Influenza Vaccine Uptake (GP Patient Survey) Data Collection 2012/13

Dear PCT flu and immunisation coordinators,

The purpose of this letter is to confirm the details for the influenza vaccine uptake data collection (GP Patient survey) from GP practices for 2012/13.

The influenza vaccination programme for 2012/13 was set out in the CMO letter to the NHS dated 8 May 2012 (Gateway references 17488 and 17489), which can be accessed at the following link:


In addition, the Department of Health (DH) has set out operational arrangements and planning for the 2012/13 winter flu season in its 'Seasonal Flu Plan' dated 3 May 2012 (Gateway reference 17489), which can also be accessed from the DH website at the following link:


An updated version of the influenza chapter (chapter 19) of the Green Book ('Immunisation against infectious disease') was published on 24 August 2012 and is available to download at the following link:


Finally, the DH has produced a flu vaccination leaflet for 2012/13 that helps explain how individuals can protect themselves against flu this coming winter and why it is important for those at increased risk from flu, to get immunised. This leaflet can be accessed from the DH website at the following link:

http://immunisation.dh.gov.uk/flu-vac-leaflet-winter-201213/
Overview

Following the release of the CMO letter, we have now finalised the survey specification, dataset requirement and collection schedule for the 2012/13 influenza vaccine uptake surveys. These information materials can be accessed from the DH Immunisation website at the following link; http://immunisation.dh.gov.uk/flu-vac-uptake-gp-pats-surv-2012-13/

All GP practices are mandated under license from ROCR (ROCR/OR/0113/FT6/005/PMAND) to provide monthly vaccine uptake data (whether by automated or manual submission, though the completion of some fields is optional). The weekly sentinel survey will continue with a separate collection (with the same dataset) for GP practices that have data automatically extracted on their behalf via a GP IT software supplier. The collections will again be made via the DH ImmForm website.

Changes from last season

The survey and dataset for 2012/13 are the same as for 2011/12. The only changes are:

- The collection covers season 2012/13

Survey specification - key points

The following points should be noted:

1. The ‘at risk summary’ excludes otherwise healthy pregnant women (i.e. without other risk factors) and healthy carers, it should only contain patients in one or more of the clinical risk groups and if a patient is in more than one risk group, they are only counted once.

2. Denominators for those aged under 65 years are defined by their age on date of extraction, but for those aged 65 years or older, they are defined by their age at 31 March 2013 (see ‘birth date ranges’ for both the monthly and weekly surveys in the dataset requirement available on the DH website at the link above)

3. Pregnant women; defined as all women pregnant or becoming pregnant (in the first, second or third trimesters) as diagnosed by a medical professional (e.g. GP or midwife) during 1 September 2012 to 31 January 2013 (i.e. all those becoming pregnant before 1 September 2012 and still pregnant during 1 September 2012 to 31 January 2013 and all those becoming pregnant during 1 September 2012 to 31 January 2013). This is the same as last season.

4. Denominators for pregnant women are further delineated by those not in a clinical risk group and those in one or more clinical risk group(s). The denominators should include women who lose their pregnancy for whatever reason and those
that give birth during 1 September 2012 to 31 January 2013. Thus denominators could be regarded as over-exclusive as they may include women that become eligible and then ineligible before they can be vaccinated. Read codes need to be selected that code for women confirmed by a medical professional as pregnant. However no read codes would be required for loss/termination of pregnancy or birth for the data collection, although they are relevant to clinicians when scheduling and administering the vaccinations. It is important that clinical records for those that were pregnant but then ceased to be pregnant before 1 September 2012 are updated, such that they are not included in the denominator, thus artificially inflating the denominator. Practices should be encouraged to review their clinical records for pregnant women as well as for other clinical risk groups to maintain their accuracy. PRIMIS have again provided guidance on coding pregnant women and vaccinations of pregnant women in the ‘Seasonal Influenza Vaccine Uptake Reporting Specification’ released 2 August 2012 (see below for further information).

