

From Medical & Allied
Dr Lorraine Doherty



Department of
**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÄNNYSTRIE O

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HSS(MD)25/2008

Chief Executives, HSS Boards and Trusts
Directors of Public Health, HSS Boards (*for onward distribution to screening leads and sexual health leads*)
Director of Nursing, HSS Boards
Directors of Pharmaceutical Services, HSS Boards/HSC Trusts/CSA
Directors of Primary Care, Health & Social Services Boards
GP Medical Advisers, HSS Boards
Consultants in Communicable Disease Control, HSS Boards
All Community Pharmacists
Medical Directors, HSC Trusts (*for onward distribution to Consultants in Genito-urinary medicine, Gynaecology and Family Planning*).
Nursing Directors, HSC Trusts (*for onward distribution to all Community Nurses and School Health Staff*)
All General Practitioners (*for onward distribution to practice staff including practice nurses*)
Regional Epidemiologist, CDSC (NI)
Dr P Jackson, Chair, Regional Immunisation Committee
Dr J Mairs, Regional Procurement Pharmacist

Your Ref:

Our Ref: HSS(MD)25/2008

Date: 25 July 2008

Dear Colleague

INTRODUCTION OF HUMAN PAPILLOMAVIRUS VACCINE INTO THE CHILDHOOD IMMUNISATION PROGRAMME: EXTENSION OF THE PROGRAMME

1. I am writing to inform you the national vaccination programme against HPV is being extended to offer protection to an additional cohort of girls aged 17-18 (School Year 14), from September 2008. It is envisaged that these girls will be immunised in primary care settings and work needs to commence to take this forward. This is in addition to the school-based routine vaccination of girls 12-13 years old which also starts this September.
2. This extension was made possible thanks to the considerable savings that were achieved through the negotiation of the vaccine procurement process. The extension of the programme will use the same vaccine - 'Cervarix' - which is produced by pharmaceutical company GlaxoSmithKline. These girls would have been otherwise excluded from the HPV programme, as the school based 'catch up' programme aimed at older girls up to the age of 18 will not commence until September 2009. .

Detailed Guidance on HPV Extension Programme 17-18 Year old girls

HPV extension programme start date and cohort to be immunised

1. The extra year of young women being offered vaccination will be those born between 2 July 1990 and 1 July 1991. This includes girls in school and those who have left school.
2. The table can now be summarised as follows to include the HPV routine programme, catch up programme and extension programme.

	School year 8	School year 9	School year 10	School year 11	School year 12	School year 13	School year 14 17-18 Yr Olds
2008/09							
2009/10							
2010/11							
2011/12							



Routine programme for Year 9 girls (September 2008 onwards)



Catch-up campaign for older girls (September 2009 – June 2011)



Extension programme for 17-18 year old girls (September 2008 – September 2009)
(to include girls in school and those in the age group who have left school)

Delivery, Funding and Service arrangements

3. Boards are asked to put in place a Local Enhanced Service (LES) for the extension of the HPV programme to cover 17-18 year old girls. GP practices are therefore being asked to deliver this extension programme as opposed to school health. It is proposed the LES should run from September 2008 to September 2009. Funding to cover primary care costs for delivery of this programme will be made available from the Department once the number of 17-18 year old girls has been confirmed in each HSC Trust area. Boards are asked to co-ordinate this data **as a matter of urgency**, which should be sent to Lynsey Stewart, Health Protection Branch, C4.14, Castle Buildings, Stormont, BT4 3SQ by 5 August 2008.

The following central costs will be met by the Department:

- Purchase of the Vaccine
- Promotion and support information materials
- Publicity for the programme by the Health Promotion Agency

General Practitioner Arrangements for Ordering & Delivery of Vaccine

Vaccine to be supplied and the immunisation schedule

4. The vaccine to be supplied is Cervarix™ which is manufactured and licensed by GlaxoSmithKline.
 - three doses of vaccine are needed; and
 - a 0, 1, 6 months schedule should be used for planning purposes.

