



# Vaccine update

## Parents' and guardians' views and experiences of accessing routine childhood vaccinations during the first wave of the coronavirus (COVID-19) pandemic in England

The NIHR Health Protection Research Unit (HPRU) in Vaccines and Immunisation ([weblink 1](#)) – a partnership between Public Health England and the London School of Hygiene & Tropical Medicine, in collaboration with the University of Cambridge – conducts research to support national immunisation programme policy and delivery. As part of our research, we focus on improving vaccination access and uptake, and reducing inequalities in vaccination.

In April and May 2020, we conducted an online survey and interviews to find out parents' and guardians' views and experiences of accessing routine childhood vaccinations during the first wave of the coronavirus (COVID-19) pandemic and the first national lockdown. During the early phase of the pandemic in England, MMR vaccination counts were 20% lower than the same period in 2019, before recovering in mid-April (McDonald et al., 2020). Our study aimed to identify barriers to accessing routine childhood vaccination during the early phase of the pandemic in England.

**McDonald H.I., et al.,** Early impact of the coronavirus disease (COVID-19) pandemic and physical distancing measures on routine childhood vaccinations in England, January to April 2020. *Euro Surveill*, 2020. 25(19). 10.2807/1560-7917.ES.2020.25.19.2000848.

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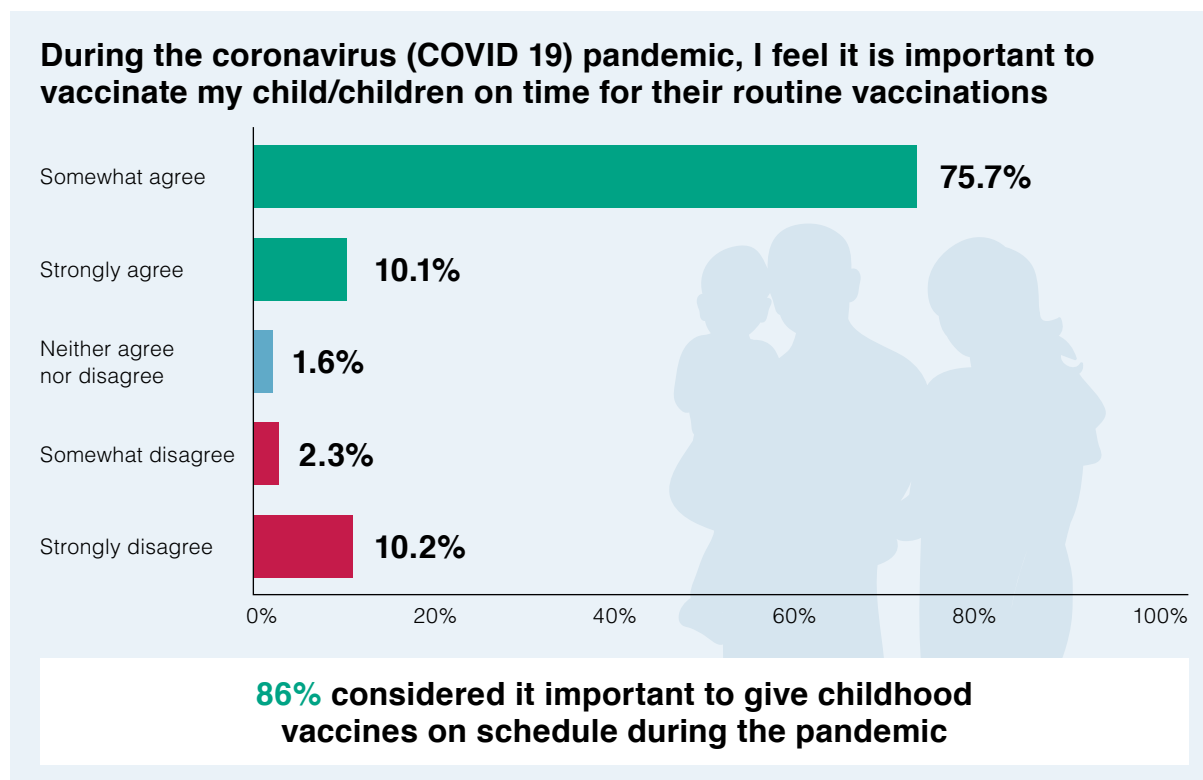
Registering for a new or updating your existing ImmForm vaccine ordering account



