

## Childhood vaccination & immunisations - QOF target report, July 2024

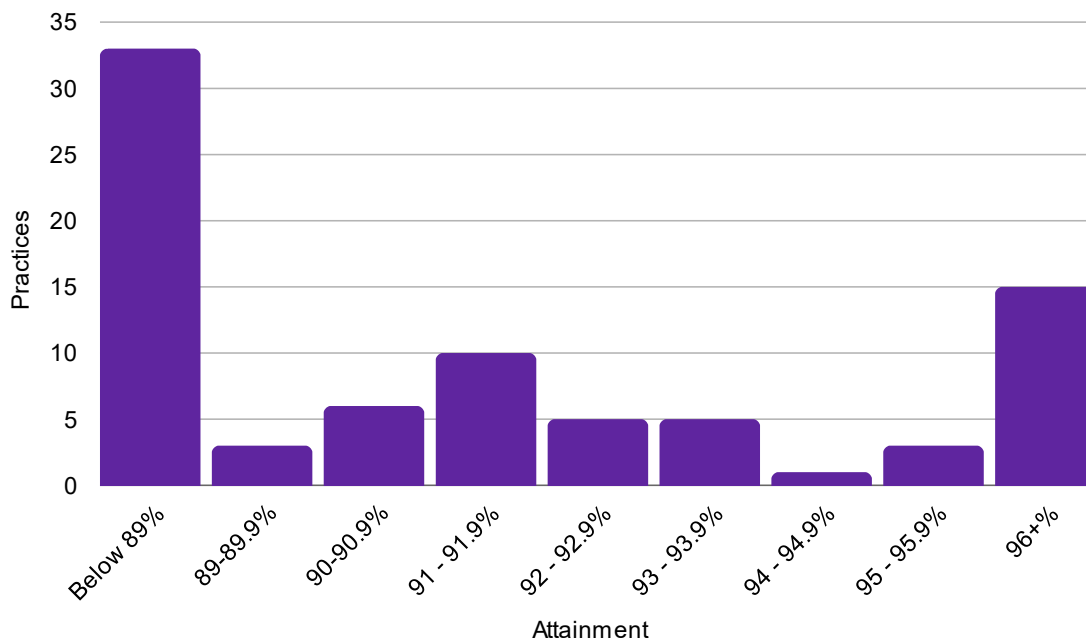
In May and June 2024, Londonwide LMCs contacted constituents following a continued awareness of the difficulties that some GP practices have experienced in achieving the childhood vaccinations and immunisation QOF targets, often for reasons that practices felt were out of their control.

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

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

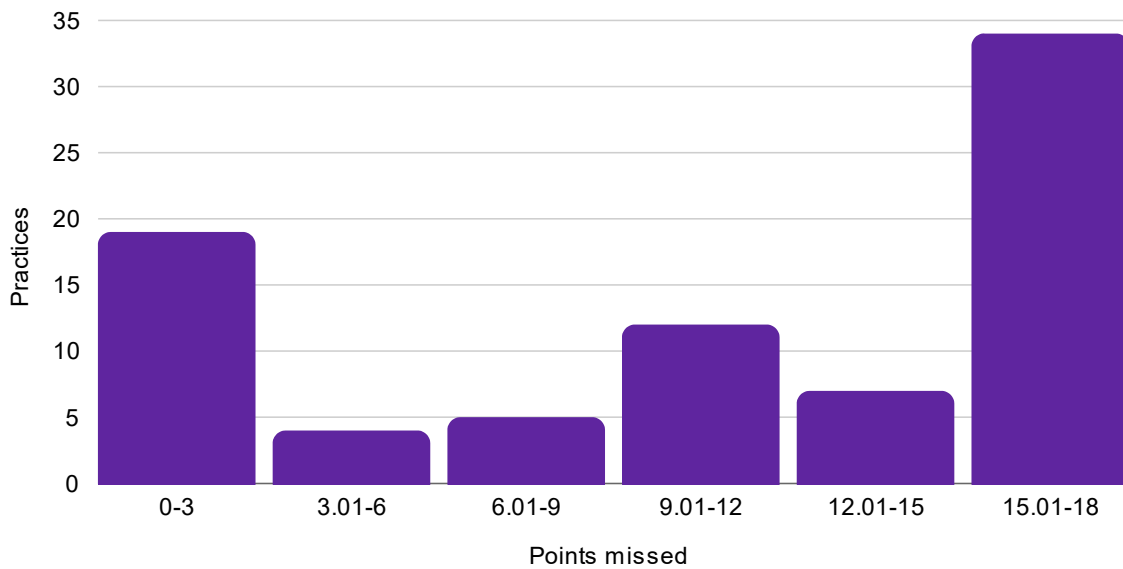
81 practices responded to the questions on percentage of targets reached and number of points missed across VI001-VI003. 80 practices responded to the questions the number of patients missed across VI001-VI003.

