

Immunisation Basics and Education/Training

Q Where can I find up-to-date information on vaccines?

- A The key documents immunisers should have access to are Immunisation against Infectious Diseases, *[Green Book](#) and [NHSGGC PGDs](#). Other useful online resources are listed below :

[NHSGGC Immunisation Website](#)

[NHSGGC Immunisation and Best Practice Guidelines 2018](#)

[PHPU newsletter](#)

[The Childhood Routine Immunisation Schedule from October 2017](#)

[The Complete Routine Immunisation Schedule 2018](#)- includes additional vaccines for individuals with underlying medical conditions:

[Childhood Seasonal Flu Vaccination Programme Resources for Registered Practitioners](#)

** The Green Book is now online only. It was last printed in 2006, and paper copies are now very out of date. Paper copies of the Green Book should be recycled. Immunisers should also be able to get advice from their line-manager, team leader, senior nurse or midwife or GP*

Q What advisory service is provided by the Public Health Protection Unit (PHPU)?

- A PHPU can provide immunisation advice if the answer is not available from the sources above. The service standards for responding to immunisation enquiries are within 24 hours for emails and within 48 hours for telephone enquiries. However, most responses are provided more quickly than this, as are enquiries relating to vaccine incident/error, post-exposure prophylaxis or other immediate clinical need.

E-mail: phpu@ggc.scot.nhs.uk Tel: 0141 201 4917 option 3

Q What training resources are available for staff?

- A NHS Education for Scotland (NES) is an education and training body and a special health board within NHS Scotland, with responsibility of developing and delivering education and training for the healthcare workforce in Scotland. The [NES website](#) has educational films and accompanying slides which aim to update knowledge on various vaccination programmes such as Flu, rotavirus, Men B, shingles as well as clinical and staff governance issues.

Slides from the annual PHPU staff immunisation seminar presentation are on the [PHPU website](#)

The immunisation e-learning programme, Promoting Effective Immunisation Practice can be accessed via the [link](#). Please contact Dr Gillian Penrice, Consultant in Public Health Medicine by email if you wish to take course. Gillian.penrice@ggc.scot.nhs.uk

Q How can I test my immunisation knowledge?

- A Public Health England has devised [multiple choice questions](#) to help test knowledge and understanding of each of the chapters of the Green Book. To make best use of the MCQs as a learning and revision tool it is recommend that you read a chapter in detail before attempting the relevant questions. For answers to PHE MCQs click [here](#)

Q How do I obtain a child's immunisation history?

- A This information is not held by the PHPU. For details of immunisation histories of children and young people contact Child Health Department 0141 277 7616

Q There is a difference between the manufacturer's guidance/SPC and the Green Book/PGD, which should I follow?

A Always follow the Green Book in preference to the SPC/manufacturer's own guidance, if there is a discrepancy between them. The recommendations in the Green book are based on current expert advice received from the Joint Committee on Vaccination and Immunisation (JCVI). The PGD will always identify if use is outside the SPC.

Ref [Green Book Chapter 4](#)

Q What about consent when vaccinating children and young people?

A For infants and young children not able/competent to give or withhold consent, consent can be given by a person with parental responsibility, provided that person is capable of consenting to the immunisation in question and is able to communicate their decision. Where this person brings the child in response to an invitation for immunisation and, following an appropriate consultation, presents the child for that immunisation, these actions may be considered evidence of consent.

Young people aged 16 and 17 are presumed, in law, to be able to consent to their own medical treatment. Younger children who understand fully what is involved in the proposed procedure (referred to as 'Gillick competent') can also give consent, although ideally their parents will be involved.

If a person aged 16 or 17 or a Gillick-competent child consents to treatment, a parent cannot override that consent.

If the health professional giving the immunisation felt a child was not Gillick competent then the consent of someone with parental responsibility would be sought.

If a person aged 16 or 17 or a Gillick-competent child refuses treatment that refusal should be accepted. It is unlikely that a person with parental responsibility could overrule such a refusal. It is possible that the court might overrule a young person's refusal if an application to court is made under section 8 of the Children Act 1989 or the inherent jurisdiction of the High Court. There is no requirement for consent to be in writing.

Ref [Green Book Chapter 2](#)

Timing of immunisations

Q Can I give vaccines earlier than the age stated on the routine schedule?

A Yes. Vaccines do not need to be given on the precise date calculated from the schedule. Generally vaccines can be given a few days prior to the scheduled date. The routine schedule for the primary immunisation is 8, 12 and 16 weeks. There are some specific examples which differ from this general rule and the Green Book should always be checked. Details for primary immunisations and MMR are covered in the relevant sections below.

The first dose of primary immunisations can be given from six weeks of age if required in certain circumstances e.g. travel to an endemic country. However, Men B vaccine is only licensed from 2 months of age and therefore cannot be given using the PGD, but can be given if authorised by the GP (i.e written in the child's case record).

A four week interval is recommended between each of the three doses of DTaP-containing vaccine in the primary schedule although if one of these doses is given up to a week early, either inadvertently or deliberately e.g. for travel reasons, then this can be counted as a valid dose and does not need to be repeated. However, no more than one dose should be given early in the three dose schedule.

MMR vaccine can be given from six months of age, for example during a local outbreak or when travelling to endemic countries. Any dose of MMR given below the age of one year should be discounted, and two further doses will be required at the appropriate ages.

Please note that children are scheduled by Child Health to receive their vaccines when they are ≥ 56 days (8 weeks) old with their day of birth being day 1.

Ref [Green Book Chapter 11](#)