

Vaccine Update

Issue 331 · August 2022



Following the detection of poliovirus type 2 (PV2) in London sewage the UKHSA has declared a national enhanced polio incident response and the Joint Committee on Vaccination and Immunisation (JCVI) have advised that an urgent supplemental polio vaccination strategy is now required to respond to this public health emergency.

The JCVI advise that, as well as the ongoing catch-up offer, a supplementary Inactivated Polio Vaccine (IPV) campaign should be implemented for children aged 1 to 9 years in London, including those with a complete course of polio vaccination.

This means all children aged 1 to 9 years in London will now be offered a dose of IPV-containing vaccine irrespective of vaccination status to prevent cases of paralysis due to poliovirus and to interrupt transmission of Vaccine Derived Polio Virus type 2 (VDPV2) in the community.

To support uptake, a focused campaign will start now in the London boroughs where VDPV2 has been detected to date. This includes Barnet, Brent, Camden, Enfield, Hackney, Haringey, Islington and Waltham Forest as a priority, with a view to rapidly extending to all London boroughs.

See the polio vaccination campaign letter. Polio vaccination campaign letter (weblink 42)

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Checking for polio vaccination in your child's personal child health record (PCHR) or Red book

Since 2004, all polio vaccines have been given as combined products, so you may not see the word polio in the record. The vaccinations can be labelled as any of the following:

Age	Vaccine	My personal child health record
Babies	Primary course of polio vaccine consists of 3 doses given at 8, 12 and 16 weeks of age:	
	6-in-1 DTaP/IPV/Hib/HepB [used since September 2017]	
	or	
	5-in-1 DTaP/IPV/Hib [used prior to September 2017]	
	Pre-school booster at 3 years and 4 months:	
Toddlers	4-in-1 DTaP/IPV	
Teenagers	Teenage booster given in school year 9 or 10, at around 14 ye 3-in-1 Td/IPV	ars of age:

If you were vaccinated before 2004, you will have received the oral polio vaccine (OPV) which was given as drops in the mouth, rather than an injection.

Guidance for health professionals delivering the extra dose polio campaign in London

Health professional guidance

This document (weblink 1) about the IPV booster campaign is intended for healthcare staff involved in delivering the programme and includes information on:

- background and rationale
- oiloq
- vaccine recommendations
- vaccine administration queries

Algorithm for healthcare professionals delivering the polio booster campaign

This A4 poster can be downloaded and locally printed and is an aid to determining the age and schedule that each child should receive.

IPV booster campaign algorithm poster (weblink 43)



Vaccine ordering for polio booster programme in London

Vaccines for the polio booster programme in London are available to order alongside your usual orders for the routine programme. Please ensure you follow the guidance at weblink 34 in relation to the vaccines appropriate for each age cohort within the booster programme. There are no restrictions on the volumes you can order (outside of usual controls) but please order responsibly and ensure you have sufficient storage space at 2 to 8°C before ordering.

Three different vaccines are available as follows:

Age of eligible child	Vaccine
1 year to less than 3 years 4 months	Infanrix hexa or Vaxelis (DTaP/IPV/Hib/HepB)
3 years and 4 months up to and including 5 years of age	Boostrix-IPV (dTaP/IPV)
6 years to 9 years of age	Revaxis (Td/IPV)

IPV booster campaign and vaccine type to be offered

All IPV-containing vaccines have the same polio content (virus type and amount of antigen) and will provide an excellent boost across the whole age range. Based on existing approvals and to allow an immediate response to be implemented, 3 different products are recommended for the booster campaign as follows:

- children aged 1 year to less than 3 years 4 months are offered the hexavalent (DTaP/IPV/ Hib/HepB) vaccine (both Infanrix hexa and Vaxelis to be used)
- children aged 3 years 4 months up to and including 5 year olds are offered Boostrix-IPV (dTaP/IPV)
- children aged 6 to 9 years are offered Revaxis (Td/IPV)

Polio vaccine is part of the NHS routine childhood vaccination schedule.

Complete routine immunisation schedule (weblink 2):

It's given to babies and children when they are:

- 8, 12 and 16 weeks old as part of the **6-in-1 vaccine** (DTaP/IPV/Hib/HepB)
- 3 years and 4 months old as part of the 4-in-1 **pre-school booster** (DTaP/IPV)
- 14 years old as part of the 3-in-1 **teenage booster** (Td/IPV)



Individuals need to have all of these vaccinations to be fully vaccinated against polio.