### Practice responses VI001% - percentage of target reached for this cohort

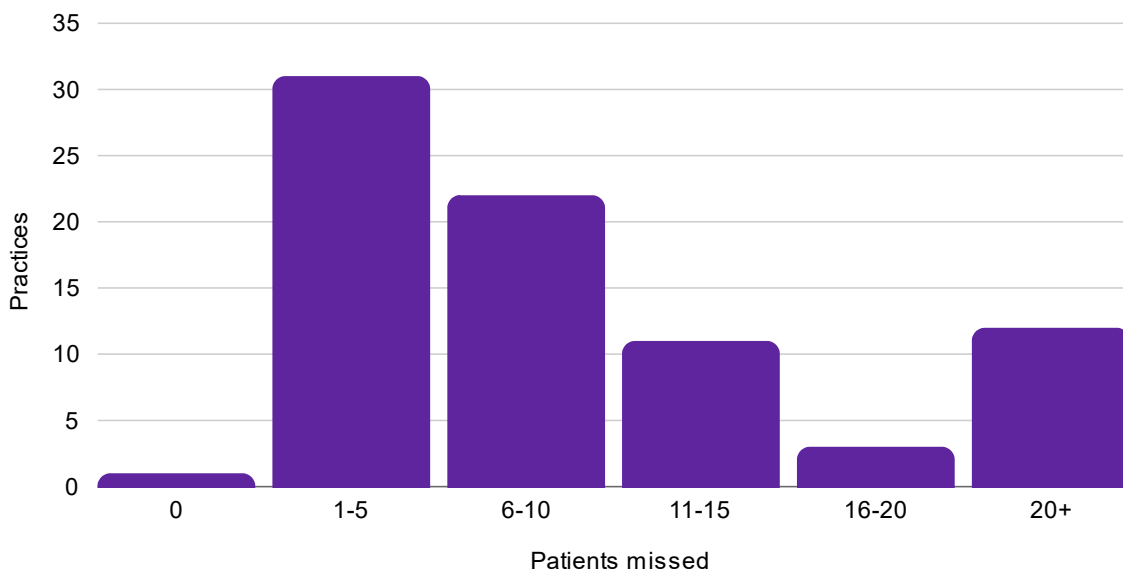


*The percentage of babies who reached eight months old in the preceding 12 months, who have received at least three doses of a diphtheria, tetanus and pertussis containing vaccine before the age of eight months. The threshold is 89-96%.*

