



Public Health
England

Protecting and improving the nation's health

Seasonal influenza vaccine uptake data collection

GP patients 'all practices' survey (England) season 2019 to 2020

ImmForm survey user guide for GP practices and local NHS England team immunisation
leads/flu co-ordinators

About Public Health England

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1. Introduction

The aim of this guidance is to give a comprehensive overview of the Seasonal Influenza Vaccine Uptake Survey in GP patients and is intended to be used as a reference guide rather than to be read in its entirety. It is updated every year to ensure any changes to the data collection are documented and circulated to stakeholders before the start of the season.

The influenza vaccination programme for 2019/20 was announced in the annual flu letter, which was jointly issued to the NHS by the Department of Health and Social Care (DHSC), NHS England and Public Health England (PHE). The document, dated 22 March 2019 (PHE Gateway reference 2018767), sets out the operational arrangements and planning for the forthcoming winter season, and can be accessed at:

www.gov.uk/government/publications/national-flu-immunisation-programme-plan

An updated version of the influenza chapter, chapter 19, of the Green Book (Immunisation against infectious disease) has been published. The chapter provides guidance on the influenza vaccine programme and detailed information about the way that available flu vaccines should be administered (target groups, dosages, contraindications, precautions, adverse reactions, vaccine supplies, etc.). The updated chapter is now available at:

www.gov.uk/government/publications/influenza-the-green-book-chapter-19

An updated flu vaccination patient leaflet is also available explaining how individuals can protect themselves against flu each winter and why it is important for those who are at increased risk from flu to be immunised. It also incorporates the latest information on who should have the vaccine and why. This leaflet can be accessed at:

www.gov.uk/government/collections/annual-flu-programme

Provisional headline (national) data from the weekly sentinel survey of automated GP practices will be published in the PHE weekly influenza report, available to view at:

www.gov.uk/government/publications/weekly-national-flu-reports.

Provisional monthly data; the end of season reports and data tables for past and present seasons can be found at:

www.gov.uk/government/collections/vaccine-uptake.

2. Data collection approval and reporting responsibilities

2.1 Approval for collection of data

The DCB2205 Seasonal Influenza Uptake (GP Patient) Survey has received full approval from the Data Coordination Board, NHS Digital for the 2019 to 2020 influenza season.¹

The DCB2211 Seasonal Influenza Uptake in Children (GP Patient) Survey has received full approval from the Data Coordination Board, NHS Digital for the 2019 to 2020 influenza season.¹

The 2 collections consist of 5 monthly (retrospective) surveys (October, November, December, January and February); and a weekly sentinel survey (for automated data only) from all GP practices in England.

In 2019/20, there will again be a fifth monthly survey for February; and GP practices will be required to submit the mandatory data for this February survey.

The monthly and weekly surveys collect the same data, but the monthly data is more complete as we allow manual data entries from GP practices (and those acting on behalf of GP practices). GP practices do not manually enter data for the weekly survey as this is automated and acts as an almost 'real time' system for frontline staff to monitor the influenza vaccination programme in their locality.

2.2 Local NHS England teams: screening and immunisation leads/flu co-ordinators (SILs/SIMs/SICs)

Local NHS England teams will be expected to report on the performance and outcome of the immunisation programme as part of the responsibilities that NHS England has agreed for the seasonal flu programme under a Section 7A agreement with the Secretary of State for Health. Local NHS England team leads must assure that arrangements are in place to ensure the collection and provision of data on

¹ <https://digital.nhs.uk/data-and-information/information-standards/information-standards-and-data-collections-including-extractions/publications-and-notifications/standards-and-collections>

immunisations support the local and national monitoring of the delivery of the programme and flu vaccine uptake (see the annual flu letter²).

Commissioners are responsible for ensuring vaccine uptake data is provided by each GP practice. They are also reminded when commissioning services for vaccinations given in settings outside of a GP practice (e.g. community pharmacies or antenatal clinics) that the details of the vaccinations should be provided to the patients registered practice and recorded on their electronic clinical record in a timely manner. This is important for clinical reasons (such as any adverse events) and also means that these vaccinations will be included in the vaccine uptake data collections.

In addition, local NHS England teams will explore ways of linking midwifery services with GP practices, so midwives can raise awareness of the flu vaccine among pregnant women and can administer the flu vaccine at antenatal visits through patient group directions. If arrangements are put in place where midwives administer the flu vaccine, it is important that the patient's GP practice is informed so their records can be updated accordingly and included in vaccine uptake data collections.

2.3 Use of data – public health objective

The routine collection of influenza immunisation uptake data is essential to provide robust and timely information about this immunisation programme. Collection of this data allows the assessment of the implementation of the influenza immunisation programme and uptake of vaccine and information that can be used locally, regionally and nationally to assess the progress of the programme.

Vaccine uptake data collections are a high priority within public health policy as they measure the effectiveness of vaccination programmes which are a key preventative aspect of protecting the public from infectious disease and public health threats (such as a flu pandemic). The data is also valuable for further analysis and evaluation for epidemiological or modelling studies.

² The annual flu letter is available at

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/788903/Annual_national_flu_programme_2019_to_2020_.pdf

3. Data submissions

3.1 How will the data be collected?

Vaccine uptake data will be collected by 2 surveys; the main GP survey and the children GP survey via our web-based platform called ImmForm. The surveys collect data on all vaccinations administered (cumulative) to the end of the month/week.

Weeklys

The weekly sentinel data collection allows almost 'real time' monitoring of the vaccination programme at a national level from week ending 8 September 2019 to week ending 26 January 2020 (week 36 2019 to week 4 2020; see Section 4.2 for the weekly survey collection dates) covering on average over 70% of GP practices in England.

Data is uploaded using automated XML bulk upload or web service only, as such manual data entries are NOT REQUIRED. Automated data uploads will include all mandatory and generally all optional fields of the survey.

Monthlys

The 'all practice' monthly data collection consists of 5 monthly returns for all vaccinations up to the end of October, November, December 2019, January and February 2020. The monthly data collection allows both automated and manual uploads. Automated uploads are the same as the weekly surveys and will generally include all data items.

Any GP practice that has a failed automatic upload should complete the mandatory fields (see page 24) manually. All manual entries whether at GP or local NHS England team/CCG level (including updates and overwriting of data) should take place within the stipulated survey deadlines for respective editing periods (see Section 4 Data collection and publication timetable) to ensure their data is included for that month's official statistics.

In 2019/20, there will be an additional monthly data submission to capture vaccinations given up to 29 February 2020. The February collection was added in 2017/18 as an experimental collection to assess how much more data would be collected in that month to account for data returning from outside the practice and later in-practice vaccinations. The February collection was able to give a more accurate national representation of the uptake rates and therefore has been adopted for our end of season figures.