1,252 parents and guardians (aged 16+ years) who reported living in England with a child aged 18 months or under completed the survey. Nineteen survey respondents were interviewed. Parents and guardians were recruited to the study via social media and by email to baby and toddler groups in England. Survey respondents were asked about their beliefs and experiences surrounding routine vaccination during the COVID-19 pandemic, including how important they felt and how safe it was to take their child(ren) for routine vaccinations.

Knowledge about the availability of routine vaccinations was captured in two questions asking if respondents were aware of the government recommendation for routine childhood vaccination services to be maintained, and how certain respondents were that their child(ren) could still receive their routine vaccinations during the pandemic.

Respondents were asked to rate their level of the agreement with the statement 'During the coronavirus (COVID-19) pandemic, I feel it is important to vaccinate my child/children on time for their routine vaccinations'. 86% somewhat or strongly agreed with this statement. 13% disagreed to some extent with this statement.



Several barriers to vaccination were reported by survey respondents and interview participants, including a lack of clarity around whether vaccination services were operating as usual; difficulties in organising vaccination appointments; and fears around contracting COVID-19 while attending general practice.

One in four respondents were not aware of the national recommendation that routine vaccinations should go ahead as normal during the COVID-19 pandemic. Respondents from ethnic minority groups were three times more likely to be unaware of the recommendation that routine vaccination should go ahead as normal than White British, White Irish and White Other respondents.

## Barriers to vaccination during the first lockdown:



Fear of **contracting COVID-19** while attending general practice



**Lack of clarity** around vaccination services continuing



Difficulties **organising** vaccination appointments



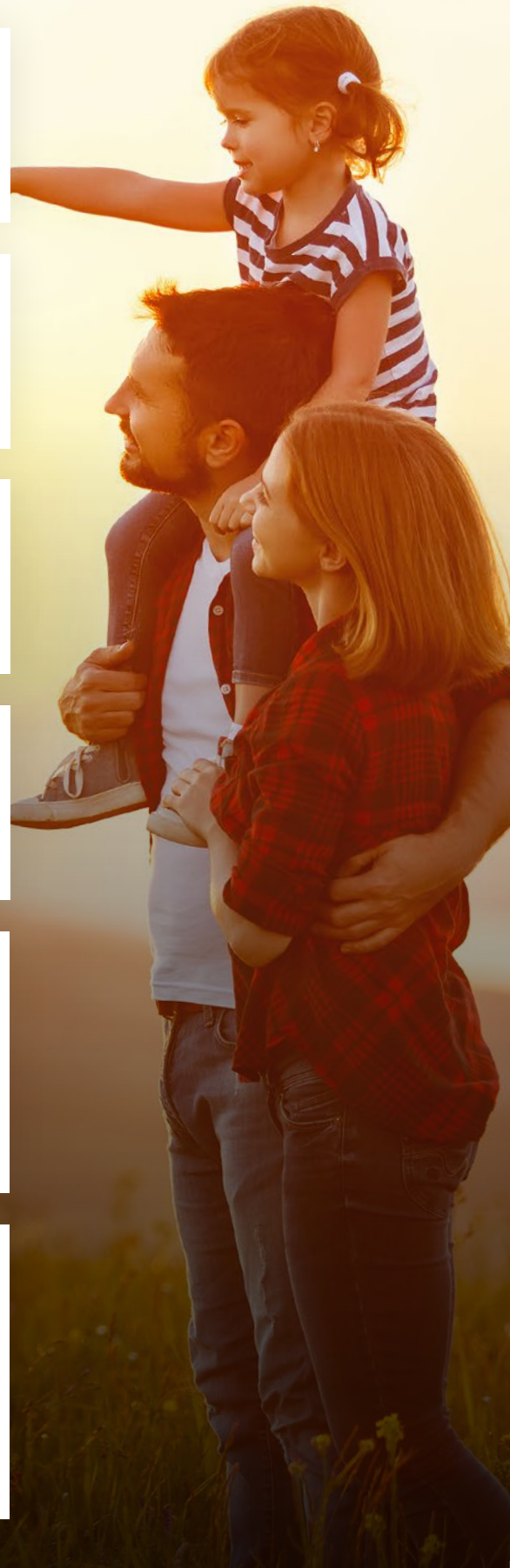
Uncertainties about what measures had been put in place to **keep patients safe**



