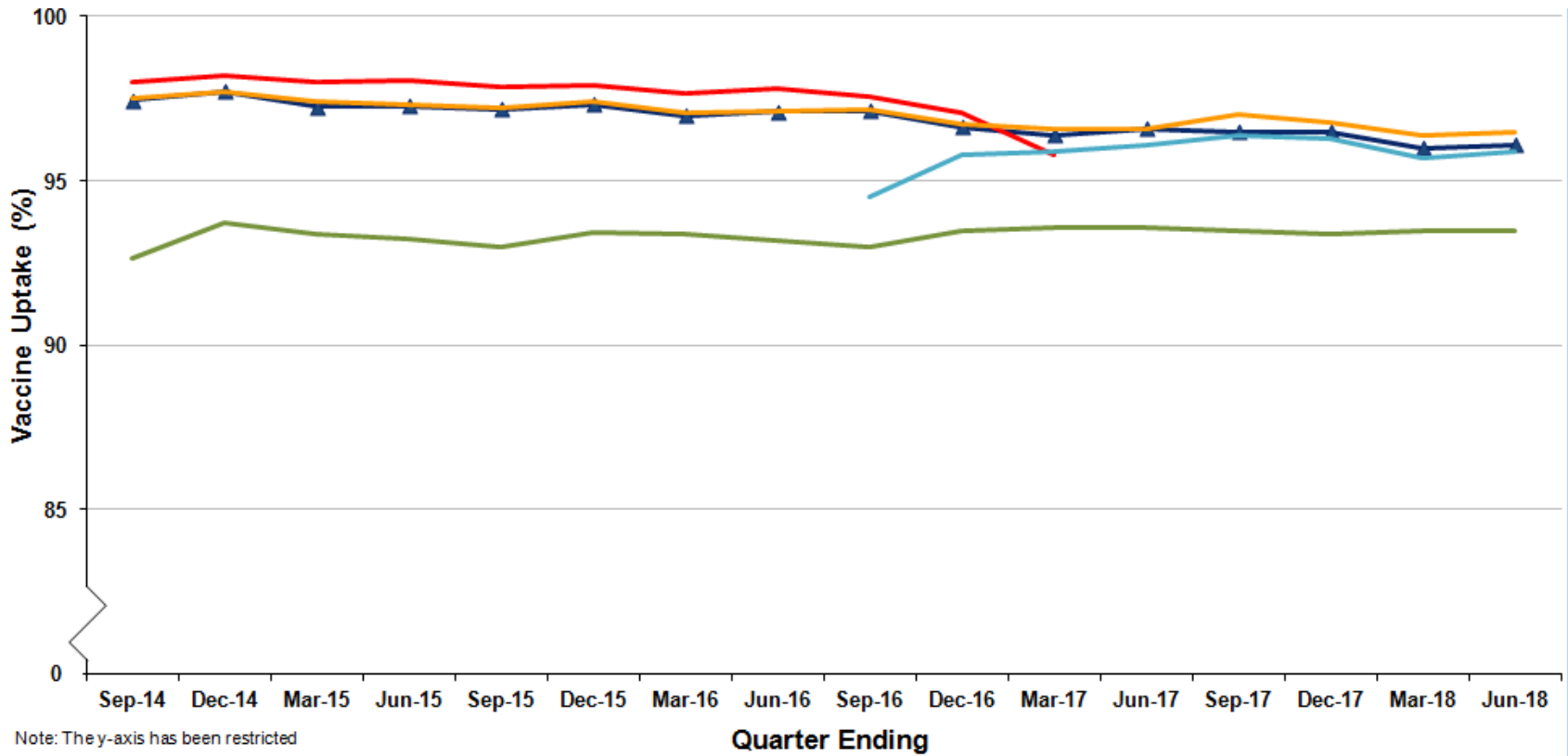


Immunisation Programmes Delivery in Scotland : 2018

Delivery Route / Method		Programmes		
	Childhood Programme (age <5 yrs)	Childhood Flu Programme (age 2-5 yrs)	School based Programmes (primary and secondary)	Adult Programmes and Programmes based on risk conditions
Co-ordination, Call / recall	NHS Board/HSCP (SIRS)	Central letter sent annually but recall by General Practice	NHS Board/HSCP (SCHS)	General Practice
Service Model / Delivery	Vaccine given at GP setting but most delivery staff employed by NHS Board	Primarily delivered by GP staff with no support from NHS Board	Delivered by NHS Board/HSCP employed staff (School Immunisation Team)	Primarily by GP staff

