



# Vaccine update

## WHO ARE OUR VACCINE HEROES?

**What defines a Vaccine hero?** Are they the workforce who strive tirelessly to deliver vaccines to the eligible mothers, infants, children, young adults and older adults? Does having your routine and occupational health related vaccines make you a hero? What about being positive and promoting vaccines, even if you are unable to have those vaccines yourself make you a hero?

Are directors of immunisation, programme staff, GPs, the virologists, data analysts, vaccine distribution staff, the data entry staff, specialist nurses, the research nurses, pharmacists, cold chain staff, IMMform and everyone working to maintain vaccine supply, heroes?

The answer is a resounding yes. All these people are vaccine heroes, from the receptionist who reminds an eligible teenager to make an appointment to catch up with their MMR and have their MenACWY to the cleaner who notices the sign on the vaccine fridge and the busy practice nurse who takes the time to listen to a young mother who has concerns.

Every contact counts, every person having their routine vaccines, is protecting themselves and playing a role in improving public health. And to those struggling to persuade, we are aiming to provide you with all the information you need to address people's concerns. Sometimes you have to keep the conversation going and leave the door open.



Vaccine  
hero

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### **Chief Executive at Public Health England, Duncan Selbie said:**

In a world where mis-information is so easily spread online we must all speak confidently about the value of vaccines and leave the public in no doubt that they are safe and save lives. It's testament to our hard-working doctors and nurses that families trust them to provide accurate facts about the effectiveness of vaccines. They're our vaccine heroes and we all have a role in supporting them.

#### **The qualities of a vaccine hero:**

- being up to date with your own routine and occupational health vaccines
- being positive about the vaccine programmes and talking about them in positive terms
- sharing evidence based information, knowing misinformation has the power to endanger lives



#### **Being a vaccine hero+ means:**

- listening and signposting to trusted sources for further information such as NHS.UK
- understand the role that vaccines have in combating poverty
- help to remind family and friends to have their routine vaccines
- identify groups who have barriers to vaccination and propose interventions to overcome those barriers
- recognise the role vaccines have in Anti-Microbial Resistance

**and we will focus on these qualities throughout this year in Vaccine Update.**

We are very lucky in England to have one of the most comprehensive programmes in the world. It is great to see that parents trust our programme and almost all children are benefiting from their routine vaccinations.

We know that inaccurate claims about safety and effectiveness can lead to doubts about vaccines – putting people at risk of serious illness. It's vital that all websites and social media platforms ensure accurate coverage of public health issues like vaccination. We have seen some steps forward with main platforms such as Twitter and Instagram banning anti-vaxx hashtags and or redirecting the traffic to trusted sites such as NHS.UK. But there is still work to be done.

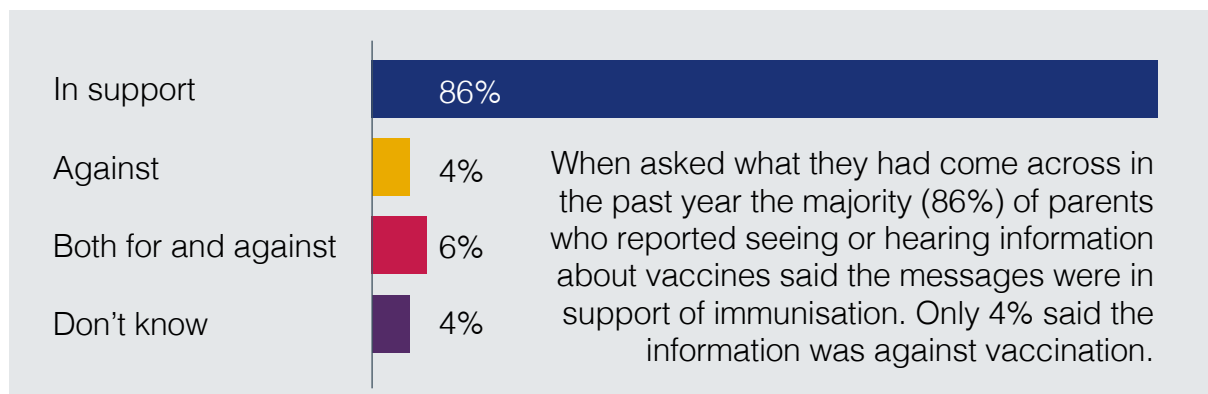
But, we also know that there are other important factors which affect vaccine uptake, such as sending out reminders and making GP appointments as convenient as possible – these things will make the biggest difference in reducing numbers of children not getting vaccinated.

We are undertaking a range of initiatives that address inequalities and now understand more about what the barriers to good uptake are. We also want to celebrate approaches that different teams have used to improve the programme and share how they did it!

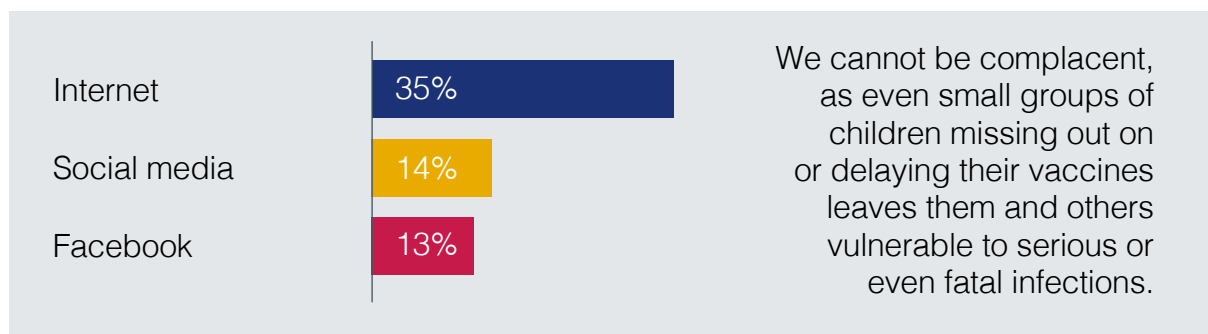
## Research from Public Health England

This European Immunization Week, Duncan Selbie, reminds all those working in healthcare of the importance of speaking 'confidently about the value of vaccines' and urges everyone to support the vaccine heroes. Research from Public Health England shows that health professionals remain the most trusted source of advice on immunisation (93% of parents agreed), while social media and the internet ranked as the least trusted sources of information.

