



Department
of Health



NHS public health functions agreement 2015-16

Service specification No.14

Shingles immunisation programme

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<p>Author: Directorate/ Division/ Branch acronym/ cost centre PHD/ IH&PHD/ PHPSU/ 10100</p>
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<p>Contact details: Public health policy and strategy unit phpsu@dh.gsi.gov.uk</p>

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Prepared by Public Health England

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Service specification No.14

This is a service specification within Annex C of the 'NHS public health functions agreement 2015-16 (the '2015-16 agreement') published in December 2014.

This service specification is to be applied by NHS England in accordance with the 2015-16 agreement. This service specification is not intended to replicate, duplicate or supersede any other legislative provisions that may apply.

Where a specification refers to any other published document or standard, it refers to the document or standard as it existed at the date when the 2015-16 agreement was made between the Secretary of State and NHS England Board. Any changes in other published documents or standards may have effect for the purposes of the 2015-16 agreement in accordance with the procedures described in Chapter 3 of the 2015-16 agreement

Service specifications should be downloaded in order to ensure that commissioners and providers refer to the latest document that is in effect.

The 2015-16 agreement including all service specifications within Annex C is available at www.gov.uk (search for 'commissioning public health').

This service specification is not intended to replicate, duplicate or supersede any other legislative provisions that may apply. It must always be read in conjunction with the core immunisation service specification <https://www.gov.uk/government/publications/public-health-commissioning-in-the-nhs-2015-to-2016> and the online version of the Green

Book: <https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book>

1. Purpose of the shingles (herpes zoster) immunisation programme

- 1.1. This document relates to the shingles (herpes zoster) vaccine which helps to reduce the number of shingles cases and associated sequelae. The Joint Committee on Vaccination and Immunisation (JCVI) advised that a universal shingles programme should be implemented for people aged 70 years and up to 79 years inclusive. The purpose of this service specification is to enable NHS England to commission shingles vaccine immunisation services to a standard that will minimise shingles cases and reduce the subsequent morbidity associated with shingles. This means achieving timely vaccination with high coverage rates in this group in appropriate settings across England as well as within upper tier local government areas. This programme requires evaluation and monitoring within the context of populations with protected characteristics as defined by the Equality Act 2010.
- 1.2. This specification provides a brief overview of the vaccine including the disease they protect against, the context, evidence base, and wider health outcomes and should be read alongside the core specification which underpins national and local commissioning practices and service delivery.
- 1.3. [*Immunisation against infectious disease*](#) (known as the Green Book), issued by Public Health England (PHE) provides guidance and has the latest information on vaccines and immunisation procedures for all the vaccine preventable diseases that may occur in the UK. This service specification must be read in conjunction with the core immunisation service specification, the online version of the Green Book, and all relevant guidance from PHE, NHS England and the Department of Health and additional evidence, guidance and literature issued by the Joint Committee on Vaccination and Immunisation (JCVI). <https://www.gov.uk/government/groups/joint-committee-on-vaccination-and-immunisation>
- 1.4. This service specification is not designed to replicate, duplicate or supersede any relevant legislative provisions that may apply, e.g. the Health and Social Care Act 2012. The specification will be reviewed annually and amended in line with any new recommendations or guidance, and in line with reviews of the Section 7A agreement.

2. Population needs

Background

- 2.1. The shingles vaccine reduces the number of cases of shingles and its associated sequelae including post herpetic neuralgia (PHN). PHN can last up to six months or in some cases years and in the most severe cases is only partially treatable even with strong painkillers. About a quarter of adults will get shingles at some point in their life and in some severe cases people may die from complications arising from shingles.

Shingles

- 2.2. Shingles is caused by the reactivation of the chicken pox virus in a person previously infected with chicken pox. It is not known what causes the virus to reactivate but is usually associated with conditions that can depress the immune system such as immunosuppressive therapy, HIV infection and older age. The incidence of shingles increases with age. In the UK this is estimated to be around 790 to 880 cases per 100,000 people per year for people aged 70-79.
- 2.3. The first sign of shingles is usually pain in the area of the affected nerve – most commonly in the chest. A rash of vesicles (fluid filled blisters) then appears, typically on one side of the body. The affected area is often intensely painful, with tickling, pricking or numbness of the skin, increasing in severity with advancing age.
- 2.4. JCVI reviewed medical, epidemiological and economic evidence as well as vaccine safety and efficacy data relevant to the shingles programme. It recommended that people aged 70 years and up to and including those aged 79 should be vaccinated provided that a licensed vaccine was available at a cost effective price. http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/ab/JCVI/DH_094744

Shingles – key details

- 2.5. The key details are that:
 - an estimated 30,000 cases of shingles occurs in older people aged 70-79 in England and Wales each year.
 - JCVI recommended that it would be most cost effective to vaccinate those aged 70 years with a catch up programme for those aged up to and including 79 years.
 - Adults should receive a single dose.
 - One dose of a shingles vaccine reduced the incidence of shingles by 38% in a group of 17,775 people aged 70 years and older. In the vaccines that developed shingles, the vaccine significantly reduced the burden of illness by 55%.

3. Scope

Aims

- 3.1. The aim of the shingles vaccination programme is to reduce the number of shingles cases in this age group and its associated sequelae.

Direct health outcomes

- 3.2. In the context of health outcomes the shingles vaccine programme aims to:
- reduce the number of cases of shingles and associated sequelae.
 - achieve timely vaccination and high coverage across all groups identified
 - minimise adverse physical/psychological/clinical aspects of immunisation (e.g. anxiety, adverse reactions).

Vaccine coverage

- 3.3. Local services must aim for 100% of the eligible group being offered immunisation in accordance with the Green Book and other official DH/PHE and NHS England guidance. This includes performance indicators and key deliverables that are set out in Annex B of the NHS Public Health Functions Agreement (Section 7A) for 2015-2016.

4. Service description / care pathway

Local service delivery

- 4.1. The delivery of immunisation services at the local level is based on evolving best practice. This section of the document specifies the high-level operational elements of the shingles vaccine programme, which can be delivered in a variety of health care settings, based on best practice that NHS England must use to inform local commissioning, contracts and service delivery. There is also scope to enable NHS England and providers to enhance and build on specifications to incorporate national or local service aspirations that may include local innovation in service delivery. It is essential, in order to promote a nationally aligned, high-quality programme focusing on improved outcomes, increasing coverage and local take-up that all the core elements as set out in the core service specification are included in contracts and specifications.

Target population

- 4.2. Providers will be required to make the shingles vaccine available to:
- Those aged 70 on the 1st September 2015
 - Those aged 78 on the 1st September 2015
 - Patients aged 70 between 1 September 2013 who were not vaccinated in either 13/14 or 14/15 will remain eligible until their 80th Birthday
 - Patients aged 70 on 1 September 2014 who were not vaccinated in 14/15 will remain eligible until their 80th Birthday
 - Those aged 78 on the 1st September 2014 who were not vaccinated in 14/15 will remain eligible until their 80th birthday.

Vaccine schedule

- 4.3. A single dose of shingles vaccine should be administered.

Vaccine ordering

- 4.4. All centrally procured vaccines must be ordered via the ImmForm online ordering system, details of which are given in the core immunisation specification.