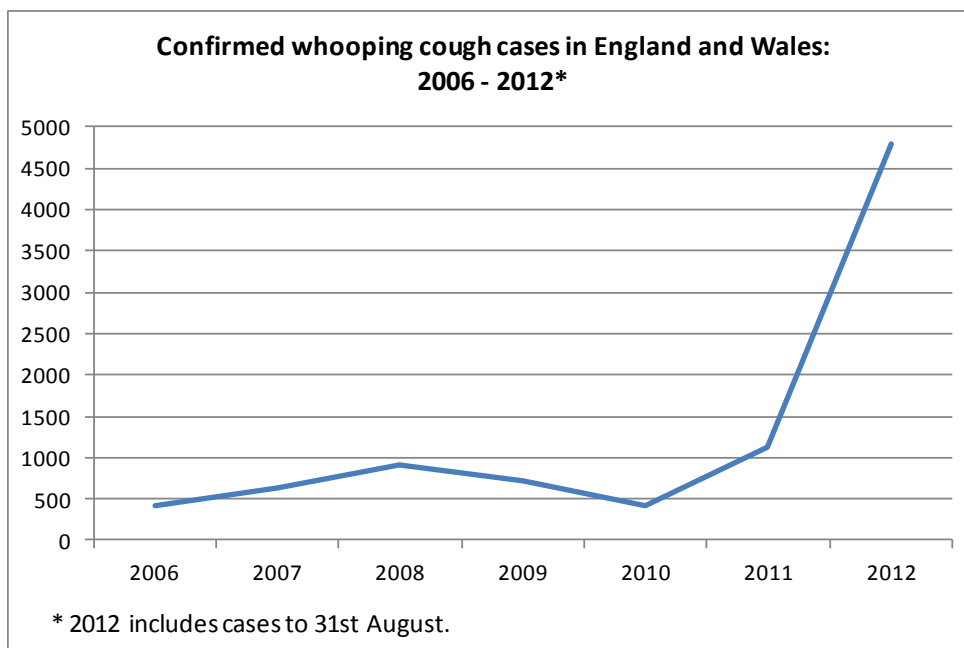
PCTs are able to compare their prenatal pertussis vaccine uptake anonymously with other PCTs within the same SHA.

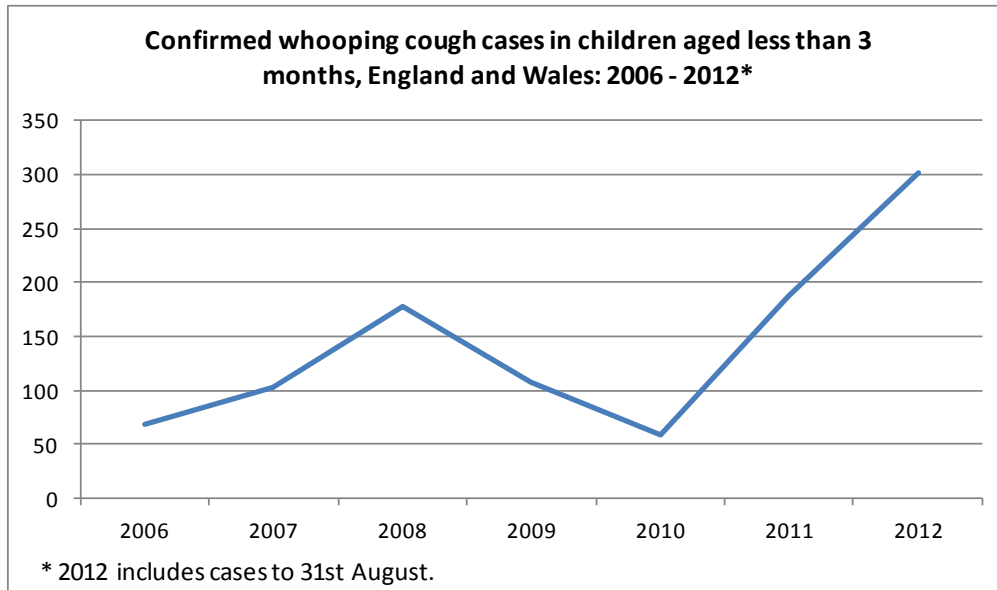


Appendix A Prenatal pertussis immunisation programme background

The routine childhood immunisation programme has been very effective in reducing the overall numbers of cases of pertussis. Before the introduction of routine immunisation against pertussis in the 1950s, large epidemics occurred every three to five years that affected up to 150,000 people and contributed to about 300 deaths each year in the UK. In comparison, over the last ten years (2002 to 2011) there have been on average 800 cases of pertussis with over 300 babies needing admission to hospital and four babies dying each year in England and Wales.

