

Matters Arising /Action Points from July 2014 Merton CCG Governing Body - for the September 2014 Meeting Pt 1					MCCG GB 25.09.14
Date	Item	Title and Action Required	Lead	Comments	Outcome
31.07.14	3	<u>To approve the minutes of the meeting of the Merton Clinical Commissioning Group on 29th May 2014</u> To make requested amendments to minutes	TF	Requested amendments made	Completed
31.07.14	5.2	<u>Chief Officer's Report</u> A member of Merton Residents' Health Forum asked if the Better Care Fund Performance Scorecard could be uploaded onto the website and EB agreed.	CC	Now uploaded	Completed
31.07.14	6.2	<u>South West London and St George's Mental Health Trust Estates Strategy – Consultation</u> It was agreed that DC would send EB a breakdown of the number of Merton patients accessing each site so that the impact could be quantified. Governing Body asked that the Trust's communication plan is provided to the CCG.	DC DC/RK	Ongoing	Ongoing
31.07.14	6.2	<u>South West London and St George's Mental Health Trust Estates Strategy – Consultation</u> It was agreed the Merton JSNA would be shared with the Mental Health Trust along with the recent mental health needs assessment.	KE	JSNA and recent mental health needs assessment. shared with the Mental Health Trust.	Completed
31.07.14	7.1	<u>NHSE and Local Merton CCG Balance Scorecard – month 12</u> AM asked what the barriers were to achieving the immunisation targets and it was agreed that Fiona White would look into this.	FW	See Attached	Completed
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Barriers to achieving the immunisation targets

Adults

- Flu jabs-no national campaign, historically the PCT now CCG has always performed at the same level 71%- last year was the first CCG reporting as a CCG (low rate of performance reported as practices were migrating to Emis web) and the first community pharmacy delivered service but this had no local impact on coverage but practices were left with stock which may result in less ordering by practices this year in order to reduce their financial risk. Poor uptake in at risk groups and pregnant women- national issue.
- Flu jabs/pneumococcal vaccines to active district nurse caseload- poor performance- new plans being developed for 2014-15- lead Debbie Lindon-Taylor
- Pneumococcal vaccines- ongoing- moving cohort at 65 years and at risk under 65 years- vaccine can be given at any time during the year and may impact of reduction of hospital admissions.
- Shingles vaccines- some vaccine shortages- variable uptake at practice level
- Pregnant women-whooping cough/flu vaccine- needs to improve uptake- advertise access via pharmacists may offer greater choice
- Reporting Flu flow chart developed / approved via CCG for escalation to CCG locality leads and practices

Children

- Hep B at risk children- excellent coverage
- Looked After Children- very good uptake of primary immunisations
- Poor uptake of childrens nasal flu (2-3 years)last year due to short shelf life of vaccine and small supplies at the start of the programme- needs to be a national campaign via Public Health England and local public health department for all childrens vaccines
- Still issues with primary care childrens immunisations- system's and processes have been checked at practice visits before Q4 returns. Rio system needs to be checked to make sure there are no data issue problems.This has been highlighted with public health . Immunisations data returns contracts are held by NHSE. Immunisation team in community services lead by Anne Howers and Amanda Sadler- no Service specification document agreed or signed off with performance metrics.
- GP practice performance variable if there are practice nurse shortages or new staff in post
- All practice nurses have had access to immunisation updates
- No prescribing errors have been reported relating to vaccines errors
- GP upload tool implementation completed
- No immunisation promotion meeting/ performance in progress since January 2014- no capacity within NHSE
- Flu jab/ pneumococcal vaccine in at risk groups children (additional vaccine to primary schedule after the age of 2 years)- remain low and variable from practice to practice.
- Flu jabs for special schools- awaiting response from community services re: capacity

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