NHS Resolution

31 July 2025

FILE REF: **SHA/26566**

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DECISION MAKING BODY: **NHS ENGLAND – MIDLANDS (EAST) ("THE COMMISSIONER")**

GMS CONTRACTOR: **FOREST HOUSE MEDICAL CENTRE, 2A PARK DRIVE, LEICESTER, LE3 3FN**

DISPUTE RESOLUTION – NATIONAL HEALTH SERVICE (GENERAL MEDICAL SERVICES CONTRACT) REGULATIONS 2015

RE: NON-PAYMENT FOR SEASONAL FLU VACCINE OCTOBER 2024

1. **Outcome**

1.1 I am satisfied that that the Commissioner can decline the updated claim for payments for October 2024 as the claim was submitted outside the 3 month timescale allowed from the date the vaccination dose was administered.

1.2 I note that neither party has submitted a claim for interest. I make no determination in this regard.

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RE: NON-PAYMENT FOR SEASONAL FLU VACCINE OCTOBER 2024

1. INTRODUCTION

1.1 The above Contractor referred the dispute in relation to its General Medical Services Contract for dispute resolution under the provisions of Regulation 83 of the National Health Service (General Medical Services Contracts) Regulations 2015 (the "Regulations").

1.2 The Secretary of State for Health and Social Care has directed that NHS Resolution exercise the functions of dispute resolution on their behalf. I, as an authorised officer of NHS Resolution, have made this determination.

2. APPLICATION FOR DISPUTE RESOLUTION

2.1 By email dated 10 March 2025 the Contractor applied to NHS Resolution, for dispute resolution.

2.2 I have had regard to the following documents made available to me in consideration of this matter to ensure the just, expeditious, economical and final determination of this dispute:

2.2.1 Email from the Contractor dated 10 March 2025;

2.2.2 Email from the Contractor and enclosures dated 25 March 2025;

2.2.3 Email from the Commissioner and enclosures dated 12 May 2025;

2.2.4 Email from the Contractor and enclosures dated 9 June 2025; and

2.2.5 Signed copy of the GMS contract.

3. PARTIES SUBMISSIONS

The Contractor's application

3.1 "Following on from a response from the East Midlands Vaccination Contracting team on the 3rd March 2025, please find my appeal below with additional evidence.

3.2 Mitigating circumstances

3.3 Firstly, I would like to outline the mitigating circumstance surrounding this claim, as I am aware that I have raised the issue initially 21days after the cut off period on the 31st Jan 2025.

3.4 New Practice development

3.5 Forest House Medical Centre is currently having a Large New Practice being built in New Lubbesthorpe, Leicester. This is a brand-new purpose-built Practice on the first floor of a large town that is also being developed at the same time. In conjunction with this project, we have a 66 bed Care Home opening next door to the new Practice as well as a Pharmacy Opening on the ground floor (not dispensing). This project is concluding in May 2025 and the additional amount of work involved in this project is substantial, which has resulted in trusting the SystmOne extraction and the Ardens Reports when declaring the flu figures in November 2024.

3.6 CQRS Accuracy

3.7 Since I have been submitting the claims for Practice over the last 2 years, I have only encountered minor variations in the figures I have cross referenced, resulting in minimal financial impact on the Practice. This is the first time in 2 years I have come across such a large variance in CQRS vs actual figures.

3.8 SystmOne report

3.9 As the figures from CQRS are driven by the SystmOne reports I sought to understand how this issue had occurred. I spent a long time on the phone to the team at TPP and they stated they were unable to run the reports from October 2024 and only a limited attempt was made to understand how the issue had occurred. However, I found this unacceptable as this issue has not been resolved. After working with our in-house IT manager and System One specialist, [BB] we managed to potentially identify the issue through copying the search and all the joins that sit behind the search S1 uses in the 'system wide reports'. [BB] identified that the SystmOne report did not include both Parts of the Flu vaccine (part 2), which resulted in a substantial difference in the report vs actual. Please see the screen shot below, the first figure is the Flu that we gave and the second is attached. This is incredible [sic] concerning, not only for our Practice but for other Practices also. (Please note there will be some variance as the patient's information may have changed)

Flu given Oct	1575
Copy of SFLUGP1ANDDRUG1_COD In Payment Period – Vaccs - OCT	677

3.10 Financial Impact.

3.11 This has a significant financial impact on the Practice (over 11k) who have worked so hard to deliver the vaccine in a timely manner and as such receive the payment due to the Practice. Given the circumstances above I feel this is a reasonable request to make, and I would ask that you allow us to submit the correct figures to you, with evidence and allow the Practice to be paid for what has been achieved.

