



Seasonal influenza frontline healthcare workers vaccine uptake survey 2013/14

ImmForm user guide for survey data providers

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About Public Health England

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Influenza Immunisation Monitoring Programme

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1. Introduction

In 2013/14, seasonal influenza vaccine uptake data will continue to be collected on frontline health care workers (HCWs) involved with direct patient care from all NHS trusts, including acute, mental health, ambulance, care and foundation trusts, as well as from GP practices and independent sector health care providers (ISHCPs), which will be submitted by their area teams (ATs). All trusts are responsible for submission of their data, including data on the vaccination of frontline HCWs in healthcare-providing organisations from which they commission services. Data will be collected via the ImmForm website, broken down by occupational staff grouping. Staff definitions will remain the same as last season and are consistent with NHS national workforce census definitions.

Cumulative data will be collected on vaccinations administered from 1 September 2013 onwards. The data collection will comprise four monthly surveys for October, November, December and January, with the collections starting from November 2013 through to February 2014.

A separate data collection tool, with four collection periods that align with the four monthly surveys, is also provided for ATs to use if they wish, to facilitate their collection of uptake data from GP practices and ISHCPs. Please note it is an **optional** tool for ATs to use in order to collate uptake data from GP practices. **PHE will not be collating this data.** There is a separate user guide for the collection tool – see document **Frontline healthcare workers vaccine uptake data collection tool 2013/14**.

The diagram of the survey hierarchy and the collection tool hierarchy is attached at Annex C.

1.1. Guidance for the seasonal influenza vaccination programme 2013/14

The annual flu letter published on 5 June 2013, set out the guidance for the seasonal influenza vaccination programme 2013/14. It is available at:

www.gov.uk/government/uploads/system/uploads/attachment_data/file/207008/130613_Flu_Let ter v 29 Gateway GW signed.pdf

A joint letter has been published by the Department of Health (DH), NHS England (NHSE) and Public Health England (PHE) encouraging higher vaccine uptake among frontline health and social care workers¹.

Also, copies of letters issued by senior officials in DH, NHS England and PHE to particular professional groups such as doctors, nurses, midwives and allied health professionals have been posted on the Flu Fighters website².

¹ www.gov.uk/government/publications/flu-vaccination-increasing-uptake-by-health-and-social-care-workers

² www.nhsemployers.org/HealthyWorkplaces/StaffFluVaccination/Latest-news/Pages/staff-group-letters-released

1.2. Why is immunisation of frontline staff important?

Immunisation of frontline staff against influenza reduces the transmission of infection to vulnerable patients who are at higher risk of severe outcomes and in some cases may have a suboptimal response to their own immunisations. Immunising HCWs also protects themselves and their families from infection. Staff vaccination results in lower rates of influenza-like illness, hospitalisation, and mortality in the elderly in healthcare settings.

The updated code of practice for the prevention and control of health care associated infections (HCAI) emphasises the need for NHS organisations to ensure that HCWs are free of and protected from communicable infections (so far as is reasonably practicable), and that all staff are appropriately educated in the prevention and control of infections. Policy and procedures on the prevention and management of communicable infections (including staff immunisation programmes) must be in place.

Further information on the code of practice is available at: www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_1 22604

2. General questions and answers

2.1. Do I have to submit these data?

Yes, this is a **mandatory** collection, approved as such by ROCR (ROCR/OR/2209/001MAND). The HCWs seasonal influenza vaccine uptake data survey is a vital part of influenza surveillance in England and provides important information to assist with the implementation of seasonal influenza vaccination campaign, locally, regionally, and nationally.

