

Clinical Audit Protocol

Clinical Audit Title:	Vaccination of chemotherapy patients at the Oxford Cancer Centre		
Audit Lead(s) / Designation	Dr Michelle Toleman, FY2 Dr David Church, Academic Clinical Lecturer in Medical Oncology		
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Directorage	Oncology		
Start Date	January 2012	Estimated Finish Date	February 2012
Background / Rationale to the Clinical Audit (a brief history to the project)			
<p>Influenza and invasive pneumococcal infections pose substantial risk to patients with cancer receiving chemotherapy. Both diseases are partly preventable by vaccination, and in the UK patients over the age of 65 are routinely invited for immunization by general practitioners. Department of Health Guidelines also recommend that that younger patients with risk factors, including those planned for chemotherapy treatment, should also be vaccinated against influenza and pneumococcal infections. Anecdotal experience suggests that vaccination of this risk group in OUH is infrequent. We plan to conduct a prospective audit of this with a view to developing interventions to improve vaccine uptake in our patient cohort.</p>			
Clinical Audit Aim / Objectives (Overall purpose of the project - e.g. improve, enhance, ensure, change, obtain)			
<p>Aim</p> <ul style="list-style-type: none"> To determine the frequency of, and reasons for influenza and pneumococcal vaccination in patients treated with systemic anticancer therapy at the Oxford Cancer Centre <p>Objectives:</p> <ul style="list-style-type: none"> To determine the frequency of influenza and pneumococcal vaccination in patients treated with systemic anticancer therapy at the Oxford Cancer Centre To record whether patients treated with systemic chemotherapy who received influenza and pneumococcal vaccination did so because they were planned for this treatment, or for other reasons. To record whether patients treated with systemic chemotherapy received advice regarding vaccination from their treating oncologist. 			

Reason for audit			
National Clinical Audit		NICE Quality Standard	
NICE Guidance		NICE	
Incident/Complaint/ Claim		NHSLA criteria	
Specified in CCG Contract		Other (compliance with DH guidelines)	X

Standards		
Measure	Standard	Evidence
Frequency of influenza vaccination	75%	National frequency of vaccination of >65's / "at risk" cases
Frequency of pneumococcal vaccination	75%	As above

Methods	
Data collection	Prospective
Case selection	Patients receiving treatment with systemic chemotherapy on the Oncology Day Treatment Unit at the Churchill Hospital will be provided with an anonymous questionnaire. No selection will be made for cancer type or chemotherapy regimen. Participation will be entirely voluntary.
Audit timing and duration	Two week period during January 2012
Sample size	Over 100 responses

Outputs	
Output	To be reviewed / implemented
Departmental presentation	July 2012
Clinical vaccine guideline development	September 2012

References:

Current HPA guidance for those with unknown or incomplete immunization status:

<http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/VaccinationImmunisation/Guidelines/>

Department of Health, "The Green Book"

<http://www.dh.gov.uk/en/Publichealth/Immunisation/Greenbook/index.htm>

US/CDC immunisation recommendations: <http://www.immunize.org/catg.d/p2011.pdf>

Utility of Influenza Vaccine for Oncology Patients. Pollyea et al. J. Clin. Onc. 28: 2481-2490.

Vaccination of Oncology Patients: An effective Tool and an Opportunity Not to Be Missed.

The Oncologist. 17:1-2.