



Essex LMCs
Childhood vaccination &
immunisations
QOF target report
June 2022

A Guidance Document for Practices

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Overview

In April 2022, Essex LMCs contacted constituents following a heightened awareness of the difficulties that some GP practices had experienced in achieving the childhood vaccinations and immunisation QOF targets. This was because of not being able to exception report for a number of reasons as outlined on page 13 of this report.

We were keen to understand the extent of the problem in Essex and therefore asked those affected practices to share information with us around:

- **Targets missed and % reached**
- **Reason for missing target(s) and by how many patients**
- **Missed payment amount**
- **Any concerns that the practice wished to share with us**

We collated responses received up to and including 31 May 2022 and shared our findings with GPC to further inform them in ongoing discussions with NHS England.

This document is updated with additional responses received by the LMC throughout the month of June 2022. At this point, we have received data from 82 practices.

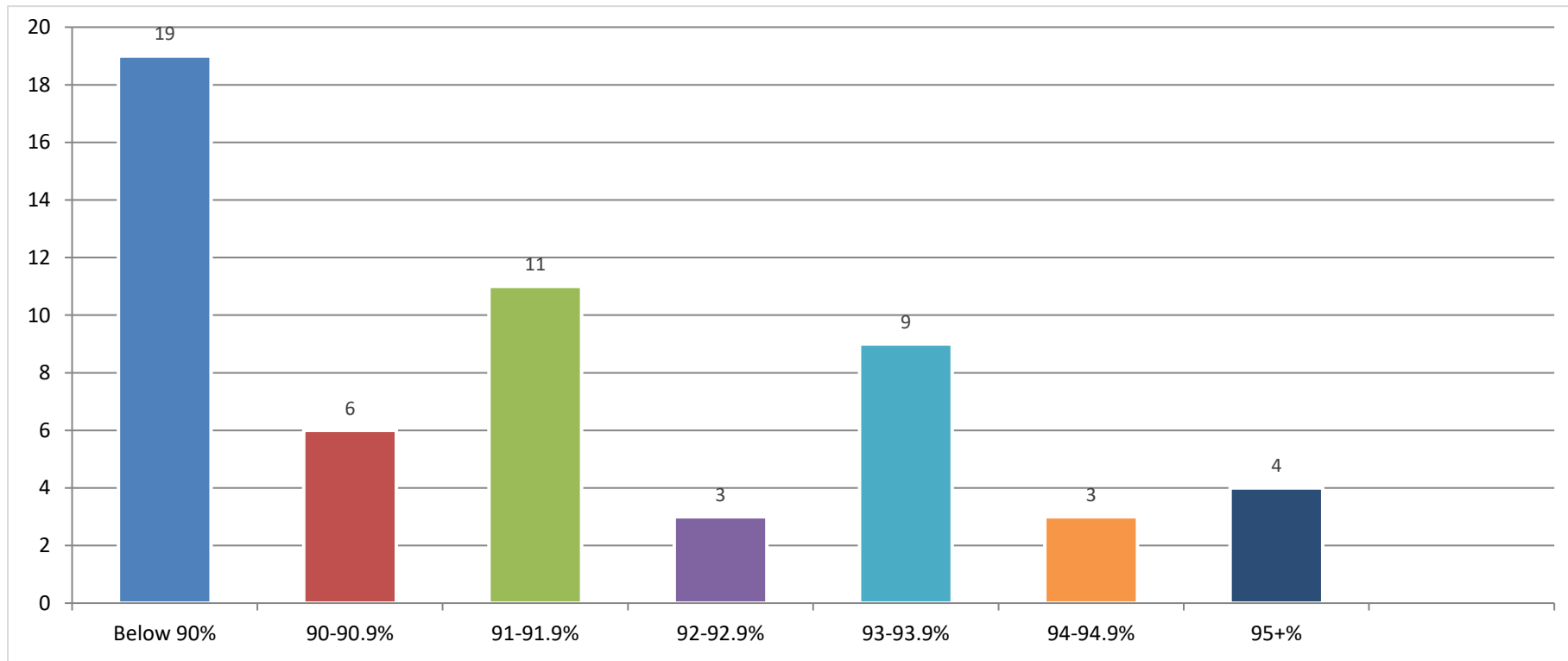
North and South Essex Local Medical Committees Ltd
4 July 2022