2.2. On which staff groups should I collect data?

Vaccine uptake data are collected on all frontline HCWs with direct patient care. This includes the following staff groups: doctors, qualified nurses, other professionally qualified clinical staff, and support to clinical staff. Data on GP practice staff and from ISHCPs are collected at AT level with the **option** of using the data collection tool (see section 1). Staff group definitions are identical to NHS workforce census definitions and are described in detail in Annex A (page 17). Please refer to the Green Book for more information on the clinical guidance on what immunisations should be given. Students and trainees in these disciplines and volunteers who are working with patients should also be included. The staff list is not an exhaustive list and decisions to provide immunisation should be based on local assessment of likely risk, exposure to influenza and direct contact with patients.

Chapter 12 of *Immunisation against infectious disease* (the 'Green Book')³ states that: 'Influenza immunisation helps to prevent influenza in staff and may also reduce the transmission of influenza to vulnerable patients. Influenza vaccination is therefore recommended for healthcare workers directly involved in patient care, who should be offered influenza immunisation on an annual basis'. *It is for employers to assess the risks to staff and patients and offer flu vaccination accordingly.*

2.3. Are vaccine uptake data being collected from social care workers?

No, we are not collecting data on social care workers.

2.4. Can a trust report vaccine uptake data for another trust?

For purposes of ordering vaccine, one trust may order and store vaccine for another trust. However, vaccine uptake data must be reported at the **individual** trust level.

All trusts are registered on ImmForm, although not all trusts have a registered 'data provider' contact. A trust may only report for another trust, if they have both agreed for a registered contact 'data provider' to submit another trust's data. However data must be reported **separately** for each trust.

³ www.gov.uk/government/publications/immunisation-of-healthcare-and-laboratory-staff-the-green-book-chapter-12

2.5. Who needs to provide vaccine uptake data?

ATs and Screening and Immunisation Coordinators (SICs) can access the survey, as can trust HCW data providers (if registered on ImmForm). Contacts previously registered to provide seasonal influenza vaccine uptake data for 2012/13 may still be valid, if individuals have the same email address and still work for the same organisation. Following the NHS reorganisation that came into effect on 1 April 2013, some individuals may be in new roles for new organisations and may need to register or amend their login details. New contacts can also be registered at any time (see section 5 below for more information about the ImmForm website and a link to help sheets).

3. Data collection dates

The first survey will start in November 2013 (for vaccinations up to end October 2013) and the final survey will begin in February 2014 (for vaccinations up to end January 2014).

Please see below the 2013/14 monthly collection dates:

Survey month	October	November	December	January
	2013	2013	2013	2014
Data should be provided on vaccinations given between the following dates (inclusive)	1 September	1 September	1 September	1 September 2013
	to	to	to	to
	31 October 2013	30 November 2013	31 December 2013	31 January 2014
Trusts	1 November to	2 December to	2 January to	3 February to
	11 November 2013	10 December 2013	14 January 2014	11 February 2013
	(7 working days)	(7 working days)	(9 working days)	(7 working days)
Area teams	1 November to	2 December to	2 January to	3 February to
	13 November 2013	12 December 2013	16 January 2014	13 February 2014
	(9 working days)	(9 working days)	(11 working days)	(9 working days)

- Each month trusts have seven working days to submit data. Two extra days have been allocated for the December survey to account for any staff leave taken during the winter holiday period.
- ATs have two additional working days to quality assure data from trusts and enter data from GP practices and ISHCPs and validate/amend data as appropriate.
- Once data are submitted, PHE will also validate the data and query any possible anomalies.
- All trusts, ATs, and PHE will be able to view and amend the submitted data up until their respective end dates for each month (after which data will be read-only).

4. Survey dataset

The dataset for the seasonal influenza (HCWs) vaccine uptake collection 2013/14 is in **Annex B.**

5. ImmForm website

The ImmForm website www.immform.dh.gov.uk provides a secure platform for vaccine uptake data collection for several immunisation surveys, including the HCWs seasonal influenza vaccine uptake survey. The ImmForm website is a service for NHS customers provided by Infomax Ltd on behalf of PHE. ImmForm is easy to access, is password protected, and allows ATs and trusts to analyse and review their vaccine uptake data.