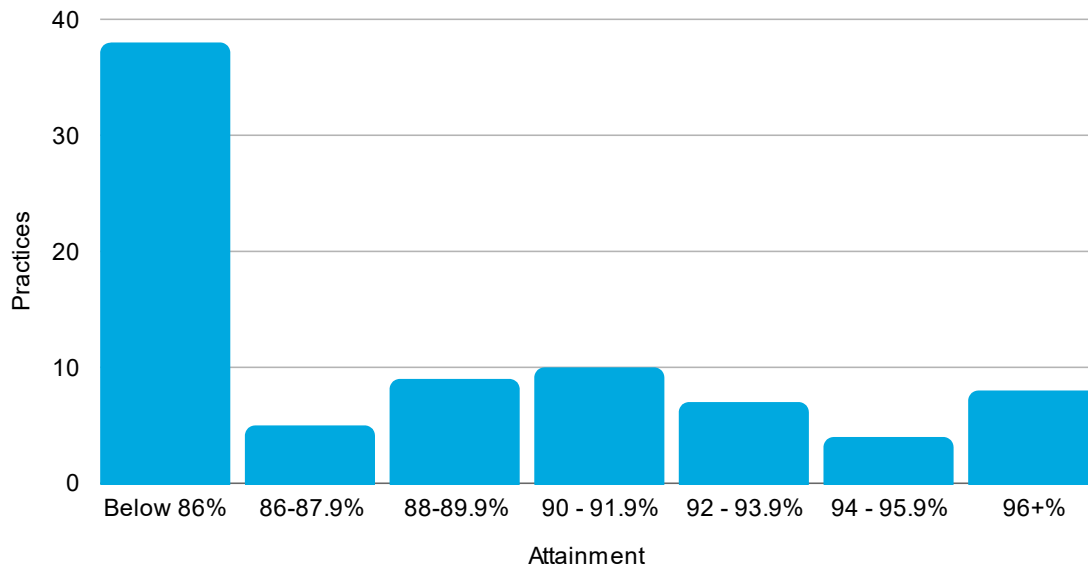
**Practice responses VI001 - number of points missed per practice out of a maximum of 18**



