



UK Health  
Security  
Agency

# Pertussis programme publications

Updated 2 July 2024

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Immunisation and Vaccine-Preventable Diseases Division

# Prenatal pertussis vaccine change bipartite letter

- the [prenatal pertussis vaccine change from July 2024 letter](#) contains information for both commissioners and health professionals who are responsible for the safe delivery of this important NHS vaccination programme to pregnant women

Summary of key changes to the programme:

- from 1 July 2024, the vaccine used in the programme will change to ADACEL® (Tdap). Vaccine ordering will open in June (exact date will be confirmed via an ImmForm news item)
- the ADACEL® (Tdap) vaccine, manufactured by Sanofi, contains tetanus, diphtheria, and pertussis (acellular) antigens and was licensed for UK use in 2016. The [ADACEL suspension for injection in pre-filled syringe, Summary of Product Characteristics \(SPC\)](#) is available
- the JCVI recognised the importance of vaccinating pregnant women to protect their babies from pertussis and the advice is clear that dTaP/IPV vaccine should still be given if ADACEL® (Tdap) is not available to avoid delays in administration

# Pertussis: collection

- the [immunisation collection](#) has links to pertussis publications, as well as training and e-learning resources
- [chapter 24](#) of the green book has immunisation information for public health professionals, including updates

## Pertussis (whooping cough)

### [Whooping cough vaccination programme for pregnant women: extension to 2014](#)

27 June 2014 Guidance

### [Vaccination against pertussis \(whooping cough\) for pregnant women](#)

28 June 2024 Guidance

### [Whooping cough: vaccination in pregnancy programme resources](#)

26 June 2024 Promotional material

### [Pertussis: guidelines for public health management](#)

14 June 2024 Guidance

## Training resources

### E-learning immunisation resources

- an [interactive immunisation e-learning course](#), written in line with the [national minimum training standards](#) and consisting of 7 knowledge sessions with accompanying assessments, is available for all healthcare practitioners with a role in immunisation - [registration](#) is free of charge
- [immunology for immunisers animation](#)

### Immunisation of pregnant woman

The immunisation of pregnant woman and neonates slidesets have been developed to support the delivery of immunisation training to health care workers providing or advising on immunisation of pregnant women:

- [background, history and attitudes towards maternal vaccination](#)
- [influenza, COVID-19 and pertussis vaccines](#)
- [selective vaccination programmes for neonates](#)
- [pre- and post-natal viral rash illness inadvertent vaccination](#)
- [governance considerations, challenges to achieving high vaccine coverage, horizon scanning and resources](#)

Chapter 24: Pertussis

26 June 2024

# 24

## Pertussis

NOTIFIABLE

### The disease

Whooping cough (pertussis) is a highly infectious disease that is usually caused by *Bordetella pertussis*. A similar illness is caused by *B. parapertussis*, but this is not preventable with currently available vaccines.

The disease starts with an initial catarrhal stage, followed by an irritating cough that gradually becomes paroxysmal, usually within one to two weeks. The paroxysms are often followed by a characteristic 'whoop' or by vomiting. In young infants, the typical 'whoop' may never develop and coughing spasms may be followed by periods of apnoea. The illness often lasts for two to three months. In older children and adults, the disease may present as a persistent cough without these classic symptoms and therefore not be recognised as whooping cough.

Pertussis may be complicated by bronchopneumonia, repeated vomiting leading to weight loss, and cerebral hypoxia with a resulting risk of brain damage. Severe complications and deaths occur most commonly in unvaccinated infants under six months of age. Minor complications include subconjunctival haemorrhages, epistaxis (nosebleeds), facial oedema, ulceration of the tongue or surrounding area, and suppurative otitis media.

Transmission of the infection is by respiratory droplet, and cases are most infectious during the early catarrhal phase. The incubation period is between six and 20 days and cases are infectious from six days after exposure to three weeks after the onset of typical paroxysms.