Quarterly immunisation uptake rates in Scotland

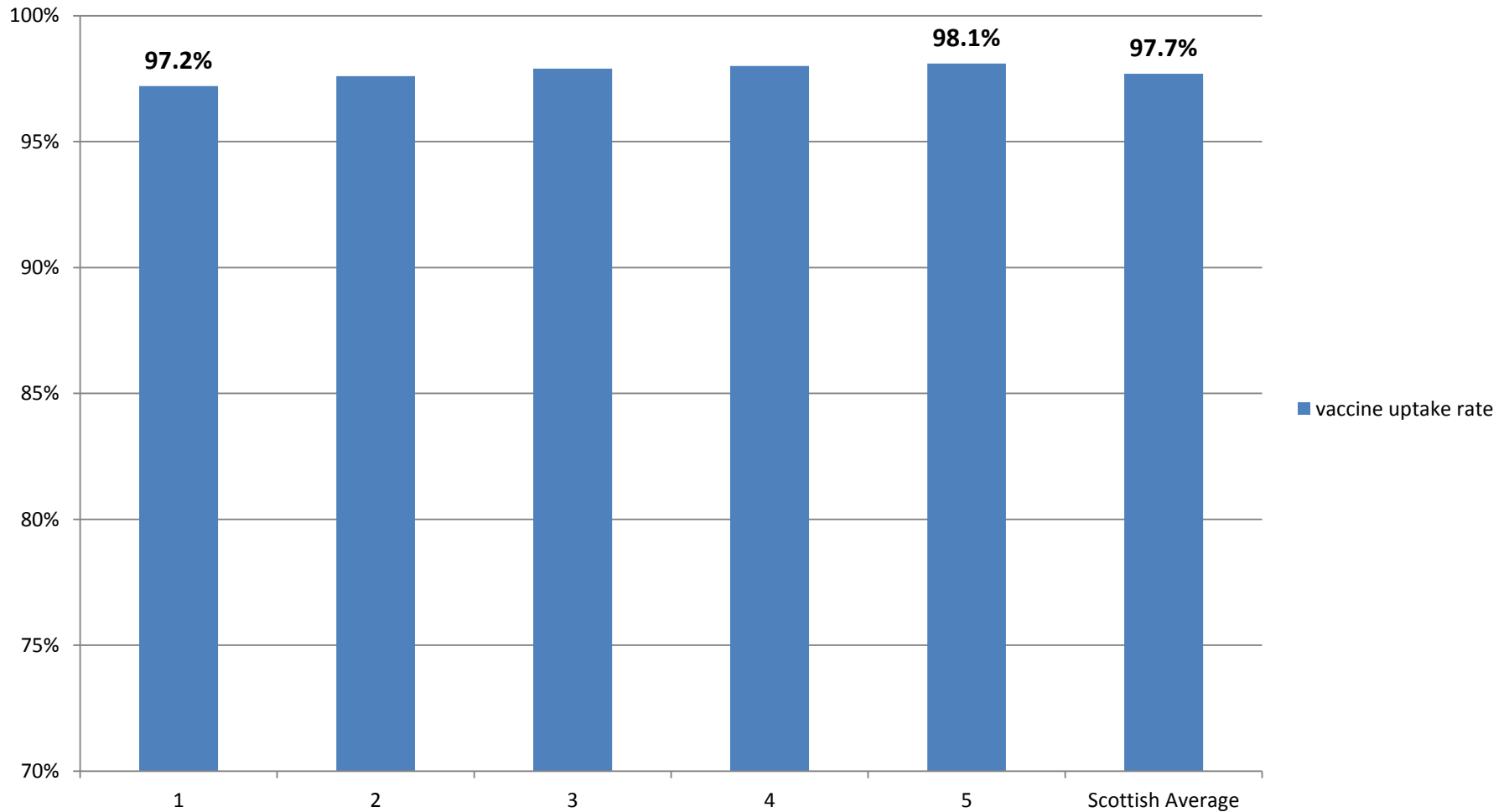


Note: The y-axis has been restricted



Uptake of DTP/Pol/Hib by 24 months of age by SIMD.

