

Derbyshire & Nottinghamshire (DeNo) Screening & Immunisation Team (SIT) Update June 2022

Please cascade to ALL staff, including GPs, Practice Nurses & Reception Staff

Immunisation Information

IMMUNISATION ENQUIRIES

- Any routine immunisation (Section 7A) enquiries or incidents (including cold chain & vaccine incidents) should be sent the East Midlands Immunisation Clinical Advice Service (EMICAS) generic inbox england.emids-imms@nhs.net
- All National flu queries should be emailed to: england.fluops@nhs.net
- All National Imms & Vacc System (NIVS) queries should be emailed to: <u>Agem.nivs@nhs.net</u>
- All ImmForm queries should be emailed to: <u>Helpdesk@immform.org.uk</u> or 0207 183 8580.
- All HCW flu queries should be emailed to: <u>HCWvac@phe.gov.uk</u>
- All practice payment queries should be emailed to: england.gp-contracting@nhs.net

POLIO VACCINATION CHECK & OFFER

- Primary Care colleagues & School Aged Immunisation providers should:
 - Opportunistically check that patients are up to date with their polio-containing vaccines & catch-up anyone who is un/under vaccinated. This is particularly important in practices where vaccine coverage for the primary DTaP/IPV/Hib/HepB course is below 85%.
 - Check immunisation status of newly registered children & adults with a particular emphasis on new
 migrants, asylum seekers and refugees <u>bring them up to date with the UK schedule at the earliest</u>
 opportunity
 - Immediate actions in response to detection of vaccine derived polio virus type 2 (VDPV2) in London sewage samples GOV.UK (www.gov.uk)



UKHSA_VDPV2_PH_M essage.pdf

VACCINE UPDATE NEWSLETTER

- If you're not already registered to receive Vaccine Update directing, please sign up to receive them here: Vaccine update GOV.UK (www.gov.uk)
- https://www.gov.uk/government/publications/vaccine-update-issue-330-june-2022-covid-19-spring-special-edition

CHECK IMMFORM REGULARLY FOR IMMUNISATION UPDATES

• Practices are reminded to check ImmForm regularly for the latest immunisation updates via: https://portal.immform.phe.gov.uk/News.aspx



REMINDER: 2022/23 FLU RESOURCES & TOP TIPS

- **2022/23 flu season:** 01.09.22 31.03.23.
- JCVI statement on 2022/23 flu vaccines (22.09.21): https://www.gov.uk/government/groups/joint-committee-on-vaccination-and-immunisation
- 2022/23 flu vaccination reimbursement guidance (02.03.22):
 https://www.england.nhs.uk/publication/annual-seasonal-flu-vaccination-programme-and-reimbursement-quidance/
- 2022/23 tripartite annual flu letter (22.04.22): https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan
- Vaccine ordering:
 - No National stockpile for 2022/23; Please check you've ordered enough vaccines to vaccinate all cohorts.
 - Please check you've ordered the recommended reimbursable vaccines.
- Patient Group Direction (PGD) (due August)
- Training:
 - Training recommendations (due July)
 - e-Learning for Healthcare (e-LFH) flu training modules x3 (Core; Inactivated & LAIV): https://www.e-lfh.org.uk/programmes/flu-immunisation/ (due July)
 - Training slide-set (due August)
 - RCN Immunisation competencies revised (22.02.22): www.rcn.org.uk/professional-development/publications/immunisation-knowledge-and-skills-competence-assessment-tool-uk-pub-010-074
- Annual flu programme webpage: https://www.gov.uk/government/collections/annual-flu-programme
 - Influenza vaccines marketed in the UK for 2022/23 including ovalbumin content (14.04.22)
 - Letter templates for GP practices to invite children aged 2 & 3 years & at-risk patients & carers for 2022/23 (25.05.22)
 - Healthcare professional's guidance (due August)
 - National protocol for inactivated influenza vaccine (due September)
 - Poster (due August)
- PHE Campaign Resource Centre: https://campaignresources.phe.gov.uk/resources/

COVID VACCINATION SUPPORT BULLETIN

• Issue 34 of the NHSEI Midlands COVID Vaccination Support Bulletin is embedded below for information.



