

NHSGG and CLYDE NEWSLETTER

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Vaccine storage in primary care

The safe storage of vaccines is an essential element of good immunisation practice. Following an incident in NHS Grampian, the Scottish Executive wrote to all NHS Boards instructing them to conduct an audit of all general medical practices, with a focus on the record-keeping of temperatures for vaccine storage over a three-month period.

The pharmaceutical public health team conducted this review at the end of last year and has returns from all 277 practices in its area; it takes this opportunity to thank all who participated in this exercise at fairly short notice.

The team was broadly satisfied with the returns however there were concerns about the content or scope of the returns from a minority of practices. Individualized feedback has been prepared for all practices highlighting areas requiring improvement, reminding them of good standards of practice and flagging up plans for future support from the Board's Public Health Protection Unit.

The team also intends to conduct site visits to every medical practice in the next few months to carry out a criteria-based inspection of vaccine storage, looking at stock control, equipment, monitoring facilities, record-keeping and training requirements. This will identify any future needs to provide reassurance that vaccines are stored safely and effectively.

Information and advice on vaccine storage is available from your local vaccine holding centre or pharmaceutical public health 0141 201 4824.

Children who require BCG

Health visitors should note that children whose parent/relative *works* in a country with a high TB prevalence are not considered to be at increased risk and do not require BCG as long as they remain in the UK. Only children whose parents or grandparents *originate* from a country of high TB prevalence are 'at risk' because of the likelihood of their visiting the risk country for extended stays and being exposed. Any child (or adult <35 yrs) planning to stay in a high-risk country for more than 3 months requires BCG.

Please note that no interval is required between the BCG (live vaccine) and the primary immunisations (inactivated vaccines).

TRAVAX and travel clinics

TRAVAX

The holiday season is approaching, and the requests for travel health and immunisation advice are starting to increase. It is timely to remind all GP practices in Scotland that they have free access to TRAVAX.

TRAVAX is a web site, created and maintained by the Travel Health Division, at Health Protection Scotland (HPS), that gives authoritative, evidence-based advice on all aspects of travel health. It is easy to use, with country-based information on health risks, immunisations and anti-malarial prophylaxis as well as sections on disease prevention and travellers with special needs. It enables the GP or practice nurse to make a risk assessment for the individual traveller and give tailored advice.

GPs can access TRAVAX by logging on to www.travax.nhs.uk - a user name and password are required. GPs who no longer have a user name or password or have any difficulty logging on should contact Mary O'Neill at HPS on 0141 300 1164.

HPS also provides a public website www.fitfortravel.scot.nhs.uk where members of the public can access user-friendly information that mirrors TRAVAX advice.

Travel Clinics

The Brownlee Centre, Gartnavel General Hospital, runs two pre-travel advice clinics each week (Tuesday and Friday mornings). The service provides specialist travel health advice to travellers with special needs (e.g. chronic illness, HIV, pregnancy) or those with complex travel itineraries. It is unable to provide a service to travellers requiring yellow fever vaccine *alone* or to those requiring *only* hepatitis A and/or typhoid vaccines (as the latter are provided on the NHS within primary care).

Travellers must be referred by their GP or practice nurse - they cannot self-refer - and should make an appointment as early as possible before their planned departure date to allow time for multi-dose courses of vaccines. An appointment can be made by phoning the Brownlee Clinic on 0141 211 1074

Flu-vaccine supplies 07/08

Planning for the next year's flu programme is already underway. The list of 'at-risk' groups remains as before and a letter from the SEHD will follow by the end of March informing GPs of any additional 'at-risk' groups.

Hepatitis C MCN update

MCN Launch Event

The NHSGGC Hepatitis C Managed Care Network (MCN) will be formally launched on the afternoon of Wed 23rd May, at the Beardmore Conference Centre in Glasgow.

