Holidaying in Europe this Summer?

Summer is here and we hope that whatever your plans, you and all your family are up to date with their routine vaccinations.

Summer is the perfect time to check the NHS website to see if any have been missed. Some parents will be able to check in their child’s red book (PCHR) at weblink 16.

Please download our Value of vaccines resources to promote vaccination this summer at weblink 18.
New school?

Whether children are pre-school, going to nursery, starting primary or secondary school, we want to make sure that they are up to date with their pre-school boosters, their MMRs, especially the second dose. We have Back to school resources including posters and postcards which can be ordered from the DH health and social care orderline, view them here (weblink 17):

Packed summer? Results days?

For older teenagers planning to travel to Europe, going to festivals and large events it is very important that they have their MenACWY and have had two doses of MMR too. Anyone waiting for A level results should be encouraged to make the appointment to have their vaccinations before they leave for university. If they delay it until they start university, it may be more difficult to access an appointment before they have registered with their new GP. Please download our resources to promote vaccination to older teenagers now at weblink 19.

For anyone thinking of getting pregnant, it is also very important for them to have their MMR. Sometimes parents who have not got their child fully vaccinated, worry that they have left it too long. Whatever the reason for any child not having had their vaccinations, it’s not too late! Most vaccinations can be caught up with. It’s time we helped everyone to get up to date with their routine immunisations and then get on with what they love best.

Subscribe to Vaccine update here. Order immunisation publications here. For centrally-supplied vaccine enquiries, email: vaccinesupply@phe.gov.uk
Revised rash in pregnancy guidance reminder!

Background

PHE has published revised guidance on the investigation and management of viral rash illness or exposure to viral rashes in pregnancy. This revision has been prompted by changes to guidance on the post exposure management of chickenpox and measles and cessation of universal antenatal susceptibility screening for rubella in 2016.

Exposure to, or illness with, a viral infection during pregnancy can have implications for the pregnant woman and her baby. The guidance primarily focuses on the investigation and diagnosis of women either presenting with or exposed to maculopapular rashes caused by rubella, parvovirus and measles and vesicular rashes caused by chickenpox.

Medical intervention in these illnesses can prevent or reduce the potential for adverse outcomes for pregnant women and their babies.

The guidance

• summarises the information that should be collected at ante-natal booking in order to optimise the management of any future exposure or infection
• advises on the investigation and initial management of a woman presenting with a rash
• advises on the risk assessment for a woman reporting contact with a rash illness

The updated guidance can be found at weblink 1.

Rash in pregnancy: aide memoire

We have now produced an Aide-memoire aimed at midwives and healthcare professionals. Please view it at weblink 1 above.

Order copies now using product code: 2903600A
Focus on offering MMR in General Practice

GP Practices provide as part of the GMS contract an additional service for MMR immunisations. MMR vaccine is routinely offered to children aged 12 months of age (first dose) and 3 years and 4 months of age (second dose) as part of the childhood immunisation scheme as referred to in Section 11 of the GMS Statement of Financial Entitlement (SFE).

Children aged 6 years and over, teenagers and adults who have not had the full course of MMR can be opportunistically immunised in accordance with the requirements of Chapter 2 the SFE and the advice outlined in the measles chapter of the Green Book.

For 2019 to 20 NHS England and GPC England agreed the introduction of a new MMR catch-up programme for 10 and 11-year olds who have not received a completed course of vaccines via the school programme.

General practices can claim payment for checking the MMR immunisation records of 10 and 11-year-olds, correct any inaccuracies (e.g. child moved away) and invite the parent/carer to make an appointment for the child to have missing doses of MMR, with priority given to those who have no MMR vaccination recorded.

Full details of the catch-up programme can be found at weblink 2.

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**Die veiligste manier om jou kinders te beskerm**

- Masels is weer in die nuus. Daar was ernstige uitbrake in Engeland en Wallis gewees, en al hoe meer kinders kry masels.
- Masels kan 'n baie ernstige siekte wees, en kan lei tot oor- en borsinfeksies, diarree, stuipe, en breinskade. Masels kan 'n mens doodmaak.
- Daar is 'n risiko dat jou kind masels kan kry as hy/sy nie die MMR- inenting ontvang het nie.
- Vir beter beskerming is twéé dosisse MMR-entstof nodig.

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Indien jou kind die MMR-entstof twee keer moes ontvang het, maar dit nog nie gekry het nie, kan jy jou huisdokter om jou kind so gou as moontlik te laat inent - maak nie saak hoe oud hy/sy is nie.

