Childhood (two and three year olds) seasonal influenza vaccination programme

Service specification

July 2013







Childhood (two and three year olds) seasonal influenza vaccination programme

Introduction

- 1. This programme is directed at GP practices delivering vaccination and immunisation services in England.
- 2. This programme has been agreed between NHS Employers (on behalf of NHS England) and the General Practitioners Committee (GPC) of the British Medical Association (BMA). The service requirements are included at Annex 1.

Background

- 3. The Joint Committee on Vaccination and Immunisation (JCVI) has recommended that the seasonal influenza programme be extended to all children aged between two and 17 years. This is in order to lower the impact of influenza on children and lower influenza transmission to other children, adults and those in clinical risk groups at any age.
- 4. The roll out of this extended programme will be phased in over a period of time due to both vaccine supply and ensuring a manageable implementation process. The first patient cohort to be vaccinated will cover two and three year olds. The phasing will be informed by pilot sites and through collaboration between Public Health England, NHS England and the Department of Health (DH). Pilots this year (Autumn 2013) are looking at how the programme can be extended to pre-schools and primary schools (i.e. up to the age of 11 years). The current plan is to extend the roll out in 2014/15, with further piloting looking to roll out the programme to secondary schools.
- 5. It is anticipated that this extended programme will involve vaccinating approximately 1,340 000¹ patients in England (one year cohort).

Duration and patient cohort

6. The target timeframe for this programme is for three months from 1 September 2013 to 31 December 2013, in order to achieve maximum impact of the programme before influenza starts to circulate. However, as with the current seasonal influenza programme, practices may continue to vaccinate eligible patients until 31 March 2014, for whom they will receive payment.

2

¹ Based on ONS Statistics.

- 7. GP practices will be required to vaccinate all registered patients who attain the age of two and three years, but not yet four, on 1 September 2013 on either:
 - a proactive call basis, if not considered at-risk, or
 - a proactive call and recall basis, if considered at-risk².

It is expected that GP practices will be able to record all administered doses through a GPES extraction. Further details will be available once agreement has been reached between NHS England and the HSCIC on how best to utilise this service. In the event that GRES does not support this extraction, ImmForm would be used.

Vaccine

- 8. Fluenz® is the recommended vaccine and is administered as a nasal spray.
- 9. The vaccine has been centrally procured and GP practices will be able to order vaccines online via the ImmForm service.
- 10. One dose is required for patients in the cohort who are not included in an at-risk group and two doses for patients in the cohort who are included in an at-risk group. Where two doses of vaccine are to be administered, this must be done at least four weeks apart.
- 11. Any prescribing practitioner may administer the vaccine:
 - a. using Patient Group Directions (PGDs) it must be administered by a registered health care practitioner,
 - b. under Patient Specific Directions (PSDs) a non-registered individual may administer under the direction of the prescriber although the prescriber is still liable.
- 12. Where two and three year olds are contra-indicated to Fluenz®, contractors will be required to make an alternative 'Inactivated Trivalent Influenza Vaccine' (TIV) available. Inactivated TIVs which have already been ordered by practices for two and three year olds in clinical risk groups can be utilised for the contra-indicated two and three year olds. Practices will be reimbursed for this as per children in clinical risk groups. Practices experiencing difficulties in sourcing inactivated TIV for the contra-indicated two and three year olds should contact the ImmForm helpdesk on 0844 376 0040.

General Practice Extraction Service (GPES) extraction

13. GPES will extract data on a monthly basis from October 2013 relating to the number of patients on the practice's registered list, who attain the aged of two and three, but not yet four, on 1 September 2013 and who are recorded as being

² The at-risk groups will be defined in the NHS England, Public Health England and Department of Health letter which is in the process of being drafted. It will be sent out by NHS England in due course

- vaccinated against influenza during the period 1 September 2013 to 31 March 2014.
- 14. Read codes to enable the Calculating Quality Reporting Service (CQRS) to calculate payment based on the GPES extraction will be included in the October Read code release³.
- 15. The data on number of patients extracted by GPES is known as the monthly count.
- 16. The GPES extraction will be run monthly and provide a non-cumulative count restarting at the beginning of each month i.e. the extraction for September 2013 will include all counts of influenza vaccination (in the eligible patient cohort) from 1 September to 30 September 2013. The first GPES extraction will be run in October 2013.