Practice responses VI001

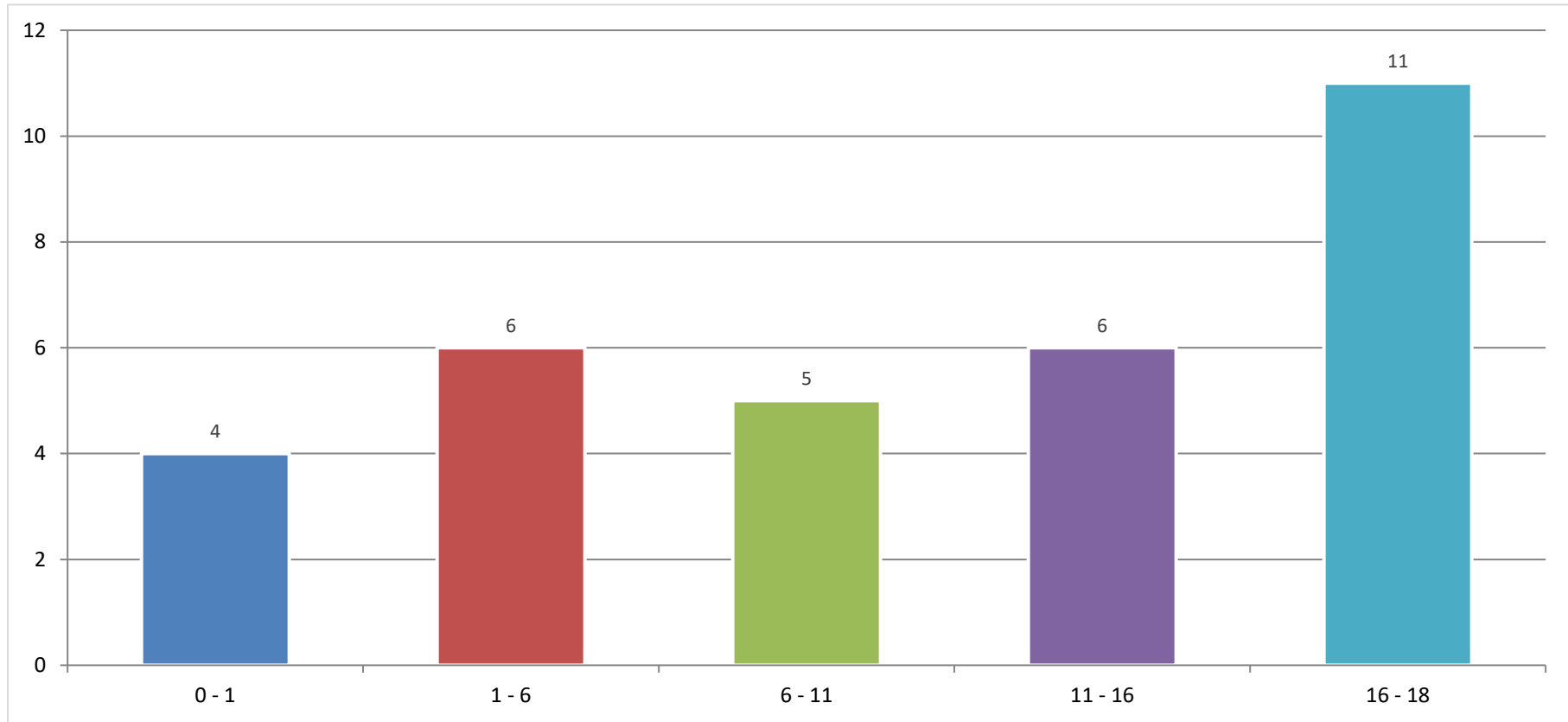
The percentage of babies who reached 8 months old in the preceding 12 months, who have received at least 3 doses of a diphtheria, tetanus