As jy nie kan onthou of jou kind enige dosisse MMR-entstof ontvang het nie, of nie kan onthou hoeveel dosisse MMR-entstof hy/sy gekry het nie, kan jy jou huisdokter om die kind se persoonlike gesondheidsrekord (die rooi boekie) te kyk. Of andersins, gesels met jou huisdokter.

As jy nie weet hoeveel dosisse jou kind gehad het nie, is dit beter om twee dosisse MMR-entstof te gee, in plaas daarvan om die kind daal onbeskerm te laat.

Sekere algemene vrae oor masels en die MMR-entstof word op die agterkant van hierdie pamflet beantwoord.
Vaccination of healthcare workers (HCWs) with pertussis vaccine can help prevent nosocomial transmission to infants. From July 2019, HCWs who have not received a pertussis containing vaccine in the last 5 years and have regular contact with pregnant women and/or vulnerable young infants (up to three months old) are prioritised for occupational vaccination. This includes clinical staff working with women in the last month of pregnancy (e.g. in midwifery, obstetrics and maternity settings) and neonatal and paediatric intensive care staff who are likely to have close and/or prolonged clinical contact with severely ill young infants. Vaccine demand will be closely monitored and extension of vaccine to other HCWs in contact with pregnant women and/or vulnerable infants will occur once stocks allow.

The Joint Committee on Vaccination and Immunisation (JCVI) advised that pertussis vaccine should be offered to specific groups of healthcare workers in 2016. However, due to global supply shortages of pertussis containing vaccines, this has not yet been implemented across the UK and to date, has only been used in response to specific outbreaks in line with PHE guidelines. PHE has been working with the two vaccine manufacturers to ensure that sufficient stock can be made available and we are pleased that from July 2019, pertussis vaccine will be available for OH departments to order to vaccinate staff in line with JCVI advice.

For further information on occupational pertussis vaccination of healthcare workers, including how to order vaccines, please visit weblink 4. For incidents and outbreaks in healthcare settings, the ‘Guidelines for the Public Health Management of Pertussis in Healthcare Settings’ still apply and are available at weblink 5.

Measles flyer translated into 20 languages
The measles flyer (weblink 3) for schools has now been translated into:

- Arabic
- Afrikaans
- Bengali
- Cantonese
- Simplified Chinese
- French
- German
- Hindi
- Italian
- Lithuanian
- Polish
- Portuguese
- Romani
- Romanian
- Spanish
- Swahili
- Tamil
- Tagalog
- Urdu

It can be used for schools, home-schooled children, healthcare centres, A&E departments, hospital wards, walk-in centres and GP practices. They can also be used in the event of outbreaks.

The English version is available to order using product code: 2901027 from the DH health and social care orderline.
Vaccine supply (centrally supplied)

Centrally supplied vaccines can be used for the purposes defined in chapter 3 of the Green Book, and in the ‘Vaccines available on ImmForm’ helpsheet (weblink 8 and weblink 9).

Ordering additional Gardasil for the universal HPV immunisation programme

From 1 September 2019, the human papillomavirus (HPV) vaccine will be offered to boys, in addition to girls, as part of the routine school aged immunisation schedule. ImmForm customers can begin to order the additional required volumes of Gardasil from August 2019.

Pertussis: occupational vaccination of healthcare workers

From July 2019, certain groups of healthcare workers are recommended to be offered pertussis vaccination through their NHS Occupational Health Departments (see the GOV.UK guidance at weblink 6). Please note that the pertussis vaccines available through ImmForm CANNOT be ordered for the purpose of vaccinating healthcare workers (or for any other Occupational Health purpose). Vaccines for occupational health purposes must be ordered directly from a manufacturer or wholesaler. Further guidance on what ImmForm vaccines can be used for is available at weblink 7 for ImmForm account holders.

BCG vaccine (AJ Vaccines) for the national BCG programme

The BCG vaccine currently being issued expires 31 August 2019. We will be issuing this stock until the end of July 2019, therefore please do not over order for your requirements. Each pack is sufficient for 100 adult or 200 infant doses. It is advised not to create locally held stockpiles.

Update on MMR vaccine ordering restriction

There are currently two different vaccines available to order for the MMR programme, MMRvaxPRO® and Priorix®. Orders for Priorix® are capped at 20 packs per order per week for accounts in England and Wales. Controls are also in place for Scottish customers. This is needed to rebalance central supplies.