5. For ‘Carers’, this will apply to those that meet the definition of a carer¹, and are vaccinated solely by virtue of being a carer (i.e. they are not in a clinical risk group, not aged 65 or over and they are not pregnant).

6. ‘All Patients’ applies to all patients registered at the practice on the date of data extraction (denominator) and all those recorded as vaccinated with influenza vaccine (numerator). Although household contacts of the immunocompromised can be considered for vaccination, there is no clear, consistent way of classifying and identifying these individuals. Therefore, they cannot be included as a distinct group in the survey although any vaccinations given to this group will be included in the ‘All Patients’ count. Similarly, those vaccinated where a GP exercises clinical judgement that do not fall within a designated clinical risk group(s) will also be counted under the ‘All Patients’ criteria.

7. The data should include patients vaccinated by another healthcare provider if a record of the vaccination is been entered onto a GP’s system.

8. The data should exclude patients that were vaccinated, but are no longer registered at the practice (e.g. because they have changed practice or died).

9. All data are cumulative (i.e. total vaccinations administered from 1 September 2012 to the end of the month/week in question).

10. It is important to remind GP practices who have or are changing IT suppliers to turn off the automated extraction from their ‘old’ system and turn it on for their ‘new’ system. This is because we have had some instances in the past, where bulk upload data from their ‘old’ supplier has been submitted after the data from their ‘new’ system and it has been overwritten.

ROCR approval for collection of data from the NHS

The 2012/13 influenza vaccine uptake (GP patient survey) data collection has been approved by the Review of Central Returns Steering Committee (ROCR) under the licence ROCR/OR/0113/FT6/005/PMAND. This is for a part mandatory collection for four monthly surveys (November, December, January and February), from GP practices and PCTs (the completion of some fields is optional). The licence expiry date for this collection is 28 August 2013. For further information about this licence please contact rocr@ic.nhs.uk.

The ROCR team are keen to receive feedback on central data collections from the colleagues who complete/submit returns. In particular, around the length of time data collections take to complete and any issues, suggested improvements or duplication of data collections. Feedback can be submitted to ROCR using an online form: www.ic.nhs.uk/webfiles/Services/ROCR/Data%20Collection%20Feedback%20Template.xls

Dataset requirement

The dataset requirement for the influenza vaccine uptake collection 2012/13 is available from the DH Immunisation website at the link above. Please ensure you have also read and understood the adjoining validation rules/notes in conjunction with the dataset requirement.

We ask that every GP practice in England completes the 20 mandatory fields as required. In addition we also anticipate that the optional dataset will be completed by those practices that have access to the semi/fully automated extraction and upload facilities available to them. CHART library and online tools as well as MIQUEST query sets will once again be provided by the PRIMIS team to aid this collection; data providers who are already registered on the PRIMIS website will also need to ensure they sign up to the ‘PRIMIS Hub membership scheme’ in order to access these tools and services at the following link; http://www.primis.nottingham.ac.uk/index.php

Dataset validation rules

The validation rules and notes which should be read in conjunction with the dataset requirement are available from the DH website at the link provided above.

Weekly and monthly collections

The primary source of data is from GP practice systems only. It will be assumed that vaccinations given in other settings by other healthcare providers (e.g. pharmacies, special clinics) will be recorded onto GP systems in a timely manner. This is essential for maintaining the individual’s clinical record but also ensures a clear auditable trail to the original source of any data and will avoid double counting for the vaccine uptake survey. It may be that for some vaccinations where recording onto a GP system is difficult or slow (e.g. vaccinations of travelling communities or homeless)
recording of these vaccinations may be missed by the survey, although this is undesirable. For manual submission, where Primary Care Trusts (PCTs) have separated into commissioning and delivery functions, it is the responsibility of the commissioning function of the PCT to ensure that data are provided by each GP practice.

**Monthly surveys**

The collection will comprise four ‘all practice’ (i.e. automated and manual) monthly surveys for all cumulative data from 1 September 2012 to end of each survey month. The first full monthly all practice survey will take place in November for all vaccinations administered to end of 31 October 2012, the second in December for all vaccinations administered to end of 30 November 2012, the third in January for all vaccinations administered to end of 31 December 2012 and the final collection will take place in February for all vaccinations administered to end of 31 January 2013. The collection schedule is shown below and is also available alongside the dataset requirement from the DH website at the link provided above.

