### CYLCHLYTHYR IECHYD CYMRU



Dyddiad Cyhoeddi: 12 Tachwedd 2018

Dyddiad dod i ben / Adolygu Amherthnasol

**STATWS: CAM GWEITHREDU** 

**CATEGORI: IECHYD Y CYHOEDD** 

**Teitl:** Manyleb Gwasanaeth Cenedlaethol Ychwanegol ar gyfer brechu oedolion a phlant mewn perygl, y tu allan i'r rhaglen imiwneiddio arferol.

perygr, y ta anarri magien miwileladio aneron.	

### I'w weithredu gan:

Meddygon Teulu

### Er gwybodaeth i:

Prif Weithredwyr, Byrddau Iechyd Lleol Cyfarwyddwyr Meddygol, Byrddau Iechyd Cyfarwyddwyr Gweithredol Nyrsio, Byrddau Iechyd

Cyfarwyddwyr Iechyd y Cyhoedd, Byrddau lechyd

Arweinwyr ym maes Imiwneiddio, Byrddau lechyd

Prif Weithredwr, Iechyd Cyhoeddus Cymru Pennaeth Rhaglen Frechu yn erbyn Clefydau Ataliadwy, Iechyd Cyhoeddus Cymru

### Anfonwyd gan:

Prif Swyddog Meddygol Cymru

### Enw(au) Cyswllt yn Adran lechyd a Gwasanaethau Cymdeithasol Llywodraeth Cymru:

Gwasanaethau Diogelu Iechyd, Adran Iechyd y Cyhoedd, Llywodraeth Cymru, Parc Cathays, Caerdydd. CF10 3NQ E-bost: HealthProtection@llyw.cymru

Annwyl Gydweithwyr,

Atodaf Fanyleb Gwasanaeth Cenedlaethol Ychwanegol ar gyfer brechu oedolion a phlant mewn perygl, y tu allan i'r rhaglen imiwneiddio arferol.

Cytunwyd ar y fanyleb rhwng Llywodraeth Cymru a Phwyllgor Meddygon Teulu (Cymru) Cymdeithas Feddygol Prydain, ac mae wedi'i hanelu at feddygfeydd teulu sy'n darparu gwasanaethau brechu ac imiwneiddio yng Nghymru.

Mae'r fanyleb hon yn rhoi manylion y trefniadau ar gyfer brechu oedolion a phlant, sydd mewn perygl lefel uwch rhag dal clefydau, y tu allan i'r rhaglen imiwneiddio genedlaethol arferol. Mae'r brechiadau y mae eu hangen ar unigolion mewn perygl yn dibynnu ar lefel y perygl i'r unigolyn neu ei ddiagnosis.

Bydd y trefniadau yn berthnasol i'r rhaglenni imiwneiddio cenedlaethol a nodir yn Atodiad B.

Rwy'n ddiolchgar iawn am eich cefnogaeth barhaus i weithredu'r rhaglenni hyn er mwyn cynyddu nifer y rhai sy'n cael brechiadau pwysig.

Yn gywir,

**Dr Frank Atherton** 

Y Prif Swyddog Meddygol / Cyfarwyddwr Meddygol GIG Cymru

# NON-ROUTINE IMMUNISATIONS FOR ADULTS AND CHILDREN AT RISK Service Specification

## National Enhanced Service Specification For Non-routine Vaccination Of Adults and Children at Risk

### Introduction

- 1. This specification is directed at GP practices delivering vaccination and immunisation services in Wales.
- 2. This specification has been agreed between the Welsh Government and General Practitioners Committee (Wales) (GPC (W)) of the British Medical Association (BMA). The service requirements are included at Annex A and the vaccines listed in Annex B.

### Background

- 3. The Joint Committee on Vaccination and Immunisation (JCVI) recommends a number of vaccinations for adults and children at increased risk of disease outside of the routine national immunisation programme. The vaccines required by at risk individuals are dependent on their elevated personal risk or diagnosis. In Wales, these vaccines are delivered through primary care and secondary care.
- 4. This specification details the process for the non-routine vaccination of adults and children at risk. Health professionals will be guided by the Green Book, "Immunisation against infectious disease" on the vaccines required. Annex B lists vaccines and indications covered by this specification.
- This service specification does not apply to vaccinations required for travel or for occupational purposes.

### Patient cohort

- 6. Only the vaccinations listed at Annex B are covered by this specification. Clinical risk indications for these vaccines in future updated editions of the Green Book chapters will apply if different to those in Annex B.
- 7. Children and adults at risk and requiring immunisation as directed in Annex B may be identified by the practice, referred to general practice by secondary

care for vaccination or may self present as directed by the local health protection team in outbreak situations.