For more information about how to register and use ImmForm, please refer to the following help sheets at:

www.gov.uk/government/organisations/public-health-england/series/immform

6. The survey

6.1. Survey overview

- The survey is cumulative; data submitted should be on vaccinations given from 1 September 2013 until the relevant month end, and not just on vaccinations given since the previous month's survey.
- As some trusts may finish their vaccination programme before the final collection, there will be an option on the survey form that allows trusts to indicate that their programme has been completed. If the 'We have finished our seasonal influenza vaccination campaign so these data can be regarded as final' box is selected, trusts will not have to submit data for remaining months (unless their data change, for example, the vaccination of new staff that may have joined), as their last submitted data will be carried forward as their final data. If trusts have finished their campaign, but do not select the box to indicate their programme has been completed, they will appear as a 'non-responder' for the following month's survey, data will not be carried forward, and they will be required to submit data for that month.
- The data will be collected via the ImmForm website. No e-mail or fax submissions will be accepted.

6.2. Entering data onto the survey form

6.2.1. Select the survey

Once you have successfully logged in you will need to select the correct survey, click on 'Surveys' on the top menu bar. You need to select your trust code, under the survey you wish to provide data for, in this case the **Seasonal flu monthly vaccine uptake (frontline healthcare workers – all trusts) 2013/14.** ATs will have their own code (e.g. 'ATQ44'), under which they can enter their data for GP practices and ISHCPs.



6.2.2. Select the survey month

Select the appropriate month if necessary (the page defaults to the current month's survey).

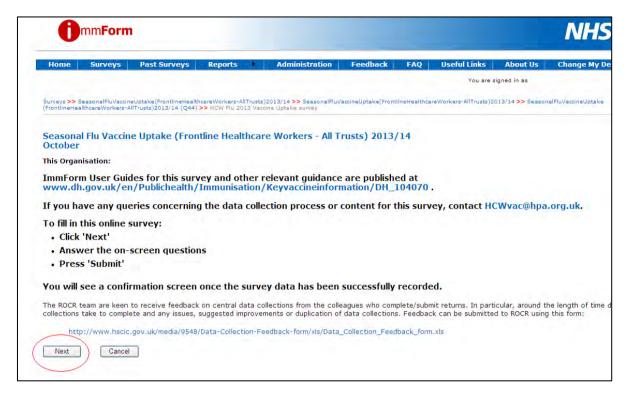
During the campaign, as each survey month opens and closes, the option to view any data entered for any specific month can be accessed by clicking on any of the blue links under 'Switch to another survey'.

6.2.3. Open the survey

To submit data or view and/or amend data you have already posted, click on 'Submit/Amend/View survey data'.

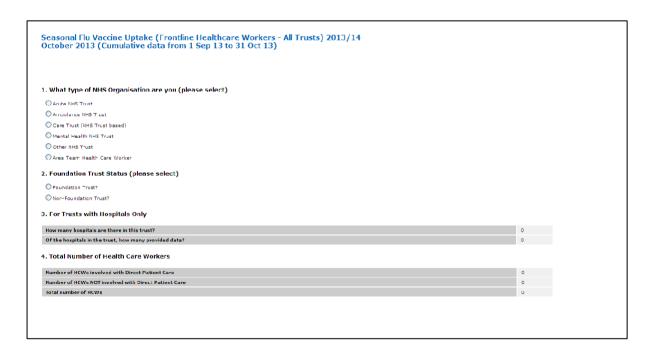


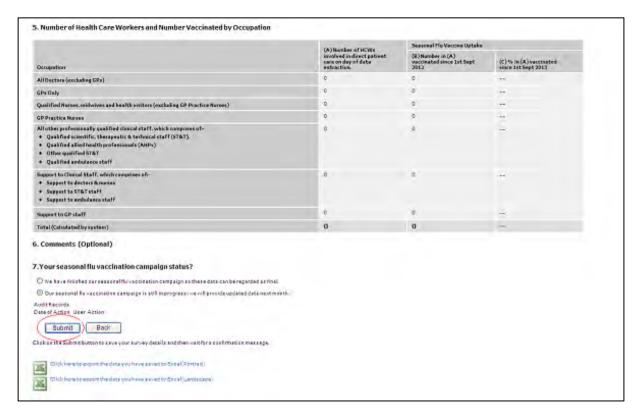
Confirm the details are correct and click on 'Next'.