Overall, only 9% of parents have seen, read or heard about something that would make them doubt having their child immunised – a historically low proportion and down from a third (33%) in 2002.



Of the small number of parents (n=143) who had seen information to make them doubt having their child immunised, 35% had seen this on the internet and 14% mentioned social media as the main source. Information relating to side effects of vaccines was the main topic parents cited that might have persuaded them not to immunise their child.



The survey also shows that reported parental confidence in the immunisation programme is very high and the percentage of parents refusing one or more of their child's vaccines remains very low at only 4%. For those parents who didn't vaccinate when due, most had postponed, rather than refused vaccination, with their child going on to have it at a later date.



Vaccine coverage remains high for most childhood vaccines. The latest quarterly data suggests that vaccine coverage at 12 months of age increased by 0.4 to 0.9% for all vaccines compared with the previous quarter. This follows slow declines in uptake since 2012 to 13. According to research by the Royal Society of Public Health, these small drops may be due to timing, availability and location of appointments.

### Background to the survey

- A total of 1,674 interviews (households) were achieved among parents of children aged 0 to 4. This included 1,050 parents of 0 to 2 year olds and 1,000 parents of 3 to 4 year olds, which included 376 parents who had a child in both age groups.
- The latest UK quarterly data and commentary on coverage achieved by the UK childhood immunisation programme is available.
- European Immunization Week (EIW), run by the WHO European Region, promotes the core message that immunisation is vital to prevent diseases and protect life. This year, on 24 to 30 April 2019, the campaign aims to raise awareness of the benefits of vaccines and to celebrate the 'vaccine heroes' who contribute in so many ways to protecting lives through vaccination.

### When a loud bang on the internet is only a tiny noise in the real world

People have always had questions, and today's information environment can amplify them. While social media can be helpful for reflecting sentiments, chatter isn't necessarily correlated to population or community-level hesitancy.

Many factors are responsible for disease outbreaks today, including past programme weaknesses, barriers to vaccine access, alterations in the epidemiology of vaccine-preventable diseases, safety scares and events and population movement. It is more important to think of the undervaccinated groups, look at their context and barriers to access. Fake news? Here is a balanced informed view – [Weblink 18](#).



## European Immunisation week video please download and share on your websites, social media

European Imms Week video – [Weblink 1](#)

Timeline video – [Weblink 2](#)



Find the EIW graphics here

Graphics – [Weblink 3](#)

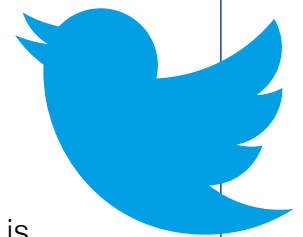
PHE Twitter post – [Weblink 4](#)

PHE Twitter post – [Weblink 5](#)

We tweeted these lovely graphics and were delighted at the response. You can download the graphics and tweet using [#ValueofVaccines](#) [#VaccinesWork](#) and [#Vaccineheroes](#)

Helen Donovan Professional Lead for public health nursing at the RCN is a vaccine hero. She tweeted [“#VaccinesWork”](#) and have reduced the incidence of vaccine preventable disease dramatically over the last 100 years. These infections are now thankfully rare but this means even more that we can't be complacent because people don't see the impact these diseases can have and therefore underestimate the need for vaccines. Helen is committed to challenging misinformation and promoting vaccination and to providing education and resources for the nursing teams that administer, to ensure best practice.

Vaccines today are featuring their vaccine champions – [Weblink 6](#)



## New publications to support Vaccine heroes

The Royal College of Nurses (RCN) launched two immunisation publications to support vaccine delivery. Thank you to everyone who supported and helped in the development of them. Please share with your networks and colleagues:

- The Role of Nursing Associates in Vaccination and Immunisation. Position statement (April 2019) – [Weblink 24](#)

The RCN recognises that nursing teams are key to the safe and effective administration of large numbers of vaccinations to those who need them. The overriding principle is: health care professionals involved in the prescribing or administration of vaccines must be suitably competent and have the knowledge as well as the skills to ensure patient safety, and public trust in immunisation is maintained. In some clinical areas, it is likely that NAs will be involved in the delivery of the national immunisation programme.

- Health Care Support Workers Administering Inactivated Influenza, Shingles and Pneumococcal Vaccines for Adults and Live Attenuated Influenza Vaccine (LAIV) for Children RCN guidance – [Weblink 25](#)

The Pharmaceutical Negotiating Services Committee (PSNC) promotes and supports the interest of all NHS community pharmacies in England. PSNC is recognised by the Secretary of State for Health as the body that represents NHS pharmacy contractors. They work closely with Local Pharmaceutical Committees to support their role as the local NHS representative organisations. Their goal is to develop the NHS community pharmacy service, and to enable community pharmacies to offer an increased range of high quality and fully funded services; services that meet the needs of local communities, provide good value for the NHS and deliver excellent health outcomes for patients.

The Royal Pharmaceutical Society (RPS) states that prevention of disease is a major issue across the NHS and pharmacists have a vital role to play in vaccination programmes to help keep people well and healthy. They highlighted the that pharmacies role can be pivotal in communities that have pockets of under vaccinated people. Another example of how this can be implemented in practice is a Healthy Living Pharmacy which has demonstrated benefits to patients and the public. Often they are able to identify eligible patients and deliver vaccines to them in a local pharmacy they have easy access to. This is very significant in areas with high transient populations such as university campuses, housing estates, areas of high density or remote locations with their specific access issues. They contribute importantly to the service provision and are a key part of the health family.



**Above, is Ade Williams Superintendent Pharmacist, Bedminster Pharmacy in Bristol.** He has supported the flu vaccination campaign over the years with the support of PHE colleagues. He and his pharmacy signpost to free NHS provision while also providing a low-price service that also supports the work of charities like Meningitis Now and Water Aid. Ade said “Our service was set up after a patient lost a relative to meningitis, same jabs my child received thanks to the NHS. My response to this was to use my skills and the science available to protect others and their loved ones. Vaccines have and continue to save lives. He also writes a syndicated column across 40,000 homes in Bristol and South Glos with a regular yearly focus on flu jabs and ongoing travel vaccination suitability, risk and options. Read more at [weblink 7](#), [weblink 8](#) and [weblink 9](#).