EMIS (LV platform/ EMIS WEB), iSoft, Microtest, TPP and InPS (Vision) will again be providing automated bulk upload and/or automated submissions from their practices direct to ImmForm.

PRIMIS will be providing a data upload service via their CHART tool; for more information you can contact PRIMIS+ via their website at [www.primis.nhs.uk/index.php/contact-us](http://www.primis.nhs.uk/index.php/contact-us)

**Weekly surveys**

We will also be operating the same weekly collection as last season, from a sentinel group of GP practices which usually accounts for at least 50+% or so practices where suppliers automatically extract data on their behalf. GP IT suppliers include EMIS (LV/WEB), iSoft, TPP and InPS (Vision). The weekly automated collection will begin from week 35 (week ending 2 September 2012) until week 04 (week ending 27 January 2013).

**Collection schedule (survey start and end dates) – see below**
**GP Practices Monthly Surveys collection dates**

<table>
<thead>
<tr>
<th>Survey Month</th>
<th>For data covering vaccinations administered up to date</th>
<th>Survey Start Date</th>
<th>XML Bulk Upload Submit Date</th>
<th>GP Survey End Date</th>
<th>PCT Survey End Date</th>
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<td>October</td>
<td>Wed 31/10/2012</td>
<td>Thu 01/11/2012</td>
<td>Fri 09/11/2012</td>
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<td>Tue 13/11/2012</td>
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<td>November</td>
<td>Fri 30/11/2012</td>
<td>Mon 03/12/2012</td>
<td>Tue 11/12/2012</td>
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<td>Mon 31/12/2012</td>
<td>Wed 02/01/2013</td>
<td>Thu 10/01/2013</td>
<td>Thu 10/01/2013</td>
<td>Mon 14/01/2013</td>
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<td>January</td>
<td>Thu 31/01/2013</td>
<td>Fri 01/02/2013</td>
<td>Mon 11/02/2013</td>
<td>Thu 14/02/2013</td>
<td>Tue 19/02/2013</td>
</tr>
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</table>

**Weekly Sentinel (Bulk or Web service upload)**

<table>
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<tr>
<th>Week No</th>
<th>Data up to Date</th>
<th>Submit Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
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<td>Mon 03/09/2012</td>
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<td>36</td>
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<td>Mon 10/09/2012</td>
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<td>37</td>
<td>Sun 16/09/2012</td>
<td>Mon 17/09/2012</td>
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<td>38</td>
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<td>Mon 21/01/2013</td>
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<td>4</td>
<td>Sun 27/01/2013</td>
<td>Mon 28/01/2013</td>
</tr>
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</table>

**ImmForm website**

The data will be collected through the DH ImmForm website, which can be accessed via [https://www.immform.dh.gov.uk/](https://www.immform.dh.gov.uk/) using existing logins and passwords, as used for the Pneumococcal (PPV) vaccine uptake and other surveys.
The service hours for ImmForm are 8:00 am to 6:00 pm Monday to Friday (except Bank Holidays). The website is usually available outside of these hours, but may be unavailable at any time outside of these hours, without notice, for essential maintenance. Several ImmForm ‘helpsheets’ are available, including troubleshooting, how to register, helpdesk etc at the following link;  
http://immunisation.dh.gov.uk/immform-helpsheets

**User guide and other guidance**

A user guide for GP practices and PCT immunisation/flu co-ordinators will be produced and circulated in due course, as well as being available to download from the DH Immunisation website.

This and other guidance and links to reference material will be available on the DH website at; http://immunisation.dh.gov.uk/ and http://www.dh.gov.uk/health/category/policy-areas/public-health/immunisation/  

**Read codes and guidance on pregnancy coding**

PRIMIS have been commissioned to provide the clinical risk group Read code specification for 2012/13. The final version was published 2 August 2012 and is available from the PRIMIS website at  
http://www.primis.nottingham.ac.uk/index.php/home.