3.12 Summary

3.13 Given the legitimacy of the claim and the extenuating factors that led to its review beyond the time frame, we respectfully request a reconsideration. We believe that processing this claim aligns with the intent of fair claims handling and ensures that the necessary medical care is appropriately covered.

3.14 I look forward to hearing from you soon.

3.15 CQRS screen shot for reference.

3.16 Reference document only

3.17 October 2024 Flu results

3.17.1 Please see the screen shot below for October 2024 for Flu.

3.17.2 Please note this was submitted in a timely manner."

Indicator ID	Description	Date Submitted	Submitted Values	Description
SFLU001	Monthly count of patients aged 65 and over as at 31 March 2025 who have received a seasonal influenza vaccination using the recommended vaccine by the GP practice, within the reporting period.	10/11/2024	376	Monthly Count
SFLU006	Monthly count of the number of eligible patients, identified as at risk, where the risk is clearly demonstrated by at least one unambiguous clinical code in the patients record, who have received a first dose of the recommended seasonal influenza vaccine given by the GP practice in the reporting period. (Eligible patients	10/11/2024	251	Monthly Count

	are aged 6 months to 64 years as at 31 Month 2025, excluding patients aged 2 and 3 years as at 31 August 2024).			

Additional information provided by the Contractor

Email from the Contractor to the Commissioner dated 21 February 2025

3.18 "Following our conversation yesterday I spent over an hour on the phone to TPP to try and identify the issue, please see the full email below to send on to [CR].

3.19 Firstly, thank you [sic] the childhood Flu seems to have been corrected as per the below and has turned green as opposed to amber or red last time. This is a screenshot from the annual CQRS summary report from today. Can you confirm this has been allocated please?

[table redacted by NHS Resolution]

3.20 However, as I have been cross referencing all the flu numbers both Adult and Child given the above situation and receiving the email from East Midlands Vaccination team (below) on Tuesday 18 Feb. please see that we have a very worrying -1111 difference (mostly in Oct) in my initial calculation in vaccines given vs what CQRS was stating on the Adults. Furthermore, as you can see in all previous months the difference is minimal. I must add that CQRS is rarely out on any of the submission, but I spent over an over on the phone to TPP SystmOne to identify why the upload from S1 was so inaccurate. After over an hour they concluded that the reports that sit behind the global reports on the clinical reporting side are too complex to amend the date and have not been able to give me an answer.

3.21 To be clear the submission date has not been missed the numbers supplied are wrong and I apologise I did not see this sooner as I believed it would show in future months. However, this is circa 10k worth of vaccine. Can you please advise how we can move forward as this seems like a complete anomaly on the extraction data from S1 which CQRS use, and I am very concerned give [sic] the level of money we are missing!

3.22 *"Dear [JL]*

C82066 Forest House Medical Ctr

Seasonal Influenza Uptake

Below is the practice summary for the Seasonal Influenza uptake collected via ImmForm for your practice.

Table 1 shows your practice's uptake as well as the ICB uptake for vaccinations given between 1st September 2024 and 31st January 2025 inclusive. Also shown is the 'Deficit to target' column, this is how many more vaccines are required to meet the end of season uptake achieved by the practice last year (2023/24). The 'Deficit to target' for your practice may show as achieved; this indicates that your practice achieved the same or has exceeded uptake reported last year for your practice.

	No. of patients	*No. vaccinated*	*% Uptake*	*Deficit to target*	*ICB % Uptake*
Patients 65 & Over	*3323*	*2570*	*77.3*	*93*	*74.9*
At Risk Patient 6mths to under 65 years	*2412*	*956*	*39.6*	*50*	*38.3*
Pregnant Women	*218*	*65*	*29.8*	*20*	*35.4*
All children – 2 years	*212*	*91*	*42.9*	*Achieved*	*41.6*
All children – 3 years	*196*	*76*	*38.8*	*Achieved*	*42.0*

The data for table 1 has been taken from ImmForm and has been automatically uploaded via your GP Clinical system, please contact your GP System Supplier if there are discrepancies within your data.""

