**Patient Immunisation Policy**

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**Table of contents**

[1 Introduction 2](#_Toc19634866)

[1.1 Policy statement 2](#_Toc19634867)

[1.2 Status 2](#_Toc19634868)

[1.3 Training and support 2](#_Toc19634869)

[2 Scope 2](#_Toc19634870)

[2.1 Who it applies to 2](#_Toc19634871)

[2.2 Why and how it applies to them 2](#_Toc19634872)

[3 Definition of terms 3](#_Toc19634873)

[3.1 Immunisation 3](#_Toc19634874)

[3.2 Vaccination 3](#_Toc19634875)

[3.3 Gillick competency 3](#_Toc19634876)

[4 Policy 3](#_Toc19634877)

[4.1 Aim of vaccinations 3](#_Toc19634878)

[4.2 Vaccination failure 3](#_Toc19634879)

[4.3 Recall process 4](#_Toc19634880)

[4.4 Consent 4](#_Toc19634882)

[4.5 Administering vaccines 4](#_Toc19634883)

[4.6 Patient Group Directions 5](#_Toc19634884)

[4.7 Vaccination schedule 5](#_Toc19634885)

[4.8 Free travel vaccinations 7](#_Toc19634886)

[4.9 Private travel vaccinations 7](#_Toc19634887)

[4.10 Determining travel vaccination requirements 7](#_Toc19634888)

[4.11 Vaccination and pregnancy 7](#_Toc19634889)

[4.12 Reporting adverse reactions 8](#_Toc19634890)

[4.13 Summary 8](#_Toc19634891)

[Annex A – Recall letter for vaccinations 9](#_Toc19634892)

[Annex B – Recall letter for children 10](#_Toc19634893)

# Introduction

## Policy statement

The purpose of this document is to outline the vaccinations that are to be offered to registered patients at Sheerwater Health Centre and the timescale for such vaccinations. Vaccinations are to be given free of charge to patients unless stated otherwise.

## Status

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

## Training and support

The organisation will provide guidance and support to help those to whom it applies to understand their rights and responsibilities under this policy. Additional support will be provided to managers and supervisors to enable them to deal more effectively with matters arising from this policy.

# Scope

## Who it applies to

This document applies to all employees of the organisation and other individuals performing functions in relation to the organisation, such as agency workers, locums and contractors. Why and how it applies to them

This document provides detailed guidance on vaccination schedules for all patient groups. It is to be read in conjunction with the referenced material and local publications.

The organisation aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the Equality Act 2010. Consideration has been given to the impact this policy might have in regard to the individual protected characteristics of those to whom it applies.

# Definition of terms

## Immunisation

Immunisation is the process of inducing immunity to an infectious organism through vaccination.

## Vaccination

The administration of an antigenic material (vaccine) to stimulate an individual’s immune system to develop an immunity to a pathogen

## 3.3 Gillick competency

Terminology used in medical law to decide whether a child (under 16 years of age) is able to consent to his or her own medical treatment without the need for parental permission or knowledge.

# Policy

## Aim of vaccinations

The principal aim of vaccination is to protect the recipient from infection whilst reducing the risk of infection to others.

## Vaccination failure

It is imperative that patients are informed that no vaccine offers 100% protection[[1]](#footnote-1) and, on occasion, vaccinations may fail and individuals may become infected. There are two main types of failure:

* **Primary failure** – occurs when the recipient fails to make an immunological response to the vaccine
* **Secondary failure** – the recipient responds initially but protection diminishes over a period of time

## Recall process

## Patients at Sheerwater Health Centre are recalled for vaccinations using the letter templates at Annex A (for adults) and Annex B (for children).

## Consent

Prior to administering any vaccination, consent must be obtained. This is to be given voluntarily and freely and remains valid unless the individual giving consent withdraws it.

Staff must ensure that they give the patient all the available information about the process including the benefits and risks of the vaccination(s) that is about to be administered. This is to include:

* Ensuring that the patient fully understands which immunisation(s) is to be administered
* The disease(s) which it will offer protection against
* The risks of not having the immunisation
* Any potential side effects and how these should be managed
* Any follow-up action that is required

Consent is to be recorded in the individual’s healthcare record. Consent forms may be used but are not a legal requirement. It should be noted that a signature on a consent form does not prove that the consent is valid but rather acts as a record that the decision was reached and the person administering the vaccine had discussed consent with the patient.[[2]](#footnote-2)

For immunisation of younger children who lack the competency to give or withhold consent, it is acceptable for consent to be given by a person with parental responsibility providing that individual is capable of giving consent.

If an individual who is aged 16 or 17, or a younger child who is deemed ‘Gillick competent’ (that is, a child who fully understands the process/procedure), consents to treatment, a parent is unable to override that consent.

Clinicians must ensure that if consent is either refused or withdrawn by a patient, or a person giving consent on behalf another person, this decision is documented in the individual’s healthcare record.

## Administering vaccines

Both GPs and nurses are professionally accountable for their actions as defined by their professional bodies. Any member of the team who administers a vaccination or provides advice on immunisation must have received the requisite training.