Bedminster Pharmacy is a small independent Healthy Living pharmacy in South Bristol. Ade is the Pharmacist of the Year 2018 and a Fellow of the Royal Pharmaceutical Society for distinction in the practice of pharmacy. As part of the 2018 NHS70 parliamentary Awards, he was nominated as the Person Centred Care Champion. In 2017, he was awarded both the UK Community Pharmacist of the Year and the Pharmacy Manager of the Year Awards alongside being awarded the Royal Pharmaceutical Society's inaugural Patient Champion Award 2017.

He is enthusiastic about promoting and supporting self-care and thrives on finding innovative ways to engage and empower patients to make the right choices about their health.

If you would like more information, please contact: [ade.williams@nhs.net](mailto:ade.williams@nhs.net)



### **Innovative approach improves engagement with previously hard to reach populations**

The Berkshire Healthcare NHS Foundation Trust's immunisation programme for school-aged children is seeing continued success, with the autumn 2018 delivery of the annual childhood flu programme providing immunisation to over 350 schools (a figure that has seen increases year-on-year). Between September 2018 and February 2019 our immunisation team administered 50,158 vaccinations and we have exceeded the upper average uptake target of 65%.

In addition to our core work of delivering immunisations in primary and secondary schools and community clinics, we have embraced creativity and innovation to enable us to reach populations that we had previously found hard to reach. As part of this approach we introduced a pilot mobile immunisation clinic and worked with faith and community groups to help communicate the value of immunisation to communities in Slough, which has a significant transient population.

Because the children's quadrivalent nasal spray flu vaccine contains porcine gelatine, the issue of pork ingredients, can pose a difficulty for some people (especially those of a faith that prohibits the consumption of pork) and can make the delivery of the children's flu vaccine particularly challenging in some locations. Slough is one such location, and has the lowest uptake across Berkshire.

To help to improve vaccination numbers in Slough, the Immunisation Service Manager, the immunisation team, Slough Borough Council, Public Health and the Royal Berkshire Fire and Rescue Service, worked collaboratively to transform the Fire and Rescue's outreach vehicle into a mobile clinic. This vehicle became our flu catch up mobile immunisation clinic and brought immunisations direct to Slough residents. The Immunisation Service Manager led the pilot with a high level of engagement from the Public Health Programme Officer within Slough Borough Council.

Much organisation was done behind the scenes, as well as a huge amount of promotional work, which included engaging with the local press, BBC Radio Berkshire, Berkshire Healthcare, Slough schools, GPs and the East Berkshire CCG. The use of social media (Facebook and Twitter) was integral to publicising this initiative and a flu flyer was created by the Public Health Programme Officer. In addition, the Officer created four flu myth busting pictorials that were circulated widely and fed onto electronic scrolling message boards inside and outside of the outreach vehicle.



### Feedback from families

“Very good approach to child”

“Friendly, chatty nurse.  
Made child very relaxed”

“Because of the location it  
was easy access”

“Friendly and happy”

“Nurse informative and  
supportive. Friendly service”

Fantastically, there was no charge for using the outreach vehicle and volunteer drivers gave their much valued time.

The immunisation service held two catch up clinics in December 2018, both on a Saturday, operating in the morning and afternoon, just before Christmas, with the aim of immunising children that hadn't yet been reached. The clinic included a mixture of bookable appointments and 'walk ins'. The first clinic was held outside a leisure centre and the second outside a superstore, with both locations chosen for their proximity to areas of low vaccination uptake.

As a result of this successful pilot, the immunisation team will continue to use this mobile outreach vehicle for future delivery and promotion of all school aged vaccines across Berkshire. This pilot resulted in an outstanding accomplishment, across a collaborative and enthusiastic team, which received positive feedback from our commissioners (NHSE), public health colleagues, Berkshire Healthcare and, very importantly, the families who attended.

Royal Berkshire Fire and Rescue Service central hub Station Manager Michael Griffiths said “It has been a privilege to work alongside the NHS to deliver this immunisation programme along with delivering fire safety messages to those that visited the outreach vehicle on the day. This collaboration and joint working venture makes for a more effective and efficient service to the public. We are looking forward to further work with the NHS in this area.”

**If you'd like more information, please contact Nicola Smith (Immunisation Service Manager) at [nicola.smith@berkshire.nhs.uk](mailto:nicola.smith@berkshire.nhs.uk).**





## Vaccine hero

## Midwives are vaccine heroes too!

Rebecca Rowe is the lead Specialist Vaccination Midwife working at the Princess Anne Hospital in Southampton (University Hospital Southampton NHS Foundation Trust).

Over the last 18 months she set up a comprehensive vaccination service for pregnant women attending the hospital. Before this time no service existed outside of GP practices in the trust. In January of this year she unexpectedly won the 'UHS Employee of the Month' award for her work in setting up this service.

The new working model launched in 2018 focuses on improved information sharing to women and partners, easier access to vaccination appointments and good communications with GP practices. Women receive timely information, have positive conversations with their community midwives and receive text appointments. This was to ensure that the maternal vaccinations (flu and pertussis) were integrated as part of the routine antenatal care pathway and became the norm within practice. This model has increased optimisation of vaccinations and offers a wide choice and availability for service users and has improved awareness with the midwives and primary care.

Throughout the service development period she worked closely with NHS England, the local CCGs, UHS staff and local radio stations to ensure a successful and inclusive implementation. She has spoken on radio with the intention of increasing awareness; one radio interview was translated into Polish to reach out to a known vulnerable group.

The service development work continues with the team looking to open more clinics across our community hubs to further increase accessibility and extended health promotion as we start to enter the next flu season. She is incredibly proud of how this service has been implemented and is thankful to all of her colleagues for their cooperation and willingness to implement change and to the senior management team for their faith and belief in her capabilities to lead on this service as she saw fit. She will continue to work hard to improve the health and well-being of women and babies through vaccination and encourage others to do the same.