Email from the Commissioner to the Contractor dated 3 March 2025

3.23 "Your issue has been forwarded to the Public Health contracting team, this includes the child flu issue and the more recent "main" / at risk seasonal flu claims.

3.24 1. Child flu 2024/25 (September 2024 / October 2024)

3.25 Having reviewed the timeline, the practice had initiated discussions relating to CQRS within the required timeline – though there were issues clarifying the data. I confirm that this claim has been processed to payment. My apologies that correspondence had not previously notified you of this.

3.26 2. At Risk flu 2024/25

3.27 The seasonal flu issue relating to patients in at-risk categories was not identified at the time. The October activity is now outside the 3-month timescale set out in the ES.

3.28 The practice declared the claims as follows

3.28.1 October claim (extracted November) declared 28.11.2024,

3.28.2 November claim (extracted December) declared 15.01.2025

3.28.3 December claim (extracted January) declared 13.01.2025

3.28.4 January claim on (extracted February) declared 21.02.2025

3.29 Declaring the data is effectively confirming that the claim is correct for payment.

3.30 1. The October 2024 claim + 3 months "timed out" 31 January 2025. The first record we have of this issue being raised to CQRS / PODS colleagues is 21 February 2025. **This claim is therefore out of scope and the appeal is declined**.

3.31 2. November 2024 claim + 3 months would be end of February 2025 so has been raised with the PODS team within 3- month window given in the enhanced service. Having liaised with the Head of Immunisation (East Midlands), he has **confirmed approval to pay the additional 14 x £10.06 = £140.84**

3.32 3. December 2024 claim+ 3 months would be end of March 2025 so has been raised within 3 months window. On the same grounds as the November claim, **the additional 2 x 10.06 = £20.12 has been given approval to be paid.**

3.33 In the absence of any further evidence, this concludes the regional Public Health Vaccination Contracting team's position on the matter. Should the practice wish to pursue this further the next step would be to escalate to Primary Care Appeals – NHS Resolution Contact Primary Care Appeals: Phone: 0203 928 2000 Email: nhsr.appeals@nhs.net

3.34 For information, if you review published decisions on this web page, NHS England has successfully defended several appeals relating to the 3-month timeline."

Representations

The Commissioner's representations

3.35 "Thank you for your letter of 28 April 2025, concerning Forest House Medical Practice and an application for dispute resolution with regard to flu vaccine payment for October 2024.

3.36 We note that the practice has been involved in a large capital build that has placed an additional burden on their capacity to manage business as usual, such as the declaration of flu vaccine claims. However, when practices have signed up to the Enhanced Service for Influenza 2024/25, section 11 clearly states the following:

11.2.3 Practices submitting claims to the Commissioner for payment monthly wherever possible and Practices must:

(a) validate and submit a claim to the Commissioner for payment within 3 months of the date of the administration of the completing dose of the vaccine; and

(b) ensure that claims submission are validated to enable the Commissioner to correctly calculate the payment

3.37 The practice has a responsibility to check the claims they are declaring on CQRS are complete and accurate, and if not to then seek amendment in the usual way, within the required timelines. This should be carried out in a timely manner to ensure that the relevant timeframes for submission are not missed by the practice and that reliance on previous data is not used as a proxy for future claims.

3.38 To reiterate the claim window, as part of the Primary Care Bulletin issued on 22 August 2024 (issue 304), the following additional information was provided via the hyperlink: Seasonal Influenza Vaccination Programme Enhance Service 2024/25 additional guidance on recording of influenza vaccination events, payments and collaboration

3.39 *5. Limitation period for claiming an IoS fee*

3.39.1 40. Claims for activity related to the administration of influenza vaccinations only must be submitted on the relevant system as soon as possible. Practices must validate and submit a claim to the Commissioner for payment within three months of the date of the administration of the completing dose of the vaccine as outlined in Section 11 Payment and Validation of the Seasonal Influenza ES.

3.39.2 41. Where an influenza vaccination is co-administered with a COVID-19 vaccination, then claims must be submitted within three months of the date of the administration of the completing dose of the vaccine."