Babies born 1st January to 31st December 2014

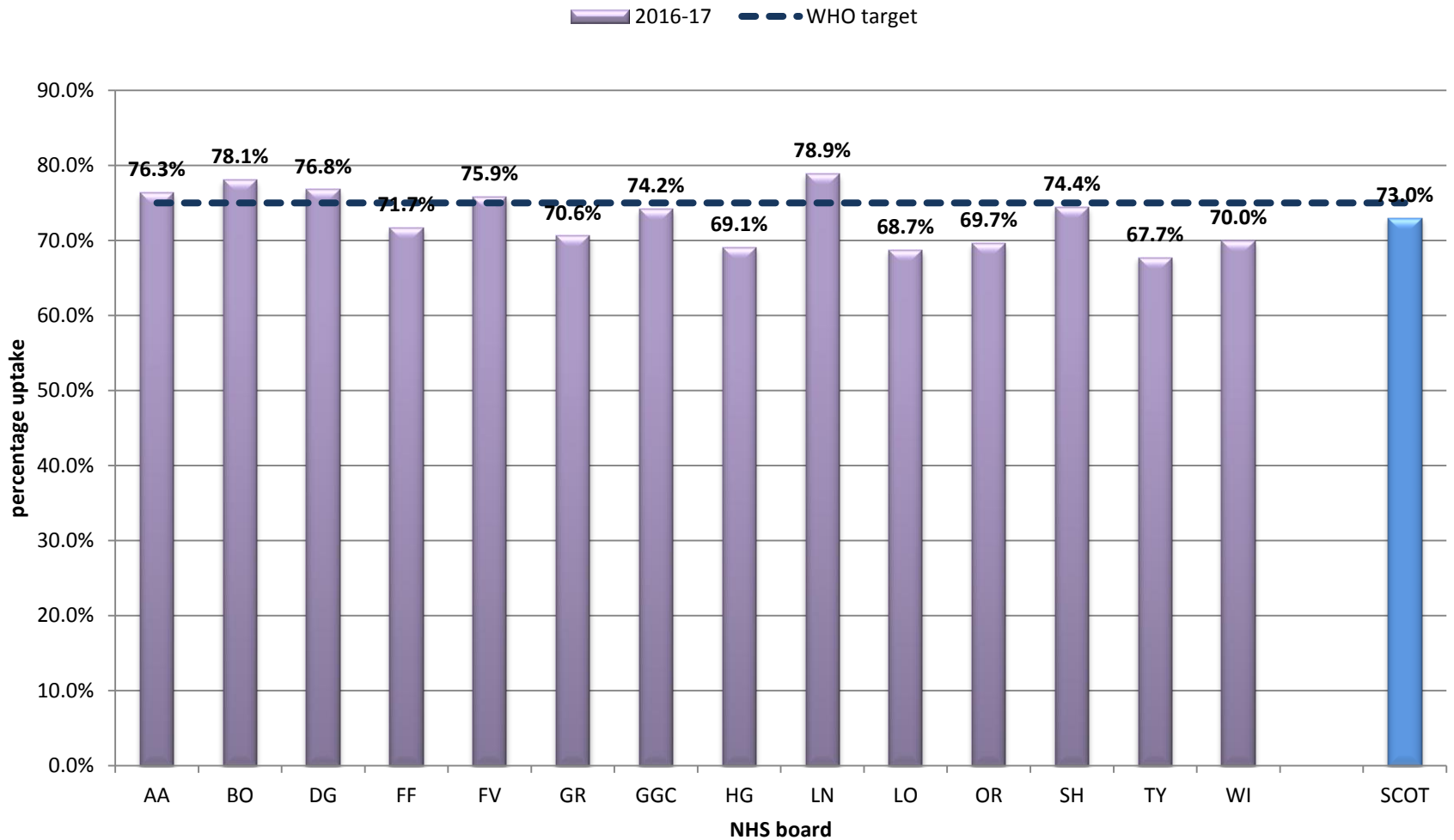


Routine pre-school programme (except flu)

