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Child Health Immunisation Process Standards (CHIPS)

Welsh Minimum Standards for Childhood Immunisation Administrative Procedures and Data Collection

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Purpose and Summary of Document:

The intended purpose of this document of agreed national standards is to provide consistency in the administrative and data collection procedures associated with routine childhood immunisation across Wales

Work Plan reference: VPDP Work plan 2013/14

Advisory group members

The Public Health Wales Vaccine Preventable Disease Programme (VPDP) invited individuals to form the following multidisciplinary advisory group with the aim of producing a set of Minimum Standards for Immunisation Administrative procedure and policy that could be adopted throughout Wales:

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The representatives of the following groups were also consulted in preparing these standards:

Health Visiting.

School Nursing.

Community Paediatricians.

HB Immunisation Coordinators.

General Practice.

Directors of Public Health.

Welsh Government.

Public Health Wales Health Protection.

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1. Background

Immunisation is one of the most effective public health interventions that exist today. Children in the United Kingdom are scheduled to receive immunisations which protect them from diseases which can lead to serious complications and can be fatal. The vaccines within the UK childhood schedule reduce the burden of vaccine preventable diseases and save lives. It is important that immunisation uptake is maintained at high levels in order to prevent diseases which were previously commonplace in the UK from returning.

Guidance exists at a national level on administration of vaccines; this is documented in the *Green Book (Immunisation against infectious disease 2006¹)*. The Green Book provides details of: which diseases are covered by vaccines in the current UK routine schedule, the recommended groups to receive immunisation, the recommended ages that children should be immunised, additional vaccines recommended for vulnerable groups at risk and the recommended immunisation procedure.

Administrative procedures and data collection carried out by immunisers and Health Board Child Health Administration Departments play a vital role in maintaining the high standard of childhood immunisation programmes in Wales and ensuring high levels of immunisation uptake. This document sets out guidance for standardising administrative procedures across Wales to maintain a high quality of service delivery and improve procedures where appropriate. Meeting these national standards for administrative procedures associated with immunisation within the Child Health System is an important step in achieving and maintaining high vaccine uptake and eliminating inequalities.

Such national standards were first implemented as policy in 2005 in WHC 2005 (081) after a national multidisciplinary working group looked at the potential for preventing measles and mumps outbreaks and developed recommendations. Those were audited in 2008. Those standards were incorporated into the CHIPS standards and are still identifiable. These CHIPS standards were implemented in November 2010. In the summer of 2011 an audit² of compliance with these standards was conducted.

The audit timing recognised that Health Boards would not have had sufficient time to apply the standards; rather it was intended to measure a baseline audit of the relevant practices at the time of introduction of the standards.

¹ <https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book#the-green-book>

² <http://howis.wales.nhs.uk/sites3/page.cfm?orgid=474&pid=21226>

Overall compliance with the standards was found to be good. Notable areas identified for consideration at that time included:

- Ensuring formal arrangements are in place with all neighbouring areas to share information in a timely manner about children living in one area and vaccinated in another area
- Ensuring a mechanism is in place to monitor the return of forms sent out by Child Health departments, in order that forms not returned can be identified and followed up and in order that any recurrent delays in the return of forms may be identified and followed up
- Introducing the production of a vaccine history for each child entering primary school and for each child entering secondary school, for dissemination to the health care professionals responsible for vaccination of this age group (this will predominantly be school nurses or GP practices)
- Introducing annual audits of compliance with the standards within CHIPS alongside programmes to address any areas of non-compliance

Following the measles outbreak in Mid and West Wales between Nov 2012 – June 2013 the outbreak report stressed the importance of compliance with these standards and specifically recommended;

- Electronic linkage of GP record of vaccine given to Child Health System
- Provide GP practices with read-only access to child health records held by the health boards.

This revision of the Welsh minimum standards reflects the findings from the audit and other changes including the planned move from the CCH2000 system to Child and Young Person's Integrated System (CYPrIS). These revised standards aim to provide consistency in the administrative procedures and data collection associated with the routine schedule of childhood immunisation across Wales. The standards in this document refer to the routine childhood schedule, for guidance on non-routine immunisations and catch-up campaigns please refer to the appropriate national policy documents. It is a credit to existing Health Board Child Health Administration Departments and NHS Informatics Services that the national immunisation programme has achieved the success that it has. These standards should support colleagues as they build on this success.

2. Aims and objectives

Aims

- To provide guidance for the standardisation, to a commonly agreed minimum standard, of administrative and data collection procedures associated with childhood immunisation across Wales; and to provide guidelines on maintaining agreed standards of accuracy of Child Health Databases in Wales.

Objectives

- To assist Child Health Administration Departments in identifying and complying with recommended policy on appointing children for routine immunisation and on recall procedures.
- To provide guidelines for ensuring that appropriate data is collected and recorded in a timely and appropriate way in Child Health Administration Departments across Wales.
- To enable administration staff to confidently, competently and effectively manage the child health system for immunisations to agreed national standards and give guidance on standard house-keeping procedures.
- To enable clinicians to confidently and competently document immunisations given.
- To advise immunisation service managers, local immunisation coordinators and healthcare professionals on appropriate reports and recommend audit procedure.

3. What is included in this document and who should these standards apply to?

Welsh Minimum Standards for Childhood Immunisation Administrative Procedures and Data Collection will achieve these objectives through improving national consistency for:

- Child Health Administration Departments.
- Healthcare practitioners.
- Immunisation Service Managers and Immunisation Leads.

These standards are designed specifically for use by those involved in delivery of childhood immunisation and associated administrative and data processing procedures. This encompasses a range of professions, including: health visitors, GPs, practice nurses, school nurses, paediatricians, health protection specialist nurses and doctors, health care support worker's, child health administrators and child health administration department staff, local health board immunisation coordinators and immunisation service managers. The introduction of minimum standards should not preclude existing good practice, but should standardise administrative procedures to at least a minimum level across Wales. Where current practices exceed these standards, sharing of good practice is recommended. Advice on the implementation of these standards is available from [Health Board Child Health Managers](#),

[Immunisation Coordinators](#) and the [Public Health Wales Vaccine Preventable Disease Programme](#).

4. Welsh Minimum Standards for Childhood Immunisation Administrative Procedures and Data Collection

Table 1. Those involved in childhood immunisation administrative procedures and data collection, including NHS Child Health Administration Departments, immunising Health Professionals and General Practice administrative staff, should follow and maintain the standards below:

- | | |
|------------|--|
| 1. | National standards for completion of scheduled and unscheduled immunisation forms. |
| 2. | National standards for basic house-keeping and data cleansing (Update of demographic, GP and immunisation status details). |
| 3. | National standard for maximum age for inputting immunisation data on CH2000. |
| 4. | National standards for call and recall. |
| 5. | National standard on maximum ceiling age for call and recall |
| 6. | National standards for management of 'living in, treated out' children. |
| 7. | National standards for management of 'living out, treated in' children. |
| 8. | National standards for timeliness of inputting data and immunisation outcomes. |
| 9. | National standards for clinic scheduling. |
| 10. | National standards for missed appointments, outstanding lists and no consents. |
| 11. | National standards for immunisation status data. |
| 12. | National standards for local audit/monitoring and improvement. |
| 13. | National standards for national audit/monitoring and improvement. |
| 14. | National standards for reporting routine childhood immunisation data at a national level. |

Table 2. Welsh Standards for Childhood Immunisation Administrative Procedures and Data Collection in detail.**1. National standards for completion of scheduled and unscheduled computer forms.**

- Each area should have scheduled and [unscheduled immunisation forms](#) which are capable of providing the information required by Child Health Administration Departments to update children's records accurately following immunisation (see [Appendix 1](#)).
- Scheduled and unscheduled documentation should be completed and returned to Child Health Administration Departments following all immunisations as [set out in the guidance](#).
- Each LHB should have written documentation advising on correct completion of scheduled and unscheduled forms.
- Completed scheduled and unscheduled forms should be returned to Child Health Administration Departments within 7 days of the immunisation being given.
- Completed school immunisation session lists should be returned within 7 days of the session.

2. National standards for basic house-keeping and data cleansing.

- Following a birth notification an 'intention' form should be completed and returned to Child Health Administration Departments to designate a clinic where vaccinations will be administered.
- Child Health Administration Departments should be notified (see [Appendix 2](#) template forms) when children move in or move out of practice.
- Immunisation lists should be sent out in advance of immunisation sessions in schools and any changes in children's details should be notified to Child Health Administration Departments and amended on the child's record.
- School lists should be updated at reception, year 7, and as appropriate for areas operating schools based teenage vaccination programmes.
- Any inaccuracy in lists or appointments sent out by Child Health Administration Departments should be notified to Child Health Administration Departments, all changes in the child's record should be updated within 7 days.
- Access to read-only child health records should be available electronically in appropriate health care settings.

