



# Survey results from GP practices with high uptake for MMR vaccinations



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Screening and Immunisation team  
PHE/NHS E

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## Background and Summary:

At the beginning of 2018 the screening and immunisation team asked GP practices with high uptake (over 95% uptake for both doses of MMR at 5 years) to complete a survey for us to see if we could identify and share good practice.

In summary most of the high performers did not run immunisation clinics, but organised immunisations through general appointments. This means that the practices didn't have waiting lists and babies could be booked in on time.

This also meant that if a patient DNA'd an appointment the nurse knew about it straight away, as opposed to drop in clinics where they might not keep these lists to hand.

A large number of high performing practices also linked in with their health visitors around DNAs

A full summary of the findings can be found in the following pages.

Below is a summary from a recent CQC study which supports the findings of this survey.



### **Summary from CQC study: McGeown, H et al. Feb 2018. *Practice Nursing* 2018, Vol 29, No 3**

This qualitative study interviewed the staff from the 1% of London general practices that were rated as outstanding by CQC in order to find out what they do to achieve good quality vaccination services

#### **Table 1. Suggested actions to improve vaccination service delivery within a practice**

- Plan ahead
- Adopt a call–recall chain of escalation
- Be flexible to patient needs
- Strive for continuity of care
- Create a family-friendly practice
- Adopt a multi-disciplinary team approach
- Train and develop staff that will be responsible for ensuring uptake
- is optimised
- Use friendly competition
- Maintain accurate immunisations records

<https://www.magonlinelibrary.com/doi/10.12968/pnur.2018.29.3.135>

# Survey results

## **Immunisation Lead:**

**71% of the high performing practices had a designated immunisation lead at the practice**

**The immunisation lead can then ensure the following:**

- Make sure call/recall is working effectively
- Telephone reminders of appointments
- Telephone call to patients who have DNA'd
- Text message reminders to parents of appointment
- Offering flexibility with appointments
- Ensuring PGDs are up to date and staff have signed these
- Promoting 'Vaccine Update' e.g. taking this to team meetings
- Vaccine ordering and management of stock
- Promoting vaccinations at the surgery e.g. managing leaflets etc.
- Organising specific catch-up clinics to support ad hoc vaccination requests e.g. MenACWY for Year 13 students
- Checking coding is accurate
- Managing clinics
- Leading on immunisation queries for the practice
- Checking all immunisers are up to date with training
- Liaising with Health Visitors with patients who have DNA'd
- Working specifically with families with child protection issues
- Ensuring child health lists are accurate
- Checking Open Exeter data lists

**82% of high performing practices routinely check children and young people's immunisation status during health appointments and when they join the practice and offer any outstanding immunisations routine**

**Practices do this by:**

- Checking immunisation history when patients newly register at the practice
- Adding IT flags or pop-ups to assist with ad-hoc vaccinations
- Inviting patients with missing immunisations to immunisation clinics
- Using translation services to write to patients in their preferred language

**Practices regularly (at least quarterly) run searches of IT system to identify children/young adults with outstanding immunisations or who have not responded to invitations to ensure this is highlighted on their patient notes. Practices then manage this follow up by:**

- Recalling patients by letter, text, phone call or email
- Contact Health Visitors to make them aware
- Option to decline after 4<sup>th</sup> DNA
- Offer flexible appointments
- Offer the opportunity to speak to the immunisations lead

### **High performing practices avoid vaccination waiting lists in the following ways:**

- Many high performing practices do not run immunisation clinics, all immunisations are given by flexible appointments
- If patients can't make the immunisation clinics they are given flexible appointments at any time
- Only dedicated clinic for 8 week immunisations, flexible for all other immunisations
- Clinics are regularly reviewed by practice nurses and practice manager
- Offering appointments to parents 3-4 weeks prior to the immunisation being due
- Running clinics over different days and times
- Saturday clinics run once a month
- Regular discussions with child health
- Immunisation appointments take priority over other appointments

### **If a child DNAs their immunisation appointment high performing practices manage this in the following ways:**

- Call the parents (26/39)
- Personal letters (15/39)
- Support from Health Visitor (14/39)
- IT pop-ups to assist opportunistic vaccination (5/39)
- Text message reminders (3/39)
- Identified through routine searches (2/39)
- Discussed at team meetings (1/39)

**It was significant to note that 84% of high performing practices ensured that their immunisers completed the 2 day core immunisations training and attended annual updates as per training guidance.**

### **They also used the following additional training resources:**

- Online screening and immunisation team updates (e.g. hexavalent training)
- Attended locality immunisation meeting
- In house updates when there are vaccine changes
- Updates at practice nurse forums

### **Resources and contact details:**

**Screening and Immunisation Team Email:** [england.swscreeningandimms@nhs.net](mailto:england.swscreeningandimms@nhs.net)

#### **Leaflets:**

- <https://www.gov.uk/government/publications/measles-protect-yourself-protect-others>
- <https://www.gov.uk/government/publications/mmr-for-all-general-leaflet>

**NHS Choices:** <https://www.nhs.uk/conditions/vaccinations/mmr-vaccine/>

**NICE guidance:** <https://www.nice.org.uk/guidance/qs145/documents/draft-quality-standard-2>

**Oxford Vaccine Group:** <http://vk.ovg.ox.ac.uk/>