NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

**NICE INDICATOR GUIDANCE**

**Resource impact statement: NM206 / NM207 / NM208**

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# Indicator

NM206. The percentage of babies who reached 24 weeks old in the preceding 12 months, who have received 2 doses of rotavirus vaccine before the age of 24 weeks.

NM207. The percentage of babies who reached 8 months old in the preceding 12 months, who have received 2 doses of a meningitis B vaccine before the age of 8 months.

NM208. The percentage of babies who reached 18 months old in the preceding 12 months, who have received 2 primary doses and 1 booster dose of a meningitis B vaccine before the age of 18 months.

# Resource impact

Each of the interventions covered by the new indicators NM206, NM207 and NM208 are well embedded in [current clinical practice](https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule). The most recent [childhood vaccination coverage statistics](https://digital.nhs.uk/data-and-information/publications/statistical/nhs-immunisation-statistics) (NHS Digital, 2021) show that 90.2% of children in England were reported to have received 2 doses of the rotavirus vaccine (measured at 12 months), 92.1% of children in England received 2 doses of the meningitis B vaccine (measured at 12 months) and 89% of children in England received a booster dose of the meningitis B vaccine (measured at age 24 months).

The latest data available ([Office for National Statistics, 2019](https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/livebirths/datasets/birthsummarytables)) indicate that there were around 611,000 live births in England in 2019. On average, around 90.4% of children are vaccinated for the range of vaccinations in the proposed indicators.

It is estimated that for every 1% increase in the current rate of vaccinations there may be around an extra 1 child requiring vaccination per GP practice per year (see table 1). Any potential increase in current vaccination rates will depend on local circumstances and where the uptake of vaccinations is currently low, more appointments may be needed to discuss the benefits of the vaccinations.

**Table 1 Estimated impact on activity for a theoretical 1%, 2% and 3% increase in the current vaccination rate.**



This is based on 10,000 registered patients in a GP practice.

Any increase in the number of vaccinations carried out due to the 3 new indicators are likely to take place in [existing vaccination appointments/clinics](https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule). The impact on general practice is therefore anticipated to be minimal and the resource impact associated with any increase will not be significant.