3. National standard on maximum age for inputting immunisation data on CCH2000.

- Changes in vaccine status and demographic details should be inputted up to the age of 19 years

4. National standards for call and recall.

- All children should be appointed according to the minimum ages recommended in the [UK routine schedule](#).
- Where a child has missed scheduled appointments and no reasons were given, guidance should be sought from the child's clinician. The Child Health System should recall these children at the earliest opportunity and continue to recall as indicated by the clinician
- The Child Health System should recall children who have missed scheduled immunisations where reasons were given at the earliest opportunity and continue to recall children following missed appointments (See [Appendices 3](#) and [3.1](#) FAILTOATTEND and IMMMIS2 reports)
- All children will continue to be appointed until they have reached the maximum age ceiling as recommended:
 - Courses 131,231,331 DTaP/IPV/Hib at 2,3,4 months – 520 weeks
 - Courses 65P7,65P8 Pneumococcal PCV 13 at 2,4 months – 52 weeks
 - Course 99R1, Rotavirus at 2 months – 15 weeks
 - Course 99R2, Rotavirus at 3 months – 24 weeks
 - Course 88C7 MenC at 3 months – 52 weeks
 - Course 88C9 Hib/MenC at 12/13 months – 520 weeks
 - Course 65P9 Pneumococcal PCV 13 at 12/13 months – 104 weeks
 - Course 25 MMR1 at 12/13 months – 171 weeks
 - Course 26 MMR2 at 3 yrs 4 months – 832 weeks
 - Course 1015 DTaP/IPV or dTaP/IPV at 3 yrs 4 months – 520 weeks

5. National standards for management for recording living in treated out.

- Records for resident children who receive immunisation in neighbouring health boards (living in, treated out) should be obtained from the HB/English clinical commissioning group (CCG) of treatment and updated by the HB of residence within 14 days of receipt of information.
- Reciprocal arrangements between HB/CCG should be set in place to allow the sharing of information in this manner.

6. National standards for management for recording living out and treated in.

- Updates to records for children living out but treated in should be provided at end of each calendar month to the HB/CCG of residence (see [Appendix 3.2](#) LOTIIMMSREP report).
- Reciprocal arrangements between HBs/CCG should be set in place to allow the sharing of information in this manner.

7. National standards for timeliness on inputting data and immunisation outcomes.

- Returned scheduled forms should be input within 7 days of receipt.
- Returned unscheduled forms should be input within 7 days of receipt.
- Returned school immunisation lists should be input within 14 days of receipt.

8. National standards for clinic scheduling.

- Clinic capacity should ensure that all children can be appointed at the [recommended minimum age](#) as specified in the current Green Book.
- Immunisation queue size lists should be monitored by the Child Health dept on a weekly basis and an informed decision made whether follow up is required via the treatment centre or Immunisation Coordinator
- Queue size reports should be provided to the HB Immunisation Coordinator by Child Health Administration Departments on a quarterly basis as a minimum ([Appendices 4 IMMOSUMM report and IMMQLIST](#)).
- Health Board Immunisation Coordinators should monitor queue sizes on a quarterly basis and report to the HB vaccination and immunisation meeting

9. National reporting framework for missed appointments, outstanding lists, no consents.

- Outstanding immunisation consent reports should be run by Child Health Administration Departments on a fortnightly basis and sent to Health Visitors. (See [Appendix 5 OUTVICON report](#))
- Health Visitors should complete and return these forms to Child Health Administration Departments on a fortnightly basis.
- Child Health Administration departments should send an outstanding appointment report to identify children (see [Appendix 6 IMMOSREP report](#)) who have been offered an appointment but the results have not been inputted to appropriate clinic/session every month.
- The health care professional responsible for the clinic/session should complete these reports and return to the local child health department within 2 weeks.
- A report to identify children who have missed two scheduled appointments (for whom reasons were not given) should be run every fortnight by Child Health Administration Departments and forwarded to the appropriate healthcare staff e.g. Health Visitors and School Nurses. (See [Appendices 3.1 IMMMIS2 report](#)). A report can be run retrospectively for specific age groups. (See [Appendix 3 FAILTOATTEND report](#)).

- Reports to identify children who have not had any MMR by the age of 18 months and less than 2MMRs by the age of 3 years and 10 months should be run at regular intervals and forwarded to the appropriate health care staff. (See [Appendix 7 V02 Report](#) and [Appendix 7.1 BSTIMMDUE report](#))
- Health Visitors and School Nurses should return lists of children that have missed two appointments (for whom reasons were not given), with instructions for the Child Health Administration Department, within a fortnight. Failure to return these lists in a timely manner will result in delayed, or missed immunisations.

10. National standards for immunisation status.

- Immunisation history should be checked on entry to primary and secondary schools by the appropriate professionals (as outlined in [WHC 2005 \(81\)\)](#). Child Health Administration Departments should provide Health Visitors and School Nurses with the appropriate reports to enable these status checks. (See [Appendix 8 IMMSRECEIVED report](#))
- Child Health Administration Departments should notify the child's GP following immunisations delivered by healthcare professionals outside the GP practice (HPV vaccine, teenage booster) within 28 days of the immunisation session taking place. (See [Appendix 9 GPNOTIF report](#))
- For children transferring into a Health Board, immunisation history should be obtained from the previous health board/CCG of residence and all records updated within 14 days of receipt of information. (See [Appendix 10 VHIST and FUPS reports](#)).
- Children transferring in from other areas, including overseas, should have an assessment for completed/outstanding vaccination and receive vaccinations in line with the PHE [Uncertain and Incomplete immunisation algorithm](#).
- For children transferring out of the Health Board, a movement out report should be provided to the new Health Board or CCG. For internal transfers between Welsh Health Boards, this can be done using the Child Health System's CCH2000 automatic transfer facility (See [Appendix 11 MOVEOUT report and guidance on internal transfers](#)).

11. National standards for local audit/monitoring and improvement.

- Compliance with the Welsh Minimum Standards for Childhood Immunisation Administration and Data Collection will be audited on an annual basis by the Health Board Immunisation Lead. Actions should be taken to remedy any failure to meet the minimum standards. (see [Appendix 12 template audit](#))

12. National standards for national audit/monitoring and improvement.

- Compliance with the Welsh Minimum Standards for Childhood Immunisation Administration and Data Collection will be audited annually by Public Health Wales VPDP.

13. Standard for reporting routine childhood immunisation data at a national level.

- Immunisation uptake data will be reported at a national and regional level, by Public Health Wales VPDP, for all routine childhood immunisations on a quarterly and annual basis.

5. Glossary of terms and abbreviations used

CH - Child Health.

CCH2000 - Community Child Health 2000 (clinical/data management software used by all NHS Child Health Administration Departments in Wales, provided by NWIS).

CHS - Child Health System

CYPriS – Child and young person’s integrated system

CCG – Clinical commissioning Group in England (was PCT)

GP - General Practice/General Practitioner.

HPV vaccine - Human Papilloma Virus vaccine.

HB - Health Board.

Living In, Treated Out - Patients resident in the Health Board area, receiving care from a GP out of Health Board area.

Living Out, Treated In - Patients not resident in Health Board area receiving treatment from a GP registered in the Health Board area

NWIS - NHS Wales Informatics Service

PCT – Primary Care Trust: former organisations in England which preceded CCGs

Scheduled immunisation form - CCH2000 generated list of children/patients for scheduled immunisations

Unscheduled immunisation form - Vaccination and Immunisation unscheduled attendance form examples include red book PCHR copies and Health Board forms

VPDP - Public Health Wales Vaccine Preventable Disease Programme

6. Key references and guidance

- Department of Health. 2006. *Immunisation against infectious disease*. London: TSO.
<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=474&pid=21232>
- Health Solutions Wales. User Guide for CCH2000.
<http://nww.hsw.wales.nhs.uk/external/page.cfm?servid=2&pageid=10>
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<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=474&pid=21226>
- Public Health Wales. 2008. RECORDING CHILDHOOD IMMUNISATION DATA ON THE CHILD HEALTH SYSTEM: 'GEMMA'S JOURNEY'. *VPDP Intranet* [Online]. Available at:
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- Public Health Wales. Unscheduled immunisation return form template (v6 2010). *VPDP Intranet* [Online]. Available at:
[http://nww2.nphs.wales.nhs.uk:8080/VaccinationsImmunisationProgramsDocs.nsf/3dc04669c9e1eaa880257062003b246b/ec4aa35b937e6dec80257712002c98d2/\\$FILE/unschedule attendance form v6 April 2010.doc](http://nww2.nphs.wales.nhs.uk:8080/VaccinationsImmunisationProgramsDocs.nsf/3dc04669c9e1eaa880257062003b246b/ec4aa35b937e6dec80257712002c98d2/$FILE/unschedule%20attendance%20form%20v6%20Apr%202010.doc)
- Public Health Wales. *VPDP Intranet* [Online]. A useful resource with slide set which could be used to provide training for CHD staff
Available at:
<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=474&pid=21410>
- Public Health Wales. Guidance on completion of scheduled immunisation return forms. *VPDP Intranet* [Online]. Available at:
[http://nww2.nphs.wales.nhs.uk:8080/VaccinationsImmunisationProgramsDocs.nsf/7c21215d6d0c613e80256f490030c05a/a8a7eee096586ec4802573a9005390b8/\\$FILE/scheduled%20returns%20form%20advice%20doc\(2\).doc](http://nww2.nphs.wales.nhs.uk:8080/VaccinationsImmunisationProgramsDocs.nsf/7c21215d6d0c613e80256f490030c05a/a8a7eee096586ec4802573a9005390b8/$FILE/scheduled%20returns%20form%20advice%20doc(2).doc)
- Public Health Wales. Guidance on completion of unscheduled immunisation return forms. *VPDP Intranet* [Online]. Available at:

