

Answers to questions asked by staff at NHSGGC Immunisation Seminars 2018

Q1 How are families being informed about the new community clinics for the routine child immunisation programme?

A1 The immunisation call/invite letter generated by the SIRS (Scottish Immunisation Recall System) invites parents/carers to attend the community clinics for immunisation and it advises them to contact the Child Health Support team with any queries they may have. Migration to the new community clinics has either just been completed or is still under way.

Q2 What is the pneumococcal vaccine availability?

A2 There is currently a shortage of PPV23. Please note that this vaccine can be offered at any time of the year to those aged 65yrs and over if not vaccinated already and that flu vaccination should not be delayed. For most patients, this is a one-off vaccination. Further advice is available on the [PHPU website](#) and in the recent [Immunisation Special Edition Newsletter](#).

Q3 How will the issue of immunisation data sharing between practices and NHS GGC be taken forward?

A3 NHSGGC is piloting an interim electronic solution with some GP practices. Child Health Support and eHealth colleagues will continue working on this with further roll-out to all practices in the near future. Further information will be available in due course. For the longer term, as part of the Vaccination Transformation Programme, a national IT and Data subgroup has been established to explore options for immunisation data recording and appropriate sharing between NHSGGC, GP practices and other agencies e.g. ISD Scotland and Health Protection Scotland. These solutions will be required to be implemented by April 2021.

Q4 Do patients need to be 75 years of age at time of flu vaccination?

A4 As per the CMO letter, to be eligible for the adjuvanted trivalent inactivated vaccine (aTIV), patients aged 75 yrs and over are defined as *those aged 75 years and over on 31st March 2019* and therefore they may well be aged under 75 yrs at the time of vaccination.

Q5 How will the ordering and deliveries through Movianto operate this year given phased availability of some vaccines?

A5 Details are in the PHPU [Immunisation Special Edition Newsletter](#)

Q6 When will the over 65's receive the Board's letter inviting them for flu vaccination ?

A6 Letters will be delivered week commencing 24th September 2018.

Q7 What is the process for school children who miss their flu vaccination at school?

A7 Currently, any children who miss their flu vaccination at primary school, and indeed, any young people who miss their vaccinations at secondary school and leave school, can make arrangements to have these vaccines administered at their GP practice. This will change in the future under the Vaccination Transformation Programme, however, until the appropriate communications are made via HSCPs, practices are asked to offer this service to children and young people

Q8 How often are children recalled for corporate (community) clinics?

A8 If the child does not attend for immunisation twice without reason, they are not called again. The child's health record will show as 'failed to attend twice'. These are ringed number '3' on the immunisation schedule. The Health Visitor is then tasked through EMIS Web to investigate these children's non attendance

If a child does not attend and has a reason, call will continue regardless of how many times they do not attend. These children are ringed '2' on the immunisation schedule

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Q9 How will housebound people receive their vaccine?

A9 Renfrewshire and Glasgow City (Glasgow South, North West and North East) HSCPs are currently piloting an HSCP community nurse approach for vaccinating housebound patients as part of the Vaccination Transformation Programme. Until such times as HSCPs communicate otherwise, GP practices are asked to continue offering housebound people flu and, for those who have not received it and are 65 and over, pneumococcal vaccinations.

Q10 Nursing homes in Inverclyde do their own vaccinations, will nursing staff be given training?

A10 Additional/specific immunisation training is not essential for registered nursing staff. As long as nurses are up to date with their anaphylaxis training and have read the relevant chapter of the [Green Book](#) (Immunisation against infectious disease), the ability to perform an intramuscular injection is all that is required. Staff may opt to pursue the immunisation e-learning course.

Q11 How are District nurses going to be informed of the changes?

A11 District Nurses will be informed of changes via HSCP communication channels.

Q12 What are the contraindications for the Shingle vaccine ?

A12 Shingles is a very painful disease that can result in Post Herpetic Neuralgia (PHN) which can last for a significant period of time after the rash has disappeared. It is recommended that all patients eligible for the vaccine are offered it. Please see the [CMO Letter](#) for details of eligibility. Contraindications are detailed in the [Chapter 28a](#) of the Green Book. A pre-immunisation screening tool is available [here](#). Where further clarification is required, please contact the [Public Health Protection Unit](#).

Q13 What if someone who is over 75 years of age is given the wrong flu vaccine?

A13 To achieve optimal protection, those aged 75 yrs and over should be given the adjuvanted trivalent inactivated vaccine (aTIV). The aTIV contains an adjuvant, which boosts the immune response of the patient to the vaccine, and ultimately, the level of immunity achieved; this is particularly important in elderly patients, whose immune response is lower due to age. If the TIV or QIV is administered instead of the aTIV to someone aged 75 yrs and over, they do not have to be recalled for the aTIV as they will still have gained protection against influenza from the other vaccine but not as much protection as the aTIV would have given.

Q14 Is everybody aged 70yrs eligible for the shingles vaccine, and is the cut off 79yrs and 364days?

A14 The [CMO Letter](#) (17/18) details the age groups and birth dates eligible for the vaccine. A pre-immunisation screening tool is also available [here](#).

Q15 Will pregnant women be offered the flu vaccine in general practice?

A15 GP practices should continue to offer flu vaccine to pregnant women from the beginning of October until the end of March, and until such times as HSCPs communicate alternative arrangements. Pertussis vaccine should also be offered to pregnant women throughout the year from 16 weeks gestation onwards.

Q16 Why are we implementing the VTP as a lot of practice staff enjoy immunising, in fact, it is a significant part of their role?

A16 The Vaccination Transformation Programme is part of the Primary Care Improvement Programme. It has resulted from national GP contract negotiations between the SGPC and the Scottish Government and affects all Health Board areas in Scotland. As immunisations services migrate to new delivery models, Health Boards will be looking for immunisers, especially between October and November, to help with the vaccination of NHSGGC's immunisation cohort groups. All staff with vaccination experience are welcome to register with the NHSGGC nurse bank and so make themselves available for the new clinics.

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Q17 When does the HPV programme for boys start?

A17 This has not been officially announced by the Scottish Government as yet. Early indications are that the programme will commence school year 2019/2020, with S1 boys and girls being offered the vaccine at secondary school from January 2020 in NHSGGC Board area schools.

Q18 What about porcine gelatine in flu vaccines?

A18 The children's nasal flu vaccine contains porcine gelatine. More information about gelatine in vaccines and observant religious groups is available on the [PHPU Flu website](#). PHE has also published a [Q&A](#) on the childhood flu programme, nasal flu vaccine and porcine gelatine