### **Vaccines**

8. Information on the vaccines and indications, and the documents providing the required clinical information is at Annex B. The vaccines should be ordered in the same way as practices and health board pharmacies currently order adult and childhood vaccines, depending on whether the vaccine is supplied centrally or not.

### Recording in the Patient Record

- 9. A practice is required under its General Medical Services contract to keep adequate records of its attendance on and treatment of its patients. In addition, to include in the patient record any clinical reports sent from any other health care professional who has provided clinical services to a person on its list of patients.
- 10. If a practice has therefore administered a vaccine listed at Annex B to a child or adult in an eligible at risk cohort then the practice is required to include this information in the patient record using the appropriate READ or SNOMED code.

### Payment and validation

- 11. A practice will receive an item of service (IOS) payment at the current applicable rate per dose in respect of each child and adult in an eligible at risk cohort who is vaccinated. When the vaccine has been purchased by the practice the cost of the vaccine will be reimbursed by the health board.
- 12. A practice will only be eligible for payment for this service in circumstances where all of the following requirements have been met:
  - a. The practice is contracted to provide vaccines and immunisations as part of Additional Services.
  - b. All patients for whom payments are being claimed were on the practice's registered list at the time the vaccine was administered.
  - c. The practice administered the vaccine to all patients for whom payment is being claimed.
  - d. All patients for whom payment is being claimed were in an eligible at risk cohort.

- e. Practices providing this service will be required to forward a completed 'unscheduled vaccination' form to the health board Child Health System or provide equivalent data in an alternative agreed format, for each child immunised in an at risk cohort (up to and including 18 years of age). For adults, practices should follow procedures agreed with the health board.
- f. The practice submits the claim within six months of administering the vaccine (health boards may set aside this requirement if it considers it reasonable to do so). Practices will only be paid vaccines given as recommended in the Green Book.
- 13. Health boards are responsible for post payment verification. This may include auditing claims of practices to ensure that they meet the requirements of this service.

### Service Requirements For Non-routine Vaccination Of Adults and Children at Risk

- 1. A practice providing this service will vaccinate, with the appropriate dosage, all patients who present to the practice and who are in an eligible cohort. There is no requirement to actively call patients in the age ranges set out in Annex B for vaccination, though practices may do so if they wish. Vaccination of individuals at increased risk of disease in line with Green Book recommendations represents good clinical practice.
- 2. The practice will take all reasonable steps to ensure that the medical records of patients receiving a vaccination administered in the surgery are kept up to date using the appropriate READ code with regard to the immunisation status and in particular includes:
  - a. Any refusal of an offer of immunisation.
  - b. Where an offer of immunisation is accepted:
    - i. The batch number, expiry date and name of the vaccine.
    - ii. The date of administration.
    - iii. Where other vaccines are administered in close succession, the route of administration and the injection site of each vaccine.
    - iv. Any contra-indication to the immunisation.
    - v. Any adverse reactions to the immunisation.
- 3. The practice will ensure that all healthcare professionals who are involved in administering the vaccine have:
  - a. Referred to the clinical guidance in the current 'Green Book'.
  - b. The necessary experience, skills and training, including training with regard to the recognition and initial treatment of anaphylaxis.

- c. Authorisation under an appropriate Patient Group Direction (PGD) unless a Patient Specific Direction (PSD) has been issued.
- 4. All vaccines are to be stored in accordance with the manufacturer's instructions and guidance contained in the Green Book. This may be found at:
  - https://www.gov.uk/government/publications/green-book-the-complete-current-edition
- 5. Timeliness of the return of data to the child health department should be in line with the Child Health Immunisation Process Standards (CHIPS).
- 6. The practice will ensure that services are accessible, appropriate and sensitive to the need of all patients. No eligible patient shall be excluded or experience particular difficulty in accessing and effectively using this service due to their ethnicity, gender, disability, sexual orientation, religion and/or age.

### Annex B

### **Programme Information**

Some of the vaccines listed below are offered as part of routine programmes. Only additional vaccines provided outside of the routine schedule are eligible for reimbursement under this specification.