Public Health Wales	All Wales Minimum Standards for Childhood Immunisation Admin and Data Collection
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[http://nww2.nphs.wales.nhs.uk:8080/VaccinationsImmunisationProgramsDocs.nsf/7c21215d6d0c613e80256f490030c05a/9e4744ffafbeab50802573a90053bc7e/\\$FILE/advice%20doc%20unscheduled.doc](http://nww2.nphs.wales.nhs.uk:8080/VaccinationsImmunisationProgramsDocs.nsf/7c21215d6d0c613e80256f490030c05a/9e4744ffafbeab50802573a90053bc7e/$FILE/advice%20doc%20unscheduled.doc)

- Welsh Assembly Government 2005. WHC (2005)81: MMR Immunisation Catch Up Programme. Welsh Assembly Government. <http://howis.wales.nhs.uk/sites3/page.cfm?orgid=474&pid=21347>

7. Appendices

Appendix 1 Example scheduled and unscheduled immunisation forms

Guidance on filling in scheduled immunisation forms and template documents are available from the Public Health Wales Immunisation and Vaccine Preventable Disease Programme intranet site:

<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=474&pid=21410>

The following two forms are examples of generic scheduled and unscheduled immunisation return forms.

Example scheduled immunisation form

Please complete and return this form as soon as possible to:-
Cwblhewch a dychwelyd y ffurflen hon cyn gynted ag y bo modd, os gwelwch yn dda, i:

LIST OF IMMUNISATION APPOINTMENTS
The presence of a child's name on this list does not necessarily mean that he/she is fit to receive immunisation.
Any amendments or additions should be entered in the comments column.

RHESTR O APWYNTIADAU IMIWNEDDIO
Nid yw'r ffaith fod enw plentyn ar y rhestr o anghenrhaidd yn golygu ei fod elfhi mewn cyflwr i gael ei imiwneiddio.
Dylid nodi unrhyw newidiadau neu ychwanegiadau yn y golofn sylwadau.

Page No. Rhif Tud. TAU

Treatment Centre Ref: Cyt. Canolfan Driniaeth:

Return by Dychweler ertbyn Date of Clinic Dyddiad Clinig

Serial No. Rhif Cyfnewid	Sex Rhyw	Child's Name Enw'r Plentyn	N.H.S. No. Rhif G.L.G.	Time of Appointment Amser Apwyntiad	Current / New Consent Cariadid Cyfredol / Newydd										Course / Antigen (See Note (ii)) Cwrs/Antigen (Gw. Nodyn (ii))	Line No. Llinell Rhif	Given Rhodwyd	Not Given Heb Ro'i	Date Given (See Note (ii)) Dyddiad Rhoi (Gw. Nodyn (ii))	Course / Antigen Cwrs / Antigen	
					D	P	T	P	P	P	P	P	P	P						1st 1st	2nd 2nd
I agree to my child named above, receiving at the appropriate times protection against the following diseases: Cytunaf i'm plentyn a enwyd uchod ddarbyn amddiffyniad ar yr amserau add priodol rhag yr afiechydon canlynol: ★★ Diphtheria - Diftëria; Whooping Cough - Y Plâ; Tetanus - Tetanus; Polio - Polio; Hib - Hib; MMR - Fg/CpR; Hib; MEN C - Llyd yr ymennydd C; Pneumococcal - Nwmococcal																			Signature Llofnod		
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I agree to my child named above, receiving at the appropriate times protection against the following diseases: Cytunaf i'm plentyn a enwyd uchod ddarbyn amddiffyniad ar yr amserau add priodol rhag yr afiechydon canlynol: ★★ Diphtheria - Diftëria; Whooping Cough - Y Plâ; Tetanus - Tetanus; Polio - Polio; Hib - Hib; MMR - Fg/CpR; Hib; MEN C - Llyd yr ymennydd C; Pneumococcal - Nwmococcal																			Signature Llofnod		
I agree to my child named above, receiving at the appropriate times protection against the following diseases: Cytunaf i'm plentyn a enwyd uchod ddarbyn amddiffyniad ar yr amserau add priodol rhag yr afiechydon canlynol: ★★ Diphtheria - Diftëria; Whooping Cough - Y Plâ; Tetanus - Tetanus; Polio - Polio; Hib - Hib; MMR - Fg/CpR; Hib; MEN C - Llyd yr ymennydd C; Pneumococcal - Nwmococcal																			Signature Llofnod		
I agree to my child named above, receiving at the appropriate times protection against the following diseases: Cytunaf i'm plentyn a enwyd uchod ddarbyn amddiffyniad ar yr amserau add priodol rhag yr afiechydon canlynol: ★★ Diphtheria - Diftëria; Whooping Cough - Y Plâ; Tetanus - Tetanus; Polio - Polio; Hib - Hib; MMR - Fg/CpR; Hib; MEN C - Llyd yr ymennydd C; Pneumococcal - Nwmococcal																			Signature Llofnod		

★★ Delete any not required. N = Refusal Y = Consent
★★ Dilech unrhyw rai nad oes eu hangen. N = Gwrthod Y = Caniatáu

The parents of children marked *** have deferred consent. Gohiniwyd caniatâd gan rieni plant a nodwyd â ***

COMPLETION INSTRUCTIONS

- The numerals in cols. 1, 2, 3, should be ringed as appropriate. This is essential as future appointments will be based on this information.
If treatment is given ring 1.
If treatment is not given with reason received ring 2.
If treatment is not given with no reason received ring 3.
- Treatment Centres operating unfixed appointments should enter the date given in col. 4. Col. 4 should also be completed where the date given differs from the date of the clinic.
- If different courses given, please note details in the next line.
- Where the batch number alters during the currency of a clinic list, please indicate in the Comments Panel.
- Unscheduled Immunisations should be entered on an Unscheduled Attendance Form.


CYFARWYDDIADAU CHWBLHAW

- Dylid rhoi cylch yng rhifolffau 1, 2, 3, o amgylch y rhifau pan fo hynny'n briodol. Mae hyn yn hantodol oherwydd seilir apwyntiadau i'r dyfodol ar y wybodaeth hon.
Os rhoi'n triniaeth rhodder cylch am 1.
Os na ro'i triniaeth ond derbyn rheswm dros hynny rhodder cylch am 2.
Os na ro'i triniaeth ac heb dderbyn rheswm dros hynny rhodder cylch am 3.
- Dylai Canolfannau triniaeth sy'n gweithredu system apwyntiadau heb drefniant no dyddiad y driniaeth yn ngolofn 4. Dylid llwne col. 4 yn ogystal, pan fo'r dyddiad yn gwehaniaethu oddi wrth dyddiad y clinic.
- Os droi'r cwrs gwehndod, nodi'r manylion yn y llinell nesaf.
- Pan fo'r rhifau bats yn amrywio yn ystod cylchod cyfredol awstr clinig, nodi'r hynny yn y Panel Sylwadau.
- Dylid nodi unrhyw imiwneiddio heb eu trhehu ar Ffurflen Ymelliadau heb eu trhehu.

Batch Numbers used (See Note (iv)), Rhifau Bats a Ddefnyddiwyd (Gw. Nodyn (iv))

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
5 in 1	I																			
MMR	G																			
H.I.B. Men C	X																			
4 in 1	K																			
	L																			