NOTE: No paper or fax submissions will be accepted to the national flu team

3.2 Automated data returns and GP system suppliers

Automated data returns are submitted directly to our web-based platform, ImmForm from GP system suppliers on behalf of GP practices. In order for us to receive an automated upload, practices must ensure that their automated extractions have been activated. If you are unsure if your automated extractions have been activated, please contact your GP system supplier. The following suppliers will be providing automated uploads: EMIS Health, Microtest, TPP (SystemOne) and Vision (formerly INPS).

It is important to remind GP practices that have or are changing GP system supplier to turn off the automated extraction from their 'old' system and turn it on for their 'new' system. This is due to some instances in the past, where data from an 'old' supplier has been submitted *after* the data from a 'new' supplier and overwritten the data.

GP practices should log into ImmForm to see if their data is being uploaded regularly. One way to verify whether the data for your practice is being automatically extracted is to check the weekly survey. If your practice data is being populated there, then it should be the same for the monthly survey. Please contact your GP system supplier if your data does not appear by the end of the month.

Please ensure any technical difficulties are resolved before the final survey as this should be as comprehensive as possible.

We will post updates on the News Item section of ImmForm throughout the season to show the 'Monthly GP System Supplier Upload Status' which lists which data has been provided from each supplier as well as any unexpected delays in receiving data.

3.3 PRIMIS tools and services

The PRIMIS team are contracted to provide the Read code and SNOMED CT code specifications for this collection and to complete a quality assurance process. The code specification should not be used for payment purposes. Any call/recall lists generated should always be reviewed by a clinician.

For clarity, PRIMIS will not provide a CHART Library and data upload service as the GP system suppliers will be providing automated uploads. PRIMIS does have a CHART flu recall audit tool that helps practices identify 'at risk' patients more accurately and validate their 'flu recall register for use year-on-year.

NOTE: this audit tool has not been commissioned by PHE but can be purchased from PRIMIS. The audit tool is based on a completely different specification to that used for the uptake survey and is designed to handle the identification of patients in the at-risk groups to the required exactitude for recall purposes. For further information:

www.nottingham.ac.uk/primis/tools/qi-tools/flu-recall.aspx

3.4 Vaccine uptake data and GP payments

The ImmForm survey collecting vaccine uptake data is designed to measure vaccine uptake at a specific point in time and as such it is not suitable to use this data for GP payment purposes. Questions concerning GP payments should be directed to NHS England as this is the responsible lead on GP payments.

Email: england.immunisation@nhs.net.

The data will exclude vaccinations that are eligible for payments, such as for patients who have received the vaccine but have subsequently died, patients who have since moved and joined another practice elsewhere and 'temporary' patients who may have received the vaccine but were not registered on the date of data extraction.

The data will likewise include vaccinations given by other healthcare providers (if the electronic record is updated accordingly) for which the GP practice is not able to claim payments.

Vaccinations of the morbidly obese (defined as BMI of 40 and above) with no other recognised risk factor will attract a payment under the direct enhanced services (DES) in 2019/20³. Many patients will already be eligible due to complications of obesity that place them in another risk category⁴.

3.5 Equality data and vaccine uptake

This data collection is designed to measure vaccine uptake at a specific point in time. The following equality data has been captured in this data collection as experimental cohorts as these have been shown to have an effect on vaccine uptake^{5,6}. Ethnicity for those aged 6 months to under 65 and in a clinical risk group; and all pregnant women⁷. Those aged 65 and over; and all patients aged 16 to under 65 are broken down by gender.

These experimental cohorts are published aggregated at national level in our annual report.

³ General Medical Services (GMS) contract effective from 1 April 2019 www.nhsemployers.org/pay-pensions-and-reward/primary-care-contacts/general-medical-services/gms-contract-changes/gms-contract-changes-2019-20

⁴ Please consult Chapter 19 of the Green book for guidance: www.gov.uk/government/publications/influenza-the-green-book-chapter-19

⁵ H.K. Green et al. Phased introduction of a universal childhood influenza vaccination programme in England: population-level factors predicting variation in national uptake during the first year, 2013/14, *Vaccine*, 33 (2015), pp. 2620-2629

⁶ E. Tessier et al. Population-level factors predicting variation in influenza vaccine uptake among adults and young children in England, 2015/16 and 2016/17, *Vaccine*, 36 (2019), pp. 3231-3238

⁷ Ethnicity data is collected using the NHS standard, 2001 Census categories.

4. Data collection timetable

For further details on ImmForm dataset requirements, please see the full dataset here with the other guidance notes:

www.gov.uk/government/collections/vaccine-uptake#seasonal-flu-vaccine-uptake:-data-collection-guidance

4.1 Survey start and end dates – monthly

The collection will comprise 5 ‘all practice’ (i.e. automated and manual submissions) monthly surveys for all **cumulative data** from 1 September 2019 to end of each survey month. Data submitted should be for all vaccinations administered from 1 September 2019 until the end of the survey month, and not just on vaccinations given since the previous month’s survey.

Table 1: Collection schedule for the monthly surveys is shown below:

Survey Month	Data up to Date	Survey Start Date	GP System Supplier Submit End Date	Final Submission Date For All Users (Survey End Date)
October	Wednesday 31/10/2019	Friday 01/11/2019	Monday 11/11/2019	Friday 15/11/2019
November	Friday 30/11/2019	Sunday 01/12/2019	Tuesday 10/12/2019	Monday 16/12/2019
December	Monday 31/12/2019	Wednesday 01/01/2020	Thursday 09/01/2020	Wednesday 15/01/2020
January	Thursday 31/01/2020	Saturday 01/02/2020	Tuesday 11/02/2020	Monday 17/02/2020
February	Saturday 29/02/2020	Sunday 01/03/2020	Tuesday 10/03/2020	Monday 16/03/2020

4.2 Survey start and end dates – weekly

We will be operating the same weekly collection from a sentinel group of GP practices (which usually accounts for over 70% of practices) where GP IT software suppliers extract automated data on their behalf. This will begin from week 36 (week ending 08 September 2019) until week 4 (week ending 26 January 2020)⁸.

No manual data entries are required for the weekly sentinel survey.

⁸ It is recognised that uptake in September will be low at first and will depend on vaccine availability.

*submission will be before noon on the 29 December 2019

The weekly aggregate vaccine uptake data will be published in the PHE weekly influenza report, on the PHE website throughout the flu season.