**Practice responses VI001 - number of patients missed per practice**

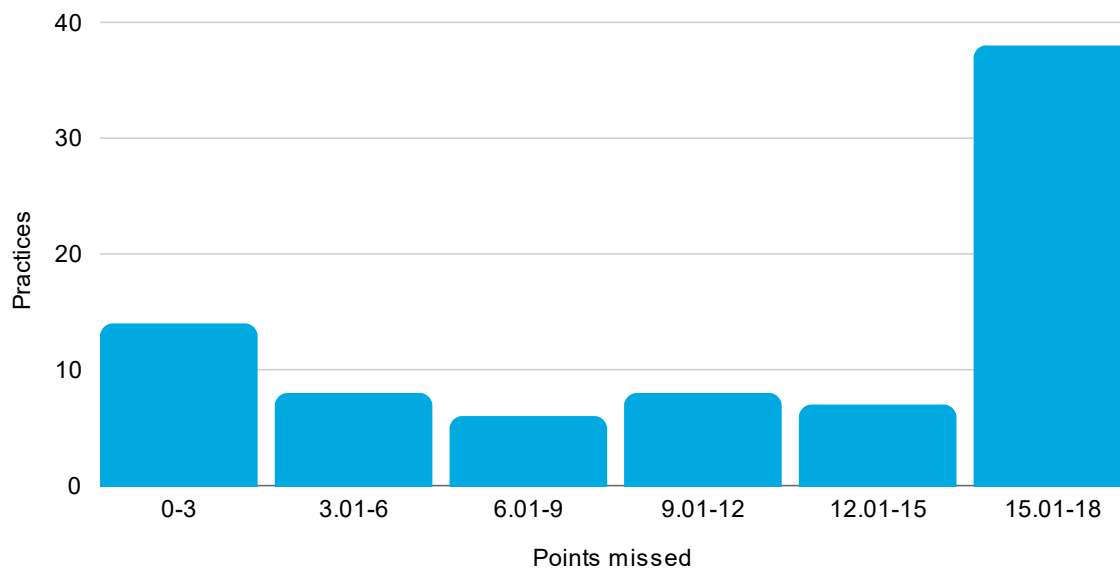


**Practice responses VI002 - percentage of target reached for this cohort**

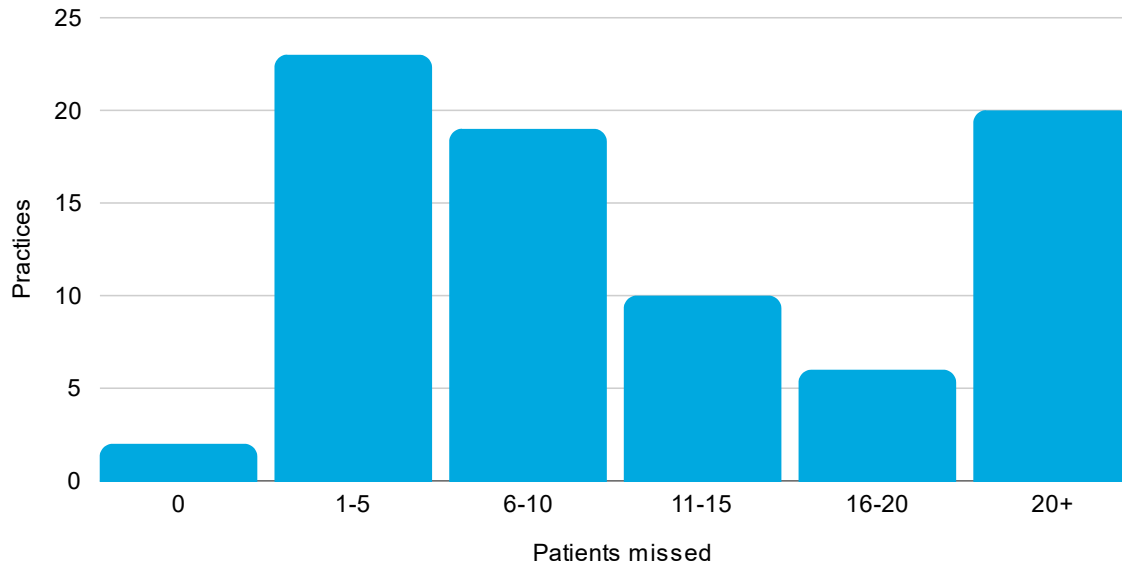


*The percentage of children who reached 18 months old in the preceding 12 months, who have received at least one dose of MMR between the ages of 12 and 18 months. The threshold is 86-96%.*

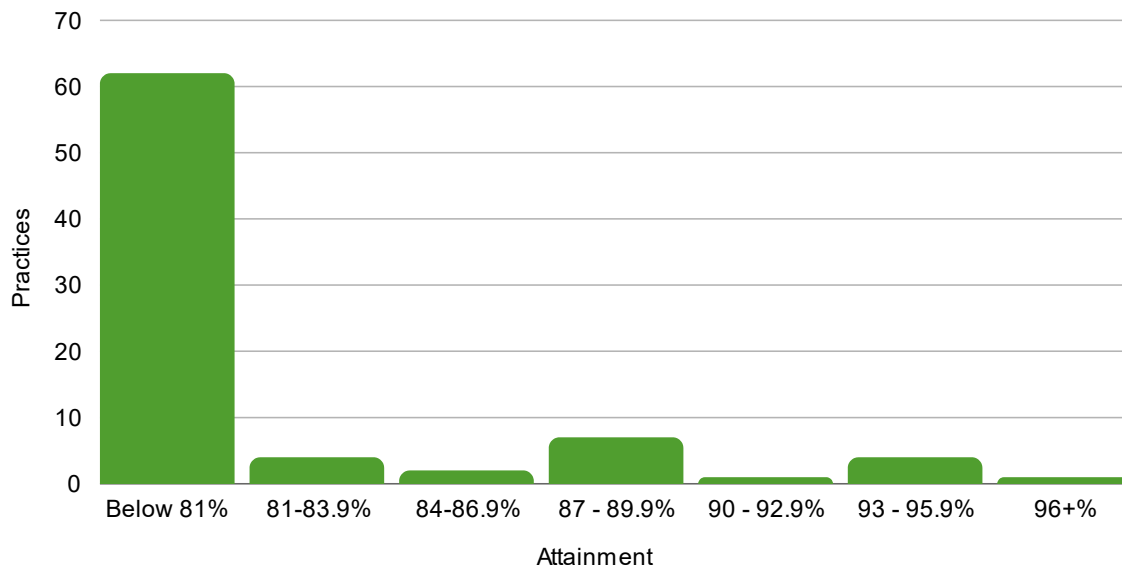
**Practice responses VI002 - number of points missed per practice out of a maximum of 18**



