Shingles: All Year Round
A West Yorkshire perspective

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Shingles Uptake and the Screening and Immunisation Team

- Practices deliver the immunisation programme
- Screening and Immunisation Coordinators (SIC’s) support and oversee delivery on a geographical basis
- Screening and Immunisation Manager (SIM’s) leads on Immunisation Programme
- West Yorkshire (WY) Screening and Immunisation Oversight Group (SIOG) provider oversight and assurance
West Yorkshire

3 Geographical Patches
- Leeds
- Bradford (inc. Airedale, Wharfedale & Craven)
- Calderdale, Kirklees & Wakefield

5 Local Authorities & 10 CCGs
West Yorkshire SHINGLES Performance (taken from published data: Shingles vaccine coverage in England by age cohort, CCG and LA: 01/09/2016 to 31/08/2017)

<table>
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<tr>
<th>Financial Year</th>
<th>Period up to:</th>
<th>Airedale, Wharfdale and Craven CCG</th>
<th>Bradford City CCG</th>
<th>Bradford Districts CCG</th>
<th>Calderdale CCG</th>
<th>Greater Huddersfield CCG</th>
<th>North Kirklees CCG</th>
<th>Leeds North CCG</th>
<th>Leeds South &amp; East CCG</th>
<th>Leeds West CCG</th>
<th>Wakefield CCG</th>
<th>West Yorkshire</th>
<th>Yorkshire &amp; Humber</th>
<th>ENGLAND</th>
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<tr>
<td>2017/18</td>
<td>31 August 2017</td>
<td>% Practices Reporting</td>
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<td>100%</td>
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<td>51.1%</td>
<td>49.1%</td>
<td>49.4%</td>
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Opportunistic vaccination programme

Standard 60% | Lower Threshold 50% | Below Lower Threshold
My Role as a WY Screening and Immunisation Coordinator

• To support the commissioning of Section 7a Programmes

• Work collaboratively with CCG’s, Local Authority, Providers, Primary Care and all other stakeholders across Calderdale, Kirklees and Wakefield (CKW)

• Review and monitor practice level uptake data providing feedback at local immunisation meetings, West Yorkshire Immunisation Programme Board and SIOG

• Raising awareness sessions, practice visits, CKW Immunisation and Influenza operation groups
Calderdale CCG Practice Uptake
Shingles Routine Cohort Since 2013
Shingles Campaign

“The immunisation of patients is given high clinical priority and the whole team is involved in ensuring that all eligible patients are notified of their eligibility and are encouraged to take up the offer of vaccination.

This obviously has a positive effect on the finances of the surgery which is a bonus to our clinical work”
**Pro-active Approach**

- We add information to the screens in the waiting room and on the website.

- We have banners, posters and leaflets all around the surgery.

- The vaccines are given by all members of the clinical team not just by the nursing team.

- Each GP on duty has a small refrigerated supply of vaccines in their rooms during flu season for morning and afternoon sessions to enable them to administer the vaccine when a patient attends for a routine or urgent appointment. We of course follow our cold chain protocol!
Pro-active Approach

• Searches are run on the clinical system to identify all eligible patients.

• From this search a reminder is added to the patient’s home screen and an icon added to the demographic box.

• This demographic box icon has a quick action template added to it so that when the patient attends the surgery and they agree to a vaccination one simple click brings up the template which is pre-populated with information regarding the vaccine so that the clinical time required for the administration element is as quick as possible.
Pro-active Approach

• **Dedicated flu clinics are run at least twice a year on a weekend to ensure we can reach patients who work during normal surgery opening times. At these clinics if a patient is eligible for not only flu but shingles or pneumococcal they will be offered the vaccines.**

• We have a **weekly update at the management team meeting to plot our progress** and the **whole team are informed of progress as it happens.**

• The **success** of the flu, shingles and pneumococcal campaigns is reported to the Patient Participation Group
Brig Royd Surgery – Halifax

Pro – active Approach

• **Identified all eligible patients** and ensured they all had a **status alert in their record** to alert anyone viewing their record that a shingles vaccination was indicated.

• Working hard at walk-in flu clinics:
  - **advising patients they are eligible** for the vaccination;
  - **providing information** about what shingles is;
  - **encouraging them** to have the vaccination **at that moment**.
  - We have a “**shingles GP**” at each clinic so patients can be escorted straight to this GP for the vaccination.
Pro – active Approach

• Acting on status alerts when patients present for other reasons:
  
  o Practice Nurses offer the vaccination for all of their eligible patients on their lists,

  o HCAs and GPs refer their patients to the PNs not for booked appointments, but “just have a seat and the nurse will be with you shortly”

So, as long as time permits, no-one is turned away, we strike while the iron is hot.
Pro-active Approach

• Initially
  
  o we set up and searched the eligible criteria for Shingles vaccination and
  
  o marked each record with a black circle on the top right of the home page.