Bulletin 34 13.06.22 FINAL.pdf

VACCINE UPTAKE IN GENERAL POPULATION (NICE guidance published 17/5/2022)

This NICE guidance aims to increase the uptake of all vaccines provided on the <u>NHS routine UK immunisation schedule</u> by everyone who is eligible. It supports the aims of the <u>NHS Long Term Plan</u>, which includes actions to improve immunisation coverage by GPs (including the changes to vaccinations and immunisations detailed in the <u>2021/2022</u> and <u>2022/23 GP contracts</u>) and support a narrowing of health inequalities: https://www.nice.org.uk/guidance/ng218



IMPORTANCE OF CORRECT TIMING OF IMMUNISATIONS

- The Complete Routine Immunisation Schedule: https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule has been developed to ensure that clinically all vaccinations are given at appropriate times to provide protection against infections before eligible individuals reach an age at which they are at increased risk from vaccine preventable diseases.
- Any vaccinations given outside the specified timeframe may be less effective for the patient and may require re-vaccination at a later stage.
- Registered Immunising practitioners should keep themselves up to date in line with NMC requirements and should access annual immunisation training in accordance with the national minimum training standards for nurses; this means they can then give information of a high standard to parents, which will then help them to make an educated decision about vaccinating their child.
 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/679824/Training_standards_an

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/679824/Training_standards_and_core_curriculum_immunisation.pdf

- If there are special circumstances that require vaccinations to be given earlier or later than schedule, i.e. planned travel, then these should be discussed on an individual basis with the local NHSEI Screening & Immunisation Team and in accordance with The Green Book:
 - https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book#the-green-book.
- Practitioners have a public health responsibility to ensure that immunisations are offered in line with the complete routine immunisation schedule and in accordance NHSEI/UKHSA recommendations. If parents express a wish to have their child's vaccinations outside of the recommended schedule they should be given the opportunity to discuss this further with their GP to reassure the parent that the recommended schedule represents the expert advice of the Joint Committee of Vaccination and Immunisation (JCVI) and is based on the most up to date, available evidence. Health professionals should not actively support parents in choosing an approach that may result in the child being put at unnecessary risk.
- Unvaccinated patients are vulnerable to disease and this could also affect the wider community, by lowering herd immunity, and UKHSA does not recommend the splitting of vaccine antigens e.g. DTaP/IPV/Hib/HepB or MMR; single antigen vaccines are not available through the NHS.

IMPORTANCE OF TIMELY VACCINATION RECORDING

- Practitioners have a public health responsibility to ensure that immunisations are offered in line with the complete routine immunisation schedule and in accordance with NHSEI/UKHSA recommendations.
- These recommendations also require timely recording of any vaccinations given. Accurate immunisation records can be used to assess the quality of the national immunisation programmes by monitoring immunisation uptake and facilitating patient recall as required.
- It is therefore necessary for vaccination records to be updated within 48 hours of the vaccine being administered. This is especially important where there is more than one service provider. For example, school age immunisation service and maternity services, in order to minimise the risk of duplication and vaccine incidents

STORAGE & HANDLING OF VACCINES

- Vaccines are sensitive substances which can biodegrade over time. Incorrect storage of vaccines may cause
 them to lose their effectiveness. It is important that vaccines are stored in their original packaging and
 protected from light as this can cause loss of vaccine potency. Anyone handling vaccines should comply with
 local cold chain policy and PGDs.
- Please contact the Screening & Immunisation Team if you require any advice with regards to maintaining the cold chain or to report an incident.
- Please refer to the Green Book for full information about storage, distribution and disposal of vaccines:
 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/223753/Green Book Chapter 3 v3 0W.pdf



ACCESSING SCID RESULTS

- Due to the Newborn Blood Spot (NBS) SCID evaluation, GP practices are required to view NBS/SCID results prior to the administration of the rotavirus vaccine/any live vaccines.
- In order to access SCID results on SystmOne, as a matter of urgency, please ensure you have the correct settings to view the results.
- The GP practice has control of the sharing preferences for all patient records so they need to add the Child Health Unit to their allowed shared in list.
- Go into the record sharing node.
- Search for the appropriate CHIS unit and add it in to their approved list.
- For Derbyshire, the unit is named 'Derbyshire Child Health'.
- For Nottinghamshire, the unit is named 'Child Health County NottsHC' (The organisation code is 559016990109).
- For Nottingham City, the unit is named 'Nottingham CityCare Child Health Information Service' (The Organisation code 576956686104).
- Please ensure you have access to the records rather than relying on parents to bring in the Newborn Blood Spot results letter into the appointment.