and pertussis containing vaccine before the age of 8 months.

Threshold = 90 – 95%

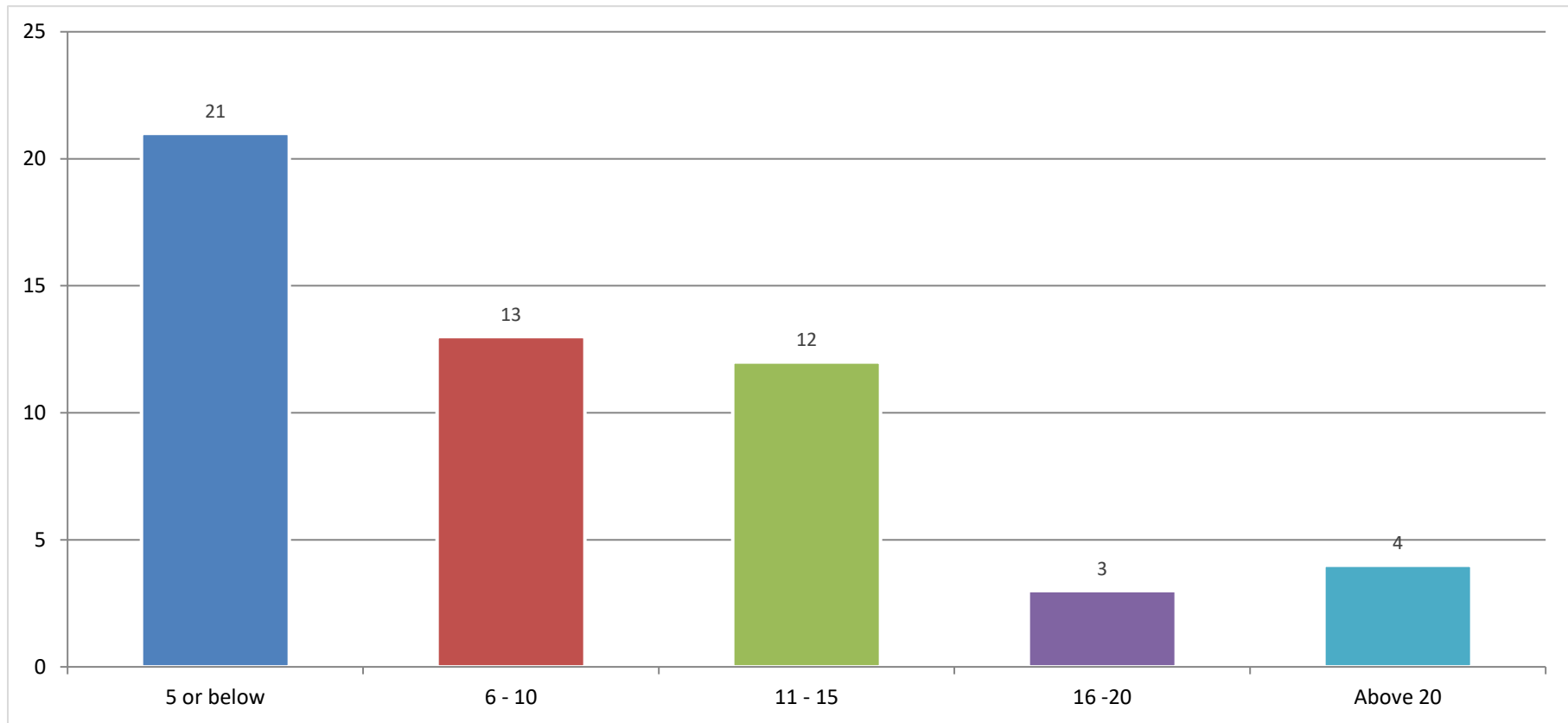
VI001 - No. of practices declaring % target reached for this cohort: **55/82**