**All the qualities of a vaccine hero.**





Photos courtesy of Martin Samangaya, RN, BSc (Hons), MSc, PGCE, FHEA.  
Senior Lecturer – Nursing Pathway Lead – Manchester NHS Foundation Trust

### Little vaccine heroes check their Redbook!

Brother and sister Tinache and Tarafa are 3 years old. Here they have their Redbooks which show they are up to date with their routine vaccines. They are vaccine heroes and can tell all their friends. The Personal Child Health Record, also known as the PCHR or 'red book', is a national standard health and development record given to parents/carers at a child's birth. Many parents keep their Redbook and are able to check if their older teenagers have had their two doses of MMR.

### Health protection teams are full of vaccine heroes!

Answering the phones is a huge part of health protection. At Colindale the phones are manned 24 hours a day and teams of duty doctors, specialist nurses and programme support staff answer queries, give advice and issue testing kits and post exposure treatments, all day, every day. Kelly Stoker's team are a fantastic example of a regional team tasked with local issues including programme implementation and outbreak response.



**Selfie Time** – Nurses and Practitioners from PHE North East's Health Protection Team take time out to celebrate European Immunisation Week and the launch of Value for Vaccines initiative. Colleagues have taken part in video filming to promote vaccination in the North East and are supporting messaging across social media. The team currently support colleagues in the Screening and Immunisation Team by dealing with immunisation enquiries that come from across Cumbria and the North East.

## How do Vaccine heroes manage an outbreak in a school?

Registered Nurses and admin support staff from the immunisation team in Children and Family Health Surrey (CFHS), along with PHE health protection staff, public health registrars and staff from Surrey County Council visited Thames Ditton Junior School in Surrey in the first week of May to administer an extra 550 (approx.) doses of pertussis vaccination (Repevax) to pupils and staff to help control an outbreak of whooping cough which has affected the school since the beginning of 2019. Oral fluid swab tests were conducted on all children for surveillance and detection of any cases of sub-clinical whooping cough infection.

Well done to the team who worked tirelessly for 2 days, it is that swift efficient, diligent and skilled team work that combines to make our outbreak control so excellent. Real everyday vaccine heroism.



**Back row** Ayesha Hafeez, Amanda Cory, Fiona Burrows, Rebecca Woodhouse, Jo Goff, Jane Bental, Liz Gannon, Malwina Wilmott, Louise Wiggins, Jamie Fagg, Emma Clements, Michelle Camis, Clare Clough, Janine Lock

**Front row** Jo Jensen, Emma Blackmore, Christy Duthie, Jodi Vincent, Dr.Margot Nicholls, Jaime Morgan, Anna Hoad, Dr. Selina Rajan, Jill Dawe, Munira Elmi (Surrey County council)

## Vaccine Heroes – Tayen’s story



We all know that vaccines protect those who are vaccinated, but the fact that they also protect those around them should never be forgotten. Children with chronic conditions that affect their immunity cannot receive some vaccines, leaving them vulnerable to the most serious complications of infection. Here we hear about one little girl’s story.

7 year old Tayen (Tots) has neurofibromatosis type 1 (NF1) she was only 22 months old when she started chemotherapy due to extensive bilateral optic pathway gliomas, a common complication of NF1 present in around 1 in 5 children with NF1 (Sellmer et al., 2018). In Tayen’s case the gliomas also extend through to the back of her brain. Now 7 years old Tayen has endured multiple rounds of chemotherapy but has still gone blind as a result of the tumours which are still growing.

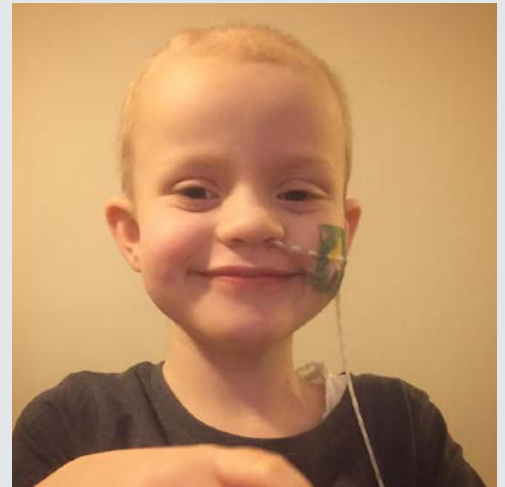
Her mother, Kali said, “We had Tayen immunised as a young baby but once she started treatment to shrink the tumours the chemotherapy wrecked her immunity making her unable to have vaccinations, we managed some boosters between the first and second rounds of chemotherapy but she was unable to have her pre-school immunisations and has not had any for years because she was either having chemotherapy or too poorly, we rely on herd immunity”.

Dr Carly Jim CPsychol, Senior Lecturer at Manchester Metropolitan University (MMU) and trustee of the Childhood Tumour Trust (CTT) charity said, “For vulnerable children, such as some children with Neurofibromatosis type 1 (NF1) who are currently undergoing chemotherapy and other treatments to shrink their tumours herd immunity is vital. Whilst having NF1 does not prevent a majority of children with the condition from being vaccinated. For the ones that are unable to be vaccinated due to complications of their condition, rely on the fact that the other people that they have been in contact with have been vaccinated.

In my opinion unless you have a genuine reason for not being able to have vaccinations then it is extremely irresponsible to not have your child vaccinated, because not only does it affect their potential health it affects others too, the more people without the vaccinations the more chance of infectious diseases spreading and the greater risk for the most vulnerable.

Carly goes on to say “As a parent it can be an emotional experience having a child vaccinated especially if it involves the pain of the injection and the risk of possible side effects, but in reality the risks to most people from being vaccinated are really, really low and compared to the risks of not being vaccinated. So I think that if you are to be vaccinated, then it really is the socially responsible thing to do. These children are already going through a lot they do not need the added risk of contracting a preventable illness simply because not enough people value a community-based herd immunity approach to vaccinations.”

For more information on Tayen you can follow her Facebook page at [weblink 10](#).



## Neurofibromatosis type 1 (NF1)

**Neurofibromatosis type 1 is a genetic condition affecting approximately 1 in 2700 people (Evans et al, 2010).** NF1 is characterised by tumours growing on nerve endings in the body and on the skin. It is a highly variable condition and there are a variety of other complications that may develop as a result of having NF1.