If any of your patients have missed out for any reason, they can have polio vaccination for free on the NHS at any age.

Individuals should get vaccinated even if they've had polio before as the vaccine protects against different types of polio. Every effort should be made to identify any individuals who are not fully vaccinated and to encourage them to come forward to be brought up to date with polio vaccinations as well as routine vaccinations including MMR etc.

For non-London residents the algorithm for uncertain or incomplete immunisation status (weblink 3) should be used to bring any infant, child or adult up to date with their routine immunisations.

Patient Group Directions (PGDs)

- diphtheria, tetanus, acellular pertussis, inactivated poliomyelitis, Haemophilus influenzae type b and hepatitis B vaccine, hexavalent vaccine (DTaP/IPV/Hib/HepB) PGD version 04.00 gateway number GOV-12873, valid from 25 July 2022 (weblink 4)
- diphtheria, tetanus, acellular pertussis and inactivated poliomyelitis vaccine (dTaP/IPV) PGD version 04.00 gateway number GOV-10216, valid from 1 December 2021 (weblink 5)
- low-dose diphtheria, tetanus and inactivated poliomyelitis vaccine (Td/IPV) PGD version 05.00 gateway number GOV-12925, valid from 5 August 2022 (weblink 6)

Patient facing resources

Please place orders now for the English version of the leaflet below.

Polio vaccination leaflet for parents and carers of children in London aged 1 to 9 years of age (weblink 7).

Copies available to order in Albanian, Arabic, Bengali, Bulgarian, Chinese, Chinese (simplified), Estonian, Hindi, Gujarati, Italian, Latvian, Lithuanian, Polish, Panjabi, Pashto, Russian, Spanish, Somali, Turkish, Tigrinya, Ukrainian, Urdu, Yoruba and Yiddish. It is also available as a braille, BSL and large print copy.

Copies of these polio leaflets and the core polio and routine immunisation programme leaflets for parents listed below are available free to order from the Health Publications order line call 0300 123 1002 or visit Health Publications website. Please register as an NHS vaccination provider and you can place orders for 500 to 1,000 copies of all the leaflets, stickers etc.

- 1. Primary course immunisations at one year of age product code 2022QG1EN (weblink 8).
- 2. Pre-school vaccinations: guide to vaccinations from 2 to 5 years product code 3197560P (weblink 9).
- 3. Teenage booster immunisations for young people product code 2902598B (weblink 10).

Useful links

NHS webpages:

- Polio (weblink 11)
- NHS vaccinations and when to have them (weblink 12)
- 6-in-1 vaccine (weblink 13)
- 4-in-1 pre-school booster (weblink 14)
- 3-in-1 teenage booster (weblink 15)
- complete routine immunisation schedule (weblink 16)
- vaccination of individuals with uncertain or incomplete immunisation status (weblink 3)
- migrant health guide immunisation section (weblink 17)
- immunisation information for migrants (weblink 18)
- UK and international immunisation schedules comparison tool (weblink 19)

Expansion of the enhanced surveillance of childhood cases of hepatitis B and C in England

To monitor the impact of the universal vaccination programme introduced in 2017 for hepatitis B, UKHSA has been monitoring cases of hepatitis B in children through laboratory notifications and GP surveys. This system is being expanded as part of a collaboration with specialist clinicians in the Hepatitis Infection Paediatric Surveillance Network (HIPSNet). The expansion involves increasing the age of case identification from 10 to 16, adding an annual questionnaire to be completed by specialist clinicians until the child turns 18, and the inclusion of paediatric cases of hepatitis C. This expansion is to ensure children diagnosed with hepatitis B and C are referred to specialist care, to monitor and review outcomes of treatment and care, establish quality-of-care indicators, and to feedback to clinicians to inform best practice and improve care pathways.

UKHSA are asking clinicians to notify them of any paediatric hepatitis B and C cases in their care across England using this form. Upon notification paediatricians and clinics will then be asked to complete a baseline survey and subsequently a short follow up form annually until the child turns 18. More information of this surveillance can be found at weblink 20.

Keeping students safe

All university and other further education students should make sure they are up to date with all their vaccines, including MenACWY vaccine (that protects against 4 types of invasive meningococcal disease (IMD) that cause meningitis and septicaemia), 2 doses of MMR (protecting against measles, mumps, rubella), HPV vaccine (protecting against cervical and other cancers caused by the human papilloma virus (HPV) together with genital warts) alongside their recommended COVID-19 vaccines.