Example unscheduled immunisation form

		PRESENOLDEB AR GYFER BRECHU AC IMIWNEIDDIO HEB DREFNIANT / VACCINATION AND IMMUNISATION UNSCHEDULED ATTENDANCE			
CYFENW'R PLENTYN CHILD'S SURNAME		ENW(AU) CYNTAF FORENAME(S)		DYDDIAD GENI DATE OF BIRTH	
CYFEIRIAD ADDRESS		GWRYW MALE	BENYW FEMALE	RHIF G.I.G N.H.S NUMBER	
Mae'r plentyn a enwir uchod yn ddyledus y brechlynnau canlynol i amddiffyn yn erbyn y clefydau canlynol: The child named above is due the following vaccines to provide protection against the following diseases:					
DILEER OS NAD OES EU HANGEN OS GWELWCH YN DDA / PLEASE DELETE THOSE NOT REQUIRED					
DIFFTHERIA / DIPHTHERIA	TETANWS / TETANUS	Y PAS / WHOOPING COUGH	POLIOMYELITIS / POLIOMYELITIS	HIB / HIB	
FLLW / FLU	MENINGITIS C / MENINGITIS C	NIWMOCOCAIDD / PNEUMOCOCCAL	Y FRECH GOCH/CLWY'R PENNAU/RWBELA / MEASLES/MUMPS/RUBELLA		
HEPATITIS B / HEPATITIS B	BCG / BCG				
NODYN : rhowch ✓ yn y blwch/blychau priodol i ddangos y driniaeth a roddwyd a chofnodir rhif casgliad NOTE : ✓ the appropriate box(es) to indicate the treatment given and enter the batch number					
<input type="checkbox"/> 5 YN 1 CYNTAF / FIRST 5 IN 1 Diff / Pert / Tet / Polio / Hib Dip / Pert / Tet / Polio / Hib		<input type="checkbox"/> Niwmococaid Cyntaf First Pneumococcal		<input type="checkbox"/> All Frech Goch / Clwy'r Pennau / Rwbela Second Measles / Mumps / Rubella	
<input type="checkbox"/> AIL 5 YN 1 / SECOND 5 IN 1 Diff / Pert / Tet / Polio / Hib Dip / Pert / Tet / Polio / Hib		<input type="checkbox"/> All Niwmococaid Second Pneumococcal		<input type="checkbox"/> ATGYFNERHYDD ARDEGAU 3 YN 1 / TEENAGE BOOSTER 3 IN 1 Diff / Tet / Polio Dip / Tet / Polio	
<input type="checkbox"/> TRYDYDD 5 YN 1 / THIRD 5 IN 1 Diff / Pert / Tet / Polio / Hib Dip / Pert / Tet / Polio / Hib		<input type="checkbox"/> Hib / Meningitis C (MENITORIX) Hib / Meningitis C		<input type="checkbox"/> HPV HPV	
<input type="checkbox"/> Meningitis C Cyntaf First Meningitis C		<input type="checkbox"/> Atgyfnerthydd Niwmococaid Booster Pneumococcal		<input type="checkbox"/> Arall - Manylwch Other - Specify	
<input type="checkbox"/> Meningitis C All Second Meningitis C		<input type="checkbox"/> Brech Goch/Clwy'r Pennau/Rwbela cyntaf First Measles / Mumps / Rubella		<input type="checkbox"/> Arall - Manylwch Other - Specify	
		<input type="checkbox"/> 4 YN 1 CYN DECHRAU'R YSGOL / PRE-SCHOOL 4 IN 1 Diff / Pert / Tet / Polio Dip / Pert / Tet / Polio			
Dyddiad a roddwyd Date given		Enw a Chyfeiriad Name and Address			
Canolfan Driniaeth Treatment Centre					
Os yw'r ganolfan driniaeth ar gofnod y plentyn i'w newid i'r uchod, rhowch X yma If the treatment centre in the child's record is to be changed to the above enter X here		Llofnod y Gofal Iechyd Proffesiynol / Healthcare Professional Signature:			

IMMUNISATION (MMR - FIRST DOSE & SECOND YEAR BOOSTERS)

Please place a sticker (if available) otherwise write in space provided.

Surname

First names

NHS Number Sex M / F

Address

Post Code D.O.B. / /

G.P. Code

H.V. Code

Breastfeeding at all at 1st birthday
Yes ☐ No ☐

Antigen	Date	Batch No.	Site	Signature	Immuniser Name in CAPITALS	Venue
12 months						
Hib/Men C						
13 months						
MMR (1 st dose)						
PCV						

PRIMARY COURSE OF IMMUNISATIONS

Please place a sticker (if available) otherwise write in space provided.

Sumname _____
 First names _____
 NHS Number _____ Sex M / F
 Address _____
 Post Code _____ D.O.B. ____/____/____
 G.P. _____ Code _____
 H.V. _____ Code _____

Breastfeeding
 at 1st Imm: Totally ☐ Partially ☐ Not at all ☐
 at 2nd Imm: Totally ☐ Partially ☐ Not at all ☐
 at 3rd Imm: Totally ☐ Partially ☐ Not at all ☐

Antigen	Date	Batch No.	Site	Signature	Immuniser Name in CAPITALS	Venue
8 weeks						
DTaP/IPV/Hib						
PCV						
12 weeks						
DTaP/IPV/Hib						
Men C						
16 weeks						
DTaP/IPV/Hib						
Men C						
PCV						

Top copy: remain in PCRH
 All subsequent copies return to Immunisation Section as each immunisation is completed

[illegible]

Public Health Wales	All Wales Minimum Standards for Childhood Immunisation Admin and Data Collection
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Appendix 2 Template transfer in and out forms from GP

Example/template family transfer in form

The following two forms are examples of forms to notify the Child Health Administrative office of families/children who have recently joined practices. These are examples of forms currently in use, supplied by Aneurin Bevan Health Board Children's Services department.

INFORMATION FOR ANEURIN BEVAN HEALTH BOARD – CHILDREN'S SERVICES

THIS FAMILY HAS RECENTLY JOINED OUR PRACTICE

Name & Address of Practice: _____

The child/children will be registered with Dr. _____

From (date): _____

NAME(S)	DATE(S) OF BIRTH	NEW SCHOOL
1.		
2.		
3.		
4.		

The family are now living at: _____

The family previously lived at: _____

(Page 1 of 2)

The child/children has/have had the following immunisations and examinations:
(please supply if known)

CHILD	IMMUNISATION(S)	DATES(S)	EXAMS/CHECKS	DATES
1.				
2.				
3.				
4.				

Signed: _____

Date: _____

Designation: _____

(Page 2 OF 2)

Template child transfer in form**INFORMATION FOR ANEURIN BEVAN HEALTH BOARD – CHILDREN’S SERVICES****THE FOLLOWING CHILDREN HAVE RECENTLY JOINED OUR PRACTICE**

Name & Address of Practice: _____

The child/children will be registered with Dr. _____

From (date): _____

NAME(S)	DATE(S) OF BIRTH	NEW SCHOOL
1.		
2.		
3.		
4.		

The family are now living at: _____

The family previously lived at: _____

Appendix 3 CCH2000 report to identify children who have missed two appointments (FAILTOATTEND).

This is a standard report available through CCH2000, which retrospectively identifies children who have missed two scheduled immunisation appointments; the report name is FAILTOATTEND and is referred to in Standards four and nine. For further information please contact your local Child Health Administration Departments.

FAILTOATTEND

Failure To Attend Immunisation Appointments - No Reason Given						Page No.: 1
Children Born in the Period: 01-JAN-2010 to 28-FEB-2010 with Failure to Attend: Other or MMR						Date: 04 FEB 2014
Treatment Centre: 0401		PLEASE RETURN BY: 04-MAR-2014 DR M.M. MORGAN THE HEALTH CENTRE WESTERN STREET NORTH TOWN EAST COUNTY CF526LL		222567	Trust Details: TEST HEALTH BOARD WEST MANOR HOUSE SOUTH TOWN EAST COUNTY CF118PL	
The following children have failed to attend for two immunisation appointments without offering an excuse. Could you please investigate and advise, as no further appointments will be offered until definite instructions to do so have been received.						
Name of Child	Address	Course Offered	Date Crse Offered	Current Fails (MMR - Prim.)	Total Fails (MMR - Prim.)	
COLUMBUS CHRISTOPHER Serial No: 6000481130 DoB: 03-FEB-10 NHS No: 269 877 8962 GP - 324465 DR. WATSON THE OLD HOUSE WARREN DRIVE NORTH TOWN EAST COUNTY CF525LL 029 20627518	FEMALE 16 WESTERN STREET NORTH TOWN EAST COUNTY CF52 5LL	1st Diph Tet Pert Pol Hib 1st Pneumococcal 1st Meningitis C	31-OCT-10	2	0	2
FENWICK HELEN Serial No: 6000481147 DoB: 04-FEB-10 NHS No: 223 366 3322 GP - 324465 DR. WATSON THE OLD HOUSE WARREN DRIVE NORTH TOWN EAST COUNTY CF525LL 029 20627518	FEMALE 6 WESTERN STREET NORTH TOWN EAST COUNTY CF52 5LL	1st Meningitis C 2nd Diph Tet Pert Pol Hi 2nd Meningitis C	31-OCT-10	0	2	0 3
JOHN BETHANY Serial No: 6000481153 DoB: 05-FEB-10 NHS No: 154 155 1451 GP - 324465 DR. WATSON THE OLD HOUSE WARREN DRIVE NORTH TOWN EAST COUNTY CF525LL 029 20627518	FEMALE GRAYGABLES WESTERN STREET NORTH TOWN EAST COUNTY CF52 5LL	1st Meningitis C 2nd Diph Tet Pert Pol Hi 2nd Meningitis C	31-OCT-10	0	2	0 3
				G.P: 324465 H.V: 1209 Mrs D Pritchard T.C: 0401 Dr M.M. Morgan H.D:		

Appendix 3.1 CCH2000 Report to identify children who have missed two appointments (IMMMIS2)

This is a standard report available through CCH2000, which identifies children who have missed two scheduled immunisation appointments; the report name is IMMMIS2 and is referred to in Standards four and nine. For further information please contact your local Child Health Administration Departments.