VI001 - No. of practices declaring points missed: 32/82



VI001 - No. of practices declaring patients missed: 53/82

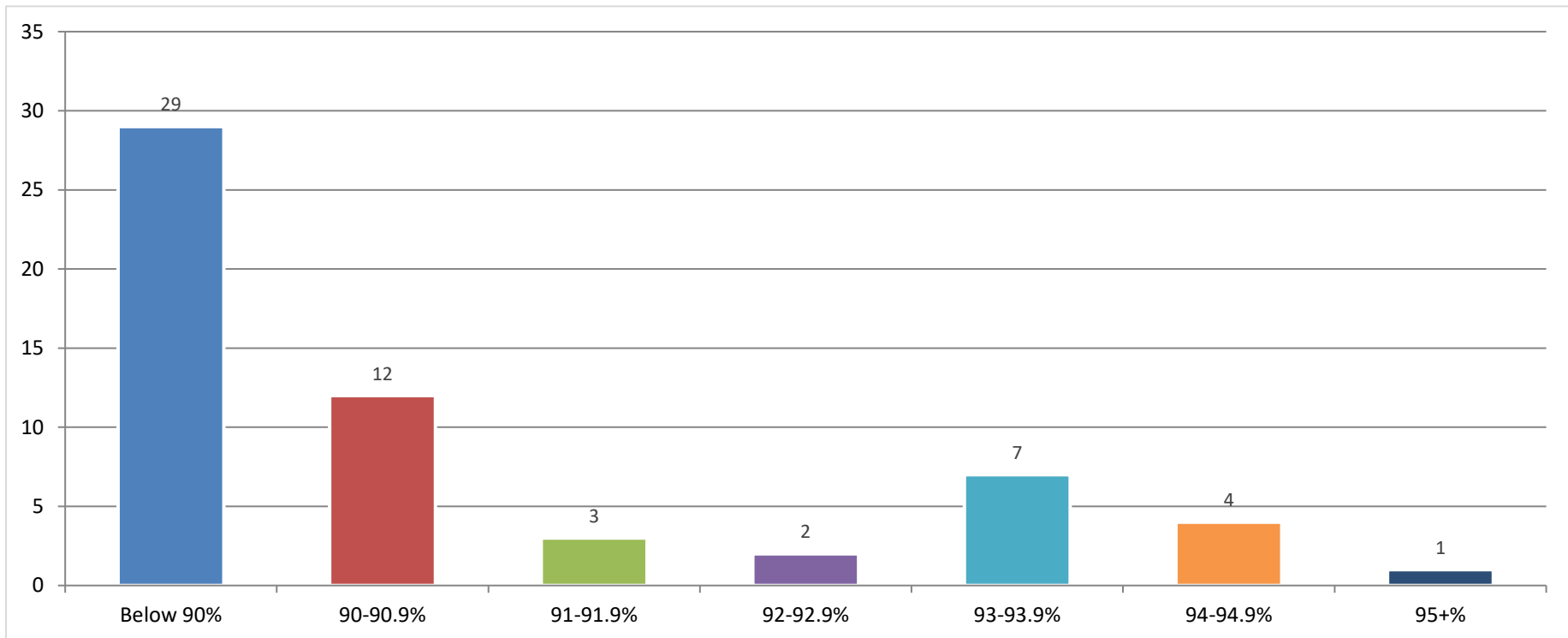


Practice responses VI002

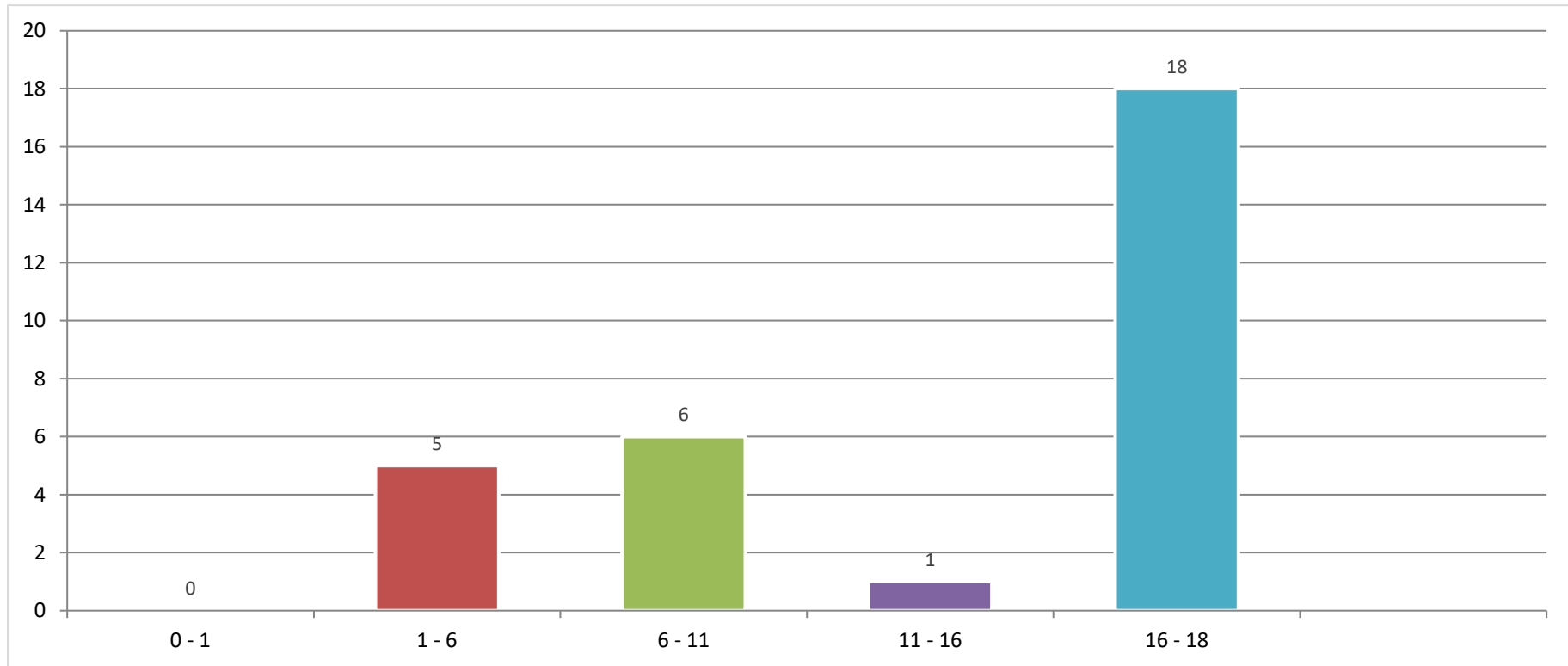
The percentage of children who reached 18 months old in the preceding 12 months, who have received at least 1 dose of MMR between the ages of 12 and 18 months.