**Practice responses VI002 - number of patients missed per practice**

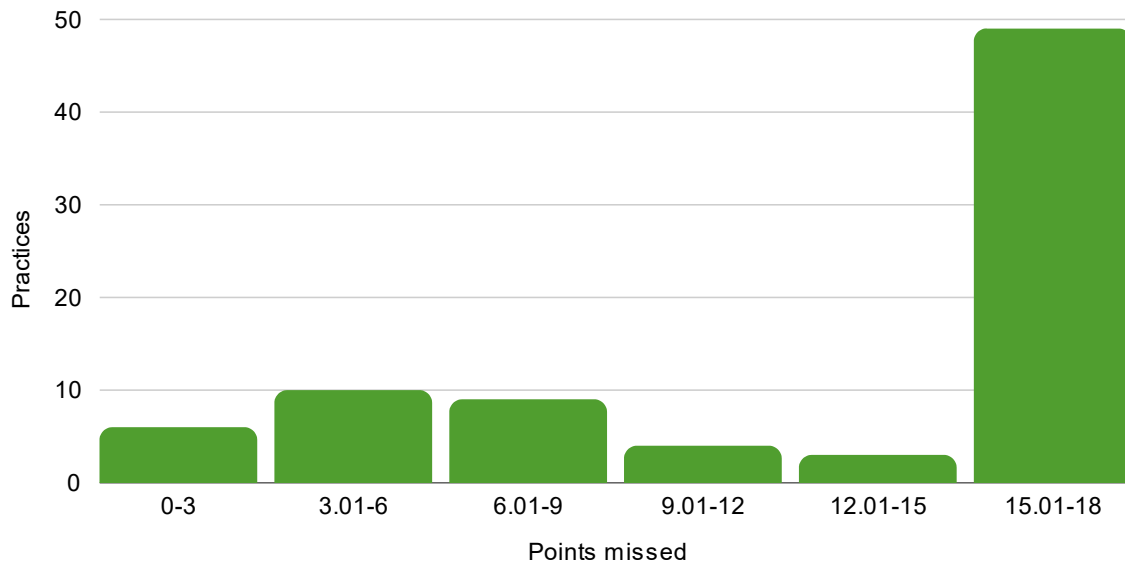


**Practice responses VI003 - percentage of target reached for this cohort**

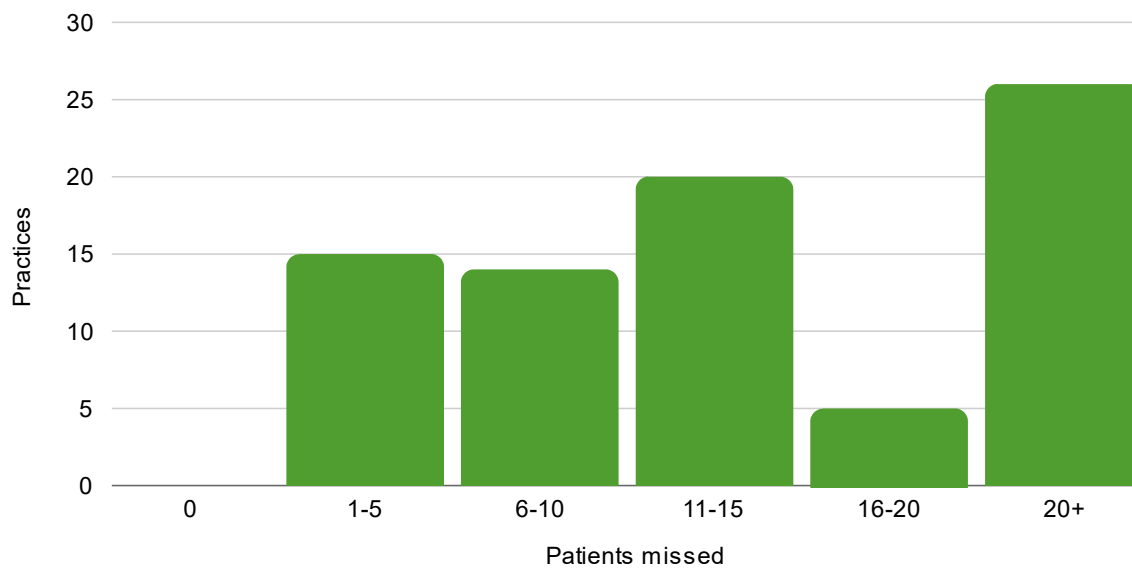


*The percentage of children who reached 5 years old in the preceding 12 months, who have