**One in four** respondents were not aware of the national recommendation that routine vaccinations should go ahead as normal during the COVID-19 pandemic



Black, Asian, Chinese, Mixed or Other ethnicity respondents were **3x more likely** to be unaware of the recommendation that routine vaccination should go ahead as normal, compared to White British, White Irish and White Other respondents





Most interview participants discussed having a positive experience once they had attended a vaccination appointment, reporting that they were reassured by the safety measures taken to prevent the spread of COVID-19.

These included patients being screened for COVID-19 symptoms before attending, waiting outside the practice and using an intercom system to be admitted, screens between patients and receptionists, the provision of hand sanitiser and masks, waiting rooms being kept quiet by leaving longer time periods between appointments, doors being opened by healthcare professionals (to avoid patients needing to touch door handles), staff wearing protective equipment, and social distancing being maintained.

Having a positive experience motivated parents to reassure and encourage others to take their children for vaccinations, and also reassured participants about attending subsequent appointments.

Our findings highlight that to promote routine childhood vaccination during the COVID-19 pandemic, particularly in lockdowns, prompt and sustained national and general practice level communication is needed to raise awareness of vaccination service continuation and the importance of timely vaccination, and invitation-reminder systems for vaccination need to be maintained.

To allay concerns about the safety of accessing general practice, practices should communicate the measures being implemented to prevent COVID-19 transmission.

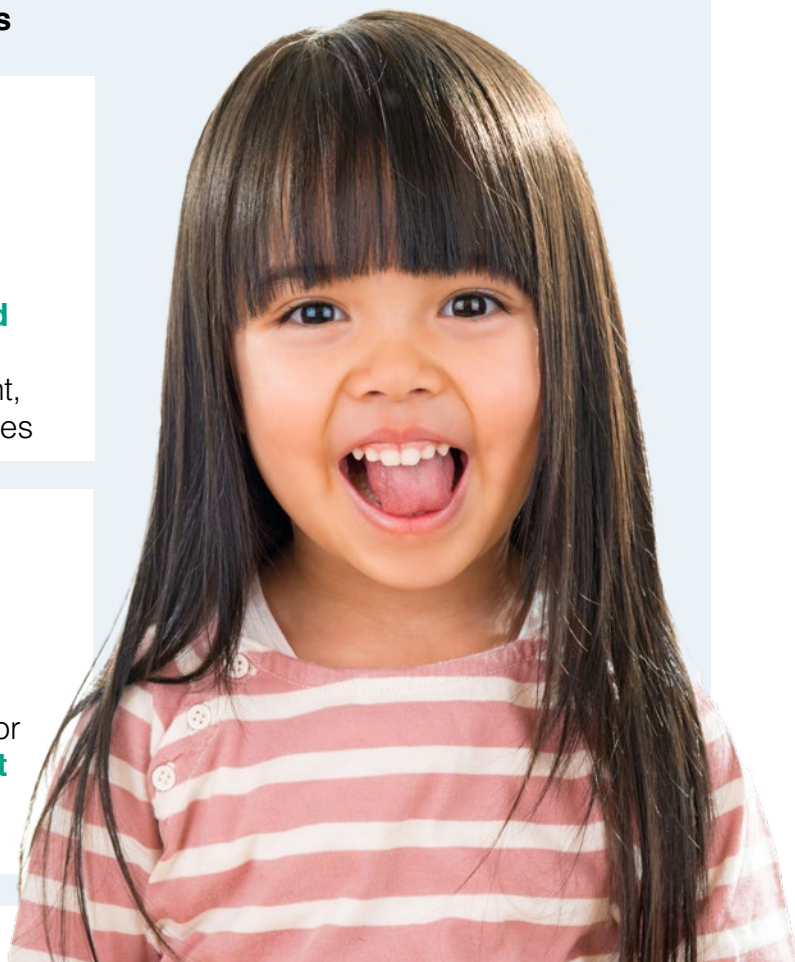
### Respondent recommendations



**Clear and strong national and local level communication messages** from the government, the NHS and public health bodies