IMMMIS2

Missed two appointments (All Children)						Page No.: 1
						Date: 16/11/10
PLEASE RETURN BY: 14/12/2010						
TO TREATMENT CENTRE 0401		DR M.M. MORGAN THE HEALTH CENTRE 222567 WESTERN STREET NORTH TOWN CF526LL				
The following children have failed to attend for two immunisation appointments without offering an excuse. Could you please investigate and advise, as no further appointments will be offered until definite instructions to do so have been received.						
Name of Child	Address	Course Offered	Date Crse Offered	Current Fails (MMR - Prim.)	Total Fails (MMR - Prim.)	
COLUMBUS CHRISTOPHER	16 WESTERN STREET NORTH TOWN EAST COUNTY CF52 5LL	1st Diph Tet Pert Pol Hib 1st Pneumococcal 1st Meningitis C	31/10/10	2	2	
Serial No. 6000481130 D.o.B. 03/02/10 NHS No. 269 877 8962	FEMALE					G.P. 324465 H.V. 1209 T.C. 0401 H.D.
FENWICK HELEN	6 WESTERN STREET NORTH TOWN EAST COUNTY CF52 5LL	2nd Diph Tet Pert Pol Hib 2nd Meningitis C	31/10/10	0	2	3
Serial No. 6000481147 D.o.B. 04/02/10 NHS No. 223 366 3322	FEMALE					G.P. 324465 H.V. 1209 T.C. 0401 H.D.
JOHN BETHANY	GRAYGABLES WESTERN STREET NORTH TOWN CF52 5LL	2nd Diph Tet Pert Pol Hib 2nd Meningitis C	31/10/10	0	2	3
Serial No. 6000481153 D.o.B. 05/02/10 NHS No. 154 155 1451	FEMALE					G.P. 324465 H.V. 1209 T.C. 0401 H.D.

Appendix 3.2 CCH2000 Report of any immunisations given outside the child's HB/CCG (LOTIIMMSREP)

This is a standard report available through CCH2000 which can identify children who have received immunisations outside their HB/CCG of residence

LOTIIMMSREP

REPORT OF IMMUNISATIONS GIVEN TO CHILDREN WHO LIVE OUTSIDE THE TRUST					
CHILD DETAILS :					
NAME : WALES					
MICHAEL					
SERIAL No. :	1234663277	DATE OF BIRTH:	22 FEB 2009	SEX :	MALE
ADDRESS :	16 HIGH STREET	GP DETAILS :	324465	N.H.S :	
	WEST TOWN		DR. WATSON		
	CF83 1NE		17 WARREN DRIVE		NORTH TOWN
			CF525LL		
COURSE DETAILS:		AREA: C - Hangleton Children's Centre Team			
COURSE DATE	COURSE	LOCATION	ORIGIN	BATCH ID	
02 FEB 2014	26 M.M.R. 2	SCH 1204 Bishop Childs (P)	S		

Appendix 4 CCH2000 Treatment centre queue size report (IMMQSUMM and IMMQLIST).

Two standard reports are available through CCH2000 to assist in managing immunisation queue sizes.

IMMQSUM summarises queue sizes at each treatment centre and is referred to in Standard nine. For further information please contact your local Child Health Administration Departments.

IMMQSUM

Treatment Centre Queues for the period : 22-NOV-2010 to 28-NOV-2010					Page No. : 1
TREATMENT CENTRE			QUEUE SIZE		
6001	GREEN PARK CLINIC	Session Number	1	272	
	WESTERN STREET				
	NORTH TOWN				
	EAST COUNTY				
	CF525LL				
6401	CHILD HEALTH CLINIC	Session Number	1	170	
	MILTON STREET				
	NORTH TOWN				
	EAST COUNTY				
	CF525LL				
6501	CHILDRENS CLINIC	Session Number	1	78	
	WESTERN STREET				
	NORTH TOWN				
	EAST COUNTY				
	CF525LL				

IMMQLIST lists the children currently queued for immunisations at each treatment centre and is referred to in Standard nine. For further information please contact your local Child Health Administration Departments.

IMMQLIST

Treatment Centre Queues for the period : 22-NOV-2010 to 28-NOV-2010						
Page No. : 2						
TREATMENT CENTRE	NAME	ADDRESS	DATE OF BIRTH	SEX	SERIAL NO.	COURSES
6001	GREEN PARK CLINIC WESTERN STREET	MICHAEL MALIK	2048 SOUTHERN STREET	17 SEP 1999	M 1825169 NHS: 640 719 7562	Diph, Tet, Apert, Polio Booster
	NORTH TOWN EAST COUNTY CF525LL		NORTH TOWN EAST COUNTY CF52 5LL	GP Practice: 7622 DR S.VAID		
		ASIF IQBAL	2050 STEWART STREET	13 NOV 1999	M 1838372 NHS: 456 988 9654	Diph, Tet, Apert, Polio Booster
			NORTH TOWN EAST COUNTY CF52 5LL	GP Practice: 7622 DR S.VAID		
		SARAH QUDDUS	20258 WESTERN STREET	22 JUL 1998	F 1733264 NHS: 637 391 3058	Diph, Tet, Apert, Polio Booster
			NORTH TOWN EAST COUNTY CF52 5LL	GP Practice: 7622 DR S.VAID		

Appendix 5 CCH2000 report to identify children for whom consent is outstanding (OUTVICON).

This is a standard report available through CCH2000, which lists children for whom immunisation consent is outstanding, the report name is OUTVICON and is referred to in Standard nine. For further information please contact your local Child Health Administration Departments.

OUTVICON

LIST OF CHILDREN WITH OUTSTANDING IMMUNISATION CONSENTS			
Health Visitor: 1209		MRS D PRITCHARD THE HEALTH CENTRE WESTERN STREET NORTH TOWN EAST COUNTY CF552LL Tel. 01446 747657	
Serial Number	Name	Address	GP:
6000483613 NHS No: 258 788 7852	ROBERTSON MICHAEL DOB: 01-AUG-2010 Sex: MALE	1 SOUTHERN STREET NORTH TOWN EAST COUNTY CF52 5LL Tel:	324465 DR. WATSON
6000483636 NHS No:	FOSTER HELEN DOB: 02-AUG-2010 Sex: FEMALE	57 SOUTHERN STREET NORTH TOWN EAST COUNTY CF83 1NJ Tel:	324465 DR. WATSON
6000483642 NHS No:	CARSON STEVEN DOB: 03-AUG-2010 Sex: MALE	45 HAMPTON STREET NORTH TOWN EAST COUNTY CF52 5LL Tel:	316019 DR JML JONES
6000483659 NHS No:	CORNWALL PATRICIA DOB: 04-AUG-2010 Sex: FEMALE	10 WESTERN STREET NORTH TOWN CF52 5LL Tel:	324465 DR. WATSON

Appendix 6 CCH2000 Report to identify children offered appointments for immunisations, but for whom results from the appointment have not yet been inputted (IMMOSREP).

This is a standard report available through CCH2000, which lists children who have been offered appointments for immunisation, but have not had the outcomes of their appointments inputted in to the Child Health System yet. The report name is IMMOSREP and is referred to in Standard nine. For further information please contact your local Child Health Administration Departments.

IMMOSREP

Date: 16 NOV 2010		Immunisations outstanding for 04 weeks				Page 2
Reference: IMMOSREP						
Treatment Centre -		6401 CHILD HEALTH CLINIC				
Clinic Date / Page Number	Line	Surname	Forename	Date of Birth	Current Status	NHS No. Serial No.
07 SEP 2010 1879	1	NORTH Appointments	MICHAEL	28 NOV 1997	0	494 793 8714 1682894
	2	BROWNING Appointments	ROBERT	07 DEC 1997	0	1684669
	3	LEWIS Appointments	HELEN	15 FEB 1998	0	606 549 5875 1699087
	4	CRAVEN Appointments	LOUISE	05 MAR 1998	0	1703287
	5	WISEMAN Appointments	BETHAN	17 MAY 1998	1	1719156
	6	NORTON Appointments	KEVIN	17 MAY 1998	1	1719163
	7	BIGGAR Appointments	VIOLET	20 JUN 1998	0	1725977

Appendix 7 CCH2000 statistical report (V02) to identify MMR uptake at 18 months and 4 years 6 months.

This is a standard statistical report available through CCH2000 which provides MMR uptake at 18 months and 3 years and 10 months. The report name is V02 and is referred to in standard nine. For further information please contact your local Child Health administration departments.

V02

Run: 04-MAR-2014																	Page 2 of 3
V02: IMMUNISATION CONSENT AND UPTAKE FOR MEASLES/MMR/MR																	
BETWEEN 04-MAY-2010 AND 04-MAR-2014																	
For Resident Children born between 04-MAY-2010 and 04-SEP-2012																	
Current Health Visitor	No. of Children	---Consent---				Immunisation		Received Primary MMR (25)		Received Catch-Up MMR (26)		Received Measles (07/77)		Received MR (55)		Received Rubella (20/21/22)	
		Yes	No	Def	Not Coded	Num	%	Num	%	Num	%	Num	%	Num	%	Num	%
0009 BETHAN EILEEN GAYNOR	3	2	0	0	1	2	67%	1	33.3	0	0.0	0	0.0	0	0.0	0	0.0
0013 MRS GAYNOR GEORGE	7	2	1	0	4	7	100%	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1209 MRS D PRITCHARD	5	1	1	0	3	4	80%	1	20.0	0	0.0	0	0.0	0	0.0	0	0.0
TOTALS	15	5	2	0	8	13	87%	2	13.3	0	0.0	0	0.0	0	0.0	0	0.0

Appendix 7.1 CCH2000 report (BSTIMMDUE) to identify children who have not had any MMR by the age of 18 months and less than 2 MMRs by the age of 4 years 6 months.