The alternative MMR vaccine, MMRvaxPRO®, remains available to order without restriction. If you specifically require additional Priorix® stock, for example because you serve communities that do not accept vaccines that contain porcine gelatine then please contact the ImmForm Helpdesk for assistance at helpdesk@immform.org.uk or 0844 376 0040.
Flu vaccine information and availability for 2019 to 2020

As in previous years PHE has centrally procured flu vaccine for children included in this year’s flu programme, i.e. all children who are aged 2-10 years old on 31 August 2019, and those aged from six months to less than 18 years old in clinical risk groups. It is the responsibility of GP practices and other providers in England to order sufficient flu vaccine directly from manufacturers for eligible patients aged 18 years and over.

The following vaccines will be available to providers of the children’s flu programme in 2019 in England via the ImmForm website.

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Manufacturer</th>
<th>Anticipated order opening for Schools</th>
<th>Anticipated order opening for GPs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fluenz Tetra®</td>
<td>AstraZeneca</td>
<td>Early October</td>
<td>Mid-October</td>
</tr>
<tr>
<td>Quadrivalent Influenza Vaccine (split virion, inactivated) (QIV)</td>
<td>Sanofi Pasteur</td>
<td>September</td>
<td></td>
</tr>
</tbody>
</table>

At this time we expect to make Fluenz Tetra® available to order by the NHS in October and QIV during September. These preliminary timings are subject to change. We therefore advise that plans for vaccination sessions in both schools and general practices should take account of this.

It may be necessary to open ordering of Fluenz Tetra® to providers of the school’s programme in advance of GP practices in 2019, to ensure that initial availability of vaccine does not impact on the ability of the school teams to complete the programme.

Because of the short shelf life of Fluenz Tetra, PHE will also put in place order controls to reduce the amount of flu vaccine that is ordered but may not be used, as in previous years. Vaccine will be available to order throughout the season.

Further details on the availability of vaccines and any order controls will be published on ImmForm, and in future editions of Vaccine Update.

Please refer to guidance from your respective health departments for arrangements in Scotland, Wales and Northern Ireland.

All influenza vaccines for the 2019 to 2020 season

Information on all influenza vaccines that have been marketed in the UK for the 2019 to 2020 season are available at [weblink 10](#).

Please refer to the flu letter ([weblink 11](#)) for information on which vaccines are eligible for reimbursement in the 2019 to 2020 season.
Vaccine wastage – time to check your fridges!

During 2018, vaccine wastage reported through ImmForm had a list price value of roughly **£6.3 million**. In terms of doses, about half of the reported vaccine wastage incidents were avoidable, but in terms of cost, these accounted for a massive 73% (£4.6 million) of the value of reported wastage in 2018.

The chart above shows that much of the avoidable wastage was down to incidents involving refrigeration temperature deviations. These include:

- fridge door being left open
- fridge being switched off or broken
- fridge equipment failure (not due to a power failure)
- wrong temperature range
- lack of temperature monitoring
- lack of, or inadequate, equipment
- stock left out of fridge

If vaccines are not stored correctly, it is not only wasteful and expensive for the NHS but vaccines may lose their effectiveness. This could result in a failure of the vaccine to provide the required immune response. In addition, if a vaccine is not stored or transported within the required temperature range of 2°C to 8°C then it is no longer within the terms of its product licence.
Everyone who handles vaccines should ensure that there are local policies in place to make sure that vaccines are stored, handled, and disposed of correctly, and vaccine wastage incidents are appropriately managed. These local policies should reflect national policy and best practice recommendations which can be found in Chapter 3 of the Green book (weblink 12). There is also a ‘Protocol for ordering, storing and handling vaccines’ available on the Public Health England website which sets out the minimum standards expected of healthcare professionals working with vaccines (see weblink 13 – please note that this guidance will be updated in due course).

To protect your patients, you need to protect your vaccines so remember to:

- **read**: take a daily reading of the thermometer’s maximum, minimum and current temperatures at the same time every day during the working week
- **record**: record temperatures in a standard fashion, on a standard form and sign each entry on the recording sheet
- **reset**: reset the thermometer after each reading. The thermometers should also be reset when temperatures have stabilized after periods of high activity e.g. restocking
- **react**: the person making the recording should take action if the temperature falls outside the +2 degrees C to +8 degrees C range and document this action

Please order your copy of the ‘Keep your vaccines healthy’ poster using product code: CCPVP01 and there is a fridge magnet product code: CCPVM02 from the DH health and social care orderline

Avoidable vaccine wastage can also be due to poor stock management:

- wrong vaccine being ordered
- excess stock being ordered
- vaccine expiring before it could be used
- vaccine lost or mislaid

To minimise wastage due to excess or expiring stock, you should hold no more than 2-4 weeks supply of vaccines and place your ImmForm orders with scheduled clinics in mind.
Are you reporting vaccine wastage on ImmForm?

