

GP Bulletin

7th October 2016 / Issue 180

About this bulletin

To minimise the number of emails sent to practices, the Area Team is using this weekly bulletin as its main method of communicating with practice managers covering the 381 practices in Bristol, Somerset, North Somerset, South Gloucestershire, Devon, Cornwall and the Isles of Scilly. The bulletins contain important information for practice managers, which might include requests for information and deadlines, as well as updates on issues relating to GP contracts.

If you have any questions or wish to provide feedback, please contact the Primary Care Team:
england.primarycaremedical@nhs.net

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Key Deadlines

CQRS declarations for payment in the same month	9 th of each month	Via CQRS
Directed Enhanced Services Claims	10/10/2016	Submission of DES Claim Forms should be sent to – england.pcfincesw@nhs.net
Workforce Minimum Data Set Return	1/10/2016 – 26/10/2016	Submission via Primary Care Web Tool
General Practice Access Data	03/10/2016 – 31/10/2016	Submission via Primary Care Web Tool
AUA coding issues to be resolved	07/10/2016	Practices need to raise issues with Clinical System Suppliers
AUA Report	31/10/2016	Completed AUA reports to be returned to england.primarycaremedical@nhs.net

• Items for all Practices

General Practice Forward View Engagement Event

Spaces for the GP Practice Forward View Event at the China Fleet Country Club in Saltash on Tuesday, 11th October 2016 from 7 pm to 9.30 pm are still available. Please note that the online registration has now closed, but if you wish to register for this event please email your name, Practice Name and contact number to england.gpdevelopment@nhs.net

Package agreed to support General Practices

NHS England has made £3.3 million available to this area from the GP Resilience Fund (£917,000) in the current year and £458,000 for the following 3 years until 2019/20). There is also some funding for GPFV implementation. This has enabled NHSE South (South West) to agree a package of measures to support innovation and resilience in general practice across the South West.

The aim is to ensure that surgeries are sustainable in the face of rising financial and workload pressures.

Following consultation, different funding streams, including cash for vulnerable practices (Resilience Fund), will be channelled into:

1. Coordinated action by NHS England and local organisations, with investment in project and clinical leadership and in a network of local change managers who will work directly with

practices

2. Customised local support for each of the four STP areas, by agreeing delegation of the available funds to local level. The annual allocations are as follows: BNSSG £163,000, Somerset £92,000, Devon £195,000 and Cornwall £92,000. In addition each area will receive the same amount as an additional but non-recurrent budget in 2016/17. This will enable each STP area and its CCG's can to put a package of support in place which might include:
 - Continuing with the Primary Care Development Fund approach, so groups of practices can be supported in making themselves sustainable
 - Coordinated action to address workforce supply issues by, for example, sharing visiting services across practices or taking on salaried doctors to replace locums
 - Peer support and rapid intervention, perhaps along the lines of the model pioneered by NHS England to help practices that have been in difficulty or have had a poor CQC rating
 - Measures to increase workforce supply, perhaps by funding extra 'GP returners' or providing bursaries for the training of new types of staff such as physicians' assistants or emergency care practitioners

We will be working to get STP/CCG plans agreed as quickly as possible so that the funding gets out to local areas and in turn helps to support practices in greatest difficulty.

Sepsis Update

Please see the attached Sepsis Update for cascade to members of your team.

CQRS Seasonal Flu Vaccination Claims for September 2016

CQRS have received feedback from several GP clinical system suppliers and users in connection with the Seasonal Influenza vaccination programme 2016/17 (achievement period 1st September – 30th September). GP system clinical suppliers believe that as the rules for data collection are complex, it may be time consuming to accurately create local searches needed to enable practices to manually enter data.

As a result, in order to reduce workload within GP practices and minimise impact, GP practices are being offered the two following options for September data only:

1. Manual entry of data. GP practices can manually enter their September achievement data in October, if a timely payment is required. If GP practices choose this option, Regional Local Offices will need to financially approve this data no later than 4th November, to avoid the automated collection re-run overwriting this manually recorded data. **However, any declaration made after midday on Friday 7th October will not receive financial approval by Regional Local Office before 4th November so if you manually submit data now it will be overwritten by the automatic extraction planned for 4th November.**

2. Automated collection re-run. GP practices can wait until November, when a re-run of the September achievement data will be carried out on 4th November. This data will be available to view in CQRS on 8th November.

GP Patient Flu Uptake Surveys

As in previous years, data on flu vaccination uptake will be extracted from practice systems using:

- EMIS Health
- INPS (Vision)
- Microtest
- TPP (SystemOne)

The following schedule shows the dates these extractions happen followed by two days in which a practice can make a manual submission via ImmForm if required. NHS England has a further four days to submit extra information if required.

Survey Month	Data up to Date	Survey Start Date	GP IT Supplier Submit End Date	GP Submit End Date	NHS Eng. Submit End Date
October	31/10/2016	01/11/2016	09/11/2016	11/11/2016	15/11/2016
November	30/11/2016	01/12/2016	09/12/2016	13/12/2016	15/12/2016
December	31/12/2016	01/01/2017	11/01/2017	13/01/2017	17/01/2017
January	31/01/2017	01/02/2017	09/02/2017	14/02/2017	17/02/2017

Flu Vaccination in Pregnancy

We have been alerted that some GP surgeries may refuse to provide flu vaccination to pregnant women before 12 weeks gestation.