This is a standard report available through CCH2000, which identifies children who have not had any MMR by the age of 18 months and less than 2 MMRs by the age of 3 years and 10 months. The report name is BSTIMMDUE and is referred to in standard nine. For further information please contact your local Child Health Administration Departments.

This report is run as a follow up to the statistical report V02

BSTIMMDUE

Page 2									
Date Of Run 04-MAR-2014									
A LIST OF CHILDREN BORN IN THE PERIOD 04-MAY-2010 TO 04-SEP-2012 WHO ARE DUE A MMR VACCINE AS AT 04-MAR-2014									
CHILDREN SELECTED HAVE NO PREVIOUS MMR RECORDED									
H.V - 1209		MRS D PRITCHARD		Location Type TC		GP		School	
		THE HEALTH CENTRE WESTERN STREET						GP Practice	
		NORTH TOWN						(Please Tick)	
		EAST COUNTY							
		CF52LL							
				Course		Date of Course		Location	
				MMR				Batch	
								Dilutant	
								Manuf.	
NHS Number/ Serial No.	DoB/ Address	Sex	Name	GP	Consent	Course	Date of Course/Batch (if Different)	Course Given	
6000483636	02-AUG-2010 57, SOUTHERN STREET, , NORTH TOWN, EAST COUNTY, CF83 1NJ	FEMALE	FOSTER HELEN	324465 Dr. Watson	MMR: Y				(Tick)
6000483642	03-AUG-2010 45, HAMPTON STREET, , NORTH TOWN, EAST COUNTY, CF52 5LL	MALE	CARSON STEVEN	316019 Dr Jml Jones	MMR: ?				(Tick)
6000483659	04-AUG-2010 10, WESTERN STREET, , NORTH TOWN, , CF52 5LL	FEMALE	CORNWALL PATRICIA	324465 Dr. Watson	MMR: ?				(Tick)
6000483665	05-AUG-2010 23, NORTON STREET, , CAERPHILLY, MID GLAMORGAN, CF81 2MN	FEMALE	WILLIAMS BETHAN	324465 Dr. Watson	MMR: ?				(Tick)

Appendix 8 CCH2000 Report listing immunisation status for children (IMMSRECEIVED).

This is a standard report available through CCH2000, which details immunisation that have been received by children, to assist in checking immunisation status. The report name is IMMRECEIVED and is referred to in Standard ten. For further information please contact your local Child Health Administration Departments.

IMMSRECEIVED

Trust	004	6148 NON CSC TEST	Date of Run	16-NOV-2010	Page 2
A LIST OF CHILDREN BORN IN THE PERIOD 01-JUN-2006 - 01-JUN-2006 WHO HAVE HAD THE SPECIFIED IMMUNISATION					
IN THE PERIOD 01-JUN-2006 - 15-JUN-2010					
All Immunisations					
Health Visitor: 1209		MRS D PRITCHARD THE HEALTH CENTRE WESTERN STREET NORTH TOWN EAST COUNTY CF552LL TELEPHONE: 01446 747657			
Child's Name	Child's Address	Crse Ant Course Date	Location	Batch No.	
WILSON	12, WEST STREET NORTH TOWN	01 31 01-AUG-2006 1st Diph Tet Pert Pol Hib			GP: 324465 Dr. Watson
BRIAN	EAST COUNTY	65 P7 01-AUG-2006 1st Pneumococcal			TC: 0401 Dr M.M, Morgan
DOB: 01-JUN-2006	MALE	CF52 2LL			
SERIAL No :	1234597815	02 31 01-SEP-2006 2nd Diph Tet pert Pol Hib 0401			
NHS No :	321 122 1123	88 C7 01-SEP-2006 1st Meningitis C	0401		
		03 31 01-OCT-2006 3rd Diph Tet Pert Pol Hib 0401			
		65 P8 01-OCT-2006 2nd Pneumococcal	0401		
		88 C8 01-OCT-2006 2nd Meningitis C	0401		
		25 01-JUL-2007 M.M.R. 1	0401		
		65 P9 01-AUG-2007 Pneumococcal Booster	0401		
		88 C9 01-AUG-2007 HIB/Meningitis C Booster 0401			
		10 15 10-JAN-2010 Boost Diph Tet aPert Pol 0401			
					SCH:
					HV: 1209 Mrs D Pritchard

Appendix 9 CCH2000 Return form to notify GPs of immunisations delivered by other healthcare professionals (GPNOTIF).

This is a standard return available through CCH2000, which can be used to inform a child's GP of immunisations given by other healthcare professionals. The report name is GPNOTIF and is referred to in Standard ten. For further information please contact your local Child Health Administration Departments.

GPNOTIF

Run on 16-NOV-2010		Page 2	
Immunisation Notification - 6148 Non Csc Test			
General Practitioner: 324465 DR. WATSON		Practice - 7053 DR M.W.WATSON AND PARTNERS	
THE OLD HOUSE WARREN DRIVE NORTH TOWN EAST COUNTY CF525LL			
The following treatments have been given to your patients.			
Name of Child	Address	Treatment given	Given at
WILSON BRIAN	12 WEST STREET	0231 2nd Diph Tet Pert Pol Hib	01-SEP-2006 0401 (CLINIC)
Serial No. 1234597815	Male	88C7 1st Meningitis C	01-SEP-2006 0401 (CLINIC)
D.o.B. 01 June 2006	NORTH TOWN	0331 3rd Diph Tet Pert Pol Hib	01-OCT-2006 0401 (CLINIC)
NHS No. 321 122 1123	EAST COUNTY	65P8 2nd Pneumococcal	01-OCT-2006 0401 (CLINIC)
T.C 0401	CF52 2LL	88C8 2nd Meningitis C	01-OCT-2006 0401 (CLINIC)
		25 M.M.R. 1	01-JUL-2007 0401 (CLINIC)
		65P9 Pneumococcal Booster	01-AUG-2007 0401 (CLINIC)
		88C9 Hib/Meningitis C Booster	01-AUG-2007 0401 (CLINIC)
		1015 Boost Diph Tet Apert Pol	10-JAN-2010 0401 (CLINIC)

Children transferring in from other areas, including overseas should have an assessment for completed/outstanding immunisations in line with the [PHE Uncertain and Incomplete Immunisation Algorithm](#). Standard reports available through CCH2000 are available to assist in providing immunisation histories and identifying, and following up, children with outstanding immunisations, the report names are VHIST (vaccination history card) and FUPS (immunisation follow up report) and are referred to in Standard ten. For further information please contact your local Child Health Administration Departments.

		16-NOV-2010				6148 NON CSC TEST			
324465		1209		BRIAN		WILSON			
DR. WATSON						12 WEST STREET			
THE OLD HOUSE						NORTH TOWN			
WARREN DRIVE						CF52 2LL			
NORTH TOWN									
EAST COUNTY									
CF525LL		Tel:029 20627518				District Birth			
						01-JUN-2006		MALE	
								02-JUN-2006	
DIP, TET, PERT, POL, HIB						T.C.		NHS No	
MENC, PNE, MMR, BCG						0401		321 122 1123	
						1234597815		PNE	
								XXXXXX	
01-AUG-2006		01		01		01		65P7	
01-SEP-2006		0401		02		02		88C7	
01-OCT-2006		0401		03		03		88C8	
01-JUL-2007		0401						65P8	
01-AUG-2007		0401				88C9		MMR	
10-JAN-2010		0401		B		B		65P9	
01-APR-2010		0401		16				88C9	

A list of children for whom all primaries are not completed										Page Number	2			
										Date	16 NOV 2010			
Surname		Forename		Address / Postcode										
Serial Number / Sex		Date of Birth		NHS Number										
WILLIAMS		Simone		17 WESTERN STREET, NORTH TOWN, EAST COUNTY, CF52 5LL										
60004811118		01-FEB-2010		Ward:										
TC: 0401	DR M.M, MORGAN	H.V. 1209	Mrs D Pritchard	Ethnic Origin:	Not Known									
GP: 324465	Dr. Watson	PCT: RT9	NORTH EAST WALES NHS TRUST	School:										
GP Practice:	7053	DR M.W.WATSON AND PARTNERS		Surestart Area:										
Courses and Immunisation Dates with Consents in ()														
Dip (Y)		Pert (Y)		Tet (Y)		Polio (Y)		HIB (Y)		Men C (Y)		Pneumo (Y)	MEAS/MMR (Y)	
1st	27/08/2010	1st	27/08/2010	1st	27/08/2010	1st	27/08/2010	1st	27/08/2010	1st	27/08/2010	1st	27/08/2010	07
2nd	XXXXXXXXXX	2nd	XXXXXXXXXX	2nd	XXXXXXXXXX	2nd	XXXXXXXXXX	2nd	XXXXXXXXXX	2nd	XXXXXXXXXX	2nd	XXXXXXXXXX	MMR1
3rd	XXXXXXXXXX	3rd	XXXXXXXXXX	3rd	XXXXXXXXXX	3rd	XXXXXXXXXX	3rd	XXXXXXXXXX	3rd	XXXXXXXXXX	3rd	XXXXXXXXXX	MMR2
							Bst XXXXXXXX	Bst	XXXXXXXXXX					MR

When children move out of the Health Board, details of their Child Health System record should be provided to the Health Board/ CCG that they are moving to. The MOVEOUT report, available through CCH2000, can be used to provide the appropriate details. This report is referred to in Standard ten. For further information please contact your local Child Health Administration Departments.