All three doses should be given within a 12-month period. Further information on scheduling is available in the final draft of a new chapter for '*Immunisation against Infectious Disease 2006*' (www.dh.gov.uk/greenbook).

5. Cervarix™ is supplied as a turbid white suspension in a single dose 0.5ml pre-filled syringe with a blue needle (23g x 25mm). The vaccine may appear as a clear colourless supernatant with a fine white deposit after storage. The vaccine should be shaken well before use. A single syringe pack measures 42mm x 24mm x 133mm.
6. The administration of HPV vaccines, their adverse reactions, and their use in pregnancy are explained in detail in the final draft of a new chapter for '*Immunisation against Infectious Disease 2006*' (www.dh.gov.uk/greenbook).
7. The vaccine supplies are only to be used for the immunisation of the 17-18 year old girls as defined in this letter.

Orders for HPV vaccine

8. Stocks of HPV vaccines will be supplied via designated Trust Pharmacy Departments. Trust Pharmacy Departments will be able to order supplies of HPV vaccine via Movianto Ireland. Trust Pharmacy departments should ensure that vaccine is stored appropriately, distributed in the correct expiry date order, and liaise with their GP Practices to ensure that vaccine is only provided for girls in the recommended cohort.

Further information on supply arrangements and stock availability will be issued soon, to Trust Pharmacy Departments, by the Regional Pharmaceutical Procurement Service (Tel; 028 9055 2386).

Vaccine storage

13. Vaccines should be stored in the original packaging at +2°C to +8°C and protected from light. All vaccines may be sensitive to some extent to heat and cold. Freezing may cause increased reactogenicity and loss of potency for some vaccines. It can also cause hairline cracks in the container, leading to contamination of the contents.

Vaccine wastage

14. Effective management of vaccines throughout the supply chain is essential to reduce vaccine wastage. Each 1% of vaccine supplied in the current childhood immunisation programme is worth approximately £2m. This could increase to nearer £3m with the introduction of the HPV vaccine. Even small percentage reductions in vaccine wastage will have a major impact on the financing of vaccine supplies.

Audit

15. At the end of this HPV extension programme, the Department will carry out an audit of the vaccines issued and used. For that reason, and also to ensure equitable provision throughout Northern Ireland, it is important that orders are made in line with anticipated need and that wastage is kept to an absolute minimum.

Communication

16. All information and guidance resources to support the HPV programme are being posted on a dedicated website www.helpprotectyourself.info as they become available.
17. Materials to support the training of health professionals are available, including: the final draft of a new chapter on HPV for '*Immunisation against Infectious Disease 2006*' (at www.dh.gov.uk/greenbook); and a fact sheet and a training slide set for professionals (at www.immunisation.nhs.uk/hpv).

Information pack

18. GPs will receive a separate professional information pack for the HPV extension programme

The information pack will comprise the following items:

- information leaflet for girls and their parents/guardians;
- fact sheet for health professionals;
- new HPV chapter for '*Immunisation against Infectious Disease 2006*' (the Green Book);
- posters to advertise the vaccination programme
- letter from Chief Medical Officer, Chief Pharmaceutical Officer and Chief Nursing Officer.

Information for girls and their parents/guardians

19. The HPV information leaflet for girls and their parents/guardians will be available for the GP practices. Translated versions of the leaflet in a number of languages will be available (in electronic format only) on the DHSSPS and Health Promotion Agency website.

Consent

20. As with all other forms of health care, valid consent must be obtained before the administration of vaccines. Girls over 16 years of age are presumed to be capable of self-consenting unless there are specific reasons otherwise.

21. Health professionals must ensure that for each person who attends an immunisation session, appropriate information and advice about the HPV vaccine is given and that the persons consent is obtained. Individuals coming forward for immunisation should be given a reasonable opportunity to discuss ant concerns before being immunised. The information leaflet is designed to support this process.

Monitoring vaccine uptake

22. Monitoring vaccine uptake will be done through capturing data from the Child Health System. Health Professionals are asked to complete a CHS7 form which will be transferred to the Child Health System. Funding for this will be included in the allocation to Boards. Specific arrangements on monitoring arrangements will be issued by CDSC at a later date.