Evaluation of Information Materials, Training and Performance of the HSE National Cold Chain Service during the Implementation of the New Primary Childhood Immunisation (PCI) Schedule

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 $\label{lem:evaluation} \begin{tabular}{l} Evaluation of Information Materials, Training and Performance of the HSE NCCS during the Implementation of the New PCI Schedule\_v1.0 \end{tabular}$ 

#### 1. Introduction

Upon the recommendation of the National Immunisation Advisory Committee (NIAC) of the Royal College of Physicians of Ireland (RCPI), a new Primary Childhood Immunisation (PCI) schedule was introduced for all children born on or after 1<sup>st</sup> October 2016. The new schedule started for children at 2 months of age i.e. on or after 1<sup>st</sup> December 2016.

The changes were as follows:

- Introduction of
  - o meningococcal B (MenB) vaccine
  - o rotavirus oral vaccine
  - o combined Haemophilus influenzae type b/meningococcal C (Hib/MenC) vaccine
- Changed timing of
  - o meningococcal C (MenC) vaccine
  - o pneumococcal conjugate vaccine (PCV).

The implications of these changes for general practice were as follows:

- Changes to the vaccines administered at all five GP visits
- Increase in the number of injections from ten to twelve
- The addition of two oral vaccine doses
- Recommendation of three doses of infant paracetamol at and after 2 and 4 month MenB vaccines to reduce fever
- Two schedules running in parallel for at least 12 months.

The table below summarises the changes that were made to the PCI schedule for babies born on or after 1<sup>st</sup> October 2016.

Table 1 Immunisation schedules for babies born on or before 30<sup>th</sup> September 2016 and for babies born on or after 1<sup>st</sup> October 2016

	Babies born on 30 <sup>th</sup> Septemb			
Age (months)	Vaccine No. of injections		Vaccine	No. of injections
2	6 in 1 + PCV	2	6 in 1 + PCV+ MenB + Rotavirus	3 + oral vaccine
4	6 in 1 + MenC	2	6 in 1 + MenB + Rotavirus	2 + oral vaccine
6	6 in 1 + PCV	2	6 in 1 + PCV + MenC	3
12	MMR + PCV	2	MMR + MenB	2
13	MenC + Hib	2	Hib/MenC + PCV	2

6 in 1 Diphtheria, Haemophilus influenzae type b (Hib), Hepatitis B, Pertussis, Polio, Tetanus

PCV Pneumococcal conjugate

RotavirusRotavirus oralMenBMeningococcal BMenCMeningococcal C

MMR Measles, Mumps, Rubella

**Hib/MenC** Haemophilus influenzae type b + Meningococcal C combined

In order to support these changes, a number of measures were undertaken by the National Immunisation Office (NIO). These included the following:

- A comprehensive information pack for general practice was developed and distributed.
   This pack included the following materials:
  - 'New schedule more protection': frequently asked questions for health professionals
  - Rotavirus vaccine schedule wheel
  - Paracetamol after MenB vaccination poster
  - Schedule for Rotavirus vaccination poster

The pack also included information materials for parents:

- Your child's immunisation: a guide for parents
- Before immunisation tearpad
- After immunisation tearpad
- Immunisation passport
- Guidelines for vaccinations in general practice were updated.
- Information on the NIO website <u>www.immunisation.ie</u> was updated.
- A 'Train the Trainers' Day was held in Dublin on 18<sup>th</sup> May 2016 which was followed by local roll-out of a training programme.
- In addition, the *Immunisation Guidelines for Ireland*, produced by NIAC, were updated.

The information packs produced by the NIO were distributed to GP practices in September 2016 to ensure that they were available to the relevant staff when the new schedule came into effect on 1<sup>st</sup> December 2016. Each practice received two copies of the information pack and additional copies were available upon request to the NIO. In total, 2,784 packs were distributed. In addition to GP practices, information packs 25,000 leaflets were also distributed to maternity hospitals in October 2016.

