

Local CQUIN Template: School and Community Based

Immunisation Service (0-19) 2018/19

Indicator number	Immunisation 2
Indicator name	<p>Tracking and assurance of the development of the 0-19 referral catch up process for unvaccinated children</p> <p>a) Action Plans and narrative</p> <p>b) A summary log of individual referrals and their outcomes, reported quarterly</p>
Indicator weighting (% of CQUIN scheme available)	1%
Description of indicator	<p>There is a cohort of unvaccinated/partially vaccinated children within the Sussex area.</p> <p>If a child (0 -19) is identified as having an incomplete immunisation schedule and the GP has made reasonable efforts to encourage vaccination then a pathway for other health professionals to refer to the provider immunisation service will be required, to receive referrals from other professionals, to contact the parent/carer (preferably by telephone) and arrange vaccination or redirect to GP.</p> <p>Refer to KSS 0-19 Immunisation CQUIN pathway.</p> <p>On-going liaison with health and social care professionals and promotion of the service will raise awareness of the service and promote referrals.</p> <p>Linking up with health and social care professionals to jointly develop Service Operational Plans for example MECC, checking immunisation status, discussing with GPs and each organisations ensuring the links are within the SOPs, jointly working together to promote the importance of vaccinations. SOPs not being developed in isolation and work with other stakeholders to dove-tail services to ensure parents are supported.</p> <p>Other professionals includes but is not exclusive to:</p> <ul style="list-style-type: none"> • Health Visitors • School Nurses • Children's Centres • Social services • Looked After Children teams • Paediatrics

Numerator	<p>There will be several numerators</p> <p>Number of possible outcomes for each child in the denominator. They should be recorded in these categories:</p> <ul style="list-style-type: none"> • Already vaccinated • Vaccinated by service • Referred to GP • Refused vaccination • Unable to contact • DNA and discharged • Other (please specify)
Denominator	Number of referrals received
Rationale for inclusion	Recorded immunisation rates are lower than national standards
Data source	Provider clinical system
Frequency of data collection	Monthly
Organisation responsible for data collection	Provider
Frequency of reporting to commissioner	Quarterly, 2 months in arrears
Baseline period/date	Aug 2018 – July 2019
Baseline value	tbc
Final indicator period/date (on which payment is based)	31 st July 2019
Final indicator value (payment threshold)	1%
Final indicator reporting date	31 st July 2019

Are there rules for any agreed in-year milestones that result in payment?	See milestones section
Are there any rules for partial achievement of the indicator at the final indicator period/date?	

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Milestones

Date/period milestone relates to	Rules for achievement of milestones (including evidence to be supplied to commissioner)	Date milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Quarter 1 (Aug-Sept)	<p>Immunisation provider to develop a service pathway that supports the Screening and Immunisation Team's pathway.</p> <p>Immunisation provider to develop an action plan for regular communications/liasing with other health professionals e.g. HV, SNs, GPs, paediatrics, re referrals using SMART objectives</p> <p>Immunisation provider to set up and run appointment system/clinics for this activity</p> <p>Provide report on progress on above outputs. To include info on which health and social care professionals contacted and narrative on contact</p>	<p>1st Aug – 30th Sept 2018</p> <p>Submit by 1st working day after 31st Oct 2018</p>	40%
Quarter 2 (Oct-Dec)	<p>Review action plan and provide narrative on actions and on improvements to communications required.</p> <p>Provide data on denominator and numerator from 1st Oct 2018 to 31st Dec 2018 with narrative</p>	<p>1st Oct – 31st Dec 2018</p> <p>Submit by 1st working day after 31st Jan 2019</p>	20%

Date/period milestone relates to	Rules for achievement of milestones (including evidence to be supplied to commissioner)	Date milestone to be reported	Milestone weighting (% of CQUIN scheme available)
Quarter 3 (Jan-Mar)	<p>Review action plan and provide narrative on actions and on improvements to communications required.</p> <p>Provide data on denominator and numerator from 1st Jan 2019 to 31st Mar 2019 with narrative</p>	<p>1st Jan – 31st Mar 2019</p> <p>Submit by 30th April 2019</p>	20%
Quarter 4 (April-June)	<p>Review action plan and provide narrative on actions and on improvements to communications required plus overview narrative on the year as a whole.</p> <p>Provide data on denominator and numerator from 1st Apr 2019 to 30th Jun 2019 with narrative</p>	<p>1st April – 30th June 2019</p> <p>Submit by 31st July 2019</p>	20%

Rules for partial achievement at final indicator period/date

Final indicator value for the partial achievement threshold	% of CQUIN scheme available for meeting final indicator value