Table 2: Collection schedule for the weekly surveys

Week No.	Week Ending	GP System Supplier End Date
36	Sun 08/09/2019	Tue 10/09/2019
37	Sun 15/09/2019	Tue 17/09/2019
38	Sun 22/09/2019	Tue 24/09/2019
39	Sun 29/09/2019	Tue 01/10/2019
40	Sun 06/10/2019	Tue 08/10/2019
41	Sun 13/10/2019	Tue 15/10/2019
42	Sun 20/10/2019	Tue 22/10/2019
43	Sun 27/10/2019	Tue 29/10/2019
44	Sun 03/11/2019	Tue 05/11/2019
45	Sun 10/11/2019	Tue 12/11/2019
46	Sun 17/11/2019	Tue 19/11/2019
47	Sun 24/11/2019	Tue 26/11/2019
48	Sun 01/12/2019	Tue 03/12/2019
49	Sun 08/12/2019	Tue 10/12/2019
50	Sun 15/12/2019	Tue 17/12/2019
51	-	-
52	Sun 29/12/2019	Tue 31/12/2019
1	Sun 05/01/2020	Tue 07/01/2020
2	Sun 12/01/2020	Tue 14/01/2020
3	Sun 19/01/2020	Tue 21/01/2020
4	Sun 26/01/2020	Tue 28/01/2020

5. GP patient groups eligible for flu vaccination

Data is collected for the following defined eligible groups (denominator)⁹ and the number of those vaccinated within each group (the numerator). The following is only for GP patients and does not cover the full scope of the programme. For full details of the national flu immunisation programme please read the annual flu letter: www.gov.uk/government/publications/national-flu-immunisation-programme-plan

Due to the changing GP population, the denominators will fluctuate as patients join and leave the practice for reasons such as: age, becoming pregnant, having a change in their clinical status (i.e. joining or leaving a clinical risk group), having a change in carer status or died during the data collection period. The data will also exclude the prison population, unless they were registered with a GP practice at the time of data extraction and their vaccination details recorded on their GP record.

Patients who are vaccinated but have not had their GP record updated by the time of data extraction, will not be included in the collection. Likewise, the data extraction will only include patients vaccinated outside the practice if the information has been returned and inputted correctly into the patient's GP record.

For detailed information about administering flu vaccine, please consult Chapter 19 of the Green Book: www.gov.uk/government/publications/influenza-the-green-book-chapter-19

⁹ For further description and detail regarding patient groups eligible for flu vaccine see Appendix A in the Annual Flu Letter (p.9) at

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/788903/Annual_national_flu_programme_2019_to_2020_.pdf

5.1 Patients in clinical risk groups aged 6 months to under 65 years should be considered to receive flu vaccinations¹⁰

Chronic respiratory disease	Chronic neurological disease (see below for more details)
Chronic heart disease	Diabetes
Chronic kidney disease stages 3 to 5	Immunosuppression
Chronic liver disease	Morbid obesity (BMI ≥ 40)
Asplenia or dysfunction of the spleen	
<p>NOTE: Patients in more than one clinical risk group will be counted once when looking at <i>all patients</i> in a clinical risk group aged 6 months to under 65.</p>	

When offering vaccination to people with chronic neurological disease, including those with stroke and TIA, clinicians should offer immunisation, based on individual assessment, to clinically vulnerable individuals including those with cerebral palsy, learning difficulties, multiple sclerosis and related or similar conditions; or hereditary and degenerative disease of the nervous system or muscles; or severe neurological disability (note all neurological disease collected together, i.e. no separation of stroke and transient ischaemic attack etc.).

Patients are further delineated by the following age bands as defined by their age on the date of extraction:

- 6 months to under 2 years
- 2 years to under 5 years
- 5 years to under 16 years

Therefore, these denominators are relative to the date when the information is extracted from the practice computer systems. However, patients aged 16 to under 65 years are defined by their age on 31 March 2020.

¹⁰ The 'Summary of patients in one or more at-risk group(s)' category on ImmForm excludes otherwise healthy pregnant women (ie without other risk factors) and healthy carers. It should only contain patients in one or more of the clinical risk groups and if a patient is in more than one risk group, they are only counted once.

For the purpose of reporting vaccination coverage of patients with morbid obesity, adults and children are categorised using different criteria. Adults are classified on the basis of a BMI ≥ 40 , children are classified using their last recorded BMI percentile code.

Please note, the GP patient survey only collects data to end of February 2020. If, however, it is a late flu season or newly at-risk' patients are present, (e.g. pregnant women who may not have been pregnant at the beginning of the vaccination period); they may continue to be vaccinated up until end of March 2020.

5.2 People who may be eligible for flu vaccination but not in a clinical risk group

Where a GP exercises clinical judgement to vaccinate a patient who does not fall within a designated clinical risk group(s), this patient will be counted under the 'All patients' criteria.

For example, household contacts of the immunocompromised patients can be considered for vaccination; however, there is no clear, consistent way of classifying and identifying these individuals. Therefore, they cannot be included as a distinct group in the survey and so any vaccinations given to this group will be included in the 'All patients' category.

The 'All patients' criteria may also include people vaccinated privately or as part of their employers' occupational health programme (including social care workers), when a record of these vaccinations has been entered onto a GP's system.

The 'All patients' category applies to *all* patients registered at the practice (including those in clinical risk groups, who are pregnant or who are carers) on the date of data extraction. Therefore, this provides us with an overall vaccine uptake rate for 'all patients' registered at the GP practice at that point in time.

5.3 Pregnant women (collected separately from the clinical risk groups specified above)

The denominator is defined as all women pregnant (both not in a clinical risk group and in one or more clinical risk group(s)) or becoming pregnant (in the first, second or third trimesters). As diagnosed by a medical professional (e.g. GP or midwife), during the period 1 September 2019 to 29 February 2020 (i.e. all those becoming pregnant before 1 September 2019 and still pregnant during any of the period 1 September 2019 to 29 February 2020, and all those becoming pregnant during 1 September 2019 to 29 February 2020).

The denominators should include women who lose their pregnancy for whatever reason and those that give birth during the period 1 September 2019 to 29 February 2020 inclusive of both dates. Thus, denominators could be regarded as

over-inclusive as they may include women that become eligible (as more women becoming pregnant over time) and then ineligible (women no longer pregnant but were eligible and are not removed) before they can be vaccinated. Only Read codes¹¹ that code for women confirmed by a medical professional as pregnant should be used. However, no Read codes would be required for loss/termination of pregnancy or birth for the data collection, although they are relevant to clinicians when scheduling and administering the vaccinations.

We record pregnant women denominators this way in order to track the total eligible population of pregnant women during the flu season and are able to provide information for vaccine supply.

In order to measure flu vaccine uptake in pregnant women more accurately, practices should review clinical records at the start of the season for those that were pregnant but then ceased to be pregnant before 1 September 2019 to ensure that patients are not included and called for vaccination (unless they are in other clinical risk groups).