Threshold = 90 – 95%

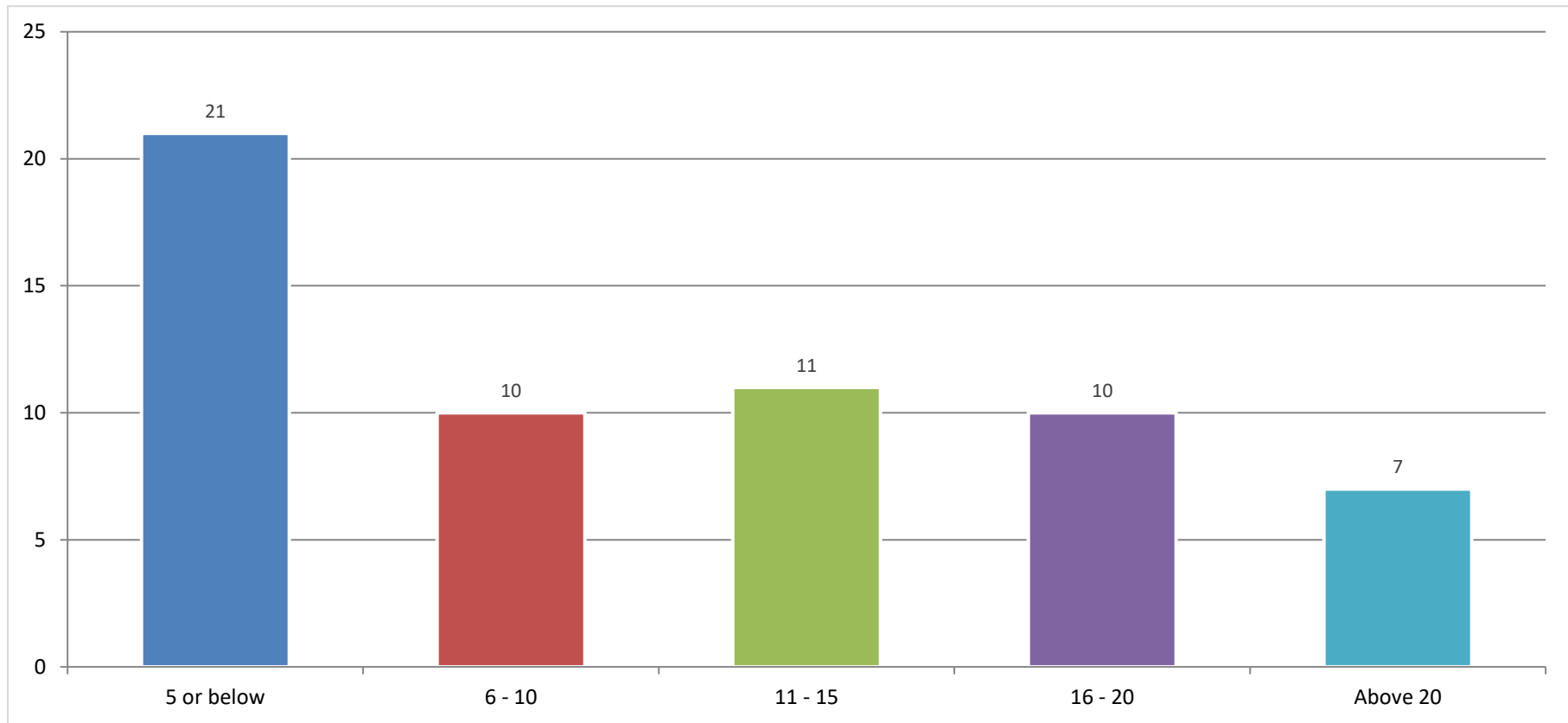
VI002 No. of practices declaring % target reached for this cohort: **58/82**