For more information on Neurofibromatosis please take our training module at [weblink 11](#) and view our health sketch at [weblink 12](#).

For more information on the Childhood Tumour Trust charity please visit [weblink 14](#) or follow us on Facebook at [weblink 13](#) and Twitter @ChildhoodTT.

#NFWarrior

#NFAwarenessMonth

#EndNF

#Icansayneurofibromatosis

#IKnowAFighter

#CTT

#BenignIsNotFine

#Neurofibromatosis

## Practice nurses are Vaccine Heroes!

**Paula is a Nurse Prescriber and Debbie is a Practice Nurse in York and they are both vaccine heroes.** They are part of a wider team of nurses at York Medical Group with immunisation as part of their busy workload. For the last 5 years Paula has been the lead Nurse in the Immunisation Strategy Team which aims to improve immunisation uptake. Debbie has recently joined this team. The team encompasses Safeguarding, Immunisation uptake and catch up schedules.

Vaccine  
heroes

Some major improvements have been made recently in order to facilitate a more person/child focussed format. The team hold bi-monthly meetings whereby data and trends are analysed and any safeguarding issues are discussed.



Debbie has been a practice nurse for 15 years, and in that time has been responsible for administering childhood vaccines. She has seen many changes in the childhood schedule. On an average day she sees about 4 children and their parents or guardians as well as delivering teenage and travel immunisation.

A big part of her role is communication and good distraction therapy, as well as play which has been an important role to alleviate any fears especially pre-school children.

Working for a period of time in paediatrics has given her the skills and confidence to carry this out in a safe and competent way.

**References:** Evans D G, Howard E, Giblin C, Clancy T, Spencer H, Huson S M & Lalloo F (2010) Birth incidence and prevalence of tumour-prone syndromes: estimates from a UK family genetic register service. *Am J Med Genet A*: 2010 Feb; 152A (2):327-32. Doi: 10.1002/ajmg.a.33139

Sellmer, L., Farschtschi, S., Marangoni, M., Heren, M.K.S., Birth, P., Wenzel, R., Mautner, V., and Friedman, J. M. (2018) Serial MRIs provide novel insight into natural history of optic pathway gliomas in patients with neurofibromatosis type 1. *Orphanet Journal of Rare Diseases* 201813:62

<https://doi.org/10.1186/s13023-018-0811-9>



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## Vaccine heroes! Derbyshire Community Health Services School Age Immunisation Team

Derbyshire's school age immunisation nursing team has been named national Team of the Year 2017 in prestigious Nursing Times Awards.

The small team of six qualified nurses and six assistants, supported by a coordinator and two administrative assistants has been crucial in keeping school children across Derbyshire protected from illness this year. Team representatives pictured picking up their Nursing Times Team of the Year 2017 Award are: (seen below from left) Amy Sims (clinical team leader), Caroline Laight (immunisation administrative assistant) and Helen North (immunisation nurse).

This included delivering four different vaccinations to 45 senior schools and 235 primary schools over a distance of 1,000 square miles, amounting to over 67,000 protective vaccinations given to 5 – 19 year olds in Derbyshire in the past academic year. The team was established only in September 2015 and to date have delivered many thousands of doses of flu, meningitis, school-leaver booster and HPV vaccinations.



The Nursing Times Awards 2017 – held at Grosvenor House Hotel, London on 2 November – recognised the huge achievement of the immunisation team, employed by Derbyshire Community Health Services NHS Foundation Trust, in delivering such good results in a short time and their fantastic team spirit to get the job done.

Team leader Susie Scales said: “They really deserve this recognition. All the team has worked so hard and it means a lot to receive this award from our own nursing profession. We were up against 11 other exceptional finalist teams from all over the UK which makes this very special indeed.”

They were named Team of the Year in Extra Miles Awards run by Derbyshire Community Health Services NHS Foundation Trust in October 2016.

And making this a hat-trick of awards, team leader Susie Scales and Amy Sims, clinical team leader, were crowned winners of the leadership category of the RCNi Nurse Awards in May 2017.

Now in their 27<sup>th</sup> year, the Nursing Times Awards are among the most respected awards in the nursing and healthcare sector annually.

### **Vaccine hero – Surinder Tamne, a Lead Tuberculosis (TB) Nurse working within PHE’s TB Unit, National Infection Service has been awarded a Cavell Star Award by the Cavell Nurses’ Trust**

The Cavell Star Awards are awarded to nurses, midwives, nursing associates and healthcare assistants across the country for their outstanding work, going above and beyond for their colleagues, their patients or for their patients’ families.



**Vaccine  
hero**

Surinder was nominated by former PHE’s Deputy Chief Nurse, Joanne Bosanquet. As a parting accolade Joanne wanted to recognise Surinder for ‘going above and beyond for her colleagues with her amazing work championing TB nurses.’

Surinder leads on the workforce component of the Collaborative TB Strategy for England 2015-2020 and created a national network of TB nurses, to encourage and support TB nurses and wider workforce leadership and developments. For the last four years she has led the organisation of annual national TB workforce conferences, and more recently she ran two workshop where over 100 TB nurse leaders attended from across the country.

As a recipient of the Cavell Star Award, Tammy said: “I feel honoured to be recognised for the award. There is still so much more to do together to tackling TB in England, I appreciate the dedicated and passionate people within PHE and across the country that I have the privilege to work with, they too, go above and beyond, and I thank them all, as well as Joanne for nominating me and for her professional leadership over the years.