received a reinforcing dose of DTaP/IPV and at least two doses of MMR between the ages of one and five years. The threshold is 81-96%.*

**Practice responses VI003 - number of points missed per practice**



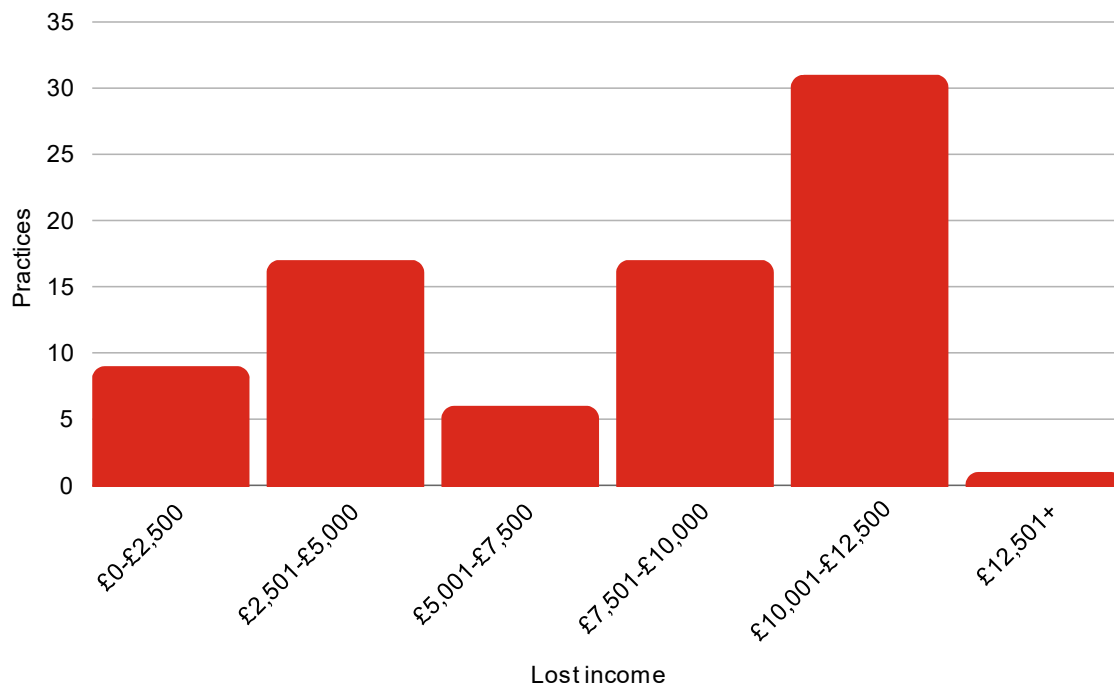
**Practice responses VI003 - number of patients missed per practice**