VI002 No. of practices declaring points missed: **30/82**



VI002 - No. of practices declaring patients missed: 59/82

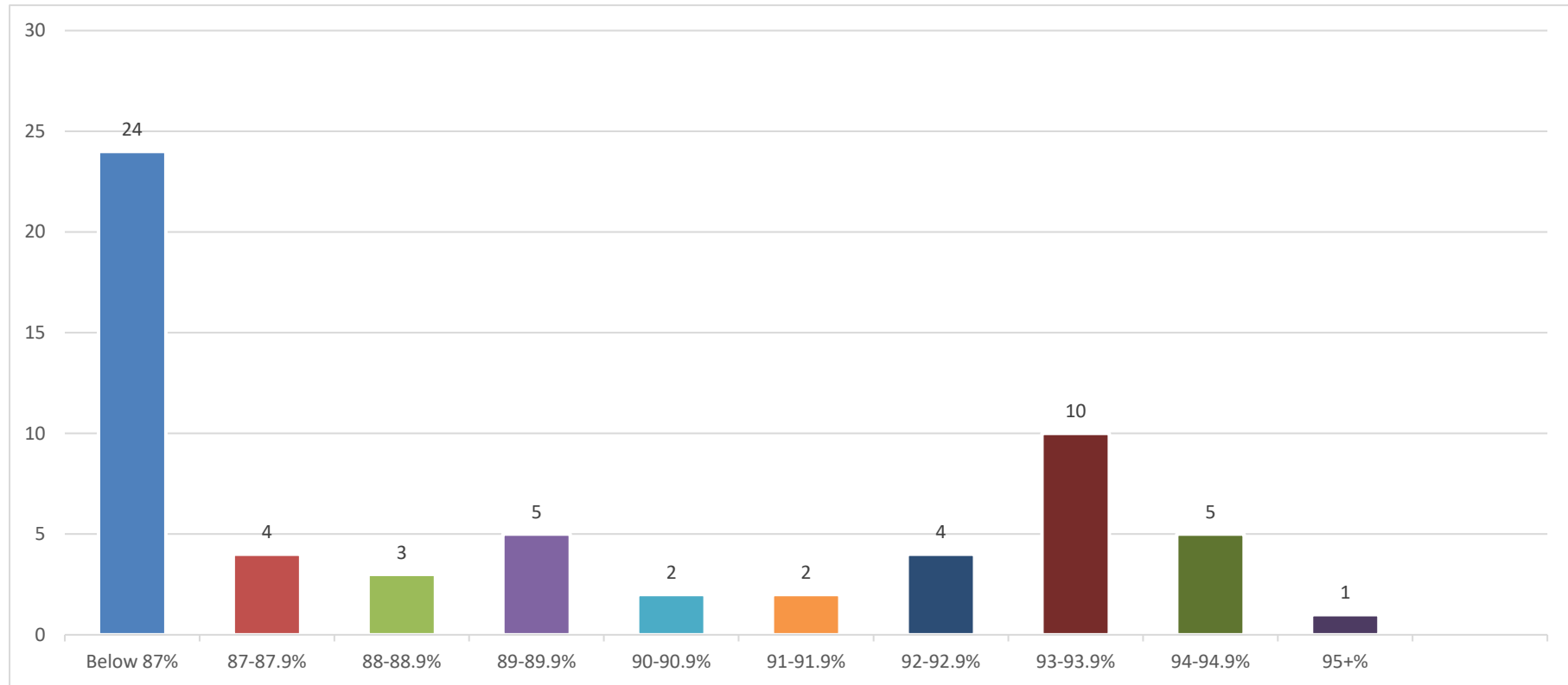


Practice responses VI003

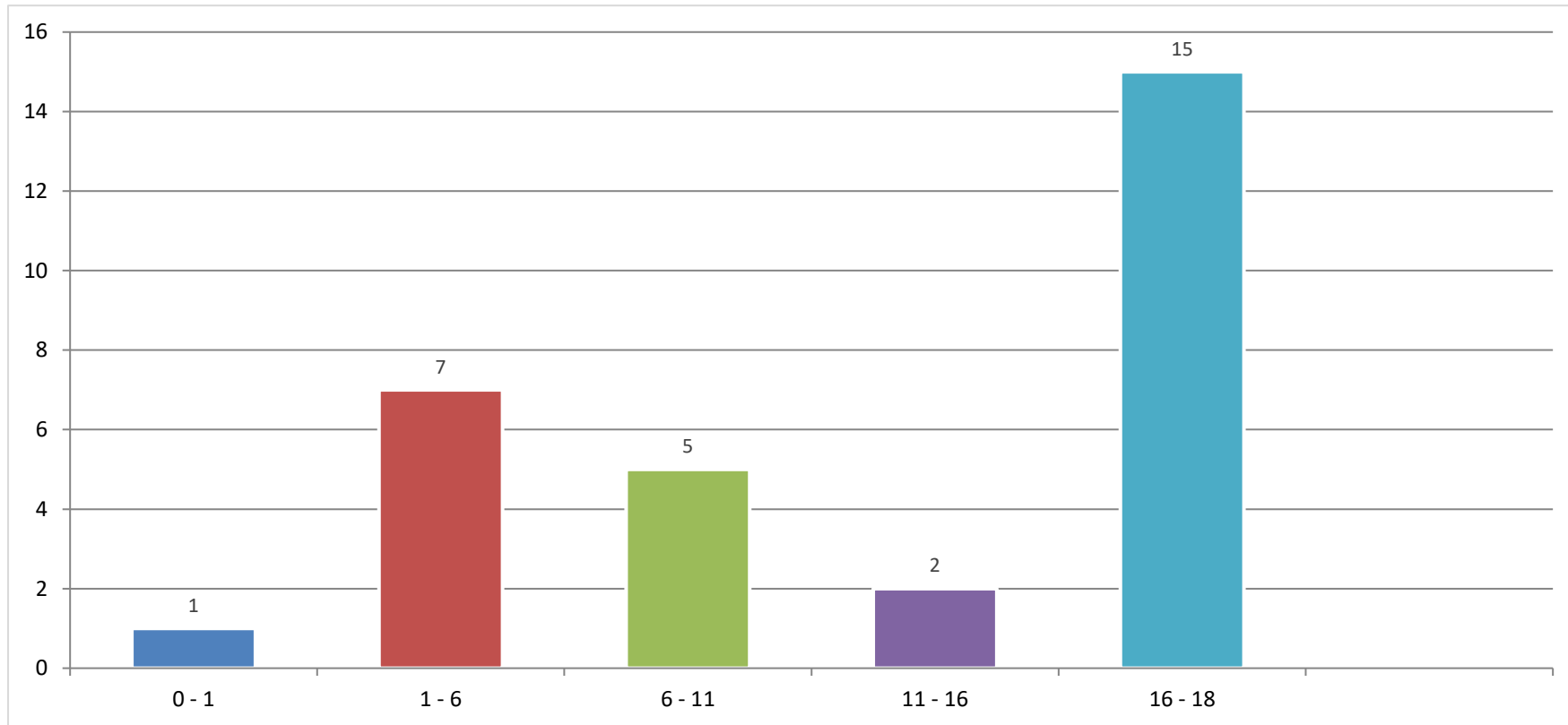
The percentage of children who reached 5 years old in the preceding 12 months, who have received a reinforcing dose of DTaP/IPV and at least 2 doses of MMR between the ages of 1 and 5 years.