Any vaccines ordered via ImmForm that have not been used should be recorded using the ImmForm Stock Incident web form. The Stock Incident reporting tab is found on the Vaccine Supply homepage:

To report unused vaccine via the Stock Incident reporting page:
1. the organisation code appears at the top of the form for the site reporting the vaccine incident
2. select the date that the incident occurred
3. select an appropriate ‘Incident Reason’ from the drop-down list
4. add information to the ‘Incident description’ and ‘Actions taken or planned following the incident’ fields
5. enter the number of doses for the product(s) involved in the incident in the table
6. click ‘Submit Incident’ at the bottom of the page

The EU Falsified Medicines Directive (FMD) and Delegated Regulation as applicable to PHE supplied vaccines for the national immunisation programme

Information on FMD as it applies to centrally supplied vaccines for the National Immunisation Programme can be found in the April 2019 edition of Vaccine update (weblink 14).

ImmForm vaccines in FMD-compliant packs that require verification and decommissioning are starting to be distributed for some products. Further products in FMD-compliant packs will start to be issued throughout the summer. The exact start dates will be different for different products (the month is indicated in the table below for each product). We will continue to update this information as forecasts become more accurate so please check for updates via the ImmForm news pages regularly at weblink 15.

Please note that both vaccines supplied by PHE for the 2019 to 2020 children’s flu programme will be issued in FMD-compliant packs that will require verification and decommissioning.
PHE are already issuing many of the products listed below in FMD-barcoded packs that were manufactured before the legislation came into force. These packs are not required to be verified and decommissioned, but this can be done so optionally.

<table>
<thead>
<tr>
<th>Product</th>
<th>Brand name</th>
<th>Month FMD-compliant packs will be issued which require verification and decommissioning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pneumococcal conjugate vaccine (PCV)</td>
<td>Prevenar13</td>
<td>Live</td>
</tr>
<tr>
<td>DTaP/IPV vaccine for pregnant women</td>
<td>Boostrix-IPV</td>
<td>Live</td>
</tr>
<tr>
<td>Meningococcal Group ACWY vaccine</td>
<td>Nimenrix</td>
<td>July 2019</td>
</tr>
<tr>
<td>Measles-Mumps-Rubella (MMR) vaccine</td>
<td>MMR VaxPRO</td>
<td>July 2019</td>
</tr>
<tr>
<td>DTaP/IPV/Hib/HepB vaccine</td>
<td>Infanrix Hexa</td>
<td>July 2019</td>
</tr>
<tr>
<td>Tuberculosis vaccine (BCG)</td>
<td>BCG Vaccine AJV</td>
<td>August 2019</td>
</tr>
<tr>
<td>Meningococcal Group B vaccine</td>
<td>Bexsero</td>
<td>August 2019</td>
</tr>
<tr>
<td>Shingles (Herpes zoster) vaccine</td>
<td>Zostavax</td>
<td>September 2019</td>
</tr>
<tr>
<td>Hib/MenC vaccine</td>
<td>Menitorix</td>
<td>September 2019</td>
</tr>
<tr>
<td>Measles-Mumps-Rubella (MMR) vaccine</td>
<td>Priorix</td>
<td>Beyond September 2019, please check back soon</td>
</tr>
<tr>
<td>DTaP/IPV vaccine for infants</td>
<td>Repevax</td>
<td>Beyond September 2019, please check back soon</td>
</tr>
<tr>
<td>Rotavirus vaccine</td>
<td>Rotarix</td>
<td>Beyond September 2019, please check back soon</td>
</tr>
<tr>
<td>Td/IPV vaccine</td>
<td>Revaxis</td>
<td>Beyond September 2019, please check back soon</td>
</tr>
<tr>
<td>Human papillomavirus (HPV) vaccine</td>
<td>Gardasil</td>
<td>Beyond September 2019, please check back soon</td>
</tr>
<tr>
<td>Live Attenuated Influenza Vaccine</td>
<td>Fluenz Tetra</td>
<td>When available</td>
</tr>
<tr>
<td>Quadrivalent Inactivated Influenza Vaccine</td>
<td>Quadrivalent Influenza Vaccine (split virion, inactivated)</td>
<td>When available</td>
</tr>
<tr>
<td>Purified protein derivative (Mantoux test)</td>
<td>Tuberculin PPD-2TU</td>
<td>All stock will be in non-FMD packs (as it is unlicensed in UK)</td>
</tr>
</tbody>
</table>
If you have identified yourself to PHE as being within Article 23 of the Delegated Regulation and this has been agreed, then you will be supplied with decommissioned vaccine.