All clinical staff administering vaccinations must be trained in the management of anaphylaxis and access to the required emergency equipment must be immediately available.

It is essential that staff giving the vaccinations ensure that:

* There are no contraindications to the vaccine
* The patient (or carer) has been fully informed, as detailed in para 4.3
* The patient (or carer) is aware of potential adverse reactions and subsequent treatments

Further detailed guidance regarding the administration of vaccines including sites for injections, cleaning the skin, injection techniques, etc. are detailed in the Green Book, Chapter 4, Immunisation procedures.[[3]](#footnote-3)

## Patient Group Directions

Patient Group Directions (PGDs) are written instructions that provide a legal framework for the supply and/or administration of medicines by a range of qualified healthcare professionals.[[4]](#footnote-4) At Sheerwater Health Centre, all relevant staff have received the necessary training to ensure that they are competent and trained in the use of PGDs.

PGDs for Sheerwater Health Centre have been signed by those staff who will use them in the course of their duties.

Refer to the [Patient Group Directions Policy](https://practiceindex.co.uk/gp/forum/resources/patient-group-directions.1460/)

## Vaccination schedule

The table overleaf details those vaccines that are routinely offered to registered patients, free of charge, including the ages at which they are to be administered. Further detailed information can be found in the Green Book.

The 2019/20 GP Contract provides details for GMS practices regarding the services that must be provided. A copy of this contract can be found [here](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/quality-and-outcomes-framework-qof/quality-and-outcome-framework-qof-business-rules/enhanced-services-es-vaccination-and-immunisation-vi-and-core-contract-components-2019--2020).

|  |  |  |
| --- | --- | --- |
| **Age of administration** | **Vaccine** | **How it is administered** |
| 8 weeks old | * [DTaP/IPV(polio)/Hib/HepB](https://patient.info/health/immunisation/dtap-polio-and-hib-immunisation) (diphtheria, tetanus, pertussis (whooping cough), polio, *Haemophilus influenzae* type b and hepatitis B) - 6-in-one injection (Infanrix hexa®)
* [Rotavirus](https://patient.info/health/acute-diarrhoea-in-children/rotavirus) (Rotarix®) oral route (drops)
* [Meningitis B](https://patient.info/health/meningitis-leaflet/meningococcal-meningitis-vaccine) Bexsero®)
* PCV(pneumococcal conjugate vaccine) in a separate injection (Prevenar 13®). Note for children born from 1st January 2020, this vaccine is offered at 12 weeks and 1 year rather than at 8 weeks, 16 weeks and 1 year
 | One injectionOne oral applicationOne injectionOne injection |
| 12 weeks old | * DTaP/IPV(polio)/Hib/HepB 6-in-one injection, 2nd dose (Infanrix hexa®)
* [PCV](https://patient.info/health/immunisation/pneumococcal-immunisation) (pneumococcal conjugate vaccine) in a separate injection (Prevenar 13®) for babies born after 1st January 2020. Note for children born before 1st January 2020, this vaccine is offered at 8 weeks, 16 weeks and 1 year rather than at 12 weeks and 1 year
* Rotavirus (Rotarix®) - oral route (drops)
 | One injectionOne injectionOne oral application |
| 16 weeks old | * DTaP/IPV(polio)/Hib/HepB 6-in-one injection, 3rd dose (Infanrix hexa®)
* Meningitis B 2nd dose (Bexsero®)
* PCV (pneumococcal conjugate vaccine) in a separate injection (Prevenar 13®). Note for children born from 1st January 2020, this vaccine is offered at 12 weeks and 1 year rather than at 8 weeks, 16 weeks and 1 year
 | One injectionOne injectionOne injection |
| 1 year old (within one month of the first birthday) | * Hib/MenC (combined as one injection) 4th dose of Hib and 1st dose of MenC (Menitorix®)
* [MMR](https://patient.info/health/immunisation/mmr-immunisation) (measles, mumps and rubella) combined as one injection (Priorix® or M-M-RVAXPRO®)
* PCV 2nd dose (Prevenar 13®) in a separate injection
* Meningitis B 3rd dose (Bexsero®)
 | One injectionOne injectionOne injectionOne injection |
| 2 - 8 years old (including children in reception and years 1 - 4) | * [Nasal flu spray](https://patient.info/medicine/influenza-vaccine) annually (Fluenz Tetra®) for all children. For children aged 2, 3 and 4, this is usually given in the GP surgery