6.2.4. Entering and amending data

You will see the following data entry screen for 2013/14:





Complete the data fields and click on 'Submit' at the bottom of the page.

When you have entered your data, click on the 'Submit' button (the system will automatically calculate the percentage uptake figures).

You will then get a confirmation message but where errors have occurred, instructions regarding the fields requiring further attention will be shown. Should there be an anomaly with the data entered, the system will alert you to the fields that failed the data validation checks and therefore will require amending.

Once the data are accepted, a page confirming the successful entry is displayed.

It is here you have the option of extracting the data you submitted to Excel, using the 'Click here to export the data you have saved to Excel' link.



6.3. Possible issues

6.3.1. I cannot enter data because the survey is read-only

If this message comes up it means that the HCWs data entry window has not opened yet (i.e. you are trying to enter data before the current month ends) OR has ended (i.e. it is more than 7/9/11 working days, as appropriate, from the start of the month). Data cannot be entered by a trust after the trust deadline. ATs have access for an additional two days after the trust deadline, but will not be able to submit/amend data after the ATs deadline (see section 3 for data collection dates).

6.3.2. When I press submit, a data validation error comes up

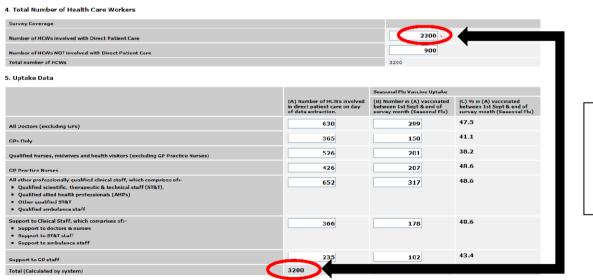
There may be several reasons why the data validation check fails. The error message will indicate what the problem is. For example:

'There has been a problem submitting your survey data. The following problems have been encountered:'

The following data fields failed validation checks:

 Number of HCWs involved with direct patient care must be equal to the sum of number of all doctors (excluding GPs), number of GPs only, number of qualified nurses, number of GP practice nurses, number of other professionally qualified clinical staff, number of support to clinical staff, number of support to GP staff. Please amend this value.

The affected field is highlighted with a red asterisk, as shown below (circled in red, top right):



These two figures should be identical

In the example above, the figure in question 4 on the 'Number of HCWs involved with direct patient care' (circled in red, top right) is incorrect; this figure should be equal to the total number of HCWs vaccinated (circled in red, bottom centre), i.e. 3200, not 2300. Therefore, this figure needs to be corrected.

Please note that question 1 (What trust type are you), question 2 (Foundation trust status) must be completed before you can submit your data.

6.4. Keeping up-to-date on the latest survey news

ImmForm news is a section on the left-hand side of the ImmForm home page that enables us to communicate timely survey information to data providers, such as answers to general queries.



Tip: Keep an eye on the News section, as we will post important messages here regarding the survey including any answers to common queries.

7. Contacts

7.1. Seasonal influenza (HCWs) vaccine uptake survey queries

If you have any questions regarding the seasonal influenza (HCWs) vaccine uptake data collection process that are not addressed in the annual flu letter and/or other guidance, please use the feedback email function on the ImmForm website (or email HCWvac@phe.gov.uk).