Observations

The Contractor's observations

3.40 "Thank you for your letter dated 28 April 2025 concerning Forest House Medical Practice and the response from the vaccinations team of our application for dispute resolution regarding the non-payment of over £11,000 for flu vaccination activity undertaken in October 2024.

3.41 We fully recognise the requirements set out in Section 11 of the 2024/25 Enhanced Service Specification for Influenza and the accompanying guidance on timely submission and validation of claims through CQRS. However, we would like to respectfully request that NHS Resolution reconsider the outcome based on the exceptional circumstances faced by the practice at the time.

3.42 During the period in question, the practice was in the midst of a major capital development project, which impaired our ability to cross reference the validity of the data.

3.43 Compounding this challenge were significant issues with both the CQRS system and our clinical system, SystmOne, which were returning inaccurate search results for the flu vaccination programme. Despite following usual procedures to validate our activity, the data extracted did not reflect the actual number of vaccinations administered. These discrepancies only became apparent following a detailed review, which unfortunately took place shortly after the three months claim window had closed.

3.44 We informed the vaccinations team of this issue within 21 days of the deadline passing. While we fully appreciate the importance of adhering to the specified timeframes, we believe it is important to recognise that the vaccinations were legitimately delivered, and the delay in claiming was due to a combination of technical and operation pressures beyond the practice's control.

3.45 Given the value of the claim – over £11,000 – and the fact that the work was fully completed in accordance with the Enhanced Service requirements, we feel it is unjust for the payment to be withheld in this instance. The loss of these funds places undue strain on the practice and undermines the considerable effort undertaken by our team during a time of significant transition.

3.46 We respectfully ask NHS Resolutions team [sic] to reconsider this decision and allow flexibility in recognition of the exceptional circumstances that led to the late submission. We remain committed to upholding the service standards and would welcome any recommendations to improve the robustness of our future claims processes.

3.47 Thank you for your time and consideration."

No observations were submitted were submitted by the Commissioner.

4. CONSIDERATION

4.1 As part of this consideration of the application for NHS dispute resolution, I required an up-to-date version of the contract in dispute containing all variations agreed since the contract was signed. This was provided and has not been disputed by the commissioner.

4.2 From the information provided to me I am satisfied that the application for dispute resolution has been made within the time limits set out in the Regulations.

4.3 I note the additional information provided with the Contractor's application includes email correspondence between the Commissioner and the Contractor in respect of the matter at hand. I am therefore content that local dispute resolution was entered into and that an agreement between the parties could not be reached prior to referral for NHS dispute resolution.

4.4 The application for dispute resolution relates to the non-payment for seasonal influenza vaccines for the financial year 2024/25. I note that a copy of the Enhanced Service Specification "Seasonal influenza vaccination programme 2024/25" ("the Specification") was provided by the Commissioner. The content of the specification and the application of it has not been disputed by the Contractor.

4.5 I note that the period in question, the year 2024/25 (specifically those vaccinations administered in October) is covered by the specification.

4.6 There is no dispute between the parties that the Contractor signed up to provide the Enhanced Service. Further there is no dispute that the Contractor provided the vaccinations. The dispute centres around whether or not the Contractor is entitled to payment for the provision of these vaccinations in accordance with the Specification.

4.7 I note the Contractor's comment that some of the vaccines administered in October 2024 were correctly claimed for on 28 November 2024 however, unbeknown to them, there had been an error with the SystmOne reporting which had led to incorrect data being uploaded onto the CQRS system. This resulted in a payment for the October vaccinations being much lower than anticipated. I note the Contractor's comment that this was reported to the Commissioner as soon as it was made aware of the fact, although this was 21 days after the claim expiry period, i.e. 3 months after the administration of the vaccines.

4.8 I note that the Commissioner makes specific reference to section 11 of the specification and quotes:

"11.2.3. Practices submitting claims to the Commissioner for payment monthly wherever possible and Practices must:

(a) validate and submit a claim to the Commissioner for payment within 3 months of the date of the administration of the completing dose of the vaccine; and

(b) ensure that claims submission are validated to enable the Commissioner to correctly calculate the payment."

4.9 I note that the Specification states:

"11.1 Subject to compliance with this ES, a payment of £10.06 shall be payable to the Practice for the administration of each influenza vaccination to Patients.