Serial No.		Trust ID - 004		Trust Name - 6148 NON CSC TEST			
01-JUN-2006	BRIAN	12		<u>Sectors</u>		Record last changed on	
Male	WILSON	WEST STREET		Initial		16-NOV-2010	
321 122 1123				Current		by	
		NORTH TOWN		Registration 3	DISTRICT 3 - CARDIFF WEST	CERI	
Init Status Area Birth	02-JUN-2006	EAST COUNTRY		OPCS Birth	Ethnic group 99		
Curr Status Movement Out	16-NOV-2010	CF52 2LL		OPCS Residence	Not Known		
GP:	324465 DR. WATSON	Onset of respiration:		Educational needs:		Social class:	
HV:	1209 MRS D PRITCHARD	Neonatal hearing loss:		Mother's name:		Surname differs:	
TC:	0401 DR M.M., MORGAN	Malformation:		Mother's date of birth:		One parent	
Clinic:		Hips tested:		Marital status:		Ultrasound	
School:				Social factors:			
<u>Gestational Age</u>	<u>Previous:</u>	<u>Birth Location</u>	<u>Appar1</u>	<u>Birth:</u>	<u>Low Birth Weight</u>	<u>Diseases notified:</u>	
	Livebirths	Type	Appar5	Time	Alive on day 28	Pertussis	
By date	Stillbirths	Change	Appar10	Weight	Died by day 1	Measles	
By exam	Abortions	Code		Length	Died by day 7	Mumps	
	Neonatal deaths			Head	Died by day 28	Rubella	
				Number 1 1	Transferred		
				Order 1		School changed	
<u>Immunisation</u>	<u>Examination</u>	<u>Examination Centres:</u>	<u>Number of exams</u>	<u>Exam Consents</u>		School options	
Where given At TC	At EC					Medical options	
Suspense date		1. Medical 0		Audiotape		Special file location	
Intend date		2. Audiotape 0		Vision			
Next due 26		3. Vision 0		Medical		Immigrant status:	
Earliest date 27-AUG-2010		4. Dental 0		Nurse		English speaker:	
Latest date 22-MAY-2014		5. Surveillance 0		Other		1st Language:	
Origin of intent A		6. Screening 0		School Med N		2nd Language:	
Reason no intent		7. School Aud N		School Vis N		Death source:	
<u>Fails to attend:</u>		8. Handicap				Death status:	
Current course	Latest exam	9. Sig.Med.Inf.					
Current primary 0	Audiotape						
Current MMR 0	Medical						
All primary	Vision						
All MMR							
<u>Research Codes</u>							
Antenatal GP	Onset of labour	Date of LMP		Foetal distress		PKU	
Mother's case number	Assisted management	Assessment date		Follow up		Thyroid	
Child's case number	Pain relief before	Date NND received		Resuscitation(Drugs)		Thalassaemia	
Obstetrician	Pain relief during	NND options		Positive pressure		Sickle Cell	
Paediatrician	Pain relief after	Rubella tested		Convulsions		Other	
Y9/Y10 Completed	Feeding	Discharged		Behaviour		BCG	
Jaundiced	Delivery mode	Mother discharged		Refer to chest clinic			
<u>Consents</u>	<u>16-MAY-2008</u>	Consent	Reason no consent	Consent	Reason no consent	Consent	Reason no consent
Diphtheria	Given			Folio Given		BCG	Given
Pertussis	Given			HIB Given		Rubella	Given
Tetanus	Given			MMR Given		Meningitis	Given
Pneumococcal	Given						

For transfers from one Health Board in Wales to another, the electronic transfer facility of CCH2000 can be used to easily forward a child's record to the new Health Board of residence.

To accomplish this using CCH2000:

- Select Child Records/Child Selection/Registration General Information to display the General Registration Information form (below).

-- GENERAL REGISTRATION INFORMATION -- Form REGNDETS

Geraldine Davies
57, Western Street
North Town
East County
CF52 5LL

NHS No: 02-FEB-2010
Date Of Birth: 02-FEB-2010
Age: 9 months
Sex: Female
Status: District Birth (05-Feb-2010)
School:

Trace Required
Child Health Clinic: 0112
Treatment Centre: 0401
General Practitioner: 324465
Health Visitor: 1209
Lead HCP:
Primary Care Trust: RT9

Serial No: 6000481124
Dr R D Jones
Dr C.J.L. Morgan
Dr. Watson
Mrs D Pritchard
NORTH EAST WALES NHS

Demographic | General Reg | Milestones | Indicators | LBW | Neonatal Details | Death Notn | Blood Tests | Internal Transfer | Movement Out

Surname: DAVIES
Forename: GERALDINE
Title:
Alias:
Date of Birth: 02/02/2010
Sex: FEMALE
Search:
House Name/Number: 57
Street: WESTERN STREET
Locality:
Town: NORTH TOWN
County: EAST COUNTY
Postcode: CF52 5LL
Tel:
Mobile Tel:
Comm ID:
PAS Number:
Transferred from Trust:
Transferred to /
Treated out Trust:
Family Details | Records Location

NHS Number:
NHS Trace Result: Trace Required
Current Status: 0 - District Birth
Date of Current Status: 05/02/2010
Initial Status: 0 - District Birth
Date of Initial Status: 05/02/2010
Current Health District:
Registration District: Z Not Known
Health Visitor: 1209 Mrs D Pritchard
General Practitioner: 324465 Dr. Watson
Lead HCP Type:
Lead HCP:
Treatment Centre: 0401 Dr C.J.L. Morgan
Child Health Clinic: 0112 Dr R D Jones
School:
Health Authority:
Ward:
Ethnic Origin: 99 Not Known
Special File Location:
Not Known

- Change current status to "4" i.e. Movement Out (see below) and enter the recipient Trust code.

-- GENERAL REGISTRATION INFORMATION -- Form REGNDETS			
Geraldine Davies 57, Western Street North Town East County CF52 5LL		NHS No: Date Of Birth: 02-FEB-2010 Age: 9 months Sex: Female Status: Movement Out (15-Nov-2011) School:	
Trace Required Child Health Clinic: 0112 Treatment Centre: 0401 General Practitioner: 324465 Health Visitor: 1209 Lead HCP: Primary Care Trust: RT9		Serial No: 6000481124 Dr R D Jones Dr C.J.L. Morgan Dr. Watson Mrs D Pritchard NORTH EAST WALES NHS	

Demographic	General Reg	Milestones	Indicators	LBW	Neonatal Details	Death Notn	Blood Tests	Internal Transfer	Movement Out
<div> <div> Surname: DAVIES Forename: GERALDINE Title: <input type="text"/> Alias: <input type="text"/> Date of Birth: 02/02/2010 Sex: FEMALE Search: <input type="text"/> Search House Name/Number: 57 Street: WESTERN STREET Locality: <input type="text"/> Town: NORTH TOWN County: EAST COUNTY Postcode: CF52 5LL Tel: <input type="text"/> Mobile Tel: <input type="text"/> Comm ID: <input type="text"/> PAS Number: <input type="text"/> Transferred from Trust: 004 Transferred to / Treated out Trust: 005 TEST DATABASE 05 </div> <div> NHS Number: <input type="text"/> NHS Trace Result: Trace Required Current Status: 4 - Movement Out Date of Current Status: 05/02/2010 Initial Status: 0 - District Birth Date of Initial Status: 05/02/2010 Current Health District: <input type="text"/> Registration District: Z Not Known Health Visitor: 1209 Mrs D Pritchard General Practitioner: 324465 Dr. Watson Lead HCP Type: <input type="text"/> Lead HCP: <input type="text"/> Treatment Centre: 0401 Dr C.J.L. Morgan Child Health Clinic: 0112 Dr R D Jones School: <input type="text"/> Health Authority: <input type="text"/> Ward: <input type="text"/> Ethnic Origin: 99 Not Known Special File Location: <input type="text"/> </div> </div>									

On saving, a new record will be created on the receiving Trust database the following day

Appendix 12 Template audit tool for Health Boards**Vaccine Preventable Disease Programme****TEMPLATE AUDIT TOOL**
Audit of Child Health Immunisation Process Standards (CHIPS)

if there is more than one CH office in the health board please complete one form for each office