General practice or health visitor should call patient or **send text messages with up-to-date information**



### Safety measures that reassured respondents about attending a vaccine appointment

1

Patients being **screened** for COVID-19 symptoms before attending

2

**Waiting outside** until called in using an intercom system

3

**Screens** between patients and receptionists

4

**Hand sanitiser** and **masks**

5

**Quiet** waiting rooms

6

**Doors being opened** by healthcare professionals

7

Staff wearing **protective equipment**

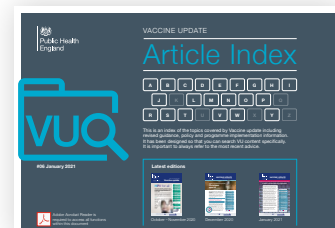
8

**Social distancing** being maintained

**Publication:** Bell S, Clarke R, Paterson P, Mounier-Jack S. (2020). Parents' and guardians' views and experiences of accessing routine childhood vaccinations during the coronavirus (COVID-19) pandemic: A mixed methods study in England. PLoS ONE 15(12): e0244049. <https://doi.org/10.1371/journal.pone.0244049>.

## Vaccine update Index has been published

An index of the topics covered by VU ([weblink 2](#)) including revised guidance, policy and programme implementation information has been designed so that you can search VU content specifically. It is important to always refer to the most recent advice.



## PPV prioritisation

Due to increased global demand, supplies of Pneumovax®23 (Pneumococcal Polysaccharide Vaccine, PPV23) have been constrained since 2017. In consequence, PHE issued guidance on prioritisation of available stock in Vaccine Update, most recently in March 2021 ([weblink 3](#)). In line with other national immunisation programmes, PHE will supply this vaccine for the routine immunisation programme and immunisation of those with underlying medical conditions, rather than providers locally procuring the vaccine. The vaccine will be available to order via PHE's ImmForm website from 1 June 2021. Please also see page 10 below "PPV23 vaccine for the pneumococcal programme will be supplied by PHE from 1 June 2021".

Details of ordering controls will be made available on ImmForm news item and Vaccine Update in due course. Additional information is available in a PHE and NHS England/ NHS Improvement bipartite letter at [weblink 4](#). Once the change occurs in June, providers are asked to prioritise previously un-vaccinated individuals and booster doses in the same order of priority that has been recommended since late 2017 and set out in table 1 on the following page.

Unvaccinated individuals in the high-risk priority groups, such as those with asplenia, dysfunction of the spleen, immunosuppression, CSF leaks and cochlear implants should be offered PPV23 first. Data on uptake of PPV23 indicates that only 18% of 2 to 64-year olds becoming asplenic between 1 April 2018 and 31 March 2019, had received PPV23 up to the end of March 2020.

Following vaccination of high-risk groups, providers may then offer PPV23 to previously unvaccinated individuals in moderate risk groups such as those with diabetes and chronic heart, lung, liver and kidney disease. Once high and moderate-risk groups have been offered PPV23, individuals in lower risk groups, such as those requiring boosters and healthy over 65-year olds, can then be offered PPV23. Providers may wish to offer PPV23 to healthy over 65-year olds alongside the influenza vaccine during the 2021 to 2022 flu vaccination season.

National stocks of PCV13 (Prevenar13), or separately procured PCV10 (Synflorix), should not be used in place of PPV23 as protection from the childhood PCV13 programme has reduced pneumococcal disease due to these serotypes across all ages. PPV23 helps provide additional protection against serotypes that are not covered by PCV13 or PCV10.