Students or parents who are unsure may wish to check with their GP practice that they are up to date before starting at their university/college. Ideally, students should have any vaccines they need before leaving for university or college. If that's not possible, they should arrange to have any missed vaccines as soon as possible with their new GP practice once they arrive at university/college.

MenACWY vaccine gives high protection against 4 common types of IMD (MenA, MenC, MenW and MenY) but won't protect against others, like MenB. Measures introduced to control the COVID-19 pandemic from March 2020 led to an historically low level of IMD in the 2020 to 2021 academic year.





With the easing of social restrictions from July 2021, IMD cases rose in the 2021 to 2022 academic year but remained at low levels, with MenB cases accounting for most (88%) disease. This increase was particularly notable in young people of university age (19 to 22 years). So, it is important that young people know the signs and symptoms of meningitis and septicaemia, how to get medical help if they need it and how to look out for their own health and the health of others. Therefore, we are highlighting these messages and providing resources to raise awareness in universities and other Higher Education Institutions and amongst new students and their parents by working with leading meningitis charities and university and student organisations.

	Product code	Digital only	Link to order of download
MenACWY and MMR university social media cards	2020328	Yes	weblink 35
Save a life – MenACWY and signs/symptoms university sticker	MENBST1		weblink 36
MenACWY back to university toolkit and social video		Yes	weblink 37
MenACWY save a life pull up banner artwork	MENBST3	Yes	weblink 38
MenACWY save a life – landscape and portrait posters – university version	MENBST4	Yes	weblink 39
MenACWY save a life – landscape and portrait posters – college version	MENBST5	Yes	weblink 40
MenACWY save a life animation video and banners	MENST6	Yes	weblink 41

Prioritisation of varicella vaccine during supply shortage (August 2022)

In the UK varicella vaccination is not routinely offered as part of the UK childhood schedule and is therefore not available through ImmForm but is recommended for specific groups as a selective pre-exposure vaccination strategy. This includes:

- close susceptible contacts of immunocompromised individuals
- non-immune healthcare workers who have regular patient contact and susceptible laboratory workers in virology laboratories at risk of exposure to varicella virus

Since varicella infection is so common in childhood, 90% of adults raised in the UK are immune. Varicella is seasonal with annual incidence peaking in spring months between March to May. Specific groups are at higher risk of complications from varicella. This includes immunocompromised individuals, neonates and pregnant women. The current UK selective programme aims to protect those at highest risk of severe disease from exposure. In addition to the recommended uses above, vaccination has also been used in outbreak settings and offered through the private market for susceptible individuals including children.

In light of the current supply shortages of varicella vaccines, the UKHSA recommends prioritising available stock for those at greatest risk from severe disease. In the current situation, varicella vaccine should be restricted to the following groups:

- susceptible child household contacts of immunocompromised individuals
- susceptible adult household contacts of immunocompromised individuals
- non-immune healthcare workers working with severely immunosuppressed patients (as defined in the Green book)

Susceptibility to varicella in adults should be confirmed by quantitative antibody testing as defined in the Green Book (<100 mlU/ml).

During the current shortage, vaccination of other healthcare workers and laboratory workers should be deferred.



Information for healthcare practitioner documents

Did you know that when a new vaccine is introduced or a change is made to an existing vaccine programme, UKHSA produce an "Information for Healthcare Practitioner" document to answer the questions around scheduling, administration, inadvertent errors, etc that may arise for vaccinators? These can be found under the "Vaccine programmes" section on the GOV.UK immunisation page.

Recently updated examples include:

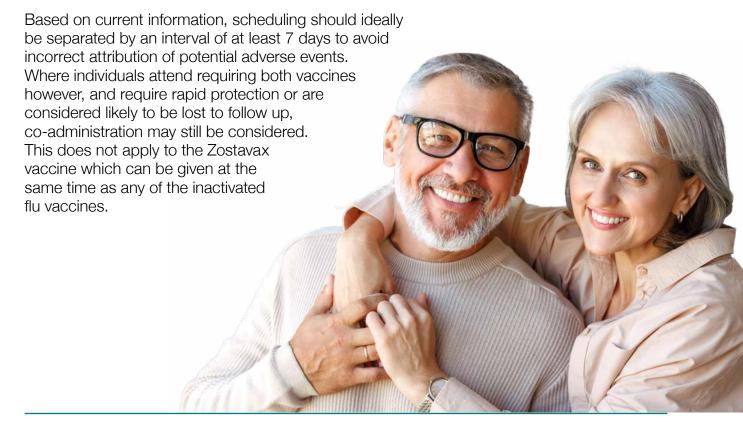
- HPV vaccination guidance for healthcare practitioners (weblink 21)
- Shingles vaccination guidance for healthcare practitioners (weblink 22)
- Hexavalent combination vaccine: information for healthcare practitioners (weblink 23)

So next time you have a question about a vaccine, if it's not covered in the Green Book chapter, we recommend you look in the "Information for Healthcare Practitioner" document (if there is one for that vaccine) and see whether your question has been answered there.