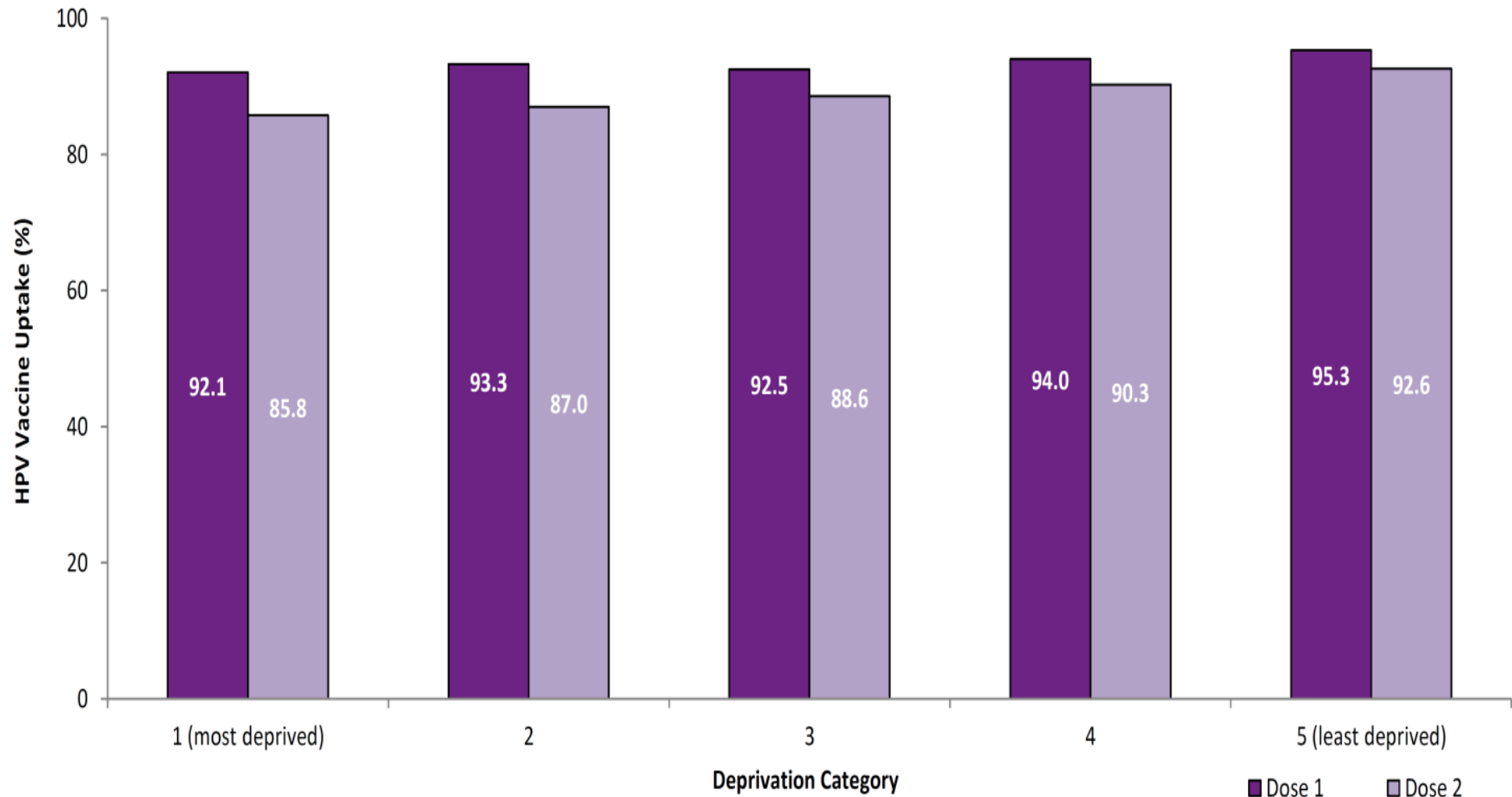
- Programme very successful with very high uptake rates partly due to “ease of access to target group” and parental motivation to protect their children
- Very little variations in uptake between practices and by social deprivation (SIMD)
- Standardised call and recall coordinated by NHS Boards
- Equity of access to vaccination services

Vaccine uptake in primary schools

Scottish influenza vaccine uptake by NHS board season 2016/17 for primary school aged children