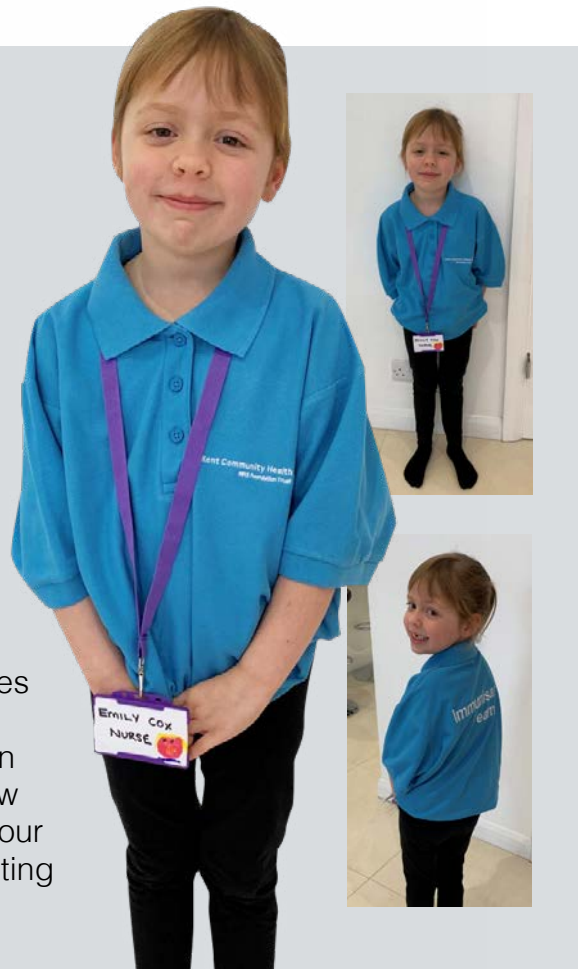
Surinder also encourages more of her fellow nurses to become Nursing Now England Ambassadors; who together are helping to improve the nation’s health by raising the profile and status of nursing.

## Primary school hero day becomes Vaccine hero day!

It was fantastic to see that Kate Cox's daughter whose primary school held a dress as your hero day, decided to be a vaccination team nurse. Emily made a great decision to be a vaccine hero for the day to raise awareness of how important vaccination nurses are, saving lives every day.

Public health advocates come in all shapes and sizes, and Emily's choice was brilliant.

Now her whole class know about the value of vaccines and why vaccine heroes make a difference, every day. Sharing good experiences of vaccination is key in helping other people understand just how easy it is to be part of the herd, having your vaccines and playing your part in protecting the nation's health.



## The Healthcare Worker Flu Vaccination Programme

NHS England and NHS Improvement, working with Public Health England, will support the service to vaccinate its workforce to protect them, their families and their patients from flu. With one of Europe's highest rates, last year saw a record uptake rate among staff of more than 70%.

### Well done to all the Vaccine Heroes having their flu vaccine

Support will be made available to NHS providers, including via the healthcare worker flu vaccination CQUIN, which offers incentives to trusts to prioritise this effort and through local, regional and national teams, to support the innovative and successful methods we have seen in practice across the country. An online resource will be available offering guidance on improving uptake.

In addition, following seven successful years of Flu Fighters, this July a new campaign will be provided to NHS and social care organisations to help them communicate the importance of staff vaccination. PHE and the NHS are creating the campaign which colleagues can pick up and use or adapt locally. The toolkit will include social, video and digital resources as well as some printed items available for pre-ordering. You can register to receive further information from the PHE Campaign Resource Centre and NHS and Social Care Flu leads will also be able to order resources from this platform in July. The link for the CRC is at [weblink 15](#).





**And finally we would like to dedicate this edition to Vaccine hero Laura Brennan** who's commitment to promoting the health benefits of the HPV vaccine to parents in Ireland has played and continues to play a vital role in the uptake of the HPV vaccine for girls!

Laura Brennan was diagnosed with terminal cervical cancer in 2016. Following her diagnosis, she worked tirelessly to help others avoid this devastating disease by telling her story and spreading the facts about HPV and the vaccine that can prevent it. Laura passed away in March 2019 at age 26, but her message lives on. Please watch her video at [weblink 17](#).

## Ensure young people get their MMR and MenACWY vaccines before the festival and holiday season begins

We are heading towards festival and holiday season. There have been recent measles outbreaks in several European countries and cases of measles and of invasive meningococcal disease can arise in young travellers and festival goers. Whilst young people may not attend general practice very often, take any opportunity (eg. sexual health services) to check their vaccination status and remind them of the importance of ensuring they are up to date with their vaccines. Parents of eligible young people can also be reminded of the need for their children to be protected.

Any young person who has not previously had two doses of MMR vaccine should complete the recommended two dose course and anyone eligible for MenACWY vaccine who has missed out (DOB on or after 1/9/1996) can still get vaccinated free of charge through their GP until their 25th birthday. Similarly, anyone who has never had a MenC vaccine can receive MenACWY vaccine up to their 25<sup>th</sup> birthday.

## Continued importance of protecting young babies against pertussis by vaccinating pregnant women

The latest figures on pertussis cases in England were published by PHE on the 26 April at [weblink 26](#). These show that in 2018 England had the lowest number of laboratory confirmed cases in infants under 3 months of age on record. Babies are at most risk of severe and potentially life-threatening complications of pertussis before they can be fully protected by their primary vaccinations. The most effective and safe way to protect these very young babies is by vaccinating women against pertussis at ideally between 20-32 weeks' gestation. This means that their babies have passive immunity from birth through the transfer of maternal antibodies in utero.



We are achieving good uptake of maternal pertussis vaccination ([weblink 29](#) and [weblink 30](#)) thanks to the hard work of maternity services and general practice and this has undoubtedly prevented many hospitalisations and deaths from pertussis. It is notable that high pertussis activity continues in older age groups. It is therefore important to ensure that each pregnant woman has every opportunity to be vaccinated as up to 30% do not currently receive the vaccine.

## **Pertussis vaccination programme for pregnant women update: vaccine coverage in England, October to December 2018**

This report presents pertussis vaccine coverage in pregnant women in England for the period October to December 2018, updating previous data reported for July to September 2018.

Pertussis vaccine coverage increased 70.2% in October 2018 to 72.9% in December 2018. During October to December, prenatal pertussis vaccine coverage by NHS England LT ranged from 57.0% (London, October) to 82.0% (Cumbria and North East, December). Pertussis vaccine coverage in pregnant women averaged 71.7% across the quarter, 1.9 percentage points lower than coverage for the same quarter in 2017. This drop could represent a genuine decrease, or an increase in vaccination in maternity units. Ongoing research suggests that vaccines administered in maternity units are under recorded in GP notes resulting in more women vaccinated but underestimated vaccine coverage.