### Reasons given by practices for missed vaccinations

- Parental refusal.
- Non-response to invitations, including letter, text and follow-up calls.
- Vaccinations provided outside of approved schedule, including through parental decision to delay and children being ill during the approved vaccination window.
- Vaccinations already received abroad (including on schedules different to England).
- Vaccine hesitancy within certain religious, national and ethnic communities.
- Economically deprived communities without regular access to the internet, tendency to change phone numbers as and when they buy new PAYG SIMs, frequently moving home, including not having a fixed address.
- Parents who are not opposed to vaccination but do not prioritise booking in and/or keeping appointments due to busy lifestyles.

### Conclusion and payment losses



Many of our constituents displayed clear frustrations that the system does not allow them to ‘exception report’ for reasons given on the previous page. 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 81 responders, a total estimated loss of £643,307.53 was recorded at an average of £7,942.06 per practice, with the highest single loss estimated as £34,575.00 by a 27,000-patient list practice.

## 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.

We would like to share some of the comments received as a synopsis of general feeling from many practices in London:

- “Parents refusing or not booking in time within the narrow windows for the targets (eg: some booked a week or two later), quite a lot of patients meet the schedules for their own varied catch-up schedule if they had some immunisations abroad, which are not counted towards the targets even though they are up-to-date with the UKHSA schedule. The targets are very high! We are improving call-recall systems this year but this requires a lot of work for admin, nursing and medical staff. The Child Health Information Services list is not comprehensive enough.”
- “Some parents also wished to delay vaccinations, so we missed the deadline and therefore targets. Some children were not able to have the vaccine within the deadline due to illness, so we missed the date deadline.”
- “High decline rate among Orthodox Jewish patients. Hesitancy - delayed vaccination, some children are vaccinated eventually but too late to count towards the target. Beliefs that children should be vaccinated from one year onwards - child is too young at eight weeks. Busy life, large families with small kids, and high DNA rate, parents have challenges in planning for vaccinations. Beliefs that vaccinations are harmful. Beliefs that vaccines contain ingredients that are forbidden according to their religion.”
- “We have a large Romanian population of anti-vaxers. We put a lot of time into recalling but the deficit is down to patient choice, and we cannot force them as patient choice is allowed. It is unfair we cannot exception report after two or three recalls as we can smears. This is set up for failure.”
- “We have missed all QOF2324 points as we have a big population of parents who decline all childhood immunisations. It is impossible to achieve the targets in the area where our practice is based.”
- “Lack of engagement from parents, reduced understanding of the benefits of the vaccines, over cautious parents nervous of the vaccine benefits. All patients were contacted at least 5 times within the QOF year via multiple methods (Tel, SMS, letter).”
- “There is no payment for hitting anything below 96% achievement now which is almost impossible for many practices. Previously, there used to be a payment for 70% achievement and a higher payment for 90% achievement. Recently, we engaged in a local MMR catch up scheme where our ICB were paying £50 per MMR jab plus an item of service fee of £10.26. This feels contradictory [to the national target], as the ICB can see practices are falling behind with immunisation targets and they then decide to provide an incentive scheme at the last moment.”

- "We carried out extensive research into this issue and we have found that there are several factors primarily out of our control, these being:
  1. High declined rate (about a third of those missed).
  2. Not responding to repeated invites, while these parents do not explicitly decline, they are essentially doing just that (around a quarter of all those missed).
  3. Vaccinated but outside the tight timeframe of QOF (10-20%).
  4. The final quarter/third of those missed had started their immunisations but completed them."

Londonwide LMCs will be sharing this data with the General Practitioners Committee of the BMA to support them in their negotiations regarding target levels and the inability to exception report, particularly in cases where there are clinical indications for delaying vaccines such as prolonged illness or where there is informed parental refusal.

**Produced by Londonwide LMCs, July 2024**

*With thanks to Dr Hannah Theodorou and Alex Orton*