Payment and validation

- 17. GP practices will receive an item of service (IOS) payment of £7.64 per dose in respect of each registered patient who attains the age of two and three, but not yet four, on 1 September 2013 and who is vaccinated during the seven month period from 1 September 2013 to 31 March 2014.
- 18. Payment will be based on a completed course of treatment, meaning that for at-risk patients this will be following the second dose of vaccine being administered.
- 19. GP practices will only be eligible for payment for this service in circumstances where all of the following requirements have been met:
 - a. The GP practice is contracted to provide vaccine and immunisations as part of Additional Services.
 - b. All patients in respect of whom payments are being claimed were on the GP practices registered list at the time the vaccine was administered.
 - c. The GP practice administered the vaccine to all patients in respect of whom payment is being claimed.
 - d. All patients in respect of whom payment is being claimed were within the cohort (as specified in paragraph 7) at the time the vaccine was administered.
 - e. The GP practice did not receive any payment from any other source in respect of the vaccine (should this be the case, then NHS England may reclaim any

³ The 2013/14 enhanced services guidance an audit requirements is currently in the process of being updated. If the descriptions and/or codes are available, they will be included for information. The updated guidance will be available to download from the NHS Employers website. http://www.nhsemployers.org/PayAndContracts/GeneralMedicalServicesContract/DirectedEnhancedServicesContract/Directe

es/Pages/EnhancedServices201314.aspx

- payments as set out in the paragraphs 25.1 and 25.2 of the Statement of Financial Entitlements⁴.
- f. The GP practice submits the claim within six months⁵ of administering the vaccine (NHS England may set aside this requirement if it considers it reasonable to do so).
- 20. NHS England area teams will offer this service to GP practices. GP practices who agree to participate will be required to indicate acceptance on the system to enable the CQRS to support payment for this programme.
- 21. CQRS will calculate the monthly payments based on the number of patients on the practices registered list, who attain the age of two and three, but not yet four, on 1 September 2013 and who are recorded as being vaccinated against influenza during the seven month period (1 September 2013 to 31 March 2014). The code being used to identify payment will be confirmed later this year.
- 22. Payment will be made based on the monthly count multiplied by £7.64:

monthly = number of patients, in the x £7.64 monthly count, who have been recording as having received the influenza vaccination within the qualifying criteria

- 23. The first GPES extraction will be run in October 2013 (providing the monthly counts for completed vaccination for September 2013) and on a monthly basis thereafter. Payments will be made within the month following.
- 24. NHS England will be responsible for post payment verification. This may include auditing claims of practices to ensure that they meet the requirements of this service, NHS England may make use of the additional information extracted by GPES on complete and incomplete vaccinations.
- 25. Administrative provisions relating to payments under this service are set out in Annex 2.

⁴ DH. NHS Primary Medical Services Directions 2013. https://www.gov.uk/government/publications/nhs-primary-medical-services-directions-2013

⁵ Only applicable if CQRS is not being used.

Annex 1: Service requirements for the childhood (two and three year olds) seasonal influenza programme

GP contractors providing this service will:

- 1. Vaccinate, with the appropriate dosage, all patients who attain the age of two and three, but not yet four, on 1 September 2013 on either:
 - a proactive call basis, if not considered at-risk, or
 - a proactive call and recall basis, if considered at-risk.
- 2. Take all reasonable steps to ensure that the medical records of patients receiving the childhood seasonal flu vaccination are kept up to date with regard to the immunisation status and in particular, includes:
 - a. any refusal of an offer of immunisation.
 - b. where an offer of immunisation is accepted:
 - I. details of consent to the immunisation (including persons that have consented on the patient's behalf and that person's relationship to the patient must also be recoded),
 - II. the batch number, expiry date and title of the vaccine,
 - III. the date of administration,
 - IV. where other vaccines are administered in close succession (for example influenza), the route of administration and the injection site of each vaccine,
 - V. any contra-indication to the vaccination or immunisation,
 - VI. any adverse reactions to the vaccination or immunisation.
- 3. Ensure that all healthcare professionals who are involved in administering the vaccine have:
 - a. referred to the clinical guidance in the Green Book, the safest way to protect individuals and communities from infectious diseases
 - b. the necessary experience, skills and training, including training with regard to the recognition and initial treatment of anaphylaxis.
- 4. Ensure all orders of vaccine are in line with national guidance, including adherence to any limits on stocks to be held at any one time. The vaccine for this programme will be centrally supplied and can be ordered online ImmForm as per other centrally supplied vaccines.

2013/14 Childhood seasonal influenza vaccination programme

- 5. Ensure all vaccines are stored in accordance with the manufacturer's instructions. All refrigerators in which the vaccines are stored should have a maximum/minimum thermometer and readings are to be taken and recorded from that thermometer on all working days.
- 6. Ensure that services are accessible, appropriate and sensitive to the need of all patients. No eligible patient shall be excluded or experience particular difficultly in accessing and effectively using this service due to their race, gender, disability, sexual orientation, religion and/or age.