IMMUNICATIONS QUERIES

 Please note as previously advised all clinical immunisation queries should be directed to the Screening & Immunisation Team via the East Midlands Immunisation Clinical Advice Service. The email address for this service is: england.emids-imms@nhs.net

Please do not send any immunisation queries to the SCRIMMS (<u>ENGLAND.SCRIMMS@nhs.net</u>) inbox as this is no longer in use for this purpose.

COVID-19 GUIDANCE

- COVID-19: guidance for health professionals is available here: https://www.gov.uk/government/collections/wuhan-novel-coronavirus
- Documents relating to COVID-19 vaccination programme: https://www.gov.uk/government/collections/covid-19-vaccination-programme
- Covid vaccine enquiries/incidents should continue to be forwarded to your local System Vaccines Operation Centre (SVOC) & to the Midlands Covid PMO inbox marked FAO CARS:

england.midscovid19vacs.pmo2@nhs.net

- o Derby & Derbyshire SVOC: ddccg.voc@nhs.net
- o Nottingham & Nottinghamshire SVOC: nnccg.nottssvoc@nhs.net

Screening Information

CERVICAL SCREENING

National Ceasing Audit – Next Steps

GP Practices:

- For the next phase of the national ceasing audit of the NHS Cervical Screening Programme, the Cervical Screening Administration Service (CSAS) will reinstate all individuals 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 the ceasing reason 'other' and there is no record that a ceasing notification letter was sent to them. Other' was removed from the ceasing audit guidance in 2004 and is no longer accepted as a valid ceasing reason by the NHS Cervical Screening Programme. As there is insufficient evidence or documentation for CSAS to recategorise these individuals with a valid ceasing reason or ask GPs to verify their ceasing reason, reinstating them back into the NHS Cervical Screening Programme is the safest option.
- This process will commence on 30th June 2022 and it will take CSAS 2 weeks to action this. <u>Please can you ensure that you check your prior notification lists (PNLs) particularly carefully in the subsequent 4 weeks following the reinstatement process, as they will include the patients that were previously ceased from the NHS Cervical Screening Programme for the ceasing reason 'other'.</u>
- When reviewing the PNL, if you have evidence or documentation that an individual is not eligible for screening then please cease them as normal using the relevant PNL category. This means that they will then be sent a letter confirming that they have been ceased from the NHS Cervical Screening Programme. Any individuals who remain un-ceased will receive an invitation letter for cervical screening approximately 6 weeks after they first



appear on the PNL. As a result, you may then receive queries or requests for screening from individuals who thought they had been ceased from the Programme. If these patients should not remain in the screening programme, please cease them by sending the appropriate form (www.csas.nhs.uk.docx (live.com) to CSAS via the online portal (Screening - Cease/Opt Out · CSAS). A valid ceasing reason must be provided on this form.

- Nearly 50% of the individuals that will be reinstated into the NHS Cervical Screening Programme will be over the eligible age for screening. However, any individuals aged over 65 that did not have their last test between the ages of 60 to 65 are still eligible for their final test. The cervical screening laboratory providers have been asked not to reject these samples.
- 1,325 registered patients are being reinstated into the NHS Cervical Screening Programme across 1,074 GP practices. These practices will be contacted directly by CSAS and provided with a list of their affected patients.
- In July 2022 CSAS will issue a bespoke letter to all individuals recorded on the National Cervical Screening Call and Recall IT system as ceased from the NHS Cervical Screening Programme since 1st April 2010 for the ceasing reason 'informed consent' and there is no record that a ceasing notification letter was sent to them. This letter will advise these individuals to contact their GP or local sexual health centre to request a cervical screening appointment if they now wish to be invited for screening. No action is required for individuals that wish to continue to be ceased from the Programme. You may receive queries or requests for screening from individuals previously ceased from the programme for informed consent. Please ensure that a screening appointment is offered if requested.