### Priority groups for Pneumococcal polysaccharide 23-valent vaccine (PPV23, Pneumovax®23)

Clinical risk group	Examples (decision based on clinical judgement)
<b>High priority</b>	
Asplenia or dysfunction of the spleen	This also includes conditions such as homozygous sickle cell disease and coeliac syndrome that may lead to splenic dysfunction.
Immunosuppression	Due to disease or treatment, including patients undergoing chemotherapy leading to immunosuppression, bone marrow transplant, asplenia or splenic dysfunction, HIV infection at all stages, multiple myeloma or genetic disorders affecting the immune system (e.g. IRAK-4, NEMO, complement deficiency). Individuals on or likely to be on systemic steroids for more than a month at a dose equivalent to prednisolone at 20mg or more per day (any age), or for children under 20kg, a dose of 1mg or more per kg per day.
Individuals with cerebrospinal fluid leaks	This includes leakage of cerebrospinal fluid such as following trauma or major skull surgery (does not include CSF shunts).
Individuals with cochlear implants	It is important that immunisation does not delay the cochlear implantation.

Clinical risk group	Examples (decision based on clinical judgement)
<b>Moderate priority</b>	
Chronic respiratory disease	This includes chronic obstructive pulmonary disease (COPD), including chronic bronchitis and emphysema; and such conditions as bronchiectasis, cystic fibrosis, interstitial lung fibrosis, pneumoconiosis and bronchopulmonary dysplasia (BPD). Children with respiratory conditions caused by aspiration, or a neurological disease (e.g. cerebral palsy) with a risk of aspiration. Asthma is not an indication, unless so severe as to require continuous or frequently repeated use of systemic steroids (as defined in Immunosuppression).
Chronic heart disease	This includes those requiring regular medication and/or follow-up for ischaemic heart disease, congenital heart disease, hypertension with cardiac complications, and chronic heart failure.
Chronic kidney disease	Nephrotic syndrome, chronic kidney disease at stages 4 and 5 and those on kidney dialysis or with kidney transplantation.
Chronic liver disease	This includes cirrhosis, biliary atresia and chronic hepatitis.
Diabetes	Diabetes mellitus requiring insulin or oral hypoglycaemic drugs. This does not include diabetes that is diet controlled.

Clinical risk group	Examples (decision based on clinical judgement)
<b>Low priority</b>	
Healthy individuals aged 65 years and over. Booster doses for asplenic, those with splenic dysfunction and chronic kidney disease.	

## Flu programme 2021 to 2022 (weblink 5)

This table lists all of the ovalbumin content of the influenza vaccines that are marketed in the UK for the 2021 to 2022 flu vaccination season ([weblink 6](#)). You can download and print out the poster locally. For information on the use of influenza vaccines in egg allergic individuals please see the green book influenza chapter.

# Vaccine supply

## Routine vaccination programme

### Vaccines for the national COVID-19 programme supplied by PHE

#### Vaccine availability

The vaccines currently available to order by the pre-agreed providers are in the table below. Latest information for each vaccine can be found on ImmForm.

Manufacturer	Vaccine Name	Presentation	Storage
Pfizer/BioNTech	BNT162b2	Each pack of vaccine contains 195 vials with 6 doses per vial (1170 doses per pack)	This vaccine requires ultra-low temperature storage (-80°C to -60°C)
AstraZeneca	ChAdOx1-S	Each pack of vaccine contains 10 vials with 8 doses per vial (80 doses per pack)	2°C to 8°C
Moderna	Moderna Covid vaccine	Each pack of vaccine contains 10 vials with 10 doses per vial (100 doses per pack)	This vaccine requires freezer (-25°C to -15°C)

If you have a query in respect of access to COVID-19 vaccines, please contact your SVOC and RVOC teams.

Colleagues from Devolved Administrations please refer to guidance from your respective health departments for arrangements in Scotland, Wales and Northern Ireland.

### Moderna COVID-19 vaccine delivery schedule change

From Thursday 6 May, the delivery schedule for ordering Moderna vaccine via ImmForm changed from next day delivery to 48 hour delivery. For example,

- if your order is placed on Monday before 11:55, then the delivery will be on Wednesday
- if your order is placed on Monday after 11:55, then the delivery will be on Thursday
- orders will continue to be delivered 7 days a week. Please ensure that if you do not wish to receive your vaccine delivery on a Saturday or Sunday, select the desired delivery date (e.g. Monday) from the drop-down box as normal



**There are exceptions to these schedules for some customers:**

- Isle of Wight, Welsh GPs and Scottish customers in Shetland, Orkney, Stornoway, Fort William, Inverness and Wick will use scheduled delivery days agreed for the ordering of COVID-19 vaccines
- Jersey & Guernsey will continue to receive 48-hour delivery but no deliveries Sunday or Monday

The existing next day delivery schedule for AstraZeneca and Pfizer COVID-19 vaccines remains unchanged. Orders placed before 11:55 each day, will be delivered next day.