Shingrix and flu vaccine administration

The Shingrix special edition of Vaccine Update published in May 2022 stated that Shingrix can be given concomitantly with inactivated influenza vaccine. This is correct for all inactivated flu vaccines other than the adjuvanted quadrivalent influenza vaccine (aQIV).

The aQIV is offered to people aged from 65 years (or becoming 65 by end of March each flu season) as part of the annual flu vaccination programme. Because of the absence of data on co-administration of Shingrix vaccine with adjuvanted influenza vaccine, it should not be routine to offer appointments to give this vaccine at the same time as the adjuvanted influenza vaccine.



Vaccine supply

Routine vaccination programme

Bank holiday deliveries

Due to the August Bank Holiday, there will be no deliveries or order processing by Movianto UK on Monday 29 August 2022. Please see the table below for revised order and delivery dates.



For customers with standard delivery days of Monday, please be aware that after Monday 22 August 2022, your next available delivery day will be Monday 5 September 2022.

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, bearing in mind the recommendation that only 2 to 4 weeks of vaccine stock be held at any one time.

August Bank Holiday orders and deliveries

August B	August Bank Holiday – Monday 29 August 2022		
Delivery date	Order cut-off date	Order cut-off time	
Monday 22 August 2022	Thursday 18 August 2022	11:55 AM	
Tuesday 23 August 2022	Friday 19 August 2022	11:55 AM	
Wednesday 24 August 2022	Monday 22 August 2022	11:55 AM	
Thursday 25 August 2022	Tuesday 23 August 2022	11:55 AM	
Friday 26 August 2022	Wednesday 24 August 2022	11:55 AM	
Monday 29 August 2022	Closed – no deliveries	s or order processing	
Tuesday 30 August 2022	Thursday 25 August 2022	11:55 AM	
Wednesday 31 August 2022	Friday 26 August 2022	11:55 AM	
Thursday 1 September 2022	Tuesday 30 August 2022	11:55 AM	
Friday 2 September 2022	Wednesday 31 August 2022	11:55 AM	

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

Vaccines for the 2022 to 2023 children's flu programme supplied by UKHSA

As in previous years, all flu vaccines for children are available to order by providers of the children's flu programme in England via UKHSA's ImmForm website.

UKHSA does not supply any flu vaccines for patients aged 18 years and over.

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

Vaccines and availability

The 3 vaccines available, and the groups these vaccines should be ordered for, are shown in the table below. This is correct at the time of publication but remains subject to change.

The latest and most accurate information on availability of centrally supplied vaccines for the children's flu programme is available on the ImmForm news (weblink 24) page at all times. It is strongly advised that all parties involved in the provision of influenza vaccines to children ensure they remain up to date with this.

Vaccine	Manufacturer	Available to order for	Anticipated order opening for all providers
Fluenz® Tetra (LAIV)	AstraZeneca	All children aged 2 to 3 years, those in eligible school age cohorts (weblink 25), and children in clinical risk groups aged 2 to less than 18 years*	Early September
Cell Based Quadrivalent Influenza Vaccine (Surface Antigen, Inactivated) (QIVc)	Seqirus	Eligible** children for whom LAIV is unsuitable	Early – mid September
Quadrivalent Influenza Vaccine (split virion, inactivated) (QIVe)	Sanofi Pasteur	Children in clinical risk groups aged 6 months to less than 2 years	Early – mid September

 $^{^{\}star}$ Unless clinically contraindicated or otherwise unsuitable.

Editing Fluenz® Tetra (LAIV) orders

Due to the anticipated large volume of orders for Fluenz® Tetra in the first few weeks of ordering, orders for this product will be assembled as soon as they are placed and will not be editable. If you need to make an adjustment to your order after it has been placed, please contact **helpdesk@immform.org.uk** for assistance.