It is important that GP practices continue to check their patient database throughout the flu season to identify women who are not pregnant at the start of the immunisation programme but become pregnant during the winter. GP practices should also be encouraged to liaise with community midwives, to ensure accurate and timely recording of pregnant women vaccinated outside the practice.

Due to the complications of recording pregnancy, other methods should be used if practices wish to identify patients who are at risk and require vaccination. We understand that the delivery codes are usually the most accurate for determining pregnancy. Any recall lists should be subject to clinical review.

In the past, some GP IT systems were using last menstrual period (LMP) or estimated delivery date (EDD) as markers for pregnancy and using this as a basis for vaccination. However, there are many reasons why LMP may be entered e.g. coil insertion, radiology safety, etc.; and both LMP and EDD dates may change over times as a result of irregular bleeds or early pregnancy bleeds, without the clinical record being updated. Therefore, we do not recommend LMP or EDD be used for call/recall purposes. Please ensure when pregnant women are called for vaccination that LMP or EDD are NOT used and consult your GP IT supplier to help ensure that patients who are genuinely pregnant are offered vaccination.

¹¹ See section 11 for more information on Read codes

5.4 Patients aged 65 years and older

The denominator is defined by patient age at 31 March 2020 (this fits with the policy that all those aged 65 years or older by the 31 March 2020 are eligible to receive vaccine in the 2019/20 vaccination programme).

5.5 People in long-stay residential homes

Vaccination is recommended for people living in long-stay residential care homes or other long-stay care facilities where rapid spread is likely to follow introduction of infection and cause high morbidity and mortality. This does not include prisons, young offender institutions or university halls of residence (although those registered with their GP at the time of data extraction would be included in the survey).

The source of data is from GP practice systems only; we will only be collecting data from GP practices. If residents' vaccination details are recorded on GP practice systems, then the data will be collected as part of the overall collection. Therefore, it is important that the details of the vaccinations are provided to the patient's registered practice and are recorded on their electronic clinical record in a timely manner. This is important for clinical reasons (such as any adverse events) and also means that these vaccinations will be included in the vaccine uptake data collections.

5.6 Social care and hospice workers

NHS England recommended vaccination for frontline health and social care workers in 2018. In 2019/20, vaccination for social care and hospice workers that offer direct patient/client care will continue to be available through community pharmacy or their registered general practice. This scheme is intended to complement, not replace, any established occupational health schemes that employers have in place to offer the flu vaccination to their workforce.

The eligible groups include health and social care staff employed by a registered residential care/nursing home or domiciliary care provider, as well as health and care staff employed by a voluntary managed hospice provider, who are directly involved in the care of vulnerable patients at increased risk from exposure to influenza. In this case vulnerable patients means patients in a clinical risk group for flu or who are aged 65 years and over.¹²

¹² 'Extension of NHS seasonal influenza vaccination to social care workers and staff in the voluntary managed hospice sector'. Letter from Professor Stephen Powis. 11 September 2018.

www.england.nhs.uk/publication/extension-of-nhs-seasonal-influenza-vaccination-to-social-care-workersand-staff-in-the-voluntary-managed-hospice-sector-letter-from-professor-stephen-powis/

5.7 Carers

The current definition of a carer is:

“Those who are in receipt of Carers’ Allowance, or those who are the main carer or the carer of an elderly or disabled person whose welfare may be at risk if the carer falls ill.”

Vaccination should be given on an individual basis at the GP’s discretion in the context of other clinical risk groups in their practice. We recognise that there are young people with carer responsibilities that will not fall into this definition.

However, these carers may be included in the survey if there is a carers’ code assigned to the patient record, as there was no lower age limit in the data specification to exclude those too young to be in receipt of Carers’ Allowance. For this reason, we now record patients who are under 16 years of age and have a carer code assigned. In the future, the continued expansion of the universal child vaccination programme will include all children aged 2 to 17 years and therefore include any young carers not currently in receipt of carer’s allowance.

5.8 Vaccination given by other healthcare provider

Data collected on vaccinations given by other healthcare providers are broken down by:

- school
- pharmacies
- other healthcare settings

As there are no Read codes for being vaccinated in a school setting, it is presumed that all patients who are of school age who have been recorded as being given vaccinations by ‘other healthcare provider’ in their GP record, are in fact vaccinated within schools unless a specific ‘vaccinated within a pharmacy setting’ code has been recorded.

Vaccinations given in other settings (e.g. pharmacies or special clinics such as antenatal care, residential homes and private or occupational health vaccinations) need to be recorded onto GP systems in a timely manner. This is essential for maintaining the individual’s clinical record but also ensures a clear auditable trail to the original source of any data and will avoid double counting for the vaccine uptake survey. It may be that for some vaccinations recording onto a GP system is difficult or slow. For example, vaccinations of travelling communities or homeless people or where patients are not registered. Recording of these vaccinations may be missed by the survey, although this is undesirable.

5.9 Refused/declined

The survey allows for data to be submitted regarding vaccines refused or declined by patients. The denominator is the GP registered population and therefore will include patients who have been offered the vaccine but refused as the uptake rate is measured against the overall eligible population. Therefore, data providers should not adjust their figures if a patient refuses or declines the vaccine.

5.10 Children aged 2 and 3 years

In 2019/20, GP practices will only be vaccinating preschool children who are aged 2 and 3 years old on the 31 August 2019. However, depending on the local commissioning arrangements, GP practices may vaccinate any child up to the age of 9 rising to 10 but not 11-year olds on the 31 August 2019 as part of a catch-up session if the child has missed their vaccination via the main mode of delivery (usually school-based). All children in these age ranges are included irrespective of whether they are in a clinical risk group or not.

All primary school-aged children (date of birth on or after 1 September 2008 and on or before 31 August 2015) will be vaccinated via a school-based programme for the 2019/20 season.