In May 2017, the NIO undertook an evaluation of the information materials, training and performance of the HSE National Cold Chain Service (NCCS) during the implementation of the new PCI Schedule.

The information provided will allow the NIO to identify potential areas for improvement and will inform future campaigns.

#### 2. Aim of Evaluation

#### Primary aim:

• To determine the value of the information materials available from the NIO to support the new PCI schedule.

#### Secondary aims:

- To identify those practices which received training prior to commencement of the new schedule and to determine their assessment of that training
- To assess satisfaction with the HSE National Cold Chain Service (NCCS)
- To identify areas for improvement so as to inform and improve future practice.

### 3. Methods

An online survey was conducted using the web-based survey tool SurveyMonkey.

United Drug, the company contracted by the HSE to manage the NCCS, provided email addresses for all GP practices that receive vaccine deliveries.

On 24<sup>th</sup> May 2017, a cover email which included a link to the survey, was sent to all of these practices (n=1,392).

Reminder emails were sent by the NIO on 31<sup>st</sup> May, 7<sup>th</sup> June and 14<sup>th</sup> June 2017, and details of the survey were also posted on the home page of the online vaccine ordering system of United Drug.

As an incentive to boost the response rate, a €75 book token was awarded at random to one respondent.

The survey was open from 24<sup>th</sup> May to 19<sup>th</sup> June 2017.

It consisted of a total of 18 questions. These included yes/no, multiple choice, ranking and free-text questions.

The survey questions and the cover email are contained in Appendix 1 and Appendix 2, respectively.

#### 4. Results

### 4.1 Response rate

The survey was sent to 1,392 GP practices, and a total of 209 responses were received. This equates to a response rate of **15%**.

Not all questions were answered by all respondents. Percentage completeness for each of the 18 survey questions is summarised in Appendix 3.

### 4.2 Characteristics of respondents/GP practices

### 4.2.1 Role of individual completing survey

The cover e-mail specified that the survey should ideally be completed by a staff member who administers vaccines. Ninety four percent (n=195) of those who completed the survey administered vaccines and 6% (n=13) did not.

The majority of questionnaires (72%, n=143) were completed by practice nurses (Table 2).

Table 2 Role of individual completing survey

Occupation	Number of respondents	%
Practice nurse	143	72.22%
GP	46	23.23%
Practice manager	6	3.03%
Practice secretary	2	1.01%
Other	1	0.51%
Total	198	100%

### 4.2.2 Location of GP practice

Responses were received from all counties, with the exception of Laois (Table 3).

The largest proportion of responses was from Dublin (29.6%), followed by Galway (9.9%) and Limerick (8.9%). This broadly reflects the geographical distribution of GP practices in Ireland - 28.3% of GP practices are located in Dublin, 6.9% in Galway and 5.3% in Limerick (the number of GP practices by county is detailed in Appendix 4).

Table 3 Location of GP practice

County	Number of respondents	%
Carlow	1	0.49%
Cavan	6	2.96%
Clare	2	0.99%
Cork	17	8.37%
Donegal	6	2.96%
Dublin	60	29.56%
Galway	20	9.85%
Kerry	8	3.94%
Kildare	5	2.46%
Kilkenny	5	2.46%
Laois	0	0%
Leitrim	1	0.49%
Limerick	18	8.87%
Longford	3	1.48%
Louth	4	1.97%
Mayo	5	2.46%
Meath	5	2.46%
Monaghan	2	0.99%
Offaly	2	0.99%
Roscommon	3	1.48%
Sligo	4	1.97%
Tipperary	5	2.46%
Waterford	6	2.96%
Westmeath	7	3.45%
Wexford	4	1.97%
Wicklow	4	1.97%
Total	203	100%

### 4.2.3 Type of GP practice

Most practices were described as 'urban' (45%, n=94). Thirty three percent (n=68) were described as 'mixed' and 22% (n=45) as 'rural' (Figure 1).