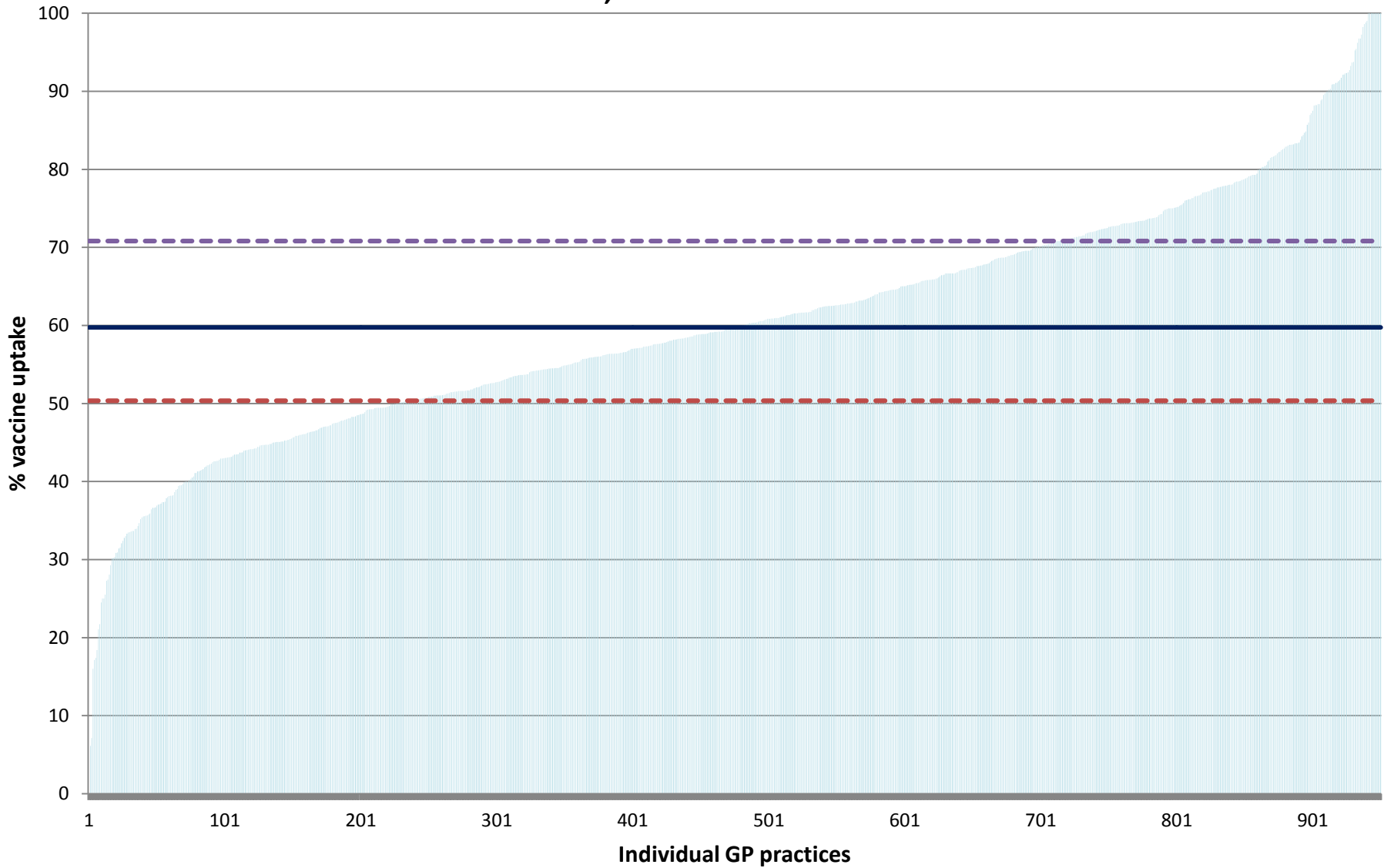
HPV uptake by end of school year 2016/17 by SIMD; Girls in S3