If you have any queries about ImmForm ordering, please call [020718 38580](tel:02071838580) or email [Helpdesk@immform.org.uk](mailto:Helpdesk@immform.org.uk).

If you have any queries about deliveries, please call [01234 587199](tel:01234587199) or email [NHS.VaccineSupport@movianto.com](mailto:NHS.VaccineSupport@movianto.com).

**Spring bank holiday COVID-19 vaccine deliveries****Vaccine and associated products will continue being delivered on a next day delivery schedule.**

Customers in Isle of Wight, Welsh GPs and Scottish customers in Shetland, Orkney, Stornoway, Fort William, Inverness and Wick will continue receiving orders per their delivery schedule.

Jersey & Guernsey customers needing delivery during the bank holiday period please contact [COVID19PHEsupplies@phe.gov.uk](mailto:COVID19PHEsupplies@phe.gov.uk) to discuss possible delivery options individually tailored to your locality.

**Spring bank holiday delivery schedule for routine vaccinations**

Due to the Spring Bank Holiday, there will be no deliveries or order processing by Movianto UK on Monday 31 May 2021. Please see the table below for revised order and delivery dates.

For customers with standard delivery dates of Monday, please be aware that after the 24 May, your next available delivery day will be the 7 June 2021.

You are reminded to be prepared for the break in deliveries and to order accordingly. Please make sure you have sufficient room in your fridge for any additional vaccine you wish to stock over this holiday period.



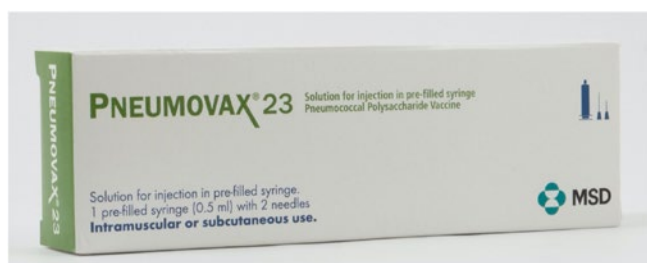
## Spring Bank Holiday – Monday 31 May 2021

Delivery date	Order cut-off date	Order cut-off time
Monday 24 May	Thursday 20 May	11:55 AM
Tuesday 25 May	Friday 21 May	11:55 AM
Wednesday 26 May	Monday 24 May	11:55 AM
Thursday 27 May	Tuesday 25 May	11:55 AM
Friday 28 May	Wednesday 26 May	11:55 AM
<b>Monday 31 May</b>	<b>Closed – No deliveries or order processing</b>	
<b>Tuesday 1 June</b>	<b>Thursday 27 May</b>	11:55 AM
<b>Wednesday 2 June</b>	<b>Friday 28 May</b>	11:55 AM
Thursday 3 June	Tuesday 1 June	11:55 AM
Friday 4 June	Wednesday 2 June	11:55 AM
Monday 7 June	Thursday 3 June	11:55 AM

Please be advised that Emergency or “Out of Schedule” deliveries cannot be arranged for failure to place orders in good time.

## PPV23 vaccine for the pneumococcal programme will be supplied by PHE from 1 June 2021

From 1 June 2021, pneumococcal polysaccharide vaccine (PPV23; Pneumovax®23) for the routine immunisation programme and immunisation of those with underlying medical conditions will be able to order through ImmForm. This replaces local PPV23 procurement through wholesalers. We anticipate ImmForm ordering will open shortly after 9.30 am on 1 June.



Clinical prioritisation for PPV vaccination remains in place. Please refer to page 5 for details on prioritisation for PPV vaccination.