11.2. Practices will only be eligible for payment in accordance with this ES where all of the following requirements have been met and payment is conditional on:

11.2.1. The Patient who received the vaccination(s) was a Patient at the time the vaccine was administered, and all of the following apply:

(a) the Practice has only used the specified vaccines recommended in this ES and/or Commissioner guidance;

(b) the Patient in respect of whom payment is being claimed was within an announced and authorised cohort at the time the vaccine was administered, unless exceptional circumstances apply as set out at paragraph 9.7 and the vaccination was administered after the announced and authorised date for the vaccinations to take place;

(c) the Practice has not received and does not expect to receive any payment from any other source in respect of the delivery of the influenza vaccination. Practices may claim a dispensing fee as set out in paragraph 16(2) and 16(3) of the NHS General Medical Services Statement of Financial Entitlements Direction 2023 for influenza vaccinations administered to Patients. Where any vaccine is centrally supplied, no claim for reimbursement of vaccine costs or personal administration fee apply to those vaccinations delivered to Patients. The vaccines reimbursed as part of the NHS Seasonal Influenza Immunisation Programme 2024/25 are outlined in the Flu Letter. During the influenza season there may be additional advice from the Commissioner or UKHSA if there are issues with vaccine supply.

11.2.2. the Patient's influenza vaccinations have been administered by the Practice.

11.2.3. Practices submitting claims to the Commissioner for payment monthly wherever possible and Practices must:

(a) validate and submit a claim to the Commissioner for payment within 3 months of the date of the administration of the completing dose of the vaccine; and

(b) ensure that claims submission are validated to enable the Commissioner to correctly calculate the payment.

11.3. Payment will be made in respect of claims submitted by the last day of the month following the month the submitted claims are validated by the Practice.

11.4. Practices must keep a record of the relevant circumstances to support reporting requirements and payment processes."

4.10 There is no dispute that the Contractor must submit claims monthly, however there is a 3 month period in which claims can be submitted for payment.

4.11 Based on the information available to me, I am of the view that this later notification of 21 February 2025 falls outside the 3 month period.

4.12 I have next gone on to consider comments from the Contractor with regard to the mitigating circumstances for the late submission of claim data.

4.13 The Contractor comments that "*the practice was in the midst of a major capital development project, which impaired our ability to cross reference the validity of the data"* and that there were *"significant issues with both the CQRS system and [its] clinical system, SystmOne, which were returning inaccurate search results for the flu vaccination programme. Despite following usual procedures to validate our activity, the data extracted did not reflect the actual number of vaccinations administered."*

4.14 I note that the Specification at 9.7 states:

"9.7. Practices will not be eligible for payment for the administration of influenza vaccinations outside the announced and authorised cohorts unless they are able to evidence exceptional clinical circumstances requiring influenza vaccination to be administered at the request of the Commissioner."

4.15 I am mindful that the exceptional circumstances as set out above are with regard to the relevant cohorts of those who should be receiving the vaccinations and further that this is with regard to exceptional clinical circumstances. The Contractor has not suggested this applies to its dispute.

4.16 There does not appear to be any provisions in the Specification for exceptional non-clinical circumstances but I have considered whether there are in this case. The Contractor suggests that the delay in claiming was *"due to a combination of technical and operation pressures beyond the practice's control"*. Whilst there may have been some reporting issues, I am of the view that the Contractor has a responsibility to check it has correctly submitted its monthly data, following which there is a three month 'grace' period for it to validate the data for payment. The Contractor should be familiar with the requirements of the deadlines and therefore should have identified any issues sooner. However, the Contractor relied *"in trusting the SystmOne extraction and the Ardens Reports…"* I do not accept this can be claimed to be beyond its control.

4.17 Whilst I appreciate that at the same time the Practice was engaged in the development of a new practice in Lubbesthorpe, I have not been provided with information as to how and to what extent this diverted attention away from business as usual activity and was beyond its control. .

4.18 Based on the information that the Contractor has provided, I am of the view that the reasons given for the late submission of claims are not exceptional as set out in the Specification.

5. DECISION

5.1 I am satisfied that that the Commissioner can decline the updated claim for payments for October 2024 as the claim was submitted outside the 3 month timescale allowed from the date the vaccination dose was administered.

5.2 I note that neither party has submitted a claim for interest. I make no determination in this regard.

Head of Appeals
NHS Resolution