GPs, practice nurses, obstetricians and midwives should continue to encourage pregnant women to receive the pertussis vaccine, ideally between weeks 20 and 32 of their pregnancy (but up to term) to optimise protection for their babies from birth. Maternity units not offering pertussis vaccines to pregnant women should continue to discuss its importance, making use of available resources and signpost the woman to her GP to receive the vaccine. The full report and associated data tables can be found at [weblink 32](#).

## **Cumulative shingles vaccine coverage report to end of March 2019: England**

This is the third quarterly shingles report of the fiscal year 2018/19 evaluating cumulative shingles vaccine coverage among those aged 70 to 78 years old between 1 April 2018 and 31 December 2018, assessed at the end of March 2019.

Cumulative coverage at the end of March 2019 for cohorts first offered shingles vaccine prior to the fiscal year 2018-19 was highest among 75 year olds (75.7%) and lowest among 76 (46.1%) and 71 (47.4%) year olds.

Cumulative vaccine coverage at the end of March 2019 among adults turning 70 (routine programme) and 78 (catch-up programme) years old during the first three quarters between 1 April 2018 and 31 December 2018 is 31.9% for both cohorts.

Cumulative vaccine coverage estimates for adults that became eligible for the shingles vaccine during quarter 3 (from 1 October 2018 to 31 December 2018) and evaluated at the end of March 2019 was 22.2% for the 70 year old routine cohort and 22.8% for the 78 year old catch-up cohort.

Shingles vaccine coverage estimates for those turning 70 and 78 years old during quarter 3 is lower than coverage achieved by those who turned 70 and 78 after the same eligibility interval during quarter 2 and quarter 1. To date, the highest initial vaccine coverage occurred during quarter 2 for both 70 and 78 year olds. This is most likely due to more adults receiving both the influenza and the shingles vaccine simultaneously during the influenza season (from September to January). Comparing cumulative shingles coverage data for this quarter with estimates from previous years is complex due to the new eligibility criteria and coverage calculation methodology. Additionally, the data collection is now based on the financial year (April to March) rather than from September to August as in all previous shingles coverage publications.

While it is important to ensure that individuals who become eligible for the shingles vaccine have the opportunity to get vaccinated in the year they become eligible, improving coverage among previously eligible cohort is equally important as these individuals remain at risk and are more likely to develop more severe outcomes. It is therefore reassuring to see that these cohorts are still being vaccinated and that coverage among those who became eligible five years ago is high. The full report and associated data tables can be found at [weblink 16](#).

The National Immunisation Network annual conference is on 21-22 May 2019 and this edition will be distributed in the delegate pack.

## Vaccine Supply – centrally supplied

### Vaccine ordering

#### What can ImmForm vaccines be used for?

Vaccines ordered through ImmForm are for delivery of the national immunisation programme. They can also be used for catch-up vaccination of older children and adults to complete their immunisations as part of the routine immunisation programme, including people coming to live in the UK. With the exception of BCG and Mantoux tests (see below), vaccines ordered from ImmForm cannot be used as occupational health vaccines, travel vaccines, or for clinical indications or patient groups not covered by the national routine immunisation programme.

BCG vaccine and Tuberculin Purified Protein Derivative (PPD) 2TU for intradermal (Mantoux) test are available to order privately on ImmForm and require a private customer account number. Other vaccines for private GP practices, occupational health (including occupational health vaccinations in the NHS) or for travel vaccinations, should be purchased directly from the manufacturer or from a vaccine wholesaler, and are not available through ImmForm.

In general, vaccines cannot be ordered through ImmForm for outbreak purposes. It is only permissible to order vaccines for outbreak purposes through ImmForm where this is part of a national catch-up campaign (e.g. MMR vaccine), or if Bexsero (Meningitis B vaccine) is required. Hep A vaccines are exceptionally available for a time-limited period. For more information, please refer to Chapter 3 of the Green Book at [weblink 28](#) and the 'Vaccines available on ImmForm' at [weblink 27](#).

## **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.

## **Tuberculin Purified Protein Derivative (AJ Vaccines)**

The Tuberculin Purified Protein Derivative (Mantoux test; PPD-2TU) that we are currently issuing expires on 31 July 2019. We will be issuing this stock until the end of June 2019. Each pack of PPD-2TU contains a maximum of 100 adult doses, therefore please do not over order for your requirements. 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](mailto:helpdesk@immform.org.uk) or 0844 376 0040.

## **Attention all customers – late May bank holiday deliveries warning notice**

### **Late May Bank Holiday**

Due to the late May bank holiday, there will be no deliveries or order processing by Movianto UK on Monday 27 May 2019. Please see the table below for revised order and delivery dates.

For customers with a standard delivery day of Monday, please be aware that after the 20 May, your next available delivery day will be the 3 June 2019.

Late May Bank Holiday Monday 27 May 2019		
Delivery date	Order cut-off date	Order cut-off time
Monday 20 May 2019	Thursday 16 May 2019	11:55 AM
Tuesday 21 May 2019	Friday 17 May 2019	11:55 AM
Wednesday 22 May 2019	Monday 20 May 2019	11:55 AM
Thursday 23 May 2019	Tuesday 21 May 2019	11:55 AM
Friday 24 May 2019	Wednesday 22 May 2019	11:55 AM
<b>Monday 27 May 2019</b>	<b>Closed – No deliveries</b>	
Tuesday 28 May 2019	Thursday 23 May 2019	11:55 AM
Wednesday 29 May 2019	Friday 24 May 2019	11:55 AM
Thursday 30 May 2019	Tuesday 28 May 2019	11:55 AM
Friday 31 May 2019	Wednesday 29 May 2019	11:55 AM

You are reminded to be prepared for the breaks 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 the holiday period, bearing in mind the recommendation that only two to four weeks of vaccine stock be held at any one time.

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

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

The Falsified Medicine Directive (FMD)<sup>1</sup> and Delegated Regulation requires that prescription only medicines, including vaccines, that entered the supply chain after 9 February 2019 carry safety features including an anti-tampering device (a seal) and a unique identifier (contained in a 2D barcode), and have their product data uploaded onto a central database.

In addition, certain parts of the supply chain are required to perform authenticity checks, and at the end of the supply chain ‘verify’ and ‘decommission’ products before they are supplied or administered to patients. 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 20](#)).