^{**} Children in clinical risk groups aged 2 to less than 18 years, healthy children aged 2 to 3 years, and those in eligible school age cohorts.

LAIV ordering information for general practice

As in previous years, ordering controls will be in place for general practices, to enable UKHSA to balance incoming supply with demand. These controls work by allocating an amount of LAIV based on the number of registered eligible patients and are tailored to each practice.

The following availability is expected, however at this time, this information remains subject to change:

- each GP practice will initially be allocated sufficient LAIV to vaccinate up to 45% of their eligible patients (all 2 and 3 year olds, plus children in clinical risk groups from age 4 to less than 18 years) when ordering commences
- amendments to the allocations will be made in response to vaccine availability and demand. The most up to date information will be available on the ImmForm news page, so please check regularly for updates
- requests for extra vaccine will be considered on a case-by-case basis throughout the
 erdering period. Requests should be sent to the helpdesk (helpdesk@immform.org.uk) and
 in good time before your order cut-off. Out of schedule deliveries will be by exception only

Multi-Branch practices and LAIV allocations

Please note that GP practices or groups that operate over multiple sites but are part of the same organisation will have a joint allocation (as in previous years), even where each site has a unique ImmForm account. This means that it is possible for one site to potentially order all of the available vaccine for the group, unless there is local agreement on how the allocated volume is shared. UKHSA recommend that this agreement is in place before ordering opens. The allocation information above allows practices to estimate the amount of vaccine they will initially have access to, and how it should be split between all sites.

LAIV ordering information for school-age providers

A default weekly ordering cap of 400 packs (4,000 doses) per week will be in place for school provider accounts.

Where this cap is insufficient and a provider needs a larger weekly volume of vaccine to deliver the programme (for example where a provider covers a large area using a single account), a higher weekly cap should be requested via the UKHSA Flu Vaccine Operations team by emailing childfluvaccine@ukhsa.gov.uk.

For one-off larger orders during the ordering period, requests should be made via helpdesk@immform.org.uk.

Inactivated flu vaccine ordering

2 inactivated vaccines will also be available for children for the 2022 to 2023 season:

- Quadrivalent Influenza Vaccine (split virion, inactivated) (QIVe) which should only be ordered
 for children in clinical risk groups aged from 6 months to less than 2 years old, with an
 initial order cap of 2 doses per week (supplied in a single dose pack)
- Cell Based Quadrivalent Influenza Vaccine (Surface Antigen, Inactivated) (QIVc), which will be available for:
 - children aged 2 to less than 18 years old in clinical risk groups for whom LAIV is clinically contraindicated or otherwise unsuitable; and
 - healthy children from 2 years of age to those in school year 9, for whom LAIV is unsuitable (for example, due to objection to LAIV on the grounds of its porcine gelatine content). This vaccine will be available in a single dose pack to:
 - GPs, with an initial order cap of 8 doses per week
 - school-age providers, with an order cap of 400 doses per week

For one-off larger orders of inactivated vaccines, requests should be made via helpdesk@immform.org.uk in good time before your order cut-off.

All influenza vaccines for the 2022 to 2023 season

Information on all influenza vaccines that have been marketed in the UK for the 2022 to 2023 season are available at (weblink 26).

Changes to the infant Bacillus Calmette-Guérin (BCG) vaccine programme

BCG vaccination of eligible babies has moved from vaccination soon after birth, to when the child reaches 28 days of age, or earlier than 28 days provided that a SCID result is available. This change applies to babies that were born on or after 1 September 2021 (weblink 27).

BCG vaccine will continue to be available to order via ImmForm. However, please consider the schedule change when placing orders for BCG vaccine, and do not order more than 2 weeks' worth of stock to minimise wastage due to fridge failures.

Each pack of BCG vaccine (from AJ Vaccines) is sufficient for 200 infant (or 100 adult) doses and contains 10 glass vials of powder for reconstitution. Each pack is accompanied by a pack of 10 vials of diluent. One vial of reconstituted vaccine contains 1 ml, corresponding to 20 doses (of 0.05 ml) for infants under 12 months of age, or 10 doses (0.1 ml) for adults and children aged 12 months or over.

While vaccination of eligible children is the priority, please ensure you have effective cold chain and administrative protocols that minimise vaccine wastage and reflect national protocols. The offer of vaccine should not be delayed in order to prevent wastage, but aim to plan ahead to minimise wastage where this is possible.