However, there has been a considerable increase in pertussis activity in the UK starting in mid-2011. The current national outbreak is the largest seen in the UK for over a decade with a total of 4791 cases confirmed so far this year in England and Wales. The greatest numbers of cases are in adolescents and young adults but the highest rates of disease are in infants less than three months of age. The latter are at highest risk of complications and death and are too young to be protected through routine vaccination. In 2012, there have been nine deaths in England up to 1 September 2012 – all in infants below the age of vaccination.





The Joint Committee on Vaccination and Immunisation (JCVI) advised that a temporary programme of immunisation of women in later stages of pregnancy be implemented. The purpose of the programme is to boost antibodies in the vaccinated women in late pregnancy, so that pertussis specific antibodies are passed from the mother to her baby. This aims to protect the infant before routine immunisation can be started at eight weeks of age.

The advice of JCVI is available at: <http://transparency.dh.gov.uk/category/minutes-2/jcvi-minutes/>

The JCVI advice was accepted and the prenatal pertussis immunisation programme was announced on 27 September 2012, and since this date pertussis vaccination should be offered to all pregnant women who reach or were already at week 28 of their pregnancy, unless immunisation is contraindicated.

Appendix B Quick reference guide to collecting and submitting pertussis vaccination survey data

Easy Reference Guide to reporting

Monthly Prenatal Pertussis Vaccination Coverage Survey

- a. Login to IMMFORM on <https://www.immform.dh.gov.uk/>
- b. Choose Survey 'Pertussis pregnant women vaccine coverage campaign 2012/13'
- c. Confirm the Survey month
- d. Select 'Submit/amend/view survey data' option
- e. On the 'Survey covering page' confirm correct month and PCT are selected and Click 'Next'
- f. Complete the form online

| Field | GPs need to | Other services offering vaccination need to | PCTs need to |
|--|--|---|---|
| No. of pregnant women with an estimated date of delivery in the survey month | Review GP patient records and return numbers to PCT. | n/a | Collate returns and manually enter using ImmForm. |
| No. of pregnant women with an estimated date of delivery in the survey month that received a dose of Repevax®. | Review GP patient records and return numbers to PCT. | Ensure records of vaccination are returned to GPs in a timely manner. | Collate returns and manually enter using ImmForm. |
| Comments (optional) | n/a | n/a | Please add optional text about data reported, or any other relevant info around your data collection. |

- g. Please check your data and press 'submit'.
- h. Please download a copy of the submitted data for your own records.

Queries

For website login issues, please call the DH Immform Team on 0844 376 0040 or email at immform@dh.gsi.gov.uk

Appendix C Other guidance

The following guidance is available:

- DH guidance on consent is given at www.dh.gov.uk/ Search for consent
- More information on vaccine issues can be found in the monthly newsletter Vaccine Update <http://immunisation.dh.gov.uk/tag/vaccine-update/>
- Any queries on vaccine procurement, storage or distribution should be emailed to vaccine.supply@dh.gsi.gov.uk
- Guidance on Information security management NHS code of practice: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_074142
- Guidance on NHS information governance guidance on legal and professional obligations: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_079616
- Any queries about the prenatal pertussis immunisation programme should be made on-line at <http://www.dh.gov.uk/health/contact-dh/>.

Appendix D NHS organisation code amendments

ImmForm uses NHS organisation codes to identify uniquely SHAs, PCTs and GP Practices. Therefore, it is vital that we are notified of any changes, ideally in advance of any changes being made.

You should also notify the NHS Organisation Data Service (ODS). The best way to contact them is via the Exeter helpdesk **Exeter.helpdesk@nhs.net** or on 01392 251289 or on the address below.

Organisation Data Service
NHS Connecting for Health
Hexagon House
Pynes Hill
Rydon Lane
Exeter
Devon
EX2 5SE

For more information follow the link below:

www.connectingforhealth.nhs.uk/systemsandservices/data/ods/index_html/?searchterm=organisation%20Codes

Appendix E Key contacts

If you have any questions regarding the prenatal pertussis immunisation uptake data collection process, please contact your PCT immunisation coordinator in the first instance. You can also use the feedback facility function on the ImmForm website or email pertussis@hpa.org.uk.

To request passwords and/or amendments made to GP contact/practice details, please email the ImmForm team at immform@dh.gsi.gov.uk or call on 0844 376 0040.

If you have any questions related to policy; please address these to DH on-line at <http://www.dh.gov.uk/health/contact-dh/>