Figure 1 Type of GP practice 94 100 90 80 Number of GP practices 68 70 60 45 50 40 30 20 10 0 Urban Rural Mixed Type of GP practice

### 4.2.4 Average number of babies born to mothers in GP practice per year

More than half of practices (n=106, 52%) had an average of 0-50 babies born to mothers who were patients of their practice each year (Figure 2).

Only ten practices reported an average of more than 200 babies born to mothers in the practice each year.

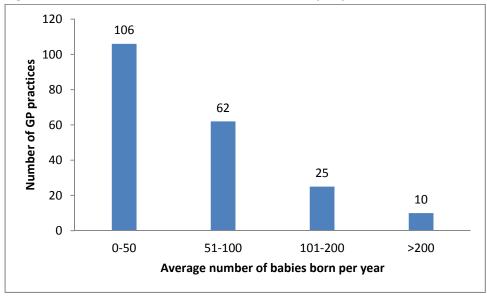


Figure 2 Number of babies born to mothers per year

#### 4.3 Information Materials

#### 4.3.1 Information materials used to access information about changes to PCI schedule

Respondents were asked to indicate the materials they used to access information about the changes to the PCI schedule (Table 4).

The information materials most frequently used were *Guidelines for vaccinations in general* practice vaccination September 2016 (87%), followed by *Immunisation Guidelines for Ireland* (78%) and 'New schedule more protection': frequently asked questions for health professionals (73%).

In contrast, the rotavirus vaccine schedule wheel was utilised by just 29% of respondents.

Table 4 Information materials used by respondents

Information Material	Number	%
Guidelines for vaccinations in general practice September	179	86.89%
2016		
Immunisation Guidelines for Ireland	161	78.16%
'New schedule more protection': frequently asked questions	150	72.82%
for health professionals		
National Immunisation Office website	135	65.53%
Paracetamol after MenB vaccination poster	104	50.49%
Schedule for Rotavirus vaccination poster	84	40.78%
Rotavirus vaccine schedule wheel	60	29.13%
Other*	38	18.45%

<sup>&#</sup>x27;Other' comprised training days (n=21); before/after vaccination tear pads (n=7); Irish Practice Nurses Association resources (n=4); Irish College of General Practitioners resources (n=2); National Health Service resources (n=1); fridge magnet (n=1); Senior Medical Officer in NIO (n=1); immunisation passport (n=1).

#### 4.3.2 Usefulness of information materials

Participants were asked to rate the usefulness of these information materials on a scale of 1 ('not useful') to 5 ('very useful').

*Immunisation Guidelines for Ireland* received the most favourable scores with 92% of respondents rating it as 'useful' or 'very useful' (Table 5).

Similarly, 91% of those who used *Guidelines for vaccinations in general practice September* 2016 and 89% of those who used the NIO website considered them to be 'useful' or 'very useful'.

In contrast, the rotavirus vaccine schedule wheel received less favourable scores with 15% of respondents rating it as 'not useful'.

Table 5 Rating of usefulness of information materials

	Score					
Information material	1	2	3	4	5	Total
Guidelines for vaccinations in	4	3	10	52	128	197
general practice September 2016	(2.03%)	(1.52%)	(5.08%)	(26.4%)	(64.97%)	(100%)
Immunisation Guidelines for	4	5	6	48	120	183
Ireland	(2.19%)	(2.73%)	(3.28%)	(26.23%)	(65.57%)	(100%)
'New schedule more protection':	5	4	22	48	109	188
frequently asked questions for	(2.66%)	(2.13%)	(11.7%)	(25.53%)	(57.98%)	(100%)
health professionals						
National Immunisation Office	4	6	9	38	119	176
website	(2.27%)	(3.41%)	(5.11%)	(21.59%)	(67.61%)	(100%)
Paracetamol after MenB	11	14	29	32	85	171
vaccination poster	(6.43%)	(8.19%)	(16.96%)	(18.71%)	(49.71%)	(100%)
Schedule for Rotavirus	14	18	27	34	63	156
vaccination poster	(8.97%)	(11.54%)	(17.31%)	(21.79%)	(40.38%)	(100%)
Rotavirus vaccine schedule wheel	22	24	33	25	42	146
	(15.07%)	(16.44%)	(22.6%)	(17.12%)	(28.77%)	(100%)

### 4.3.3 Suggestions to improve information materials

Respondents were also asked for suggestions as to how information materials might be improved. These are contained in Table 6.