Changes to the human papillomavirus (HPV) vaccination schedule for eligible adolescents and adults who start the course on or after their 15th birthday

From 1 April 2022, the HPV vaccination schedule for adolescents and adults who start the vaccination course on or after their 15th birthday has changed for most eligible individuals from a 3-dose to a 2-dose course; please see the UKHSA and NHSEI bipartite letter (weblink 28) for details.

HPV vaccine will continue to be available to order through ImmForm. However, please consider the schedule change when placing orders for HPV vaccine, and do not order more than 2 weeks' worth of stock to minimise wastage due to fridge failures.

Gardasil®9 has replaced Gardasil® for the national HPV programmes since July 2022

Since mid July 2022, Gardasil®9 has been the HPV vaccine supplied for both the national HPV adolescent programme and the men who have sex with men (MSM) programme. To minimise wastage, please use all of your locally held stocks of Gardasil® to vaccinate eligible individuals, before switching to Gardasil®9.



As the programmes transition to Gardasil®9, some individuals will receive a mixed schedule. The 2 vaccines are interchangeable and vaccination should not be delayed due to preference for either vaccine.

Please see the Green Book chapter 18a (weblink 29).

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

When you register for or update an existing ImmForm account, UK Health Security Agency 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 helpsheet – how to register (weblink 31).

Movianto UK drivers delivering centrally supplied products are not able to phone delivery points

Please note that Movianto UK drivers delivering centrally supplied products are not able to phone a delivery point upon arrival at the delivery location. Customers are expected to make arrangements ahead of the scheduled delivery day to receive their deliveries.

Availability of Vaxelis® vaccine as an alternative to Infanrix hexa®

Since 31 January 2022, as part of the current vaccination programme, Vaxelis® has been available to order via ImmForm. Vaxelis® is an alternative hexavalent vaccine to Infanrix hexa® (DTaP/IPV/Hib/HepB) for routine infant primary immunisations scheduled at 8, 12 and 16 weeks of age.



Vaxelis protects against the same 6 diseases as Infanrix hexa® and has been licensed in Europe for more than 5 years. Infanrix hexa® will also continue to be available via ImmForm.

Vaxelis® and Infanrix hexa® vaccines are interchangeable, but where possible and if local stock allows, it is preferable that the same DTaP/IPV/Hib/HepB-containing vaccine be used for all 3 doses of the primary course. However, vaccination should never be delayed because the vaccine used for previous doses is not known or unavailable.

The hexavalent vaccine DTaP/IPV/Hib/HepB PGD national template includes use of both Infanrix hexa® and Vaxelis®.

Ordering controls for Vaxelis® will be in place to balance incoming supply with demand. Customers in England and Wales may order up to 10 packs of Vaxelis® per ImmForm account per week. Orders for Infanrix hexa® remain unrestricted. Customers in Scotland should refer to their local ordering restrictions. Providers should not order more than 2 weeks' worth of stock to minimise wastage due to fridge failures.

Further information, including the contact details for Sanofi Pasteur, can be found in the Vaxelis® suspension for injection in pre-filled syringe – Summary of Product Characteristics (SmPC) (weblink 30).

Supply of vaccines with reduced shelf life

Vaccines supplied via ImmForm for the routine immunisation programme will usually have at least 3 months of shelf-life remaining at the time of delivery. To help reduce wastage, vaccines with reduced shelf life will occasionally be supplied. ImmForm customers will be informed of vaccines which have reduced shelf life via ImmForm news articles, updates on the particular ImmForm product page, or a click-thru pop-up message at the time of ordering.

ImmForm customers should order no more than 2 weeks' worth of stock to minimise wastage due to fridge failures or failure to use stock before expiry. See chapter 3 of the 'Green Book' (Immunisation against infectious disease) for further details on the storage and supply of vaccines.

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.

ImmForm customers should report long-term changes to opening hours for deliveries

Customers should report long-term changes to the days when they can accept deliveries, such as routine training days and closures, by contacting Movianto UK Customer Care (MoviantoUK.NHSCC@movianto.com; 01234 587207). This should not be used to report short-term changes due to absence or holidays.