UHDB Laboratory Update

- Number of samples rejected by the Laboratory against the National Acceptance Policy for Q4 2020/21
- Rejected and Not processed, repeat sample required = 263
- Vial no form = 7
- Unlabelled vial = 75
- Vial & form not matching = 61
- Insufficient identifiers = 46
- Crossed patient details = 23
- Unable to process = 1
- Vial leaked, not processed = 16
- Form / vial illegible = 2
- Out of date vial = 32 Vials have a 2 year expiry date please check your cupboard for out of date vials.
 When sampling reduced over the pandemic, odd vials may be sat at the back of cupboards. Vial dates are shown in American format. YEAR/MONTH/DAY Please ensure there is 2 month date remaining on the vial to accommodate the latest laboratory Turn-around-Time.



- Rejected and not processed, no repeat necessary = 177
- Outside of age range = 23
- Early Attendee = 154

Cervical Screening Incidents recorded for Q1 & Q2 (National figures)



- A total of 242 Cevical Screening Incidents were recorded for Q1 & Q2 2020/21 with the following themes identified:
- Serious Incidents = 8
- Failsafe incidents (mostly IT systems) = 25
- Sample Taker incidents across Primary Care (Mostly relating to transport of samples and training issues) = 122
- HPV Laboratory Issues = 29
- Colposcopy Administration = 45
- Histology incidents = 5
- Cervical screening administration Services (CSAS) = 17

Screening safety incidents

- · Screening safety incidents include:
 - any unintended or unexpected incident(s), acts of commission or acts of omission that occur in the delivery
 of an NHS screening programme that could have or did lead to harm to one or more persons participating
 in the screening programme, or to staff working in the screening programme
 - harm or a risk of harm because one or more persons eligible for screening are not offered screening
- Characteristics are:
 - they occur at a particular point of the screening pathway, at the interfaces between parts of the pathway or between screening and the next stage of care
 - they can affect populations as well as individuals. Although the level of risk to an individual may be low, because of the large numbers of people offered screening, this may equate to a high population risk
 - the root cause can be an individual error or a failure of a system(s), or equipment or IT
 - there is a systematic failure to comply with national guidelines or local screening protocols that has an adverse impact on screening quality or outcome
 - due to the public interest in screening, the likelihood of adverse media coverage with resulting public concern is potentially high even if no harm occurs (examples include breach of patient confidentiality or data security)

https://www.gov.uk/government/publications/managing-safety-incidents-in-nhs-screening-programmes

Cervical Screening Awareness Week (20-26 June 2022)

 Cervical Screening Awareness Week is championed by <u>Jo's Cervical Cancer Trust</u> & raises the profile of cervical screening by sharing tips & experiences for those having difficulty accessing screening appointments.

Contact details for the Screening & Immunisation Team (SIT)		
Name	Programme	Email
Sarah Mayfield (SIM)	ANNB, DESP, Child & Adolescent Imms	sarahmayfield@nhs.net
Annie Tasker (SIM)	AAA, Bowel, Breast & Cervical Screening, Adult Imms & Flu	annie.tasker@nhs.net
Alison Campbell (SIC)	Child & Adolescent Imms	alison.campbell@nhs.net
Amy Fottles (SIC)	ANNB Screening & Neonatal Imms	Amy.fottles@nhs.net
Sue Markham (SIC)	Child & Adolescent Imms	Sue.markham2@nhs.net
Tania Murdoch (SIC)	Cervical Screening & AAA	tania.murdoch@nhs.net
Amy Fottles (SIC)	ANNB Screening & Neonatal Imms	amy.fottles@nhs.net
Gemma Riley (SIC)	Breast Screening, Adult Imms & Flu	gemma.riley4@nhs.net
Rosie Tuttle (SIC)	Bowel Screening & DESP	rosie.tuttle@nhs.net

Alternatively, you can email the generic email account: england.emids-imms@nhs.net

- Covid vaccine enquiries/incidents should continue to be forwarded to your local System Vaccines Operation Centre (SVOC) & to the Midlands Covid PMO inbox marked FAO CARS: england.midscovid19vacs.pmo2@nhs.net
 - o Derby & Derbyshire SVOC: ddccg.voc@nhs.net
 - Nottingham & Nottinghamshire SVOC: nnccg.nottssvoc@nhs.net

This information can be made available in alternative formats, such as easy read or large print & may be available in alternative languages, upon request.