Every attempt is made to respond to all queries received via this mailbox as quickly as possible, but please bear in mind there is sometimes a large volume of calls and email queries received particularly during the early weeks at the start of the survey. As a result, there may be delays in getting back to recipients. However, it is always best to email to ensure an adequate response is received.

7.2. Login/password reminders

If you have previously registered and used ImmForm, it is likely that your login will still be valid. You can request a password reminder directly from the ImmForm site (see section 5).

7.3. ImmForm support and registering new contacts

For ImmForm support, to register new contacts, and to provide general ImmForm feedback, please contact helpdesk@immform.org.uk. If you need to register several users at once, please use the Excel spreadsheet template provided (see notes in the spreadsheet that indicate which roles provide which types of access to the survey and collection tool respectively). Please do not amend the layout of the spreadsheet, as it is used for automated uploading of registration details.

7.4. Seasonal influenza (GP patient) vaccine uptake survey queries

Queries regarding the seasonal influenza (GP patient) vaccine uptake data collection process should be sent to influenza@phe.gov.uk

7.5. Other

- Should you have any policy or immunisation queries that are not addressed in the annual flu letter or the Green Book, please address them to the DH via the GOV.UK website at www.info.doh.gov.uk/contactus.nsf/memo?openform
- For queries about new programmes general implementation issues and miscellaneous vaccination questions please email the PHE mailbox at immunisation@phe.gov.uk

Annex A: Data item to workforce definition mapping

Please note GPs and GP practice nurses are separated further within the dataset on the ImmForm website – see the dataset at Annex B.

Data item	Definitions of staff groups
	Professionally qualified clinical staff – consisting of all professional staff with direct patient care.
All doctors	All doctors – consists of all doctors and dentists working in hospital and the community and GPs (excluding retainers). The figures include all grades of hospital, community and public health doctor or dentist (consultant, registrars, senior house officers, foundation years 1 & 2 staff, staff grades, associate specialists, clinical assistants and hospital practitioners) and students.
Qualified nurses	Qualified nurses including practice nurses – consists of qualified nursing, midwifery and health visiting staff, working in the hospital and community services and general practice. These nurses have at least first level registration. Includes nurse consultants, nurse managers and bank nurses and students.

All other professionally qualified clinical staff

This comprises:

- qualified scientific, therapeutic and technical staff (ST&T),
- qualified allied health professionals (AHPs)
- other qualified ST&T
- · qualified ambulance staff

Qualified scientific, therapeutic and technical staff (ST&T) – qualified health professionals and students (includes consultant therapists, ST&T managers and healthcare scientists).

These staff work alongside doctors, nurses and other health professionals and are categorised into the following two groups:

Qualified AHPs – qualified allied health professionals (AHPs) and students are the following staff:

- chiropodists/podiatrists
- dietitians
- occupational therapists
- orthoptists
- physiotherapists
- radiographers
- art/music/drama therapists
- speech and language therapists

In primary care, AHPs work in teams with GPs, nurses and other professionals, such as social workers, to provide quick and effective care for patients without the need for them to go into hospital.

Data item	Definitions of staff groups
	Other qualified ST&T – other qualified health professionals including healthcare scientists and pharmacists as well as students. These are other staff working in key professional roles.
	Qualified ambulance staff – ambulance paramedics, technicians, emergency care practitioners and ambulance service managers, but does not include ambulance trainees. From 2006, ambulance staff are collected under more detailed occupation codes which can't be applied to previous years. Therefore, there will be comparability issues.

Support to clinical staff – staff working in direct support of clinical staff, often with direct patient care, who free up clinical staff and allow them more time to treat patients.

Support to clinical staff

This comprises:

- support to doctors and nurses
- support to ST&T staff
- support to ambulance staff

Support to doctors and nurses – nursing assistants/auxiliaries, nursery nurses, healthcare assistants and support staff in nursing areas. Also includes clerical and administrative staff and maintenance and works staff working specifically in clinical areas, for example medical secretaries and medical records officers. They also include all support workers and healthcare assistants as well as students and trainees in central functions, as these are mainly general porters involved in moving patients around the hospital.