The most common suggestion focused on increasing the availability/accessibility of information materials.

Table 6 Suggestions to improve information materials

Comment	Number
Make information materials more accessible/regular scheduled	8
deliveries/should be possible to order them at any time	
Provide information to parents in maternity hospitals	5
Provide more space in immunisation passport for vaccine stickers	5
Ensure information materials are distributed to PHNs	1
One leaflet for all vaccines, separate MMR leaflet unnecessary	1
Add information to immunisation passport e.g. potential side-effects	1
Involve practice nurses in development of materials	1
Wheels/posters/magnets not useful	1
Provide guidance on paracetamol dosing for LBW babies	1
Include more information on rotavirus vaccination of immunosuppressed	1
patients	
Include more information on risks of not vaccinating	1
Include website details that parents can be referred to	1
Leaflet should be available in different languages	1

PHN = Public Health Nurse

LBW = low birth weight

### 4.3.4 Information materials for parents

Respondents were asked to indicate the information materials that they refer parents to for further information (Table 7).

The commonest response was the NIO website (n=61) (Table 7).

Table 7 Further information sources for parents

Resource	Number
NIO website	C1
NIO website	61
Your child's immunisation: a guide for parents	21
Immunisation Guidelines for Ireland	17
Before immunisation/after immunisation information	15
NIO materials	7
Paracetamol after MenB poster	2
NHS website	2
Leaflet/information leaflet/website/poster (unspecified)	31

### 4.3.5 Usefulness of information materials for parents

Respondents were asked to rate the usefulness of the information materials produced by the NIO for parents on a scale of 1 ('not useful') to 5 ('very useful') (Table 8).

Over 80% of respondents rated each of the parents' information materials as 'useful' or 'very useful'.

Your child's immunisation: a guide for parents received the most favourable scores with 91% (n=181) of respondents scoring it as 'useful' or 'very useful'.

Table 8 Rating of usefulness of information materials

		Score				
Information material	1	2	3	4	5	Total
Your child's immunisation: a guide	5	2	11	52	129	199
for parents	(2.51%)	(1.01%)	(5.53%)	(26.13%)	(64.82%)	(100%)
Before immunisation information	6	8	22	48	113	197
	(3.05%)	(4.06%)	(11.17%)	(24.37%)	(57.36%)	(100%)
After immunisation information	5	3	19	45	127	199
	(2.51%)	(1.51%)	(9.55%)	(22.61%)	(63.82%)	(100%)
National Immunisation Office	6	8	22	53	102	191
website	(3.14%)	(4.19%)	(11.52%)	(27.75%	(53.4%)	(100%)

### 4.3.6 Timeliness of receipt of information materials

Ninety one percent (n= 185) of respondents reported that they had received the information materials in a timely manner and 9% (n=19) reported that they had not (Figure 3).

9% Yes ■ No 91%

Figure 3 Timely receipt of information materials

### 4.3.7 Ordering information materials

Participants were asked if they encountered any difficulties ordering information materials.

Eight eight percent (n=176) had no difficulty ordering materials while 12% (n=23) had (Figure 4).

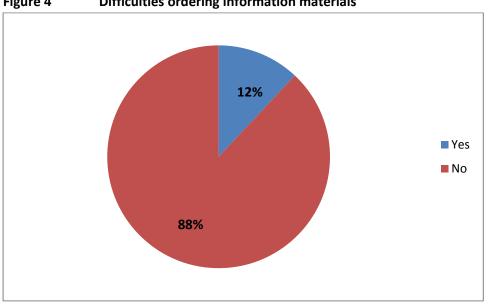


Figure 4 Difficulties ordering information materials

Table 9 summarises respondents' comments relating to the difficulties encountered when ordering information materials and their relative frequency.