Customers are reminded to be prepared for any break in deliveries due to absences or holidays and to order accordingly. Please make sure you have sufficient room in your fridge for any additional vaccine you wish to stock. Deferred orders can also be placed in advance. 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 UKHSA-supplied vaccines for the national immunisation programme

The EU Falsified Medicines Directive (weblink 32) 2011/62/EU (FMD) and Delegated Regulation ((EU) 2016/161) (weblink 33) (The Delegated Regulation) impose legal obligations on the EU medicines supply chain to prevent entry of falsified medicinal products into the supply chain. The Delegated Regulation was implemented in all EU Member States on 9 February 2019. Following the UK's departure from the EU, the Delegated Regulation ceased to apply in Great Britain from 31 December 2020, but continues to apply in Northern Ireland.

Information for customers in Northern Ireland

FMD-barcoded packs of routine immunisation programme vaccines that are centrally supplied by UKHSA continue to be supplied with active FMD serialisation, and should be decommissioned by end users in Northern Ireland. Customers in Northern Ireland who access centrally supplied vaccines are encouraged to review local guidance on implementation of the EU Falsified Medicines Directive.

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. Customers in Scotland should refer to their local ordering restrictions.

Vaccine supply

Non-routine vaccination programme (updated for August)

HEPATITIS A VACCINE

Adult

- GSK: Havrix Adult PFS singles are limited availability which is expected to resolve by second half of August and packs of 10 are limited availability which is expected to resolve by end of August
- · Sanofi Pasteur: Avaxim PFS singles and packs of 10 are currently available
- MSD: VAQTA Adult is OOS and expected resupply is w/c 15 August 2022

Paediatric

- **GSK:** Havrix Paediatric PFS singles and packs of 10 are limited availability which is expected to resolve by end of August
- MSD: VAQTA Paediatric is OOS, expected resupply is w/c 15 August 2022

HEPATITIS B VACCINE

Adult

- **GSK:** Engerix B PFS singles and packs of 10 are limited availability which is expected to resolve by the second half of August
- GSK: supply of Fendrix is available
- MSD: HBVAXPRO 10 μg is available
- MSD: HBVAXPRO 40 μg is available

Paediatric

- GSK: supplies of Engerix B Paediatric singles is currently 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 unavailable for daily orders for the period between 29 July 2022 to 8 August 2022. Our pre-booked standing orders will still be fulfilled in line with contract agreements. From 8 August 2022, Viatim will be restricted to 20 doses per customer per month until the end of August. Our pre-booked standing orders will be fulfilled in line with contract agreements

TYPHOID VACCINE

- Sanofi Pasteur: Typhim singles are unavailable for daily orders for the period between 17 July 2022 to 12 August 2022. Our pre-booked standing orders are still being fulfilled in line with contract agreements. From 12 August 2022, Typhim singles will be available. Typhim 10 pack are unavailable for daily orders from the period between 27 July 2022 to 8 August 2022. Our pre-booked standing orders are still being fulfilled in line with contract agreements. From 8 August 2022 Typhim 10 packs will be available
- Emergent: Vivotif is available

RABIES VACCINE

- Valneva: Rabipur is currently available
- Sanofi Pasteur: Rabies BP is now a discontinued product and no longer available for sale

PNEUMOCOCCAL POLYSACCHARIDE VACCINE (PPV)

MSD: supply of Pneumovax 23 (PPV23) PFS is available

PNEUMOCOCCAL POLYSACCHARIDE CONJUGATE VACCINE (PCV)

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

VARICELLA ZOSTER VACCINE

- GSK: supply of VARILRIX is limited
- MSD: VARIVAX is limited. Resupply is October 2022
- MSD: ZOSTAVAX is 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 available
- Sanofi Pasteur: Repevax is available

MMR

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

MENINGITIS ACWY VACCINE

GSK: Menveo is currently available

• Pfizer: Nimenrix is currently available

Sanofi Pasteur: MenQuadfi is available

YELLOW FEVER

• Sanofi Pasteur: Stamaril is available

HUMAN PAPILLOMAVIRUS VACCINE

• MSD: GARDASIL has been discontinued (please refer to ImmForm for NIP supply status)