Threshold = 87 – 95%

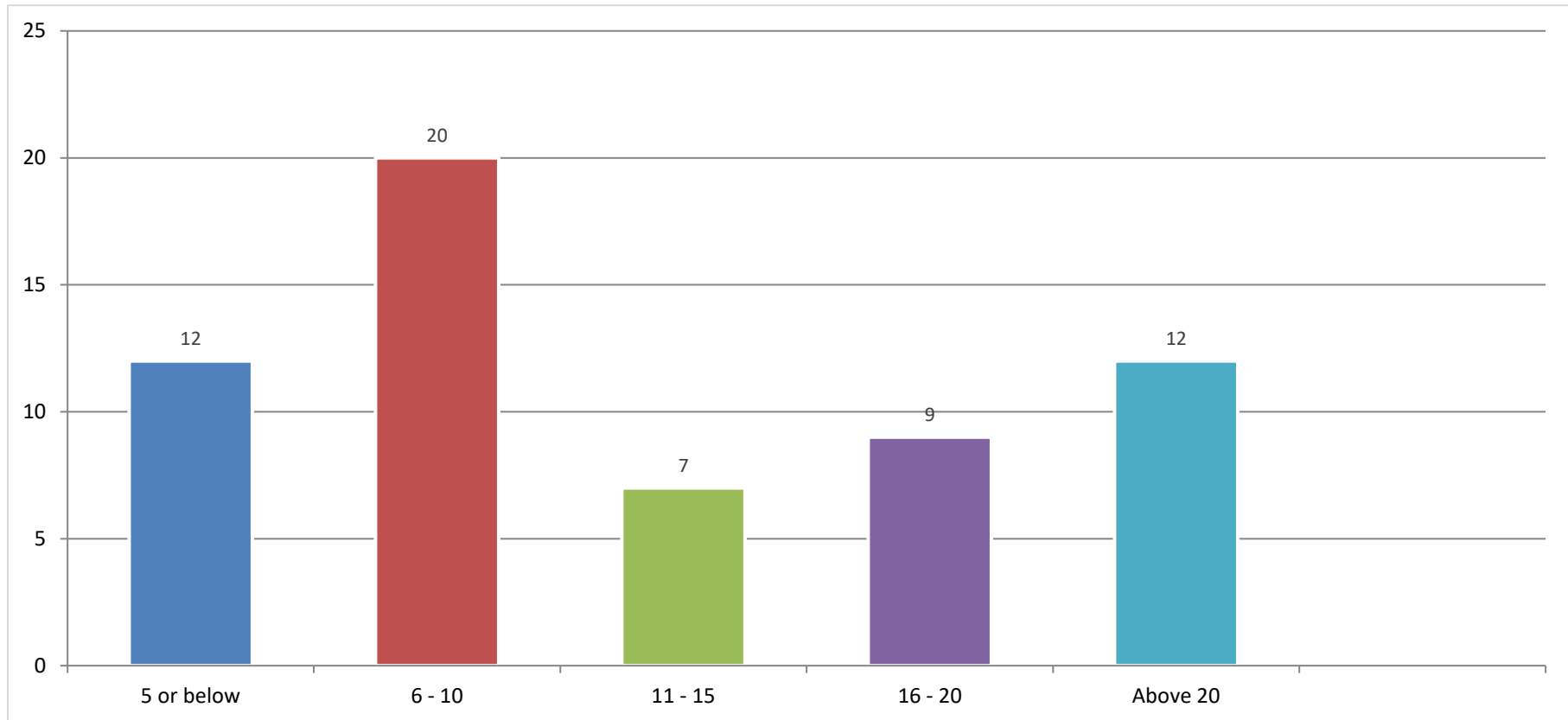
VI003 No. of practices declaring % target reached for this cohort: **60/82**



VI003 No. of practices declaring points missed: 30/82



VI003 - No. of practices declaring patients missed: 60/82



Reasons for missed vaccinations

Of the 82 practices in Essex who responded to our request for information regarding childhood vaccinations and immunisations, 81 responded with reasons as to why they had missed the target threshold for each cohort. The reasons given followed a common theme throughout and included:

Parental refusals

Non-responders to invitations

Patients reside in a deprived area where parents did not want to take children into the practice

New registrations

Vaccinations performed privately

Vaccinations given outside of relevant timescales

Children moved into the UK and vaccinations were given in a different schedule to that of the UK

Sick or premature children who had to wait longer for a vaccination

Orthodox Jewish patients

Other cultural choices

Conclusion

Many of our constituents displayed clear frustrations that the system does not allow them to 'exception report' for reasons given on page 13. Efforts had been made on multiple occasions via telephone, letter, and text message to invite patients for vaccinations. The tight threshold margins, without the ability to exception report, meant that many practices were not able to reach the thresholds required for maximum payments.

Of our 82 responders, 47 provided details of the financial loss sustained which came to a total of **£300,659.97** at an average of £6,397.02 per practice that provided financial loss details.

£'s lost by those practices that informed us of their financial losses:



Summary of comments from practices

Many of our practices responded to us with an overriding feeling of frustration. They work hard at trying to achieve the required thresholds and through no fault of their own, they feel like they are penalised for matters out of their control.

The LMC would like to share some of the comments received as a synopsis of general feeling from many practices in Essex:

“With other indicators such as asthma/diabetes, you can code 1st and 2nd invite and then the patients are removed from the QOF target if they haven’t been in as you have made the effort to contact them, and it is patient choice not to attend. We do not have this option with immunisations. We have/had about 30 patients who fell into missed pre-school immunisations due to the covid pandemic, so are now 5 years old and most of them have declined the immunisations, but we have no way of adding a declined code. That would remove them from the QOF list. Personally, I think this is a little unfair as we have invited the patient in, and the parents have refused. Not much more we can do!”

