

# Maximise your rotavirus vaccination coverage

**Dr John Allingham**

*Medical secretary of Kent LMC*

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This service sits alongside the childhood immunisation schedule in the additional services section of the GMS Statement of Financial Entitlement Directions but attracts an item of service fee. It does not require a call and recall system but is picked up with other childhood immunisations. Using the 2017 UK birth rate estimates, a practice of 5,000 patients will have approximately 60 births per annum and complete coverage will provide an income of around £600 each year.

## Key points

- This service sits alongside the childhood target immunisations and is delivered in the same appointments.
- It is an easy service to deliver with a captive audience.
- The income is easily earned because the patients are already in the practice for another reason.

This vaccine was introduced in 2013. Rotavirus had been the leading cause of severe diarrhoea in infants. The UK followed the USA, where the vaccine was introduced in 2006 making a significant impact on numbers of cases.

## What it is worth to practices

This service pays £10.06 per completed course. A course is two doses, administered from two and three months of age, up to 24 weeks of age. It is worth noting that it is the completing dose that triggers the payment and this needs to be considered where infants move mid-course.

## How to claim and ensure payment

This service is covered under the additional services section of the GMS contract.<sup>1</sup> To deliver this practices must be signed up as delivering or accepting a quality service on CQRS (Calculating Quality Reporting System) and the data are extracted via GPES (General Practice Extraction Service) run by NHS Digital.

This vaccine is normally administered with the standard childhood immunisations. It is only two doses, so is not given with the third set of immunisations. Clinicians need to be alert to avoid making a mistake here. The GMS contract requires that you record any refusal to accept this service. This is part of the normal public health surveillance of vaccine uptake; it is a contractual requirement which attracts no fee.

It is important to ensure the correct codes are entered to trigger payment. The SNOMED codes for this service are:

1st rotavirus 868631000000102

2nd rotavirus 86865000000109

Check the Open Exeter statements monthly to ensure claims made correspond with monies received and errors are chased up swiftly. Check any discrepancy with the commissioner initially (the CCG if delegated co-commissioning or NHS England otherwise). CQRS and GPES errors can be pursued by NHS Digital.

### How to maximise coverage

- These infants are possibly one of the easiest groups to find. We are notified of their births and we have health visitors with an interest in child protection and development who will help target this group.
- Remind pregnant women of the vaccines their children will need. Lots of leaflets are available.
- Remind mothers when they attend for their own post-natal checks or appointments.
- Consider sending congratulations cards to new parents with information about your baby clinic and possibly with an appointment date and time to fit their age.
- Advertise the service on the web site and via waiting room noticeboards.

### Reference

1. *GMS Statement of Financial Entitlements Directions. Part 4. Payments for specific services: Section 12. Rotavirus vaccination*

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Guide URL:

<http://preview.pulse-intelligence.co.uk/guide/how-to-maximise-your-practice-income-from-vaccinations-rotavirus/>