[1] [https://ec.europa.eu/health/sites/health/files/files/eudralex/vol-1/dir\\_2011\\_62/dir\\_2011\\_62\\_en.pdf](https://ec.europa.eu/health/sites/health/files/files/eudralex/vol-1/dir_2011_62/dir_2011_62_en.pdf)

## Information for ImmForm customers

Details of when PHE expect to begin distributing fully FMD-compliant packs is now available on the ImmForm Vaccine Supply News pages ([weblink 21](#)). This will be updated frequently, so please check back regularly for the latest information. Guidance on the responsibilities for FMD and the Delegated Regulation relating to vaccines and other medicines centrally supplied by PHE, is accessible via the ImmForm help guide page at [weblink 22](#).

# 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 and 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 23](#)

#### Paediatric

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

### COMBINED HEPATITIS A & B VACCINE

- **GSK:** Twinrix Adult singles are available
- **GSK:** Twinrix Adult packs of 10 are unavailable. Resupply is expected in May 2019
- **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 supplies of Rabipur are available. GSK is currently experiencing a supply delay due to manufacturing constraints through the first half of 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 23](#) 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:** ZOSTAVAX is currently available

## DIPHTHERIA, TETANUS AND POLIOMYELITIS (inactivated) VACCINE

- **Sanofi Pasteur:** Revaxis is available

## MMR

- **MSD:** MMRvaxPro is 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

### Coming soon: Universal HPV programme and special National childhood flu programme special

There will be a new Vaccine Update index so please look out for your next issues and recommend signing up with Vaccine Update as a great way to keep up to date with whats new in Vaccine policy, programme implementation, promotional publications and guidance. Vaccine Update supports Goal three of the United Nations Sustainability goals which advises everyone to vaccinate their family to protect them and improve public health (see [weblink 19](#)).

[Click here to see more >](#)

SUSTAINABLE  
DEVELOPMENT  GOALS

## Weblinks

- Weblink 1 <https://publichealthengland-immunisati.app.box.com/s/s925doszxi2trakvt118oysm8c154a13>
- Weblink 2 <https://publichealthengland-immunisati.app.box.com/s/qliyea3052vxvsdqjysxlmg160yagj6>
- Weblink 3 <https://publichealthengland-immunisati.app.box.com/s/4fqkz84ws9pnhl84yo7norz42cf1wo2o>
- Weblink 4 [https://twitter.com/PHE\\_NorthWest/status/1121720878553759744?s=20](https://twitter.com/PHE_NorthWest/status/1121720878553759744?s=20)
- Weblink 5 [https://twitter.com/PHE\\_NorthWest/status/1121425033287618560?s=](https://twitter.com/PHE_NorthWest/status/1121425033287618560?s=)
- Weblink 6 [www.vaccinestoday.eu/stories/discussing-vaccination-with-parents-takes-time-but-its-worth-it/](http://www.vaccinestoday.eu/stories/discussing-vaccination-with-parents-takes-time-but-its-worth-it/)
- Weblink 7 [www.meningitisnow.org/support-us/news-centre/news-stories/great-chemistry/](http://www.meningitisnow.org/support-us/news-centre/news-stories/great-chemistry/)
- Weblink 8 [www.meningitisnow.org/support-us/news-centre/news-stories/top-award-meningitis-champion/](http://www.meningitisnow.org/support-us/news-centre/news-stories/top-award-meningitis-champion/)
- Weblink 9 [www.maturetimes.co.uk/its-time-to-roll-your-sleeve-up-and-have-your-flu-jab/](http://www.maturetimes.co.uk/its-time-to-roll-your-sleeve-up-and-have-your-flu-jab/)
- Weblink 10 <https://www.facebook.com/tayensjourney/>
- Weblink 11 <https://www.healthprofessionalacademy.co.uk/mum-and-baby/learn/neurofibromatosis-type-1>
- Weblink 12 <https://www.youtube.com/watch?v=IM7r-U1sKnI>
- Weblink 13 <https://www.facebook.com/childhoodtumourtrust.org.uk/>
- Weblink 14 <https://www.childhoodtumourtrust.org.uk/>
- Weblink 15 <https://campaignresources.phe.gov.uk/resources/campaigns/92-healthcare-workers-flu-immunisation-/overview>
- Weblink 16 <https://www.gov.uk/government/publications/herpes-zoster-shingles-immunisation-programme-2013-to-2014-provisional-vaccine-coverage-data>
- Weblink 17 <https://www.youtube.com/watch?v=iiidJ5FVvcM>
- Weblink 18 <http://www.sciencemediacentre.org/beware-creating-fake-news-on-mmr/>

**Continued overleaf**



## Weblinks (continued)

- Weblink 19 <https://www.un.org/sustainabledevelopment/news/communications-material/>
- Weblink 20 <https://www.gov.uk/government/publications/vaccine-update-issue-293-april-2019>
- Weblink 21 <https://portal.immform.dh.gov.uk/Logon.aspx?returnurl=%2fVaccineSupply%2fVaccineSupply%2fNews.aspx>
- Weblink 22 <https://portal.immform.dh.gov.uk/Help-Guides.aspx>
- Weblink 23 <https://www.msd-uk.com/products/vaccines.xhtml>
- Weblink 24 <https://www.rcn.org.uk/professional-development/publications/007-565>
- Weblink 25 <https://www.rcn.org.uk/professional-development/publications/007-441>
- Weblink 26 <https://www.gov.uk/government/publications/pertussis-laboratory-confirmed-cases-reported-in-england-2018>
- Weblink 27 <https://portal.immform.dh.gov.uk/IntranetPortal/files/78/78f8c75e-e176-41d8-a12f-11f534eb1228.pdf>
- Weblink 28 <https://www.gov.uk/government/publications/storage-distribution-and-disposal-of-vaccines-the-green-book-chapter-3>
- Weblink 29 <https://www.gov.uk/government/publications/pertussis-immunisation-in-pregnancy-vaccine-coverage-estimates-in-england-october-2013-to-march-2014>
- Weblink 30 <https://www.gov.uk/government/publications/pertussis-immunisation-in-pregnancy-vaccine-coverage-estimates-in-england-october-2013-to-march-2014#history>



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