Table 9 Comments relating to difficulties ordering information materials

Comment	Number
Out of stock	7
Limit to number that could be ordered at any one time	5
Order did not arrive	1
Had to set up account on website	1

### 4.3.8 Contact for advice relating to immunisation

Respondents were asked who they would contact for advice relating to immunisation.

As illustrated in Table 10, almost half of respondents (48.6%, n=70) contacted the NIO for advice pertaining to immunisation.

All of the other contacts listed were also reputable information sources.

Table 10 Contact for advice relating to immunisation

Contact	Number	%	
National Immunisation Office	70	48.61%	
Department of Public Health	27	18.75%	
Local Health Office (LHO)	28	19.44%	
Other medical or nursing colleagues	19	13.19%	
Total	144	100%	

### 4.4 Training

Participants were asked if they or any member of their practice had received training relating to the new PCI schedule.

Seven two percent (n=148) replied in the affirmative and 28% (n=57) replied that neither they nor any other member of their practice had received training (Figure 5).

28%

72%

Figure 5 Receipt of training relating to new PCI schedule

When asked to rate the usefulness of the training on a scale of 1 ('not useful') to 5 ('very useful'), 83% of respondents rated the training as 'useful' or 'very useful', and less than 6% rated it as 'not useful' (Table 11).

Table 11 Rating of usefulness of training

	Score				
	1	2	3	4	5
Usefulness of training	9	7	12	34	98
	(5.63%)	(4.38%)	(7.5%)	(21.25%)	(61.25%)

Respondents were asked for suggestions as to how training might be improved. Table 12 summarises respondents' suggestions and their relative frequency.

The most common suggestion centred on increasing the availability of training (n=14).

Table 12 Comments relating to training sessions

Comment	Number
Increase availability of training sessions (increase number of dates/venues)	14
GPs should attend training	6
Shorten duration of training sessions	4
Hold sessions at an earlier date	3
Include practical demonstration of vaccine administration	3
Use videos/webinars/online training	3
Hold refresher sessions	2
Not enough time for Q&A	2
Smaller groups	2
Prioritise training of practice nurses	1
Should be mandatory for all HCPs involved in immunisation	1
Distribute information packs on training day	1
More information on late entrants & co-administration of vaccines	1
More information on vaccine benefits & side-effects	1

HCP=health care professional

#### 4.5 HSE National Cold Chain Service

Participants were asked to rate the performance of the HSE National Cold Chain Service (NCCS) on a scale of 1 ('poor') to 5 ('excellent').

Eighty nine percent of respondents rated the performance of the NCCS as 'good' or 'excellent' (Table 13).

Table 13 Rating of performance of HSE National Cold Chain Service

	Score				
	1	2	3	4	5
Performance of HSE National Cold Chain	4	4	14	52	133
Service	(1.93%)	(1.93%)	(6.76%)	(25.12%)	(64.25%)

### 4.6 Summary of key findings

- Response rate was 15% (this is comparable to the response rate observed in other similar electronic surveys<sup>1-4</sup>).
- 72% of surveys were completed by practice nurses.
- Most respondents were from Dublin (30%). This reflects population distribution 28% of the Irish population is resident in Dublin (Census 2016).
- The most frequently used document to access information about the new PCI schedule was *Guidelines for vaccinations in general practice September 2016* (87%)
- In terms of the usefulness of the information materials provided by the NIO, most received favourable scores. There was however variation e.g. the NIO website and the rotavirus vaccine schedule wheel were rated as 'very useful' by 68% and 29% of respondents, respectively.
- 91% received information materials in a timely manner.
- 88% reported no difficulty ordering information materials.
- The NIO website was the resource that respondents most commonly referred parents to for further information.
- Almost half of respondents reported that they would contact the NIO for advice pertaining to immunisation.
- 72% of GP practices had received training. 83% rated training as 'useful' or 'very useful'. The most frequent suggestion to improve training centred on increasing the number of dates/venues.
- 89% rated the performance of HSE National Cold Chain Service as 'good' or 'excellent'.