It is also published on the DH Immunisation website at the following link; https://www.wp.dh.gov.uk/immunisation/files/2012/08/Seasonal_Flu_LQD_Specification_V4.2.0_Final.pdf

*It is important to note that there may be some individual patients who fall outside the listed Read codes who, based on the advice in the CMO letter and Green Book, should be offered flu vaccination. The data collection will use the Read codes to extract uptake data for the surveys.*

**Please note the Read code specification is for vaccine uptake monitoring purposes only. It is important that it is NOT used for recall or payment purposes. The pregnancy groups include patients who may have been eligible for a period of time but are no longer eligible. Due to the complications around recording pregnancy, other methods should be used if practices wish to identify patients who are at risk and require vaccination. Any results should be subject to clinical review.**

**Green book: influenza chapter updated**

The Department of Health’s handbook of immunisation practice and procedures in the UK *Immunisation against infectious disease* (‘the Green Book’) was updated to take account of recent developments relating to influenza. This was published on 24
August 2012. Please note the chapter may also be updated during the course of the flu season.

The updated chapter 19 on Influenza can be accessed via the DH website at the following link: http://immunisation.dh.gov.uk/green-book-chapters/chapter-19/

It provides guidance on the influenza vaccine programme (target groups, dosages, contraindications, precautions, adverse reactions, vaccine supplies, etc); there is also a general introduction to the history and epidemiology of the disease.

**Action required and feedback**

Please note the contents of this letter and cascade the information to your GP practices.

1. It is vital that we have up-to-date details for PCT flu coordinators and GP practices. Please let us know via immform@dh.gsi.gov.uk (or via the website feedback facility on the ImmForm website) of any changes to coordinator contacts, e-mail addresses, organisation codes, current GP practices etc.

   There is also a self-registration service available on ImmForm to register contacts at GP practices for vaccine ordering and/or providing vaccine uptake data. See the ImmForm helpsheets available from the DH website at the following link; http://immunisation.dh.gov.uk/immform-helpsheets.

2. We also check the NHS Organisation Data Service (ODS) website for any changes to organisations (see www.connectingforhealth.nhs.uk/systemsandservices/data/ods). GP practices that open, close, merge or split should notify ODS so any changes can be applied. We are aware in some cases, of practices that have split but continue to operate with just one organisational code and practices that have merged and continue to operate with two separate organisational codes. Both of these scenarios cause problems with data submission (and potentially with vaccine supply); therefore please make sure that each unique practice has a unique organisational code. Similarly, where a practice has split sites, please ensure that data are provided for the practice as a whole.

3. Notify us at influenza@hpa.org.uk if you do not plan to include provision for the vaccination of patients with ‘chronic liver disease’, ‘MS and other degenerative diseases of the CNS’ and for ‘carers’ under a Local Enhanced Service (LES). If your PCT will not be putting in place a LES to cover these groups, we will remove your data from the final national vaccine uptake figure for these particular risk groups.
Contact points

- Any queries concerning the flu vaccine uptake data collection content or process not covered in the user guide should be sent to influenza@hpa.org.uk.

- Requests for passwords to access the ImmForm website or changes to organisation codes, contacts etc or problems concerning the ImmForm website should be emailed to immform@dh.gsi.gov.uk.

- Should you have any policy or immunisation queries that are not addressed in the CMO letter or the Green Book, please address them to the Department of Health via the website at www.dh.gov.uk/en/ContactUs/DH_06631.

Influenza vaccine uptake (GP patient survey) report 2011/12

Thank you again for all your continuing efforts which resulted in the highest GP response rate ever achieved at 99.5%. The annual report presenting influenza vaccine uptake data for GP patient groups for winter 2011/12, was published on 26 June 2012 and is available to download from the DH website at the following link:


Yours sincerely

Fateha Begum

Fateha Begum
Surveillance Programme Coordinator
Influenza and Pneumococcal vaccine uptake monitoring
Respiratory Diseases Department
Health Protection Services, Colindale
Health Protection Agency
influenza@hpa.org.uk