MSD: Gardasil 9 is currently available

· GSK: Cervarix has been discontinued

CHOLERA VACCINE

Valneva: Dukoral is available

JAPANESE ENCEPHALYTIS VACCINE

Valneva: Ixiaro is available

Weblinks

Weblink 1	https://www.gov.uk/government/publications/inactivated-polio-vaccine-ipv-booster-information-for-healthcare-practitioners
Weblink 2	https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule
Weblink 3	https://www.gov.uk/government/publications/vaccination-of-individuals-with-uncertain-or-incomplete-immunisation-status
Weblink 4	https://www.gov.uk/government/publications/hexavalent-vaccine-dtapipvhibhepb-infanrix-hexa-pgd-template
Weblink 5	https://www.gov.uk/government/publications/dtapipv-infanrix-ipv-or-repevax-pgd-template
Weblink 6	https://www.gov.uk/government/publications/diphtheria-tetanus-and-inactivated-poliomyelitis-vaccine-tdipv-revaxis-patient-group-direction-pgd-template
Weblink 7	https://www.gov.uk/government/publications/polio-booster-campaign-resources
Weblink 8	https://www.gov.uk/government/publications/immunisations-between-12-and-13-months-of-age
Weblink 9	https://www.gov.uk/government/publications/pre-school-vaccinations-a-guide-to-vaccinations-from-2-to-5-years
Weblink 10	https://www.healthpublications.gov.uk/ViewArticle.html?sp=Simmunisationsforyoungpeoplemainleaflet
Weblink 11	https://www.nhs.uk/conditions/polio/
Weblink 12	https://www.nhs.uk/conditions/vaccinations/nhs-vaccinations-and-when-to-have-them/
Weblink 13	https://www.nhs.uk/conditions/vaccinations/6-in-1-infant-vaccine/
Weblink 14	https://www.nhs.uk/conditions/vaccinations/4-in-1-pre-school-dtap-ipv-booster/
Weblink 15	https://www.nhs.uk/conditions/vaccinations/3-in-1-teenage-booster/
Weblink 16	https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule
Weblink 17	https://www.gov.uk/guidance/immunisation-migrant-health-guide

Weblinks

Weblink 18	https://www.gov.uk/government/publications/immunisation-information-for-migrants
Weblink 19	https://www.gov.uk/government/publications/uk-and-international-immunisation-schedules-comparison-tool
Weblink 20	https://www.gov.uk/government/publications/enhanced-surveillance-of-childhood-cases-of-hepatitis-b-and-c-in-england
Weblink 21	https://www.gov.uk/government/publications/hpv-universal-vaccination-guidance-for-health-professionals
Weblink 22	https://www.gov.uk/government/publications/shingles-vaccination-guidance-for-healthcare-professionals
Weblink 23	https://www.gov.uk/government/publications/hexavalent-combination-vaccine-programme-guidance
Weblink 24	https://portal.immform.phe.gov.uk/Special-pages/BrowserCompatibility.aspx
Weblink 25	https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan/statement-of-amendments-to-annual-flu-letter-21-july-2022
Weblink 26	https://www.gov.uk/government/publications/influenza-vaccines- marketed-in-the-uk
Weblink 27	https://www.gov.uk/government/publications/bcg-immunisation-programme-changes-from-september-2021-letter
Weblink 28	https://www.gov.uk/government/publications/hpv-immunisation-programme-changes-from-april-2022-letter
Weblink 29	https://www.gov.uk/government/publications/human-papillomavirus-hpv-the-green-book-chapter-18a
Weblink 30	https://www.medicines.org.uk/emc/product/12264/smpc
Weblink 31	https://www.gov.uk/government/publications/how-to-register-immform-helpsheet-8
Weblink 32	https://health.ec.europa.eu/system/files/2016-11/dir_2011_62_en_0.pdf
Weblink 33	https://health.ec.europa.eu/system/files/2016-11/reg_2016_161_en_0.pdf

Weblinks

Weblink 34	https://www.gov.uk/government/publications/inactivated-polio-vaccine-ipv-booster-information-for-healthcare-practitioners
Weblink 35	https://www.healthpublications.gov.uk/ViewArticle.html?sp=Smenacwya ndmmruniversitysocialmediacards
Weblink 36	https://www.healthpublications.gov.uk/ViewArticle.html?sp=Ssavealifemenacwyandsignssymptomsunihallssticker
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Weblink 39	https://www.healthpublications.gov.uk/ViewArticle.html?sp=Smenacwys avealifelandscapeandportraitpostersuniversityversion
Weblink 40	https://www.healthpublications.gov.uk/ViewArticle. html?sp=Smenacwysavealifelandscapeandportraitposterscollegeversion
Weblink 41	https://www.healthpublications.gov.uk/ViewArticle.html?sp=Smenacwys avealifeanimationvideoandbanners
Weblink 42	https://www.gov.uk/government/publications/polio-vaccination-campaign-letter
Weblink 43	https://www.gov.uk/government/publications/inactivated-polio-vaccine-ipv-booster-information-for-healthcare-practitioners