#### 5. Conclusions

#### Information materials

The findings of this evaluation indicate that the information materials available from the NIO are broadly utilised to access information relating to the new PCI schedule.

Overall, the materials are considered to be useful although there is evidence that some are considered to be less useful than others.

The majority of GP practices had no difficulties ordering information materials and received them in a timely manner.

Despite just 12% of respondents reporting difficulty ordering information materials and just 7% reporting that they didn't receive materials in a timely manner, when asked how best to improve information materials, the commonest suggestion centred on making materials more available. Other suggestions included ensuring mothers receive information in maternity hospitals and amending the immunisation passport so that there is more room for vaccine stickers

There is evidence that respondents refer parents to reliable resources for further information (e.g. NIO website and NIO information materials for parents) and that they themselves primarily consult the NIO, local Depts. of Public Health and LHOs for immunisation advice.

### **Training**

Seven two percent of respondents had received training. In terms of its usefulness, 83% assigned it a score of either four or five out of maximum score of five (i.e 'useful' or 'very useful').

Suggestions to improve training included increasing its availability, ensuring GPs also attend training, shortening the duration of sessions and including a practical demonstration of vaccine administration in future sessions.

Of note, the NIO collaborated with the Irish College of General Practitioners (ICGP) production of an e-learning module on immunisation to GPs which included content on the new PCI schedule.

#### **Performance of HSE Cold Chain Service**

The findings of this evaluation indicate that there is a high level of satisfaction with the performance of the NCCS with 89% of respondents rating it as 'good' or 'excellent'.

#### 6. Recommendations

- a. Increase awareness among staff of GP practices that additional information materials can be ordered online at <a href="https://www.healthpromotion.ie">www.healthpromotion.ie</a>. This should be regularly highlighted in the NIO newsletter.
- b. Contact maternity hospitals to ensure information materials relating to the PCI schedule are being distributed to mothers.
- c. Consider utility of rotavirus vaccination schedule wheel. It was used by less than one third of respondents and 54% did not rate it useful.
- d. Review space available in immunisation passport for vaccine stickers.
- e. If there are further changes to the PCI schedule in the future, consider increasing the number of training sessions provided for general practice (more dates/venues). This would be contingent upon available resources. Training/information could potentially be provided at GP Continuing Medical Education (CME) meetings. The use of webinars or other online resources would also be worthy of consideration.
- f. Consider including a practical demonstration of vaccine administration in future training sessions.

### 7. Acknowledgements

The NIO would like to thank all GP practices that took the time to complete this survey. We greatly appreciate the valuable information that you provided.

#### 8. References

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- 3. Hassenbusch SJ, Portenoy RK. Current practices in intraspinal therapy—a survey of clinical trends and decision making. J Pain Symptom Manage 2000;20:S4–S11
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## 9. Appendices

	dix 1 Survey questions	
	Details of individual completing questionnaire	
	Name:	
	Contact details:	
	Occupation:	
	Do you administer vaccines?	
	Yes  No	
	In which county is your GP practice?	
	Type of GP practice	
	Urban  Rural  Mixed	
	On average, how many babies are born to mothers who are patients in your pr	actice each
	year?	
	0-50	
	·	
	0-50 □ 51-100 □ 101-200 □	
	0-50	
	0-50 □ 51-100 □ 101-200 □	ges to the
•	0-50	
•	0-50	
•	0-50	nals 🗆

Q7 Please rate the usefulness of these information materials on a scale of 1 (not useful) to 5 (very useful).