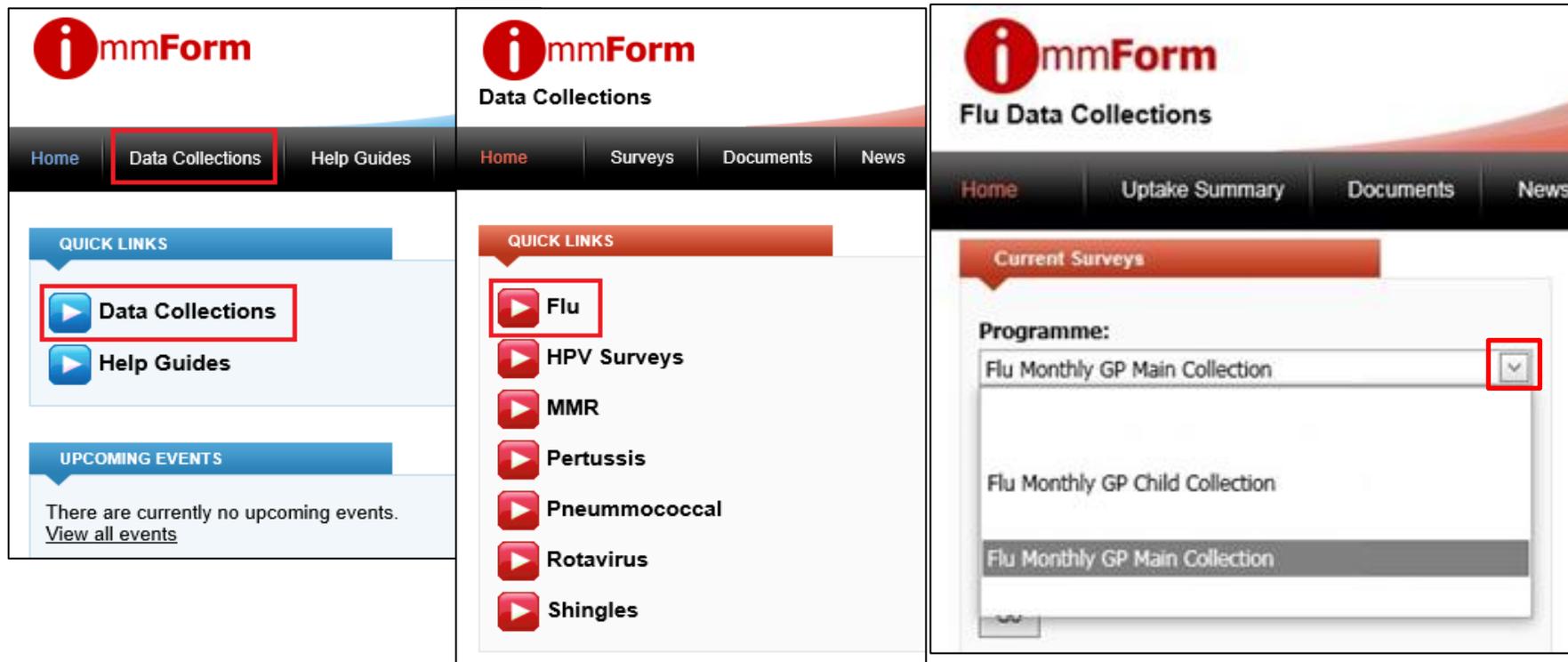
Further details of the Seasonal influenza vaccination uptake survey in primary school aged children can be found here: www.gov.uk/government/publications/childhood-flu-vaccination-programme-in-primary-school-age-children

It is presumed that all patients who are of school age who have been recorded as being given vaccinations by 'other healthcare provider' in their GP record, are in fact vaccinated within schools unless a specific 'vaccinated within a pharmacy setting' code has been recorded. As with all vaccinations given outside the GP practice, we assume that vaccinations will be recorded on GP systems in a timely manner.

7. Datasets: submitting data on ImmForm manual entry

7.1 Selecting the correct survey

Once you have successfully logged into the ImmForm website, you will need to select the correct survey. Click on 'Data Collections' from the top dark-blue menu bar and then 'Flu' shown in the screenshot below. Select the survey you want, in this case the 'Flu Monthly GP Main Collection 2019-20' or 'Flu Monthly GP Child Collection 2019-20' then the collection month you wish to provide data for and your organisation code under the survey.



During the campaign, as each survey month opens and closes, the page will default to the current month's survey. To view any data entered for any specific month, this can be accessed by clicking on the previous months listed in the 'Survey' drop down menu.

After selecting the survey, click 'Go' and it will show a list of organisations attached to your role. To submit data or view and/or amend data, click on your organisation name.

immForm
Flu Data Collections

DataCollectionManager@immform.org.uk : [Sign Out](#) [My Details](#)

Helpdesk 0844 376 0040

Home Documents News

Text size: [icon]

Summary Report :

Programme: Flu Monthly GP Main Collection
Survey: Month/ Year of survey
Organisation: Organisation Name

Show in Excel Click here to switch table axis

Other Reports

Reporting Hierarchy: Organisations For Survey Group

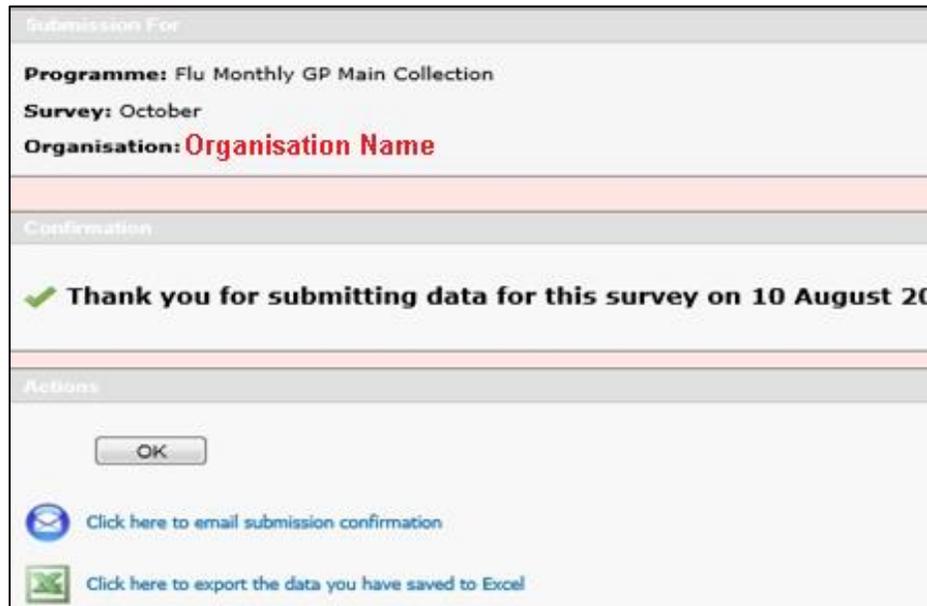
- Datasource Quality Assurance Report
- List organisations that have yet to respond
- Discrepancy Report
- Child Report

Summary 65 and Over All Patients Pregnant Women At Risk Groups Gender Ethnicity

Datasource

Org Code	Org Name	Response Summary			Summary of Flu Vaccine Uptake %					
		No. of practices	No. of forms completed	% of practices responding	65 and over	Under 65 (all Patients)	Under 65 (at-risk only)	Pregnant and NOT IN a clinical risk group	Pregnant and IN a clinical risk group	All Pregnant Women
Org. Code	Organisation Name	2171	34	1.6	0.0	0.0	0.0	0.0	0.0	0.0

Where errors have occurred, instructions regarding the fields requiring further attention will be shown by a red asterisk next to the fields that failed the data validation checks and will require amending (see Section 7.2 Data validation errors). Once you have entered the data, click on 'Submit' at the bottom of the page and, if successful, a confirmation page will be displayed as below.



