

Appendix 4 - London Child Flu GP practice visit audit form

Date of form completion:	Click to enter date	CCG:	Click to choose your CCG
Practice 'E' code:	e.g. E12345	Practice name:	Click here to enter text
Practice Manager name:	Click here to enter text	Phone number:	Click here to enter text
Practice Manager email address:	Click here to enter text@nhs.net		
GP payment Systems			
Q1	Uptake 2015/16 for 2, 3 and 4 year olds		<i>Comments / discussion</i>
a	Why do you think you were unable to achieve the recommended 40% uptake of child flu vaccine for 2, 3 and 4 year olds last year?		
Q2	Contract		
a	Has your practice signed up to the 2016/17 national DES?	<input type="checkbox"/>	
b	Will your practice be delivering influenza vaccinations to your 2, 3 and 4 year olds this coming influenza season?	<input type="checkbox"/>	
Q2	Data extraction		
a	Did the Immform data extraction tool automatically upload your practice influenza uptake data last season?	<input type="checkbox"/>	
b	If no, did you enter the data manually onto Immform?		
c	Do you know how to contact Immform for support?		
d	Which IT system does the practice use?		
GP performance			
Q3	For Influenza vaccinations does your practice: (select all that apply)		
a	Have a call and recall process for 2, 3 and 4 year olds?	<input type="checkbox"/>	
b	Follow up DNAs	<input type="checkbox"/>	
c	Calculate cohorts for vaccinating using the latest demographic data from HSCIC (i.e. use a "look ahead" report)?	<input type="checkbox"/>	
e	Have allocated immunisation clinic times?	<input type="checkbox"/>	
f	Have ad-hoc immunisation appointments?	<input type="checkbox"/>	
g	Have extra clinics at the weekend (Saturday pm and/or Sunday)?	<input type="checkbox"/>	
h	Have extra clinics in the evening?	<input type="checkbox"/>	
i	Have an up to date cold chain policy and when was it last reviewed	<input type="checkbox"/>	
Q4	How many influenza immunisation staff:		
a	Work at your practice (WTE)?	Number	
b	Do you feel this is adequate for all the vaccines that the practice has to deliver over the winter season?		
c	Have received immunisation training in the past year?	Number	
Q5	Are these immunisation staff (select all that apply):		
a	Fully trained and updated on the local cold chain policy?	<input type="checkbox"/>	
b	Using an up to date, complete PGD and know where to access updates	<input type="checkbox"/>	
Q6	Action plan		
a	We will require your practice to complete an action plan and submit to us within two weeks of this visit. We will provide you with a template		
Thank you for your cooperation			
NHS England use only		Actions:	Click here to enter text
		Additional comments:	Click here to enter text