

**Central Midlands (Leicestershire, Lincolnshire and Northamptonshire)**

**Screening and Immunisation Team Update**

**W/C 28th January 2019**

**Please cascade to ALL staff, including GPs, Practice Nurses, Admin and Reception Staff**

**Immunisation Information**

**Hep A vaccine supplies – for information**

As previously communicated to you, we were advised about the following on 24 December:

*HepA vaccine central stock available to order free of charge from Immform while stocks last. Some remaining PHE central stock of HepA vaccine, procured for GUM clinic use as part of the emergency response to the MSM-related outbreak last year, is now available to order free of charge from ImmForm by GPs and NHS hospital pharmacies, while stock lasts. This temporary availability via ImmForm is to prevent wastage as stock is approaching expiry in 2019. A small amount of vaccine has been kept aside for incidents. Available stock includes: Vaqta (18+), Havrix adult (16+) and Havrix junior (under 15 years). This stock can be used for all Green Book indications, but preferably for MSM, household contacts of cases, people with chronic liver disease and people who inject drugs.*

We have had no further update with regard to stock levels but if you do manage to obtain any of this vaccine you of course cannot claim back the vaccine cost on an FP34 as you would usually do for vaccine that you have purchased.

**Co-administration of PPV and shingles vaccines – for information**

Remember that Green Book guidance overrules the product SPC where this information differs. If, additionally, a PGD is clear that off-label use is permitted then you can use it to vaccinate. ‘Off-label’ just means that a (still) licensed medicine is being used in a different manner to that for which its license was originally granted.

The Off-label use and Drug interaction sections of both the PPV and Shingles PGDs make it clear that (in line with the Green Book - ch 28a, p 6 - recommendation) co-administration is perfectly acceptable. As always when more than one vaccine is being given, this should be “at separate sites, preferably in different limbs. If given in the same limb, they should be given at least 2.5cm apart”.

**Flu Vaccines for 2019/20 – for information and action**

We have recently circulated definitive information about which vaccines will be used in the national programme next season – practices should now ensure their orders are placed and confirmed as soon as possible.

The letter is attached and the headlines below-

**Vaccines for those aged 6 months to 17 inclusive**: as has been the case for the last few years all vaccines for this age group (nasal Fluenz as well as QIV) will be available to be ordered free of charge to practices through Immform.

**Vaccines for those in risk groups aged 18-64:** two types of vaccine are appropriate; the quadrivalent inactivated vaccine (QIV) grown in eggs now called QIVe, this is the same vaccine as was used this year for this group; and you can also use the new quadrivalent cell grown vaccine (QIVc) called Flucelvax Tetra.

**Vaccines for those aged 65+:** two types of vaccine are appropriate; the adjuvanted trivalent vaccine (aTIV) that was used for this group this year; and you can also use the new quadrivalent cell grown vaccine (QIVc) called Flucelvax Tetra for this age group.

The three types of vaccine for adults mentioned above (aTIV, QIVe and QIVc) will all be reimbursed by NHS England.

**There is a further new vaccine, high-dose trivalent vaccine (TIV-HD). Whilst this is licensed for use for those aged 65+ the cost of the vaccine means that this vaccine will not be reimbursed and therefore you should not be using it. There is a helpful table in the attachment that makes this clear.**

We would ask that every practice consider both its 18-64 at risk population and its 65+ population and ensure that you have placed orders for an appropriate vaccine for at least the proportion of each cohort that you expect to immunise next year.

**Egg allergy and MMR – for information**

Egg allergy is NOT a contraindication to receiving MMR. Focussed studies have demonstrated MMR to be safe to give to all children with egg allergy - at their GP practice. Only those children who have had documented anaphylaxis *to the vaccine itself* (or to another component of the vaccine) should be deferred, pending an assessment by an allergist. See Green Book ch 21, p220 and the Criteria for exclusion and Special considerations / additional information sections of the MMR PGD.

**• Vaccine Update – for Information**

[**https://www.gov.uk/government/publications/vaccine-update-issue-289-december-2018**](https://www.gov.uk/government/publications/vaccine-update-issue-289-december-2018)

* **PGDs – for information and action**

**PCV13**

We have recently circulated a new PCV13 PGD to practices (also attached to this email in case you missed it). This becomes effective from 1st February - when the current version, plus the accompanying extension notice, will expire (and must be withdrawn but retained as per NHS medical records policy - see our PGD webpage for details of the latter). We will soon publish the new PGD on our webpage.

**PGDs shortly due for renewal**

The following PGDs have been reviewed and updated by PHE, and will be published and sent to practices in good time to replace those due to expire: MenACWY for risk groups, Men B routine, Men B for risk groups - all due from 1st March; Pertussis in pregnancy and Shingles - both due from 1st April.

**PGD use in the event of a cold chain breach**

The Off-label use section of the newer PGDs contains the following wording that allows for administration of vaccines that have been subject to a cold chain breach but remain effective - as long as you have first taken the advice of the manufacturer(s). If the latter tell you that the vaccine remains viable, and as long as you adhere to any additional conditions that they stipulate (e.g. shortened expiry dates) the PGD will cover you do use them:

*“Vaccine should be stored according to the conditions detailed in the Storage section below. However, in the event of an inadvertent or unavoidable deviation of these conditions refer to PHE Vaccine Incident Guidance. Where vaccine is assessed in accordance with these guidelines as appropriate for continued use this would constitute off-label administration under this PGD.”*

Eventually this wording will make its way into all PGDs, and we are hopeful that this will reduce wastage of otherwise viable vaccines by minimising the administrative burden (i.e. the need for PSDs) on practices when a cold chain breach occurs.

**PGD webpage**

We intend to review/ update the content and layout of our PGD webpage in the course of the next few weeks.

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**Immunisation Specifications and Contracts**

**Commercially available template/ search inaccuracies (e.g. MenACWY eligibility)**

It’s been brought to our attention that a commercially available template is flagging all those under 25 as eligible for MenACWY. This is not the case. The attached slide shows the current eligibility criteria. We suggest a degree of caution when using commercially produced templates and searches, as they are not always totally aligned with the service specifications. We also urge you to flag any discrepancies to the provider of such templates/ searches - we have no power to effect the necessary changes and you pay them to provide tools to make your life easier, so they need to be accurate. Please ask if you are uncertain about eligibility criteria for any vaccination - we know that it’s a minefield!



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**Screening and Immunisation Team – where to direct your queries**

General immunisation queries and any problems with immunisation payments and claims can be directed to england.llimms@nhs.net and PGDs can be found on our website <https://www.england.nhs.uk/mids-east/info-professionals/ll-immunisation/>.

**General enquiries to** –

Louise Fergusson on 0113 824 9515 / 07568 431900

Louise.fergusson@nhs.net

or

Vanessa Robinson on 0113 825 3495 / 07714 772645

Vanessa.robinson3@nhs.net

**Health Protection Team Contact Details**

The PHE Health Protection Team now operates an Acute Response Centre (ARC). To contact them dial 0344 225 4524 – option 1 and they will answer any immediate immunisation queries.