_____ Health Board

_____ Child Health Office

KEY TO ABBREVIATIONS:

CHD = Child Health Department

HV = Health Visitor

SN = School Nurse

IC = Immunisation co-ordinator/lead

CHIPS = [Child Health Immunisation Process Standards](#)

Standard	Question	Answer	Comments
1.	National standards for completion of scheduled and unscheduled computer forms (for examples see appendix 7.1 of CHIPS) 1. Does your area have a. Scheduled forms capable of providing the information required to update children's records accurately following immunisation?	Y / N	
	b. Unscheduled forms capable of providing the information required to update children's records accurately following immunisation?	Y / N	
	2. Is there written documentation advising on correct completion of these forms?		
	a. Scheduled	Y / N	
	b. Unscheduled	Y / N	
	3. Are you aware of regular delays in CHDs receiving completed scheduled forms? (longer than 7 days after vaccination)	Y / N	
	4. Are you aware of regular delays in CHDs receiving completed unscheduled forms? (longer than 7 days after vaccination)	Y / N	
	5. Are you aware of regular delays in CHDs receiving completed school immunisation lists ? (longer than 7 days after vaccination)	Y / N	

2.	National standards for basic house-keeping and data cleansing 1. Are you aware of a regular problem with receiving “intention” forms for newborn children, designating a clinic where the child will receive their vaccines? (i.e. forms not received, or received late enough to delay vaccination)	Y / N	
	2. Do you have a template form or other process for the notification to the CHD of child movements in and out of GP practices?	Y / N / N/A	
	3. Are immunisation lists sent out in advance of immunisation sessions in schools?	Y / N / N/A	(choose N/A if there are no school immunisation sessions in your area)
	4. Are school immunisation lists returned to your CHD with demographic details checked and amended as necessary?	Y / N / N/A	
	5. Are school lists assessed and updated by your CHD at reception year?	Y / N / N/A	
	6. Are school lists assessed and updated by your CHD at year 7?	Y / N / N/A	
	7. Is access to read only child health records available electronically in appropriate health care settings?	Y / N	
3.	National standard on maximum age for inputting immunisation data on CH2000 1. Are changes in vaccine status inputted up to the age of 19 years	Y / N	
	2. If not please specify the maximum age for inputting vaccination details:	
	3. Are demographic details checked and updated by CHD every time any submission concerning a child is received?	Y / N	
	4. Are changes in demographic details inputted up to the age of 19 years?	Y / N	
	5. If not please specify the maximum age for updating demographic details:	

4.	National standards for call and recall		
	1. At what age or school year are children appointed for Td/IPV and MenC?	
	2. Are all children who have missed scheduled immunisation appointments with reasons recalled at the earliest opportunity?	Y / N	
	3. Is the standard FAILTOATTEND or IMMMIS2 sent to clinicians when a child has missed 2 scheduled appointments without an explanation? (see appendices 3 and 3.1 of CHIPS)	Y / N	
	4. What are the appointment age ceilings for the following vaccines?		
	a. DTaP/IPV/HIB doses 1, 2 and 3 (due at 2, 3 and 4 months)weeks	
	b. PCV13 doses 1 and 2 (due at 2 and 4 months)weeks	
	c. Rotavirus dose 1 (due at 2 months)weeks	
	d. Rotavirus dose 2 (due at 3 months)weeks	
	e. MenC dose 1 (due at 3 months)weeks	
	f. PCV13 dose 3 (due at 12-13 months)weeks	
	g. MMR dose 1 (due at 12-13 months)weeks	
	h. MMR dose 2 (due at 3 years 4 months)weeks	
	i. DTaP/IPV or dTaP/IPV (due at 3 years 4 months)weeks	

5.	National standards for management of recording living in treated out 1. Are there working arrangements between your HB and any/all of the neighbouring HB/CCG(s) to allow the sharing of information, to ensure children receive scheduled vaccinations?	Yes (all) Yes (not all) No	
6.	National standards for management of recording living out and treated in 1. Are updates to records for children living out but treated in provided on a fortnightly basis to the HB/CCG of residence?	Y / N	
	2. Are there working arrangements between your HB and all the neighbouring HB/CCG(s) to allow sharing of this information, to ensure children receive scheduled vaccinations?	Yes (all) Yes (not all) No	
7.	National standards for timeliness on inputting data and immunisation outcomes 1. Are you aware of regular delays (longer than 7 days) in inputting information from completed scheduled forms onto the child health system, after receipt in the office?	Y / N	
	2. Are you aware of regular delays (longer than 7 days) in inputting information from completed unscheduled forms onto the child health system, after receipt in the office?	Y / N	
	3. Are you aware of regular delays (longer than 14 days) in inputting information from completed school immunisation lists onto the child health system, after receipt in the office?	Y / N	

8.	National standards for clinic scheduling 1. Does your CHD have a system in place to monitor and report queues in clinics which are delaying vaccination appointments?	Y / N	
	2. If yes do you use routinely and regularly use this system?	Y / N	
	3. If yes who are these reports sent/given to (please identify the posts/roles, rather than the name of the individuals)?	
	4. How frequently are these queue reports prepared and sent?	
9.	National reporting framework for missed appointments, outstanding lists, no consents 1. Are reports of outstanding immunisation consents sent to HVs on a fortnightly basis? (see appendix 5 of CHIPS)	Y / N	
	2. Are you aware of problems with the return of these forms? (i.e. are a significant proportion of these forms not returned or are returned less often than fortnightly or are returned only following prompting)	Y / N	
	3. Does the CHD contact clinics/clinicians each month asking for the outcomes of appointments, whenever the CHD has not received this information? (see appendix 3 of CHIPS)	Y / N	
	4. Are you aware of problems with the return of these forms? (i.e. are you aware that a significant proportion of the forms do not get returned or are not returned within two weeks or are returned only after prompting?)	Y / N	
	5. Does your CHD forward reports to the appropriate healthcare staff (e.g. HV's and SN's) identifying children who have missed two scheduled appointments (for whom reasons were not given) every fortnight?	Y / N	

	6. Are you aware of problems with the return of these forms? (i.e. are you aware that a significant proportion of the forms do not get returned or are not returned within a fortnight or are returned only after prompting?)	Y / N	
	7. Does the CHD forward reports identifying children who have not received 1 MMR by 18 months of age to the appropriate health care staff?	Y / N	
	8. Does the CHD forward reports identifying children who have not received 2 MMRs by 3 years and 10 months of age to the appropriate health care staff?	Y / N	
	9. Are you aware of problems with the return of these forms (discussed in 9.7 and 9.8 above)? (i.e. are you aware that a significant proportion of the forms do not get returned or are not returned in a timely manner or are returned only after prompting?)	Y / N	
10.	National standards for immunisation status		
	1. Does your CHD provide IMMSRECEIVED (or equivalent) reports for SN's to undertake immunisation history checks on entry to primary schools as required in WHC 2005(81)? (see appendix 7.1 of CHIPS)	Y / N	
	2. Does your CHD provide IMMSRECEIVED (or equivalent) reports for SN's to undertake immunisation history checks on entry to secondary schools as required in WHC 2005(81)? (see appendix 7.1 of CHIPS)	Y / N	
	3. Does your CHD notify the child's GP following immunisations delivered by other healthcare professionals (e.g. vaccines given in schools) within 28 days of the immunisation session taking place?	Y / N	
	4. Does your CHD request the immunisation history of all children that they are informed are transferring into your area?	Y / N	

	5. Are all of the records obtained in above question updated accordingly within 14 days of receipt?	Y / N	
	6. When the CHD is informed that a child is transferring out of your area, does the CHD provide an immunisation history report for the new area? (within Wales this can be done using the CCH2000 automatic transfer facility)	Y / N	
11	National standards for local audit/monitoring and improvement 1. Have annual audits been introduced of the Health Board's compliance with the CHIPS standards?	Y / N	If yes, please send a summary report of the most recent audit
Please add any further comments			

Appendix 13 - Amendments to document

Date	Description of Change
25 th February 2014	<p>Comprehensive revision of standards undertaken following consultation notable changes include;</p> <ul style="list-style-type: none"> • Standard 2: Access to electronic read- only child health records should be available in appropriate health care settings • Standard 4: <ul style="list-style-type: none"> ○ Addition of FAILTOATTEND report ○ Addition of maximum age ceilings for vaccine courses • Standard 6: Updates to records of children living in treated out who receive immunisations should be provided on a fortnightly basis rather than weekly to HB/CCG of residence. • Standard 8: Immunisation queue size lists should be monitored by child health depts on a weekly basis and an informed decision made whether follow up via the treatment centre or Immunisation Coordinator is required. • Standard 9: Reports to identify children who have not had any MMR by the age of 18 months and less than 2MMRs by the age of 3 years and 10months rather than 4 years and 6 months, should be run at regular intervals and forwarded to the appropriate health care staff. Addition of V02 and BSTIMMDUE reports • Addition of template audit tool, appendix 12.