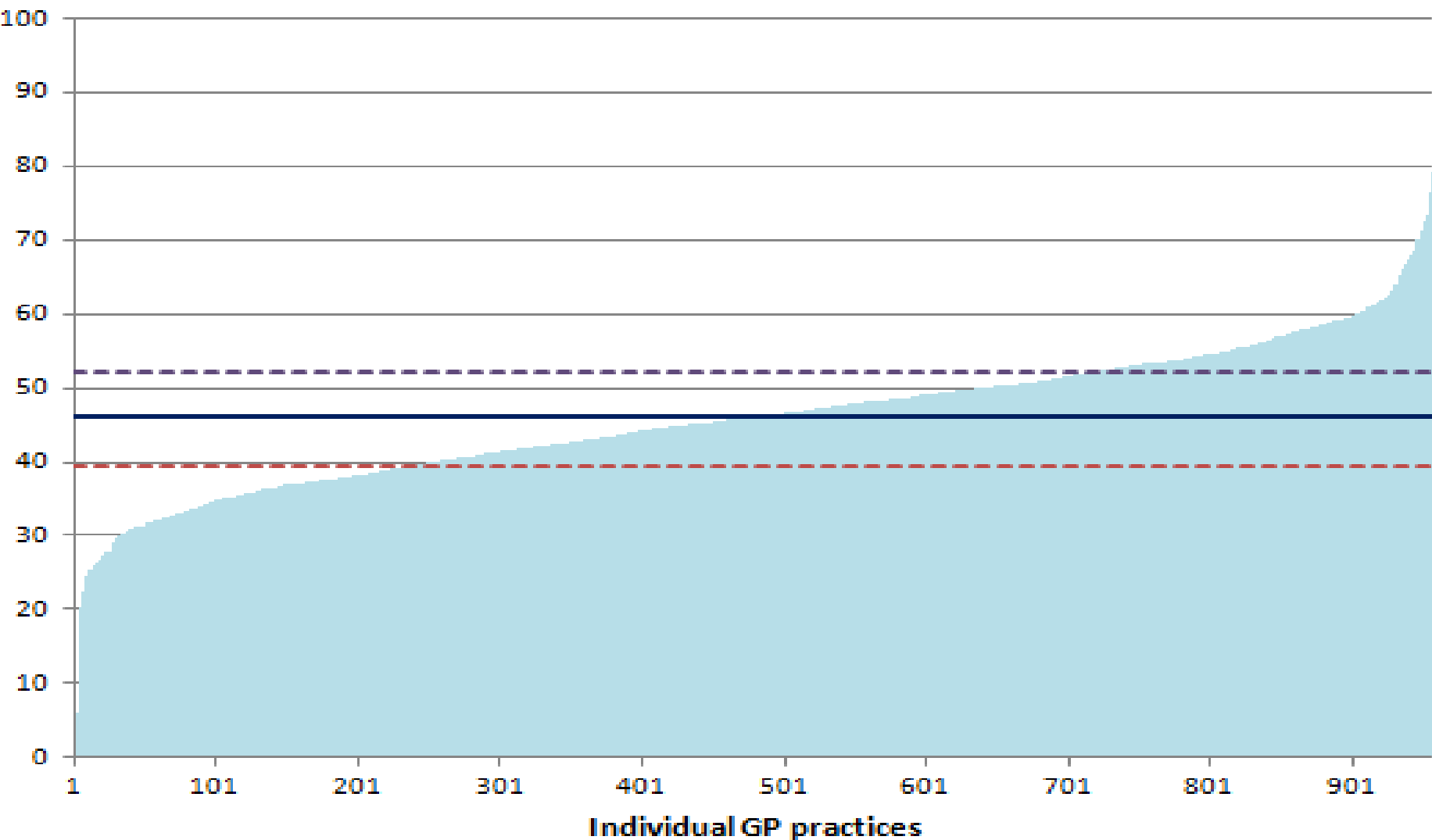
School based programmes

- Standard service across the all the NHS Boards
- Standardised call recall and mop up coordinated by NHS Board staff
- Good uptake rates with approx. 75% for flu vaccine and 93% for HPV first dose
- Uptake gradually drops with more SIMD variations for vaccine given later years due to absenteeism and less opportunity for mop up

Estimated flu vaccine uptake for pre-school children (aged 2-4yrs)* by GP practice Scotland, 2016-17 season