Annex 2: Administrative provisions relating to payments under the childhood (two and three year olds) seasonal influenza programme

- 1. Payments under this service are to be treated for accounting and superannuation purposes as gross income of the GP practice in the financial year.
- 2. The amount calculated as payment for the financial year falls due on the last day of the month following the month during which the GP practice provides the information specified at paragraph 18 of this service specification.
- 3. Payment under this service, or any part thereof, will be made only if the GP practice satisfies the following conditions:
 - a. the GP practice must make available to NHS England any information under this service, which NHS England needs and the GP practice either has or could be reasonably expected to obtain,
 - b. the GP practice must make any returns required of it (whether computerised or otherwise) to the Exeter Registration System or CQRS, and do so promptly and fully; and,
 - c. all information supplied pursuant to or in accordance with this paragraph must be accurate.
- 4. If the GP practice does not satisfy any of the above conditions, NHS England may, in appropriate circumstances, withhold payment of any, or any part of, an amount due under this service that is otherwise payable.

Provisions relating to GP practices that terminate or withdraw from this service prior to 31 March 2014 (subject to the provisions below for termination attributable to a GP practice split or merger)

- 5. Where a GP practice has entered into the childhood (two and three year olds) seasonal influenza service but its primary medical care contract subsequently terminates or the GP practice withdraws from the service prior to 31 March 2014, the GP practice is entitled to a payment in respect of its participation if such a payment has not already been made, calculated in accordance with the provisions set out below. Any payment calculated will fall due on the last day of the month following the month during which the GP practice provides the information required.
- 6. In order to qualify for payment in respect of participation under this service, the GP practice must provide NHS England with the information specified at paragraph 18 (of this service specification) before payment will be made. This information should be provided in writing, within 28 days following the termination of the contract or the withdrawal from the enhanced services agreement.

7. The payment due to GP practices that terminate or withdraw from the service agreement prior to 31 March 2014 will be based on the number of vaccination given, prior to the termination or withdrawal.

Provisions relating to GP practices who merge or split

- 8. Where two or more GP practices merge or are formed following a contractual split of a single GP practice and as a result the registered population is combined or divided between new GP practice(s), the new GP practice(s) may enter into a new agreement to provide the childhood (two and three year olds) seasonal influenza service.
- 9. The service agreements of the GP practices that formed following a contractual merger, or the GP practice prior to contractual split, will be treated as having terminated and the entitlement of those GP practice(s) to any payment will be assessed on the basis of the provisions of paragraph 5 of this annex.
- 10. The entitlement to any payment(s) of the GP practice(s), formed following a contractual merger or split, entering into the agreement for the childhood (two and three year olds) seasonal influenza service, will be assessed and any new arrangements that may be agreed in writing with the NHS England will commence at the time the GP practice(s) starts to provide such arrangements.
- 11. Where that agreement is entered into and the arrangements commence within 28 days of the new GP practice(s) being formed, the new arrangements are deemed to have commenced on the date of the new GP practice(s) being formed. Payment will be assessed in line with paragraph 18 (of this service specification) as of this commencement date.

Provisions relating to non-standard splits and mergers

- 12. Where the GP practice participating in the service is subject to a split or a merger and:
 - a. the application of the provisions set out above in respect of splits or mergers would, in the reasonable opinion of NHS England, lead to an inequitable result; or,
 - b. the circumstances of the split or merger are such that the provisions set out in this section cannot be applied,

NHS England may, in consultation with the GP practice or GP practices concerned, agree to such payments as in NHS England's opinion are reasonable in all circumstances.

Queries process

Queries should be directed as follows:

- 1. Queries relating to Business Rules/coding queries should be sent to the HSCIC via enquiries@hscic.gov.uk_.Where required, the HSCIC will work with other key stakeholders to respond.
- 2. Policy, clinical and miscellaneous queries should be sent to:
 - NHS Employers for NHS England area teams via GMS@nhsemployers.org
 - GPC for general practice via info.gpc@bma.org.uk

If there are queries which cross the above areas, the recipient will liaise with the other relevant parties in order to resolve/respond. In addition, where a query has been directed incorrectly, the query will be redirected to the appropriate organisation to be dealt with.

NHS Employers

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www.bma.org.uk info.gpc@bma.org.uk

NHS England

www.england.nhs.uk

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