This event will:

- provide an update on local epidemiology and service provision
- report on recent developments in testing services; including local pilots providing diagnostic testing in addiction services, community rehabs and shared-care settings
- share the primary care perspective in relation to the management of patients with multiple needs and the role of primary care in the patient pathway
- update on developments in the management of HCV, and local clinical activity

Places are free and open to anyone with a professional interest in HCV. For more information, and to reserve your place, contact Justin Schofield, HCV MCN Manager, or visit the MCN website on www.nhsggc.org.uk/hepcmcn.

National HCV Action Plan - Local Developments

In September 2006, the Scottish Executive published phase one of the 'Hepatitis C Action Plan for Scotland: Sep 2006 to Aug 2008', which contained a range of recommendations relating to the prevention, testing, treatment and monitoring of HCV. The Board and MCN have been working with colleagues across NHSGGC, including primary and acute care providers, to implement action points relating to HCV treatment and care services.

With the increased national profile of Hepatitis C, more health care workers and patients are likely to become aware of the benefits of HCV testing. It is anticipated that referrals to specialist clinical HCV services will increase and the Board will be investing some of the phase one funding to develop the capacity of specialist HCV care provision across NHSGGC.

NHSGGC will increase the number of Specialist Liver Nurses at existing clinical services, to enable patient care provision, and provide a clinical research role which will highlight models of best practice. There are plans to develop the provision of associated disciplines such as dietetics and psychology as these services provide valuable input to patients with hepatitis C, especially those on treatment. In the Clyde area a new specialist service at the Royal Alexandra Hospital will be developed and service capacity at the Inverclyde Royal hospital increased. A new Specialist Liver Nurse will work across both sites, and in community settings, to support the gastroenterology consultants in providing a package of clinical care.

The aim of these developments is to increase the number of patients receiving care at specialist centres, reduce obstacles and delays in the patient journey, and lead to more people receiving combination therapy for their HCV infection. See the MCN website, www.nhsggc.org.uk/hepcmcn, for more details.

Pneumococcal programme 07/08

The NHS circular, PCA (P) (2007) 3, about the forthcoming pneumococcal (PPV) immunisation programme was issued from the Scottish Executive Health Department on 5th February 2007. The document sets out the arrangements that will apply for reimbursing community pharmacy contractors and dispensing doctors for the supply of the vaccine:

- GPs should ensure they write "PPV" (pneumococcal polysaccharide vaccine) on all prescriptions or stock order forms
- the standard method of procurement of the vaccine by GPs is through the stock order system

In placing their orders for PPV, GPs and community pharmacist contractors will have to consider the effect of publicity campaigns aimed at encouraging 'at risk' groups to present for immunisation. GPs were asked to advise the community pharmacy contractor who will be procuring PPV vaccine on their behalf by the 23rd February 2007 at the latest.

The PHPU at NHS Greater Glasgow and Clyde will support and facilitate the programme.

'At risk' - flu vaccine uptake

Flu-vaccine uptake for 'at risk' groups (by CHCP)

October 2006 - January 2007

CHCP	At-risk population	*Highest Uptake %
East Dunbartonshire	13198	35.6
East Renfrewshire	7937	41.
Glasgow East	17109	40.4
Glasgow North	10098	29.4
Glasgow South East	11546	38.2
Glasgow South West	13062	39.8
Glasgow West	17913	36.7
South Lanarkshire	6269	42.6
West Dunbartonshire	11595	37
Inverclyde	9767	34.7
Renfrewshire	19080	38
GGCNHSB Total	13754	37.5

* Highest uptake at January 2007

The figures above indicate the flu-vaccine uptake rates for CHCPs in the NHSGG&C area and are based upon data submitted *voluntarily* by practices. Some CHCP uptake-rates might, therefore, be under-rated.

In NHSGG&C the uptake rate for the over 65s in the same period in 2006/07 was 70.67 %, so just above the 70% target.

If you would like to comment on any aspect of this newsletter please contact Marie Laurie on 201 4933 or at marie.laurie@gghb.scot.nhs.uk