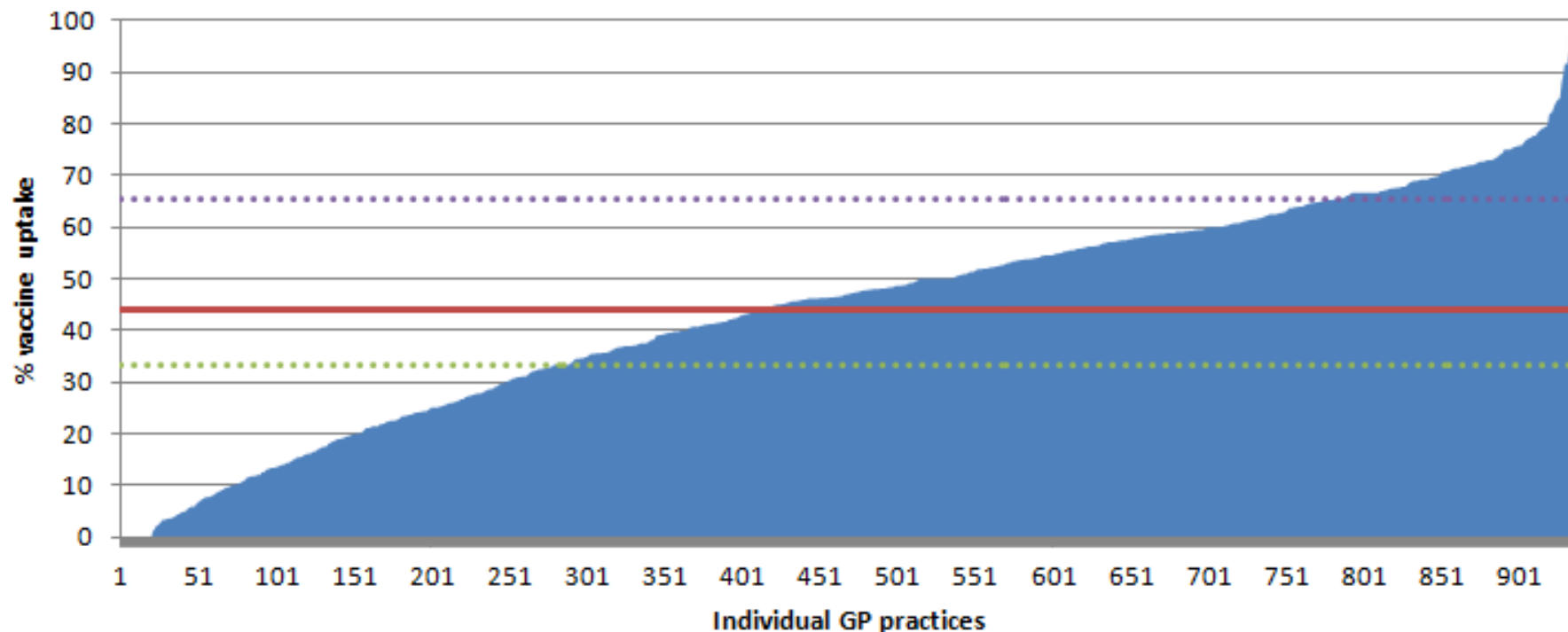
Flu vaccine uptake for the under 65years 'at risk' groups by GP practice, Scotland 2016-17 season



46.1% - average uptake for GP practices in Scotland

Half of GP practices have uptake between 39.5% and 52.2%

Shingles vaccine uptake for those aged 70 years in the 2017/18 season by individual GP practice in Scotland



■ Individual GP practices — Average Scotland uptake
..... average uptake - lower 25% GPs" Average uptake - top 25% GPs

Adult and other General Practice co-ordinated programme

- Uptake usually poor
- Significant variations in approach in organising clinics including call recall by individual practices
- Huge variations in uptake between practices
- Challenges of standardisation
- Inequity of access to vaccination services
- Most issues influencing uptake are practice specific (Dexter LJ et al. BMJ Open 2012; **2**: e000851)

Challenges and issues in General practice

- Significant increase in vaccine workload and complexity of schedule in recent years
- Recruitment and retention crisis with unsustainable workload
- GPs to become “expert generalist”
- To explore alternative models for some service delivery to support evolving roles of GPs
- Vaccine Transformation Programme (VTP)

Vaccine Transformation Programme

- Implementation coordinated nationally by the SG with input from all NHS Boards through BCMs Steering Group
- A number of sub-groups: IT; Communication and engagement; Travel Health; workforce etc
- 3 year phased programme from April 2018 to be fully implemented by April 2021, however:
 - only if safe and sustainable alternative service
 - HSCPs & IAs need to provide sufficient resources for robust and flexible service
- Planning for delivery of alternative services at a local level engaging with all stakeholders

Challenges of VTP

- Availability of appropriate IT systems to identify, call/recall, record and data sharing
- Resources
 - funding source/mechanism
 - prioritisation within the PCTP
 - levels of funding allocation
- Workforce capacity
- Capacity of the infrastructure
- Fragmented service with unknown impact

Opportunities for VTP

- Support evolving role of GPs as intended
- Provide standardised adult and pre-5 flu vaccination service with standardise cal/recall
- Provide equity of access to vaccination service with easy and flexible clinic times
- Working with Practices, increase vaccine uptake and reduce variations to improve patient safety
- Reduce variation and improve travel health service provision