There may be reluctance on the part of immunisers to give flu vaccine in the first trimester given that up to 25% of pregnancies end in miscarriage with 70% of these occurring in the first trimester. Some women may link flu immunisation early pregnancy with a subsequent first trimester miscarriage.

However, we would like to take this opportunity to remind all practices that the national guideline published by PHE states:

“A review of studies on the safety of influenza vaccine in pregnancy concluded that inactivated influenza vaccine can be safely and effectively administered during any trimester of pregnancy and that no study to date has demonstrated an increased risk of either maternal complications or adverse foetal outcomes associated with inactivated influenza vaccine (Tamma et al., 2009).”

Source:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/456568/290439_4_Green_Book_Chapter_19_v10_0.pdf

If a woman wishes to have the vaccination before 12 weeks she should not be refused. Doing so could adversely affect women who become pregnant during the flu season and are eligible for

vaccination right up to the end of March. These women remain at risk of flu and complications from flu throughout their pregnancy.

Availability of Egg Free Flu Vaccine

Optaflu was an egg protein free flu vaccine used in previous years for those patients who were severely allergic. This is not available in 2016 – 2017.

With the exception of those individuals with a severe anaphylaxis to egg which has previously required intensive care, patients with less severe egg allergy can be immunised in any setting using an inactivated influenza vaccine with an ovalbumin content less than 0.12 micrograms/ml (equivalent to 0.06 micrograms for 0.5 ml dose). For those patients who have experienced severe anaphylaxis, a very strong case would need to be made for repeat administration.

Supplier	Name of product	Vaccine Type	Age indications	Ovalbumin content µg/ml (µg/dose)	Contact details
AstraZeneca UK Ltd	Fluenz Tetra ▼	Live attenuated, nasal	From 24 months to less than 18 years of age	≤1.2 (≤0.24/0.2ml dose)	Fluenz Tetra® for use in the national children flu programme should be ordered through ImmForm** Otherwise: 0845 139 0000
GSK	Fluarix™ Tetra ▼	Split virion inactivated virus	From 3 years	≤0.1 (≤0.05/0.5ml dose)	0800 221 441
MASTA	Imuvac®	Surface antigen, inactivated virus	From 6 months	0.2 (0.1/0.5ml dose)	0800 358 7468
	Inactivated Influenza Vaccine (Split Virion) BP	Split virion, inactivated virus	From 6 months	≤0.1 (≤0.05/0.5ml dose)	
Mylan (BGP Products)	Influvac®	Surface antigen, inactivated virus	From 6 months	0.2 (0.1/0.5ml dose)	0800 358 7468
	Imuvac®	Surface antigen, inactivated virus	From 6 months	0.2 (0.1/0.5ml dose)	
	Influenza vaccine, surface antigen, inactivated	Surface antigen, inactivated virus	From 6 months	0.2 (0.1/0.5ml dose)	
Pfizer Vaccines	CSL Inactivated Influenza Vaccine	Split virion, inactivated virus	From 5 years	≤2 (≤1/0.5ml dose)	0800 089 4033
	Enzira®	Split virion Inactivated virus	From 5 years	≤2 (≤1/0.5ml dose)	
Sanofi Pasteur MSD	Inactivated Influenza Vaccine (Split Virion) BP	Split virion, inactivated virus	From 6 months	≤0.1 (≤0.05/0.5ml dose)	0800 085 5511
	Intanza® 15 micrograms	Split virion, inactivated virus	60 years of age and over	≤0.24 (≤0.024/0.1ml dose)	
Seqirus Vaccines Ltd, formerly Novartis Vaccines	Agrippal®	Surface antigen, inactivated virus	From 6 months	≤0.4 (≤0.2/0.5mL dose)	08457 451 500

South West Flu Immunisation Programme for Children 2016/17

The attached document provides FAQs, a summary of the pathways for each eligible cohort and dates of the planned school immunisation sessions in each area.

- **Items for Bristol, North Somerset, Somerset and South Gloucestershire Practices only**

None

- **Items for Devon, Cornwall and Isles of Scilly Practices only**
School Aged Immunisations for vulnerable children – Cornwall Practices only

It has been brought to our attention that there has been some confusion whether GP practices can vaccinate school aged children or not. As you will be aware Kernow Health CIC has been commissioned to vaccinate all school aged children in Cornwall. They will be vaccinating in schools and also working to vaccinate children who are eligible (in terms of DOB) but not attending school (e.g. example home educated children, gypsy and travellers).

Whilst every effort will be made by Kernow Health CIC to vaccinate all eligible children, there will be occasions where it is more appropriate to vaccinate in your GP practice. This may be, for example, a looked after child who has moved frequently, or an unaccompanied asylum seeker. As in previous years practices are able to order vaccine through ImmForm (holding a maximum of two weeks' stock at any time). Full information, including payment information, can be found on the school immunisation pathways document circulated last month. If you have any queries on this, or would like us to resend the school immunisation pathways, please contact the screening and immunisations team on england.bnsssg.imms@nhs.net