Support to ST&T staff – ST&T trainees and helper/assistants. Also includes healthcare assistants, support workers, clerical and administrative staff and maintenance and works staff specifically identified as supporting ST&T staff.

Support to ambulance staff – ambulance personnel, trainee ambulance technicians as well as healthcare assistants, support workers, clerical and administrative staff and maintenance and works staff specifically identified as supporting the ambulance service.

Data item	Definitions of staff groups	
	NHS infrastructure support – staff directly involved in the day-to-day running of the organisation and its infrastructure.	
N/A – not relevant to this data collection as these groups not involved in direct patient care	Central functions – includes clerical and administrative staff working in central functions. The group includes areas such as personnel, finance, IT, legal services, library services, health education and general management support services. Hotel, property and estates – includes clerical and administrative staff and maintenance and works staff working in areas such as laundry, catering, domestic services and gardens. This group includes caretakers and labourers. Managers and senior managers – staff with overall responsibility for budgets, manpower or assets, or accountable for a significant	
	area of work. Senior managers include staff at executive level and those who report directly to the board. These staff are essential to the smooth running of hospitals, Trusts and strategic health authorities. This excludes nursing, ST&T and ambulance managers in posts requiring specific clinical qualifications.	

Support to GP staff – staff working in direct support of GPs.

Support to GP staff	GP practice staff – includes a variety of staff who work in practices. These include physiotherapists, occupational therapists, receptionists and practice managers as well as students and trainees. However, practice nurses are included as qualified
	nurses within professionally qualified clinical staff instead.

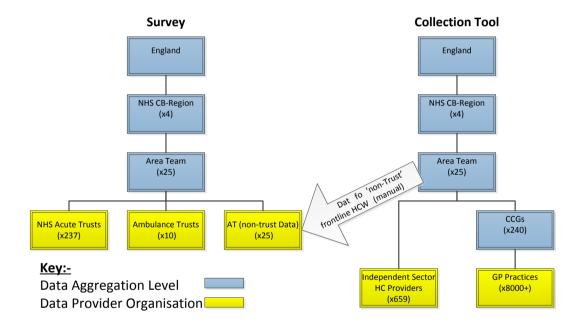
Annex B: Dataset for the seasonal influenza (HCWs) vaccine uptake collection 2013/14

1. What Type of NHS Organisation are you (please select)				
Sum of above				

5. Number of Health Care Workers and Number Vaccinated by Occupation			
	(A) Number of HCWs involved in direct patient care on day of data extraction	(B) Number in (A) vaccinated since 1st Sept 2013	(C) % in (A) vaccinated since 1st Sept 2013
Occupation			
All Doctors (excluding GPs)			Col B / Col A *100
GPs only			
Qualified Nurses, midwives and health visitors (excluding GP Practice Nurses)			Col B / Col A *100
Qualified Nurses, midwives and health visitors (GP Practice Nurses only)			Col B / Col A *100
All other professionally qualified clinical staff, which comprises of. Qualified scientific, therapeutic & technical staff (ST&T), Qualified allied health professionals (AHPs) Other qualified ST&T Qualified ambulance staff			Col B / Col A *100
Support to Clinical Staff, which comprises of: Support to doctors (excluding GPs) & nurses Support to ST&T staff Support to ambulance staff			Col B / Col A *100
Support to GP staff			Col B / Col A *100
Total (calculated by system)	Sum of above*	Sum of above	Col B / Col A *100

Annex C: Survey and collection tool hierarchies

FRONTLINE HEALTHCARE WORKER VACCINE UPTAKE: SURVEY AND COLLECTION TOOL HIERARCHIES



Note: For the purposes of this data collection, 'NHS acute trusts' includes all trusts (other than ambulance trusts).