This enabled both admin and clinical staff to clearly identify that the patient may be offered the vaccination.

  o Staff have also been educated on how to decline.
**Pro-active Approach**

- The flu **clinics we run on Saturday mornings in October** have proven to be a platform for offering advice and education on additional vaccinations such as Shingles.

  Patients eligible for the Shingles vaccine were immunised at the same time.

- Most of all we have found **working together as a team and with a shared goal in mind benefits our patients** with a wider view to effective public health
Shingles Checklist

Name of shingles vaccination lead:

This checklist has been designed to help immunisation practitioners plan their shingles immunisation programme.

1. Bookmark the PHE shingles vaccination programme web page: www.gov.uk/government/collections/shingles-vaccination-programme
   - Green Book chapter – shingles chapter
   - PO D shingles live vaccine - PO D (All PO Ds must be appropriately authorised before use)
   - Shingles wheel poster – product code: 2942850D, who’s eligible for shingles vaccine?
   - Information document for HCPs, shingles information document
   - Leafllet – product code: 2942850A, shingles vaccination leaflet
   - Shingles vaccination postcard – product code, 2942850C, shingles postcard
   - Consider including shingles information on patient TV systems in waiting rooms, download the two banners to use on your digital displays.

2. Check your knowledge
   - Complete the learning in the vaccine preventable diseases module of the new e-learning for health immunisation course www.e-lth.org.uk/programmes/immunisation/
   - Share learning with all those involved in the programme, including reception staff booking appointments, consider using the rational leaflet for shingles: www.gov.uk/government/publications/shingles-vaccination-guidance-for-healthcare-professionals

Shingles infection is not related to season but is related to age so don’t let your patients wait. The shingles vaccine may be their best birthday present this year.

3. Plan your programme: remember shingles vaccination can now be offered all year round. Plan to offer the vaccine as soon as your patient has turned 70 or 78 years old.
   - Review your surgery vaccine uptake for 2018/17 and identify patients not vaccinated but previously eligible (anyone in their 70s who was born on or after 2nd September 1947, use the shingles eligibility calculator if in doubt).
   - Inform your patient participation group of previous years vaccine uptake and renewed focus for this year.
   - Identify your eligible patients, including those previously eligible but unvaccinated.
   - Identify patients turning 70 or 79 years of age during each month and those previously eligible (born after 1st September 1942).
   - Identify eligible housebound patients/patients in care homes.
   - Ensure in-date authorised PO D available and that a prescriber has prepared a PO D and a protocol if non-registered staff are administering the vaccine.
   - It is recommended that immunisers have a paper copy of the shingles PO D available when discussing vaccination with their patients and checking their medical history. This will allow easier identification of patients for whom the vaccine may be contraindicated.
   - Ensure eligible patients are flagged on the system to promote opportunistic vaccination (for example at chronic disease clinics, routine appointments, flu clinics).
   - Each month/quarter, update your list of patients still eligible on the shingles vaccination planner and feedback progress made at practice meetings.
   - Remember to add your requirement for shingles vaccine in with your childhood vaccine order through iMMiN. Aim to hold no more than two weeks’ worth of stock.
   - Celebrate your success.

Remember to advise patients that having their routine shingles vaccine is a good way of looking after their health so they can get on with enjoying life without the pain of shingles.

Shingles infection is not related to season but is related to age so don’t let your patients wait. The shingles vaccine may be their best birthday present this year.

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Additional Actions to Improve Uptake

✓ Information added to the screens in the waiting room and on the website.

✓ Flu clinics used to vaccinate opportunistically and spread the word that Shingles vaccine can be given all year round.

✓ The vaccines are given by all members of the clinical team not just by the nursing team.

✓ Weekly update at management team meetings to plot progress and the whole team are informed of progress as it happens.

✓ Having a “shingles GP” at each clinic so patients can be escorted straight to this GP for the vaccination.
Additional Actions to Improve Uptake

European Immunisation week

To improve the uptake of shingles vaccine in Yorkshire and the Humber we have:

- Written to each GP Practice asking them to promote vaccinations with a focus on Shingles and MMR
- Highlighted the Shingles vaccination Programme and materials available
- Utilised Social media - campaigns running on Twitter, Facebook and LinkedIn
- Asked Pharmacies to display leaflets and posters and promote vaccination