“I think NHS England need to either bring the targets down to 90% or allow exceptions for those children who had to have vaccinations later. Parents that refuse consent are very difficult to deal with and even if they book an appointment after consultation with a clinician, they always DNA.”

“Thank you for looking at this for us, we are very unhappy with the inflexible approach being taken and quite frankly may be disincentivised to really push these in this current year with the same, unachievable targets.”

“Thanks for pursuing this. I suspect the figures will make for grim reading.....”

“In total for these 3 indicators we lost £2,831.75. The number of babies being born is currently going down so as the years go by it will need fewer parents declining to make it impossible to meet the target. Using the current target, eventually we will get to the stage where if one parent refuses, we are out of pocket!”

“Despite the above, we have managed to vaccinate most children, although some of them were given late. Sadly, there is NO allowance for ANY exception coding except for clinical contra-indication of specific vaccine allergy. Furthermore, the lower thresholds are set at very high percentages. Accordingly, we have missed ALL our Child Vaccination targets due to late attendance for vaccination by just a few patients. As such, therefore, we will receive NO points at all for these Child Vaccination & Immunisation domains – a loss of 54 points equating to £13,780 (each point £201.16 x CPI of 11,525/9,085). I believe that we are one of many practices in this position, and it is grossly improper for practices who are trying their hardest during this pandemic to be penalised in this way through no fault of their own, as outlined in the above reasons.”

“Please could we also highlight another problem we see arising with vaccinations and immunisations QOF targets for this current year. All practices are now starting to see Ukrainian refugee families register, including ourselves, who are of course very welcome, but many come without their vaccination history and even if they do, it does not match the UK schedule and whilst we know what to do clinically to ensure they are fully immunised, this will not record as an achievement for QOF targets as it may well not match the routine schedule and will certainly not be within the time frame required for QOF. If possible, please could this be considered as part of your investigations also. It is also more difficult for practices such as ours with a small denominator of patients.”

“We have worked hard to achieve this; we have chased and texted etc. We are in a deprived area and patients often opt out as they do not want to bring children into surgery. We can do nothing about this, and I feel strongly we are being unfairly penalised.”

“The reasons for these children not being vaccinated or vaccinated outside of the QOF schedule timeframe are because of parents declining, children under consultants and vaccines have been advised to have later than the normal schedule, Covid sickness within staff and appointments being rearranged, Parents working schedule, children are being vaccinated but QOF does not recognise if they are 1 day + after the timeframe.”

“We managed to hit the required target for all 3 of the childhood immunisation denominators. We started the chasing at the earliest point of being made aware, but it has been a tough task. Fortunately, with a large population the 3 or 4 in each denominator who haven’t been vaccinated or vaccinated too late have not stopped us hitting target, but it was close, and we may not be so lucky next year.”

“This is something that we have been greatly affected by and have lost a significant amount of income.”

“This issue has hit us hard. We did a lot of work looking into this, and I can confirm that all our patients were invited appropriately etc. We also have done phone follow up campaigns to try and catch up. Some of these people did come in for their jabs, but as it was late it makes no difference for QOF. Our nursing team were fantastic, and I stand behind our clinical work on this, as evidenced by how close we came, and our high scores in other areas. We have been through every missing patient individually to try and encourage them to get vaccinated and understand why this situation arose. There were various reasons identified: We had one family with young children who immigrated to the UK where the timeframes involved were simply not realistic. We have several families who are anti-vax and have refused all vaccinations. We have a process of getting written refusal in these cases which we have done. We have had patients who did not respond in time but were ultimately vaccinated. Covid was most likely a factor. We also had a family who moved from another surgery. By the time they registered with us, they were outside of the timeframe so count as a failure on our part, through absolutely no fault of ours. To be frank, I don't feel that we can have done any more, and it seems like a game of chance whether you are going to be successful with vaccination in this area or not. We lost 36 QOF points, so presumably something in the region of £7000. As we have checked every set of notes and phoned every missing patient, I think it is fair to say we would have achieved fully if there were fairer timeframes or exception reporting was an option. Many thanks for taking this up, and hopefully it is resolved for the coming year. It feels very demoralising, but of course being such an important area, we are going to continue to work hard at it. Once again it feels like our goodwill and care for our patients has been somewhat exploited to make us undertake what has now become unpaid work.”

“All parents of the missing children were contacted, and all declined to have their children immunised. We lost 20 QOF points for a minimal number of children that we could not exception report. We now have two more children who have recently registered with the practice whose parents don't want them immunised, so will probably lose out on more this year.”

“We are glad to know that this matter is being investigated. We feel that the achievement rate of 95% is not achievable.”

“We have put so much effort into trying to achieve this it is utter madness. Thank you for your support.”

“This shortfall was totally due to parent refusal and was never going to be achieved despite numerous telephone calls and a large amount of time spent following up. The biggest problem was parents making appointments (I think just to get us off their case) and then not turning up. This just meant more phone calls and more wasting of precious appointments – not a good use of surgery resources.”



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