

South West Public Health

Section 7a Screening & Immunisations Bulletin



Issue 111: 17th October 2022

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ICARS Newsletter 13.10.22

Please find this week's ICARS newsletter attached to this email.

National cervical screening ceasing audit - phase 2

There are 3,201 individuals in England who are recorded on the National Cervical Screening Call and Recall IT system as ceased from the NHS Cervical Screening Programme since 1st April 2010 for one of the following ceasing reasons:

- **Radiotherapy (to note that patients ceased for this reason do not receive a letter confirming their ceasing)**
- Mental Capacity Act (MCA) and there is no record that a ceasing notification letter was sent.

Further to the update on the national ceasing audit provided in the national Primary Care Bulletin on 23/09/2022, CSAS has now contacted practices to request action to support the final stage of the audit.

Action required:

If you have received an audit request from CSAS it should be actioned and returned as per the timescales outlined in the communication from CSAS. It is important that practices respond to the audit request as this will reduce clinical risks by ensuring no patients been incorrectly ceased from the programme.

URGENT - ACTION REQUIRED: Adult and Childhood Seasonal Flu Claims - Communication 2

Please note that we will be expecting automated uploads from the GP System Suppliers on Tuesday, 11th October 2022 for the first monthly seasonal flu vaccine uptake data collection. Please ensure your data providers have their automated uploads capacity switched on in their GP practices, if they are not sure, please ask them to contact their GP System Supplier to enable this function in good time.

Update

******Important Information******

Issues impacting Adult and Childhood Seasonal Flu Extracts for September

Please note, this communication relates only to the GPES extraction in as far as it impacts on CQRS. Issues with the extraction that feeds the ImmForm data are being dealt with separately

Dear Practice Manager,

Following on from the communication sent to practices on 12 October regarding issues identified with the September seasonal flu extracts, this communication provides clarity on the issues and solutions in place to resolve them. Apologies that this wasn't sent out by the end of last week as advised, this information was only received Friday evening.

Two separate issues relating to the Seasonal Flu and Childhood Flu extractions were identified over the previous few days. These issues and the resolutions are described below.

Issue 1 – Seasonal Flu Injectable vaccines pharmacy reference sets

One of the seasonal flu injectable vaccines pharmacy reference sets had not been updated to reflect changes to the list of seasonal flu vaccines for 2022/23 (as per the annual flu letter). Practices using only prescription codes to record flu vaccination (rather than an administration code or both together) will have lower than expected figures from the GPES extraction for September flu activity. This will also impact the childhood flu service for non-intranasal vaccines given to children aged 2-3 years.

This incorrect reference set impacted all GP Clinical System Suppliers (GPSS). To date the actions taken by GPSS are:

- **Cegedim:** Practices on Cegedim may now declare their September flu achievement.
- **EMIS:** EMIS will re-extract September's activity where data has not been approved for payment in CQRS National. Once this re-extract is complete (anticipated by the end of Wednesday 19 October), EMIS practices that had not already declared their September achievement will be able to do so.
- **TPP:** The planned fixed should be in place for the October extract which will take place in **November** and be paid in December. This will cover **both** September and October activity. See annex for actions TPP practices should take.

Issue 2 – TPP issue with Seasonal Flu reports

TPP identified an issue with the Seasonal Flu 2022/23 reports which meant the practice data extracted could be lower than the level of activity completed in September. A fix has now been put in place and a re-extract taking place to resolve this issue now. Please note, this re-extraction will not resolve the issue with the pharmacy reference set detailed above.

Annex: Issue 1: Detail and actions for practices

Coding changes

There are:

- 3 codes that were in the 2021/22 pharmacy reference set are still on the list of approved vaccines for 2022/23 so remain in the pharmacy reference set
- 3 codes used in the 2021/22 which are not on the 2022/23 list of approved vaccines so need to be removed from the pharmacy reference set and should not be used by GP practices
- 2 new vaccines are on the list of approved vaccines, the codes have yet to be added.

SNOMED code	Description	21/22 service	22/23 service	Status
34680411000001107	Quadrivalent vaccine (split virion inactivated) suspension for injection 0.5ml pre-filled syringes (sanofi pasteur MSD Ltd) (product)	Yes	Yes	Correct
35727111000001109	Influvac sub-unit Tetra vaccine suspension for injection 0.5ml pre-filled syringes (Viatris UK Healthcare Ltd) (product)	Yes	Yes	Correct
39566211000001103	Supemtek Quadrivalent vaccine (recombinant) solution for injection 0.5ml pre-filled syringes (Sanofi Pasteur) (product)	Yes	Yes	Correct
40085311000001103	Adjuvanted quadrivalent influenza vaccine (surface antigen inactivated) suspension for injection 0.5ml pre-filled syringes (Seqirus UK Ltd) (product)	No	Yes	Missing
40085011000001101	Cell-based quadrivalent influenza vaccine (surface antigen inactivated) suspension for injection 0.5ml pre-filled syringes (Seqirus UK Ltd) (product)	No	Yes	Missing
35726811000001104	Influenza Tetra MYL vaccine suspension for injection 0.5ml pre-filled syringes (Viatris UK Healthcare Ltd) (product)	Yes	No	Needs removing
36509011000001106	Flucelvax Tetra vaccine suspension for injection 0.5ml pre-filled syringes (Seqirus UK Ltd) (product)	Yes	No	Needs removing
38973211000001108	Fluad Tetra vaccine suspension for injection 0.5ml pre-filled syringes (Seqirus UK Ltd) (product)	Yes	No	Needs removing

Actions for Practices

1. EMIS practices should check CQRS from Thursday 20 October and follow the usual declaration process.
2. Before the end of October TPP practices should compare expected September achievement, with the achievement on CQRS National. They should also check the table above for any incorrect codes that may have been used and amend accordingly.

Where a generic vaccination administration code such as “Administration of first inactivated seasonal influenza vaccination” has been used on its own, or with a drug specific code, this will not affect achievement as the generic code will trigger payment. However, practices should ensure they have not used any of the 3 codes to be removed (see table).

3. Once the September and October extracts have completed, if you are satisfied that your September flu achievement is accurate, ‘declare your achievement’ in CQRS National. Do not do this unless you are sure as once achievement is accepted by NHSE, adjustments cannot be made within CQRS National and if a re-extraction of data takes place, the systems will not be able to overwrite the approved data in CQRS National.

OR

4. If a discrepancy is identified, confirm with NHSE in the first instance that there is an issue. Ensure that you have checked your coding is in line with the table below. NHSE SW and the practice will then need to agree the most suitable course of action.

If payment is a priority, NHSE can make a manual adjustment to ensure prompt payment.

We will communicate any updates with practices as we move through the plan outlined and communicate when the issue is finally resolved as and when notified by CQRS.

Further Information

Back issues of these bulletins and attachments are available on the NHSEI website [here](#).

If you have any questions or wish to provide feedback, please contact the Integrated Public Health Team at england.swscreeningandimms@nhs.net