Children in primary school should have this at school | Nasal spray, single application in each nostril annually (injection of inactivated influenza vaccine if nasal spray contraindicated) |
| 3 years, 4months old | * Preschool booster of DTaP/IPV(polio). 4-in-one injection (Repevax® or Boostrix IPV-IPV®)
* MMR 2nd dose (Priorix® or M-M-RVAXPRO®) in a separate injection
 | One injectionOne injection |
| Boys and girls aged 12 - 13 years old | * [HPV](https://patient.info/health/immunisation/human-papillomavirus-immunisation-hpv) (human papillomavirus types 16 and 18). T**wo**injections (Gardasil®). The second injection is given 6-24 months after the first one
 | Course of two injections |
| 14 years old (school year 9) | * Tetanus, diphtheria and polio (Td/IPV)
* Meningococcal ACWY conjugate (MenACWY)
 | One injectionOne injection |
| Adults | * [Influenza (annual](https://patient.info/health/influenza-and-flu-like-illness/immunisation-for-flu)) and PPV (pneumococcal polysaccharide vaccine) for those aged over 65 years and also those in high-risk groups
* Td/IPV(polio) for those not fully immunised as a child or travelling to high-risk areas
* DTaP/IPV for pregnant women from 20 weeks of gestation to protect the new-born baby against whooping cough or people travelling to high-risk areas
* [Shingles](https://patient.info/health/shingles-herpes-zoster-leaflet) (Zostavax®) vaccine for adults aged 70 or 78 years. (Plus catch-up for adults born after 2nd September 1942 who have not previously been immunised if they are under 80 years)
 | One injection annually |
| Pregnant women | * Flu vaccine (annual and during flu season)
* [Whooping cough](https://www.nhs.uk/conditions/pregnancy-and-baby/whooping-cough-vaccination-pregnant/) (Pertussis) vaccine from 16 weeks of pregnancy
 |  |
| Further information can be sought from:<https://www.nhs.uk/conditions/vaccinations/nhs-vaccinations-and-when-to-have-them/> |

## Free travel vaccinations

Travel vaccinations are available to patients with the following vaccinations being provided free of charge:

* Diphtheria, tetanus and polio (combined booster)
* Typhoid
* Hepatitis A (including when combined with typhoid or hepatitis B)
* Cholera

The reason these vaccines are provided free of charge is that they protect against those diseases that are thought to represent a significant risk to public health if they were to be brought into the UK.

## Private travel vaccinations

The following vaccinations are available for a fee:

* Hepatitis B (when not combined with hepatitis A)
* Japanese encephalitis and tick-borne encephalitis
* Meningitis vaccines
* Rabies
* Tuberculosis (TB)
* Yellow fever

The cost per vaccine at Sheerwater Health Centre is £[xx].

## Determining travel vaccination requirements

To ensure that advice is accurate, staff at Sheerwater Health Centre are to use the information provided by the National Travel Health Network and Centre ([NaTHNaC](https://nathnac.net/)) when determining vaccination requirements for those patients travelling abroad.

##  Vaccination and pregnancy

Pregnant women are advised to have the following vaccinations:

* Inactivated influenza vaccine – available from September until January/February
* Pertussis vaccine – from 16 weeks of pregnancy (this is administered using the Diphtheria, Tetanus, Pertussis and Polio (DTaP/IPV or dTaP/IPV) vaccine)

##  Reporting adverse reactions

All adverse reactions are to be reported using the Yellow Card scheme which is managed by the MHRA and can be accessed using this [link](http://yellowcard.mhra.gov.uk/). The manager is to be informed of all adverse reactions.

##  Summary

All staff at Sheerwater Health Centre have a responsibility to ensure that patients are fully advised regarding those immunisation services that can be provided free of charge and those that command a fee. Clinical staff have a duty of care to ensure that the patient is fully advised regarding their vaccinations and that consent is obtained. Where any doubt exists, additional advice and guidance must be sought.

## Annex A – Recall letter for vaccinations

Dear [insert patient name],

I am writing to invite you to come for [insert immunisation] as it is now due. It is important for you to continue with this vaccination to guard against disease in the future.

Please call [insert number] to arrange a convenient date and time for an appointment with the practice nurse. If you have recently made an appointment, or have already had your test, then please ignore this letter.

If you would like further information, please contact the organisation and ask to speak to a member of the nursing team. Alternatively, visit our website [www.sheerwaterhealthcentre.nhs.uk](http://www.sheerwaterhealthcentre.nhs.uk) where information about immunisations is available.

Yours sincerely,

[Signature]

[Name]

[Role]

## Annex B – Recall letter for children

To the parent or guardian of [insert child’s name]

I am writing to invite you to bring your child for the following [insert immunisations] as they are now due. It is important for your child to continue with this immunisation programme to guard against disease in the future.

Please call [insert number] to arrange a convenient date and time for an appointment with the practice nurse. If you have recently made an appointment, then please ignore this letter.

If you would like further information, please contact the organisation and ask to speak to a member of the nursing team. Alternatively, visit our website [www.sheerwaterhealthcentre.nhs.uk](http://www.sheerwaterhealthcentre.nhs.uk) where information about immunisations is available.

Yours sincerely,

[Signature]

[Name]

[Role]

1. [Immunity and how vaccines work: the green book, chapter 1](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/144249/Green-Book-Chapter-1.pdf) [↑](#footnote-ref-1)
2. [Consent: the green book, chapter 2](https://www.gov.uk/government/publications/consent-the-green-book-chapter-2) [↑](#footnote-ref-2)
3. [Immunisation procedures: the green book, chapter 4](https://www.gov.uk/government/publications/immunisation-procedures-the-green-book-chapter-4) [↑](#footnote-ref-3)
4. [Immunisation by nurses and other health professionals: the green book, chapter 5](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/147823/Green-Book-Chapter-5.pdf) [↑](#footnote-ref-4)