Haemophilus influenzae type b (Hib)	Children and adults with:
	early complement deficiency  https://www.gov.uk/government/publications/haemophilus-influenzae-type-hib-the-green-book-chapter-16
Hepatitis A	The vaccine is recommended for the following individuals:      contacts of a confirmed case of hepatitis A as advised by health protection team     patients with chronic liver disease     patients with haemophilia     men who have sex with men     injecting drug users  https://www.gov.uk/government/publications/hepatitis-a-the-green-book-chapter-17
Hepatitis B	Pre-exposure vaccination. The vaccine is recommended for the following individuals:  people who inject drugs (PWID) and those likely to progress to injecting. sexual, family and close household contacts of PWID individuals who change sexual partners frequently and MSM sexual, family and close household contacts of a case/individual with chronic hepatitis B infection families adopting children from countries with a high/intermediate prevalence of hepatitis B foster carers individuals receiving regular blood/blood products and their carers patients with chronic renal failure (as soon as anticipated will require dialysis or transplant) patients with chronic liver disease inmates of custodial institutions individuals in residential accommodation for those

	with learning difficulties, or other non-residential care settings for those with severe learning disability on the basis of a local risk assessment.
	Post-exposure vaccination. The vaccine is recommended for the following individuals:
	<ul> <li>Babies born to mothers who are chronically infected with HBV or to mothers who have had acute hepatitis B during pregnancy</li> <li>Individuals potentially exposed to hepatitis B through sexual contact or accidental inoculation or contamination</li> </ul>
	https://www.gov.uk/government/publications/hepatitis-b-the-green-book-chapter-18
Measles, Mumps & Rubella (MMR)	MMR vaccine should be offered to all women who are planning to become pregnant and who have not had two doses of MMR (pregnancy should be avoided for 1 month after MMR vaccination).
	MMR vaccine may also be offered to susceptible women after pregnancy.
	Others who may require MMR are covered by the National Enhanced Specification: "Unscheduled vaccination of children and young people who have outstanding routine immunisations".
	https://www.gov.uk/government/publications/measles-the-green-book-chapter-21
Meningococcal vaccines	These vaccines are recommended for children and adults with:  • asplenia,  • splenic dysfunction or  • complement disorders (including those on complement inhibitor treatment)
	Re-immunisation of individuals with immunosuppression and human immunodeficiency virus (HIV) infection (regardless of CD4 count) should be considered after treatment and recovery.  https://www.gov.uk/gov.org.mont/publications/moningeessel
	https://www.gov.uk/government/publications/meningococcal- the-green-book-chapter-22
Pneumococcal vaccine	Vaccination is recommended for individuals with:
	<ul> <li>Asplenia or splenic dysfunction or those requiring splenectomy</li> <li>cochlear implants</li> <li>CSF leaks</li> </ul>
	chronic heart disease

	<ul> <li>chronic liver disease</li> <li>chronic renal disease</li> <li>diabetes</li> <li>immunosuppression due to disease or treatment</li> <li>neurological conditions</li> <li><a href="https://www.gov.uk/government/publications/pneumococcal-the-green-book-chapter-25">https://www.gov.uk/government/publications/pneumococcal-the-green-book-chapter-25</a></li> </ul>
Rabies vaccine	Vaccination is recommended for pre and post exposure prophylaxis where not related to occupation or travel. Volunteers who regularly handle bats are eligible. <a href="https://www.gov.uk/government/publications/rabies-the-green-book-chapter-27">https://www.gov.uk/government/publications/rabies-the-green-book-chapter-27</a>
Varicella vaccine	The vaccine is recommended for healthy susceptible contacts of immunocompromised patients where continuing close contact is unavoidable (e.g. siblings of a leukaemic child, or a child whose parent is undergoing chemotherapy)  If advised by the local Health Protection Team varicella vaccine can be provided to nursery children and staff where Group A streptococcus and chickenpox is co-circulating. <a href="https://www.gov.uk/government/publications/varicella-the-green-book-chapter-34">https://www.gov.uk/government/publications/varicella-the-green-book-chapter-34</a>
Shingles (herpes zoster) vaccine	Individuals anticipating immunosuppressive therapy should be assessed for vaccine eligibility before starting treatment that may contra-indicate future vaccination and vaccinated at least 2 weeks before commencing therapy.
Primary and booster vaccination of older children and adults	The following groups may require primary or booster immunisation with routinely scheduled vaccines:  • patients following transplants • patients following chemotherapy • adults who have not completed the UK primary immunisation schedule e.g. asylum seekers and refugees

### Notes:

- 1. Annex B last updated on 1 November 2018.
- 2. This table contains contractual guidance for this service specification. For clinical guidance see the appropriate chapter in the Green Book.
- 3. GPs are already funded for Td/IPV vaccination of those 25 years and over as part of Additional Services for Vaccinations and Immunisations within the Global Sum.