The screenshot shows a confirmation page with the following sections:

- Submission For:**
 - Programme: Flu Monthly GP Main Collection
 - Survey: October
 - Organisation: **Organisation Name** (with a red asterisk indicating a validation error)
- Confirmation:**
 - ✔ Thank you for submitting data for this survey on 10 August 20
- Actions:**
 - OK button
 - Click here to email submission confirmation (with an envelope icon)
 - Click here to export the data you have saved to Excel (with an Excel icon)

If you require assistance while filling in the form you can click on the '?' that appears on the top left hand side of the survey form as shown below.

Once the help icon is selected it will open the survey help pop up that will contain information and contact details of the local team who should be able to help you fill out the form. If you have any further queries about the survey, please contact influenza@phe.gov.uk

7.2 Data validation errors

There may be several reasons why data validation errors occur, the data validation rules for each of the surveys can be found in sections 7.5 and 7.6. The **error message will appear at the top of the form** (as per screenshot below) to indicate what the problem is, and the affected fields are then highlighted with a red asterisk. A change must be made in order to correct the data error and allow you to submit the GP practice's data.

In the example below, the denominator for the 65 and over group (number of patients registered) is smaller than the numerator (number of patients vaccinated) i.e. there are more people vaccinated than there are people to vaccinate. Therefore, in order to correct this error, the number of patients vaccinated needs to either be less than or equal to the number of patients registered; in this case there are 2 patients registered and therefore the number vaccinated needs to either be less than 2 or equal to 2 (where vaccine uptake rate is 100%).

Submission Form

Programme: Flu Monthly GP Main Collection
Survey: October
Organisation: YOUR ORGANISATION NAME

Survey Form

The following data fields failed validation checks:

- Aged 65 and over - vaccinated must be less than or equal to Aged 65 and over - registered. Please amend this value.

 To record any changes you make to this form, press the submit button

1. Seasonal Flu Vaccine Uptake Summary Data (Mandatory)

Summary Data	(A) Number of Patients registered on day of extraction.	(B) Number of patients within (A) that have received the Flu vaccine since 1st September 2017	Vaccine Uptake (%)	(C) Number of patients refused/declined vaccine (Optional)	(D) Number of patients who received the Flu vaccine in school (Optional)	(E) Number of patients who received the Flu vaccine in pharmacies (Optional)	(F) Vaccination given in any other healthcare settings (Optional)
All patients 							
Aged 65 and over*	2	3*	150.0		n/a		

Influenza vaccine uptake (GP patients) data collection season 2019 to 2020

If a data validation error appears and it is not apparent as to how to fix it, you can use the  button to contact someone to help you with the form, alternatively you can contact influenza@phe.gov.uk.

Please ensure all mandatory fields are completed, otherwise you will not be able to submit the data.

7.3 Main GP flu survey: manual entry (mandatory fields)

1. Seasonal Flu vaccine uptake summary data (Mandatory)			
Summary data	(A) Number of Patients registered on day of extraction.	(B) Number of patients within (A) that have received the Flu vaccine since 1st September 2019	Vaccine Uptake (%) calculated by the system
All Patients			
Aged 65 and over			
Aged 6 months to under 2 years			
Aged 2 years to under 5 years			
Aged 5 years to under 16 years			
Aged 16 to under 65 years			
Summary of patients in one or more at-risk group(s) (excluding 'healthy' pregnant women, those with morbid obesity with no other clinical risk group and carers)			
Aged 6 months to under 2 years			
Aged 2 years to under 5 years			
Aged 5 years to under 16 years			
Aged 16 to under 65			
Pregnant Women			
Pregnant and NOT IN a clinical risk group			
Pregnant and IN a clinical risk group			

7.4 Child GP flu survey: manual entry (mandatory fields)

1. Seasonal Child GP Flu vaccine uptake summary data (Mandatory fields)			
Summary data	(A) Number of Patients registered on day of extraction.	(B) Number of patients within (A) that have received the Flu vaccine since 1st September 2019	Vaccine Uptake (%) calculated by the system
Age 2 years (Birth Cohort: 1 September 2016 - 31 August 2017)			
Aged 2 and NOT in a clinical risk group			
Aged 2 and IN a clinical risk group			
Age 3 years (Birth Cohort: 1 September 2015 - 31 August 2016)			
Aged 3 and NOT a clinical risk group			
Aged 3 and IN a clinical risk group			

7.5 GP flu survey: data validation rules

1. Figures entered for the number of vaccinations administered and number of vaccinations refused/declined must be less than or equal to the number of patients registered in the group for which the figure is being entered.
2. Figures entered for number of vaccinations administered in schools, pharmacies and other healthcare settings must be less than or equal to the number of vaccinations administered in that group.
3. 'All patients' is a count of all registered patients, including those in clinical risk groups, or who are pregnant or who are carers. Each patient should only be counted once.
4. Figures entered in the section 'Summary of patients in one or more at-risk group(s) (excluding 'healthy' pregnant women and carers)' must be less than or equal to the corresponding fields for 'All patients'.
5. Patients may appear in more than one risk group. This means that it is possible that the total patients in all individual risk groups might be more than the total patients in the at-risk summary. However, people that appear in more than one risk group should only be counted once in the 'Summary of patients in one or more at-risk groups'.
6. For the section 'Pregnant and NOT IN a clinical risk group', the 'Number of patients within "A" that have received the flu vaccine since 1 September 2019, should usually be less than the total of the number of patients vaccinated for 'All patients – aged 16 to under 65' minus the number of 'Summary of patients in one or more at-risk group(s) (excluding 'healthy' pregnant women and carers) – aged 16 to under 65'.
7. For the field 'Pregnant and IN a clinical risk group' the 'Number of patients within "A" that have received the flu vaccine since 1 September 2019' should usually be less than the number of patients vaccinated for 'Summary of patients in one or more at-risk group(s) (excluding 'healthy' pregnant women and Carers) – aged 16 to under 65'.

Data providers are given a validation error message if the number of pregnant women is higher than the 16 to under 65 age band but will allow data providers to confirm and submit the data if they wish. It is accepted that some pregnancies occur in the under-16s, so the validation check is a warning only.
8. Numbers entered by age bands for each of individual clinical risk group(s) must always be less than or equal to the corresponding fields for 'Summary of patients in one or more at-risk group(s)'.
9. Carers should not be greater than the 'total patients' or less than the 'total patients at risk'.
10. 'All patients' registered and vaccinated should equal the total number of patients registered and vaccinated with a gender Read code.