Please see our guidance for more information on the roles and responsibilities in relation to FMD and the Delegated Regulation, regarding vaccines and other medicines centrally supplied by PHE, which is currently accessible via the ImmForm help guide page.

Vaccine supply
(non-centrally supplied)

Vaccine supply for the non routine programme

HEPATITIS A VACCINE

Adult
• GSK: Havrix Adult PFS singles and packs of 10 are available
• Sanofi Pasteur: Avaxim is available
• MSD: VAQTA Adult is available

Paediatric
• GSK: Havrix Paediatric PFS singles is unavailable. Resupply expected in September 2019
• GSK: Havrix Paediatric PFS packs of 10 are currently available
• MSD: VAQTA Paediatric is available

HEPATITIS B VACCINE

Adult
• GSK: Engerix B PFS singles and packs of 10 are available
• GSK: Engerix B vials singles are available
• GSK: Engerix B vial packs of 10 are unavailable
• GSK: Fendrix is available
• MSD: HBVAXPRO 10 µg is unavailable until further notice
• MSD: HBVAXPRO 40 µg is unavailable until further notice. Please see MSD statement for further information on supply of HBVAXPRO vaccines at weblink 15

Paediatric
• GSK: Engerix B Paediatric singles are available
• MSD: HBVAXPRO 5µg are available

COMBINED HEPATITIS A & B VACCINE
• GSK: Twinrix Adult singles are unavailable. Resupply expected August 2019
• GSK: Twinrix Adult packs of 10 are available
• GSK: Twinrix Paediatric is available
• GSK: Ambirix is available
COMBINED HEPATITIS A & TYPHOID VACCINE
• Sanofi Pasteur: Viatim is available

TYPHOID VACCINE
• Sanofi Pasteur: Typhim is available
• PaxVax: Vivotif is available

RABIES VACCINE
• GSK: Limited supply of Rabipur is currently available. Supply issues resulting from manufacturing constraints have now resolved, however, GSK do not expect the situation to fully normalise until late 2019
• Sanofi Pasteur: Rabies BP is currently out of stock. An alternative vaccine is available, please contact Sanofi Pasteur directly for more information

PPV (Pneumococcal Polysaccharide Vaccine)
• MSD: Pneumococcal Polysaccharide Vaccine vials are currently available
• MSD: PNEUMOVAX 23 PFS are currently available. Please see weblink 15 for further information

PPV (Pneumococcal Polysaccharide Conjugate Vaccine)
• Pfizer: Prevenar 13 is available

VARICELLA ZOSTER VACCINE
• GSK: VARILRIX is currently available
• MSD: VARIVAX is currently available
• MSD: Limited supply of ZOSTAVAX is currently available

DIPHTHERIA, TETANUS AND POLIOMYELITIS (inactivated) VACCINE
• Sanofi Pasteur: Revaxis is available

MMR
• MSD: MMRvaxPro is available
• GSK: Supplies of Priorix are available

HUMAN PAPILLOMAVIRUS VACCINE
• MSD: GARDASIL is currently available
• MSD: Gardasil 9 is currently available

MENINGITIS ACWY VACCINE
• GSK: Limited supply of Menveo is available
• Pfizer: Nimenrix is currently available

YELLOW FEVER
• Sanofi Pasteur: Stamaril is available
Weblinks


Weblink 3  https://www.gov.uk/government/publications/measles-dont-let-your-child-catch-it-flyer-for-schools


**Weblinks**


Weblink 16  https://www.nhs.uk/conditions/vaccinations/vaccine-ingredients/?tabname=nhs-vaccination-schedule

Weblink 17  https://www.gov.uk/government/publications/immunisations-resources-for-schools

Weblink 18  https://publichealthengland-immunisation.box.com/s/cgaf6qizmpx8m4wui6vevgztq7y31h4c

Weblink 19  https://publichealthengland-immunisation.box.com/s/asc1i3b0osumaf73a7uryo4e3z9h65gt