ImmForm ordering controls will be in place for PPV23, to enable PHE to balance incoming supply with

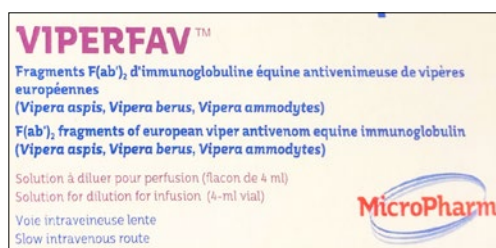
demand. Details of ordering controls will be made available on ImmForm in due course. Requests for extra vaccine will only be considered on a case by case basis.

Requests should be emailed to the ImmForm helpdesk at [helpdesk@immform.org.uk](mailto:helpdesk@immform.org.uk). Allow sufficient time before your order cut-off. Out of schedule deliveries will be by exception only. Pneumovax®23 is presented as single units of solution for injection in a pre-filled syringe. Further details about this programme can be found in Chapter 25 of the Green Book.

## Viper antivenom has changed

The viper antivenom product supplied via ImmForm has recently changed from ViperATAB® to Viperfav®. The products have different active ingredients, formulations and presentations:

Product	ViperATAB®	Viperfav®
Source of immune sera	Ovine	Equine
Licensed status	Unlicensed in the UK	Unlicensed in the UK
Storage	Store in a refrigerator between 2°C and 8°C	Store in a refrigerator between 2°C and 8°C
Presentation	Each pack includes 2 x 4ml vials, containing 100mg Fab fragments each	Each pack includes 1 x 4ml vial containing F(ab') <sub>2</sub> fragments
Initial treatment recommendation	The initial dose of ViperATAB® is the contents of 2 x 4ml vials (i.e. 1 pack per patient)	The initial dose of Viperfav® is the contents of 1 x 4ml vial (i.e. 1 pack per patient)



Recommendations for the treatment of common adder bites and the administration of Viperfav® can be found on TOXBASE ([weblink 7](#)).

To minimise wastage, please use all locally held stocks of in date ViperATAB® to treat eligible patients, before switching to Viperfav®.

## Change to dTaP/IPV vaccine for both the pre-school booster and maternal pertussis dTaP/IPV programmes

Boostrix-IPV® is currently supplied for both the pre-school booster and maternal pertussis dTaP/IPV programmes. This has recently changed from Repevax®. The two vaccines are equivalent. To minimise wastage, please use all your locally held stocks of Repevax® to vaccinate eligible individuals, before switching to Boostrix-IPV®.

There is no other change to the pre-school booster or maternal pertussis immunisation programme. Further details about this programme can be found in chapter 24 of the Green Book ([weblink 9](#)).

## Update to Bexsero Patient Information Leaflet

Every pack of Bexsero (Meningitis B vaccine; 10 doses) is supplied with a pad of 10 Patient Information Leaflets (PILs), as well as there being a single PIL inside each Bexsero pack. Since September 2020, an updated version of the PIL pad has been distributed with Bexsero orders. Please dispose of the single PIL from inside the pack, as it will be out-of-date. We will advise further when the PIL supplied in the pack is in line with the PIL pad.

## MMR vaccine ordering

To rebalance central supplies of both MMR vaccines please consider ordering M-M-RvaxPRO® as your first choice, which is available without restriction. Customers in England and Wales who require Priorix®, for example because you serve communities that do not accept vaccines containing porcine gelatine, may order up to **6 packs** of Priorix® per ImmForm account per week. For assistance please contact the ImmForm Helpdesk at [helpdesk@immform.org.uk](mailto:helpdesk@immform.org.uk). Customers in Scotland should refer to their local ordering restrictions.

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

From 11pm on 31 December 2020, when the UK's EU exit transition period ended, the 'safety features' Delegated Regulation (2016/161) under the EU Falsified Medicines Directive (FMD; 2011/62/EU) no longer applied in Great Britain.

This means that in Great Britain, end users of the majority of prescription-only medicines, including the FMD-compliant products supplied by PHE via ImmForm, are no longer required to verify or decommission the unique identifiers on serialised packs.

Serialised packs can none the less continue to be dispensed for as long as they are still in date.