11. 'All patients' registered and vaccinated should equal the total number of patients in the ethnicity field including those with a deprecated ethnicity code, unknown ethnicity, not stated or refused.

7.6 Child GP flu survey: data validation rules

1. 'All patients' is a count of all registered patients aged 2 rising to 8 years on 31 August 2020 including those in clinical risk groups. Each patient should only be counted once.
2. Patients in the 'All patients' and individual age groups who have been vaccinated will be less than or equal to the total number of patients registered in that cohort.
3. Patients in a clinical risk group and in the 'All patients' and individual age groups who are vaccinated will be less than or equal to the total number of patients registered in that cohort.
4. Figures entered for the number of vaccinations administered and number of vaccinations refused/declined must be less than or equal to the number of patients registered in the group for which the figure is being entered.
5. Figures entered for number of vaccinations administered in schools, pharmacies and other healthcare settings must be less than or equal to the number of vaccinations administered in that group.
6. 'All patients' registered and vaccinated should equal the total number of patients registered and vaccinated with a gender Read code.
7. 'All patients' registered and vaccinated should equal the total number of patients in the ethnicity field including those with a deprecated ethnicity code, unknown ethnicity, not stated or refused.

8. Reviewing, editing and downloading data on ImmForm

Please note that the flu vaccination data on ImmForm form part of Official Statistics and therefore should not be shared or published in the public domain before the Official Statistics are available on the GOV.UK website.

If you are unsure as to whether you can share the data and with whom, please ensure you email the national flu team for guidance at influenza@phe.gov.uk

8.1 Amending data after it has been entered

You can return to the data entry screen and update or edit information that you may have previously entered, or was submitted on your behalf by automated upload, provided you do this within the submission and editing period. You will not be able to amend the survey after the end of your respective data entry period (see Section 4 for the Data collection timetable).

GP practices should still check and/or query any data that is automatically uploaded. GPs who identify errors with their data (whether it was manually entered or via an automated upload) after their survey end date has passed, should notify their local NHS England team/CCG flu co-ordinator(s).

8.2 Exporting data into Excel



After entering data, data providers can retain a copy of the data that they have submitted. There are links that export the data into Excel; look for the Excel icon (left) and then click on the relevant link to open or save the file.

The Excel export has been provided to facilitate local printing. We recommend that you do not try to print directly from the ImmForm website as we are unable to control any potential problems centrally from the website due to the wide variations in local browser and printer configurations.

8.3 ImmForm uptake summary tool

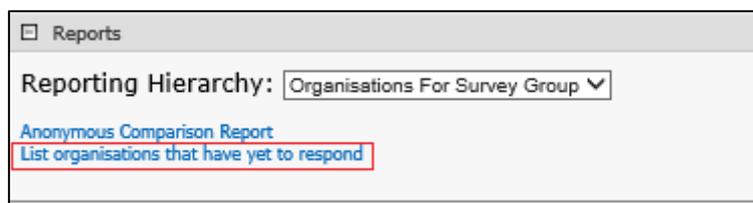
This is an interactive reporting tool on the ImmForm website for service users to compare organisations within the NHS for the weekly data during the flu season. The aim of the tool is to help improve the visualisation of the data and to help standardise some of the outputs in the local areas. Organisations will be able to view uptake rates for the cohorts where the main mode of delivery is via the GP practice by geographical area in relation to other practices/local NHS England Teams/CCGs that they are responsible for. Data will be downloadable in Excel with accompanying caveats (see above Section 8.2 on exporting data into Excel).

To access the tool, you must be logged onto ImmForm. Select 'Data Collection', followed by 'Flu' to get to the Flu Data Collections Home page and finally select the 'Uptake Summary' tab as below. Access to the uptake summary tool data is restricted, depending on the permissions the user has on ImmForm.



8.4 Non-responder reports

Local NHS England teams/CCGs have the opportunity to see which GP practices have already entered data or have failed to respond to the survey, by running non-responder reports. Running this report before the data entry period closes allows for follow-up of any outstanding data that needs to be submitted by the GP practice. This can be found on the survey cover page.



9. Troubleshooting tips

Please ensure you have read the ImmForm help sheets available via the 'Help Guides' tab on the ImmForm Home page before contacting the helpdesk team, as most problems are resolved by referring to the relevant help sheet.

9.1 Unable to enter data because survey is read-only

If this message comes up it means that the data entry period has either not opened yet or has ended. You cannot make amendments and changes to data submissions outside the editing period that has been set for each monthly survey

See Section 4 for the Data collection timetable

9.2 The flu survey is not visible

Please check you are using the correct URL, that you are accessing ImmForm during service hours and that you are using Internet Explorer version 8 or above (see the [ImmForm Help sheets](#) for more information).

Should you still not see the GP flu survey, it may be a problem to do with your access permissions and/or your GP practice is not registered. After making sure that you have access for the correct organisation, if there is still a problem, please notify the ImmForm helpdesk via helpdesk@immform.org.uk or call on **0844 376 0040** with full details.

9.3 Unable to print survey form

Some users have reported problems when trying to print completed survey forms. This is not something we can control centrally from the website. We have therefore provided users with the ability to output the saved data to Excel (see Section 8.2 Exporting data into Excel).

10. ImmForm

10.1 Background

ImmForm (www.immform.dh.gov.uk) is the system used by the NHS and PHE to collect data on vaccine uptake for immunisation programmes and provide vaccine ordering facilities for the NHS. ImmForm is easy to access, password protected and allows GP practices and local NHS England teams to submit, analyse and review their vaccine uptake data.

10.2 Service hours

ImmForm service hours are 9am to 5pm Monday to Friday (excluding bank holidays). Although the website is usually available outside of these hours, essential maintenance can be conducted during this time and therefore the website may become unavailable without notice.

Several ImmForm 'help sheets' are available, including troubleshooting, how to register and helpdesk on the ImmForm website under the 'Help Guides' tab on the ImmForm home page.

Data providers should also monitor the 'News items' section of the website where timely information about flu surveys and important messages for GP practices or Local NHS England team co-ordinators will be posted as and when necessary.

10.3 Helpdesk

The ImmForm helpdesk can be contacted via telephone on 0844 376 0040 or by emailing helpdesk@immform.org.uk. However, please note that not all queries should go to the support team. For example, queries about specific surveys should go to other dedicated mailboxes and queries about vaccine deliveries should go to the distributors. Please see 'Help sheet – contact points' for more information, available via the 'Help Guides' tab on the ImmForm Home page.