Information Material	Score				
'New schedule more protection': frequently	1	2	3	4	5
asked questions for health professionals					
Guidelines for vaccinations in general practice	1	2	3	4	5
September 2016					
Paracetamol after MenB vaccination poster	1	2	3	4	5
Schedule for Rotavirus vaccination poster	1	2	3	4	5
Rotavirus Vaccine Schedule wheel	1	2	3	4	5
Immunisation Guidelines for Ireland	1	2	3	4	5
National Immunisation Office website	1	2	3	4	5

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relating	to the n	new PCI s	chedule?
		ful) to 5	very
		cale of 1 (not use	cale of 1 (not useful) to 5 (

the New PCI Schedule\_v1.0

	Score				
HSE Training session	1	2	3	4	5

Do you use any other resources to obtain info	rmation on i	immunis	ation?	
Yes □				
No 🗆				
Comments:				
			_	
			_	
Who would you usually contact for advice in	elation to im	nmunisa	- tion?	
Who would you usually contact for advice in	elation to in	nmunisa	- tion?	
Who would you usually contact for advice in I	elation to im	nmunisa	_ tion? _ _	
Who would you usually contact for advice in the state of the HSE's National Control of the HSE's			- -	vice duri
	ional Cold Ch	ain Deli	– – very Serv	
Please rate the performance of the HSE's Nati	ional Cold Ch	ain Deli	– – very Serv	

#### Appendix 2 Cover e-mail

Dear Doctor,

We would greatly appreciate if you would take part in this survey "Evaluation of Information Materials, Training and Performance of the HSE National Cold Chain Delivery Service during the Implementation of the New Primary Childhood Immunisation Schedule"

This survey is being undertaken by the National Immunisation Office (NIO).

As you are aware, there were changes to the Primary Childhood Immunisation (PCI) Schedule for babies born on or after 1<sup>st</sup> October 2016.

The primary aim of this survey is to determine the value of the information materials available from the NIO to support the new PCI Schedule.

Secondary aims are:

- To identify those practices who received training prior to commencement of the new schedule and to determine their assessment of that training
- To assess satisfaction with HSE National Cold Chain Delivery Service

Your participation will help to inform future campaigns.

Ideally the survey should be completed by a staff member who administers vaccines, and we estimate that it will only take 5-10 minutes to complete.

Be assured that all answers that you provide will be kept in strict confidentiality.

A prize of a €75 book token will also be awarded at random to one participant who completes the survey.

# To complete the survey, please click on the following link:

https://www.surveymonkey.com/r/WLP6BBB

The closing date for completion is **Monday 19<sup>th</sup> June.** 

If you have any questions in relation to the survey, please contact the National Immunisation Office at 01 867 6108 or send an email to <a href="mailto:immunisation@hse.ie">immunisation@hse.ie</a>.

Kind regards,

**National Immunisation Office** 

Appendix 3 Completeness of survey responses

	Answered	Skipped	% completeness
Q1	202	7	96.7%
Q2	209	0	100%
Q3	209	0	100%
Q4	207	2	99%
Q5	203	6	97.1%
Q6	206	3	98.6%
Q7	208	1	99.5%
Q8	188	21	90%
Q9	206	3	98.6%
Q10	204	5	97.6%
Q11	199	10	95.2%
Q12	88	121	42.2%
Q13	205	4	98.1%
Q14	160	49	76.6%
Q15	85	124	40.7%
Q16	199	10	95.2%
Q17	197	12	94.3%
Q18	207	2	99%

Appendix 4 Number of GP practices by county

County	Number of GP practices	%
Carlow	19	1.23%
Cavan	24	1.56%
Cavan	27	1.3070
Clare	42	2.72%
Cork	190	12.31%
Donegal	46	2.98%
Dublin	437	28.32%
Galway	106	6.87%
Kerry	53	3.43%
Kildare	58	3.76%
Kilkenny	23	1.49%
Laois	18	1.17%
Leitrim	8	0.52%
Limerick	81	5.25%
Longford	16	1.04%
Louth	39	2.53%
Mayo	61	3.95%
Meath	40	2.59%
Monaghan	14	0.91%
Offaly	23	1.49%
Roscommon	20	1.3%
Sligo	28	1.81%
Tipperary	55	3.56%
Waterford	39	2.53%
Westmeath	27	1.75%
Wexford	38	2.46%
Wicklow	38	2.46%
Total	1,543	100%