## Registering for a new or updating your existing ImmForm vaccine ordering account

When you register for or update an existing ImmForm account, Public Health England as a wholesaler of vaccines need to verify the requesting customer.

Please ensure you have your professional regulatory body registration number or Wholesaler Dealer

Licence and an organisation code which can be verified when requesting updates or requesting a new vaccine ordering account. For more information please see the ImmForm Helpsheets – How to register ([weblink 8](#)).





# Vaccine supply

## Non-routine vaccination programme

### HEPATITIS A VACCINE

#### Adult

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

#### Paediatric

- **GSK:** Havrix Paediatric PFS singles and packs of 10 are available
- **MSD:** VAQTA Paediatric is available

### HEPATITIS B VACCINE

#### Adult

- **GSK:** Engerix B PFS singles and packs of 10 are available
- **GSK:** Fendrix is available
- **MSD:** HBVAXPRO 10 µg is available
- **MSD:** HBVAXPRO 40 µg is available

#### Paediatric

- **GSK:** Engerix B Paediatric singles are available
- **MSD:** HBVAXPRO 5µg is available

### COMBINED HEPATITIS A & B VACCINE

- **GSK:** Twinrix Adult singles and 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 singles and packs of 10 are available
- **Emergent:** Vivotif is available

### RABIES VACCINE

- **Valneva:** Rabipur is currently available. Orders should be placed directly with Valneva via the Valneva website ([weblink 10](#)) or via your preferred wholesaler. Vaccine supply contact details: Valneva UK, Tel: 01252 761007
- **Sanofi Pasteur:** Rabies BP is currently available

**PNEUMOCOCCAL POLYSACCHARIDE VACCINE (PPV)**

- **MSD:** Supply of Pneumovax 23 (PPV23) PFS is currently available

**PNEUMOCOCCAL POLYSACCHARIDE CONJUGATE VACCINE (PCV)**

- **Pfizer:** Prevenar 13 is currently available

**VARICELLA ZOSTER VACCINE**

- **GSK:** Supply of VARILRIX is currently limited
- **MSD:** VARIVAX is available
- **MSD:** ZOSTAVAX is currently available

**DIPHTHERIA, TETANUS AND POLIOMYELITIS (inactivated) VACCINE**

- **Sanofi Pasteur:** Revaxis is available

**DIPHTHERIA, TETANUS, PERTUSSIS (acellular) AND POLIOMYELITIS (inactivated) VACCINE**

- **GSK:** Supply of Boostrix-IPV is currently limited
- **Sanofi Pasteur:** Repevax is available

**MMR**

- **MSD:** MMR Vaxpro is currently available
- **GSK:** Priorix are currently available

**MENINGITIS ACWY VACCINE**

- **GSK:** Menveo is available
- **Pfizer:** Nimenrix is currently available

**YELLOW FEVER**

- **Sanofi Pasteur:** Stamaril is available

**HUMAN PAPILLOMAVIRUS VACCINE**

- **MSD:** GARDASIL will be discontinued. Supplies are available until end of May 2021
- **MSD:** Gardasil 9 is currently available

**CHOLERA VACCINE**

- **Valneva:** Dukoral is available

**JAPANESE ENCEPHALYTIS VACCINE**

- **Valneva:** Ixiaro is available

## Weblinks

- Weblink 1    <https://immunisation.hpru.nihr.ac.uk/>
- Weblink 2    <https://www.healthpublications.gov.uk/ViewArticle.html?sp=Svaccineupdateindex>
- Weblink 3    <https://www.gov.uk/government/publications/vaccine-update-issue-318-march-2021>
- Weblink 4    <https://www.gov.uk/government/publications/pneumococcal-polysaccharide-vaccine-change-to-the-supply-route-from-june-2021-letter>
- Weblink 5    <https://www.gov.uk/government/collections/annual-flu-programme>
- Weblink 6    <https://www.gov.uk/government/publications/influenza-vaccine-ovalbumin-content>
- Weblink 7    <http://www.toxbase.org>
- Weblink 8    <https://www.gov.uk/government/publications/how-to-register-immform-helpsheet-8>
- Weblink 9    <https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book>
- Weblink 10    <https://www.valneva.co.uk/healthcare-professionals/placeanorder>



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