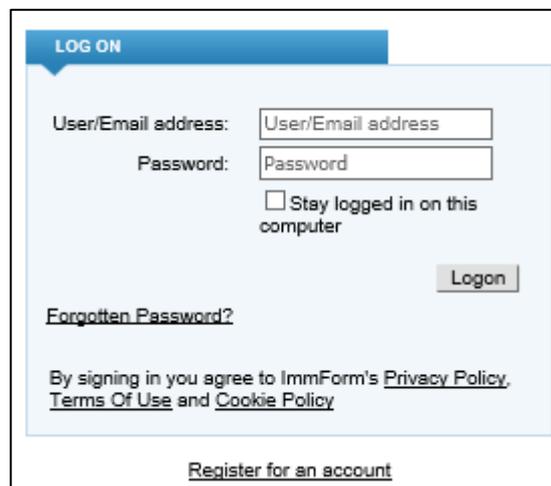
10.4 Accessing ImmForm

ImmForm can be accessed via www.immform.dh.gov.uk using existing logins and passwords. Currently ImmForm is designed and tested to work with Google Chrome and Internet Explorer; you must use Internet Explorer version 11 to access ImmForm. Only those who require flu vaccine uptake data for operational purposes will be given access to ImmForm; for all other data requests, please email influenza@phe.gov.uk.

10.5 How to obtain login details for ImmForm

Most GP practices and local NHS England teams/CCGs are already registered on ImmForm for providing vaccine uptake data for seasonal flu and other surveys and therefore should have a valid organisational account login and password. If you have forgotten your current password, you should use the password reminder option available on the login page (see screenshot below). Only those who require access to the data for operational purposes will be given access to the site directly.

Please make sure you are entering the password correctly, as it is case sensitive. Please ensure there are no spaces after or before the password, especially if you copy and paste in the password.



LOG ON

User/Email address:

Password:

Stay logged in on this computer

Logon

[Forgotten Password?](#)

By signing in you agree to ImmForm's [Privacy Policy](#), [Terms Of Use](#) and [Cookie Policy](#)

[Register for an account](#)

If you are still encountering problems with logging in, you should contact the ImmForm helpdesk team via email on helpdesk@immform.org.uk or by calling on 0844 376 0040.

11. Read codes and SNOMED CT codes

11.1 What are Read codes and SNOMED CT codes; and how do we use them?

Read codes and SNOMED CT codes are different coded thesauruses of clinical terms used in GP practice IT systems. These sets of codes are commonly referred to as clinical terminologies (CTs). These CTs are used in all parts of the NHS to record patient information in a standardised way. Our team use them primarily for data collection purposes to extract vaccine uptake data for patients who fall into one or more of the designated clinical risk groups.

Our code specifications are written and reviewed by PRIMIS on an annual basis in line with the needs of the flu vaccination programme. More information on PRIMIS can be found in Section 3.3 and on their website:

www.nottingham.ac.uk/primis/index.aspx

The code specifications help us identify patients who have an at-risk code assigned to their GP record in order to extract the data for the survey. However, it is important to note that there may be some individuals with conditions not specified in the code specifications, which may be offered influenza vaccine by their GP based on clinical judgement. Therefore, it is important that the code specifications are NOT used for call/recall of patients or payment purposes.

11.2 Read codes to SNOMED CT codes: what is changing?

SNOMED CT codes are an international standard of clinical terms that will replace Read codes as the information standard in the NHS. This change to SNOMED CT codes will be taking effect in GP IT systems now although users may not have noticed any changes to the user interface. However, all GP IT systems are expected to be using just SNOMED CT codes this 2019/20 flu season. The data extraction specification for the GP flu programme will be dual coded in Read and SNOMED CT codes until the transition has been fully completed. The Immunisation and Countermeasures department (includes the national flu team) are conducting a bridging study to ensure that our data is robust, and we can spot any potential problems in the data due to the transition over to SNOMED CT.

General information on SNOMED CT can be found here:

<https://digital.nhs.uk/services/terminology-and-classifications/snomed-ct#summary>

More information regarding the SNOMED CT Implementation in Primary Care:

https://hscic.kahootz.com/connect.ti/t_c_home/view?objectId=300147

12. Useful contacts

You are advised to contact your local NHS England team immunisation lead/flu co-ordinator(s) and/or CCG immunisation co-ordinators (as appropriate) in the first instance. Also check this user guide first, as the information contained will cover the majority of questions. Please make every effort to target the appropriate contact, as sending queries to the wrong contact results in delays.

Survey collection and content

For queries regarding survey data collection content and process not covered in official correspondence, or in this user guide, or addressed by your Local NHS England Team/CCG lead /co-ordinator, please email influenza@phe.gov.uk.

Every attempt is made to respond to all queries received via the PHE mailbox as quickly as possible, but due to the usually large volume of calls and email queries received, particularly at the start of the survey, there may be delays in responding. Nevertheless, it is always best to email to ensure a response is received.

Log-in details/password reminders/registering new contacts

If you were previously registered and have used ImmForm, it is likely that your login details and password will still be valid. Remember you can also request a password reminder directly from the login page on ImmForm. To request a password to access the ImmForm website or changes to organisation codes or contacts etc., please email the ImmForm helpdesk via helpdesk@immform.org.uk.

Website support and technical issues

For technical issues concerning ImmForm, please email the ImmForm helpdesk via helpdesk@immform.org.uk.

Policy

For queries regarding policy or general immunisation questions not addressed in the annual flu letter or the Green Book or other published guidance, please address them to the DHSC via the GOV.UK website at:

www.info.doh.gov.uk/contactus.nsf/memo?openform.

Immunisation implementation

For clinical questions regarding immunisation programmes and the Green Book please email Immunisation.Lead@phe.gov.uk.

For specific queries regarding new immunisation programmes and miscellaneous vaccination questions please email immunisation@phe.gov.uk.

Vaccine supply

Vaccine supply queries should be sent to vaccinesupply@phe.gov.uk.

Commissioning/GP payments

Queries on commissioning and/or GP payments should be directed to NHS England via email to england.immunisation@nhs.net .

GP IT software suppliers

For queries regarding GP IT systems, including how to be included in automated bulk data uploads, please contact your GP system supplier in the first instance.

Frontline healthcare workers' vaccine uptake survey

For questions regarding the frontline healthcare workers' vaccine uptake data collection process and content, please use the feedback facility function on the ImmForm website or email hcwvac@phe.gov.uk.

Childhood flu vaccine uptake survey and child flu pilots (school delivery)

For queries regarding the new universal childhood flu vaccine uptake data collection process and content, and questions relating to the childhood flu vaccine pilot areas, please email ChildFluvac@phe.gov.uk.

National weekly flu report

For queries regarding data supplied in the national weekly flu report should be directed to the following email Respiratory.Lead@phe.gov.uk