### History and epidemiology of the disease

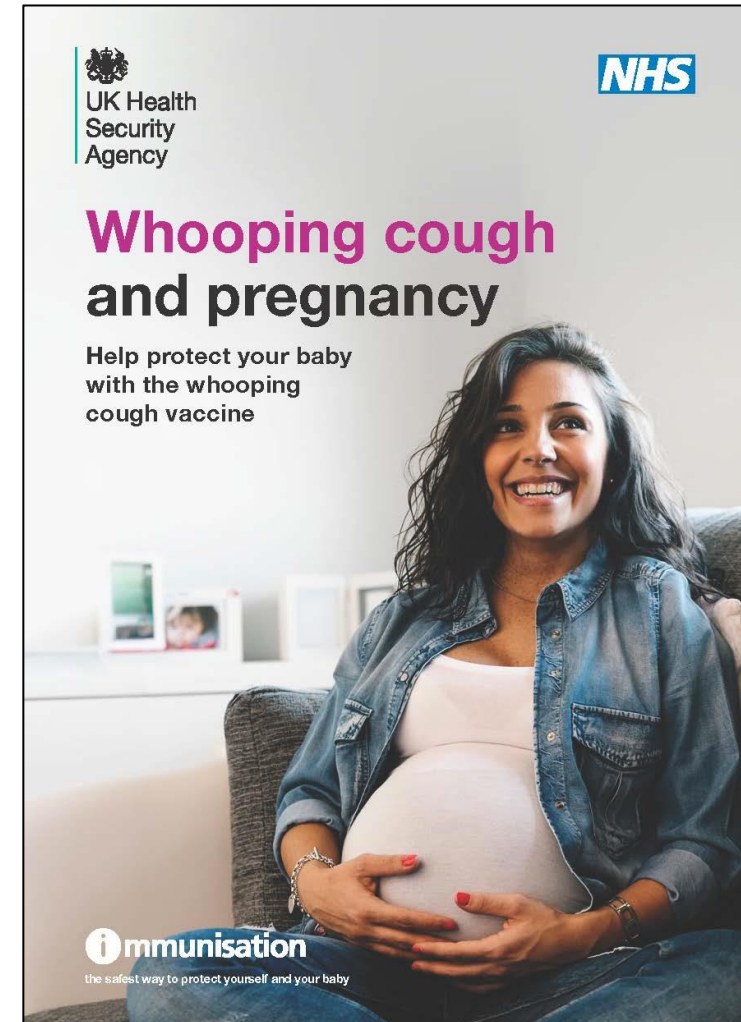
Pertussis is a cyclical disease that peaks every 3 to 5 years alongside a seasonal pattern with highest levels of activity usually in the Autumn. Before the introduction of pertussis immunisation in the 1950s, the average annual number of notifications exceeded 120,000 in England and Wales (Figure 24.1).

By 1972, when vaccine coverage was around 80%, there were only 2,069 notifications of pertussis. Because of professional and public anxiety about the safety and efficacy of the whole-cell vaccine, coverage fell to a low of around 30% by 1978. Major epidemics occurred in 1977–79 and 1981–83. In 1978 there were over 65,000 notifications and 12 deaths (Amirthalingam *et al.*, 2013). These two major epidemics illustrate the impact of a fall in coverage of an effective vaccine. The actual number of deaths due to these pertussis outbreaks was higher, since not all cases in infants are recognised (Miller and Fletcher, 1976; Crowcroft *et al.*, 2002) but with current surveillance systems, under ascertainment of deaths from diagnosed pertussis cases is now considered to be small (van Hoek *et al.*, 2013b).

Chapter 24 - 1

# Pertussis leaflet: pregnant women

- leaflet providing in-depth information on why the vaccine is needed, how maternal pertussis vaccination helps to protect babies from whooping cough and when expectant mothers can have the vaccine
- available to print or download from the Health Publications website with product code [24WCPEN](#)



# Pertussis poster: pregnant women

- poster promoting immunisation against pertussis to expectant mothers, to be displayed in GP practices, maternity units and other community healthcare settings
- available to print or download from the Health Publications website with product code [24WCP01](#)



The poster features the UK Health Security Agency logo and the NHS logo in the top left and right corners, respectively. The main headline reads 'Help protect your baby with the **whooping cough** vaccine', with 'whooping cough' in pink. Below this, a paragraph states: 'There is a lot of whooping cough around at the moment. Babies are at most risk, especially in their first weeks of life.' A call to action follows: 'If you have reached 20 weeks of pregnancy or later and have not yet been offered the whooping cough vaccine, talk to your midwife or GP practice and make an appointment to get vaccinated.' A central image shows a smiling pregnant woman in a denim jacket. A pink box contains the text 'Don't take the risk.' Below it, a blue box contains the text 'Act now to protect your baby against whooping cough from birth. Contact your GP or midwife to get the vaccination.' At the bottom left, the 'i mmunisation' logo is present with the tagline 'the safest way to protect yourself and your baby'. Small text at the bottom provides copyright information and contact details for the Health Publications website.

# Pregnancy: how to help protect you and your baby

Product Code: [24STRWP01](#)

This leaflet explains: the flu vaccine, the whooping cough (pertussis) vaccine & the rubella (German measles) vaccine

These vaccinations are recommended for women who are pregnant. Rubella vaccination is also recommended for women who require protection before becoming pregnant again.

Paper copies of this leaflet are available free to order or download in the following languages:

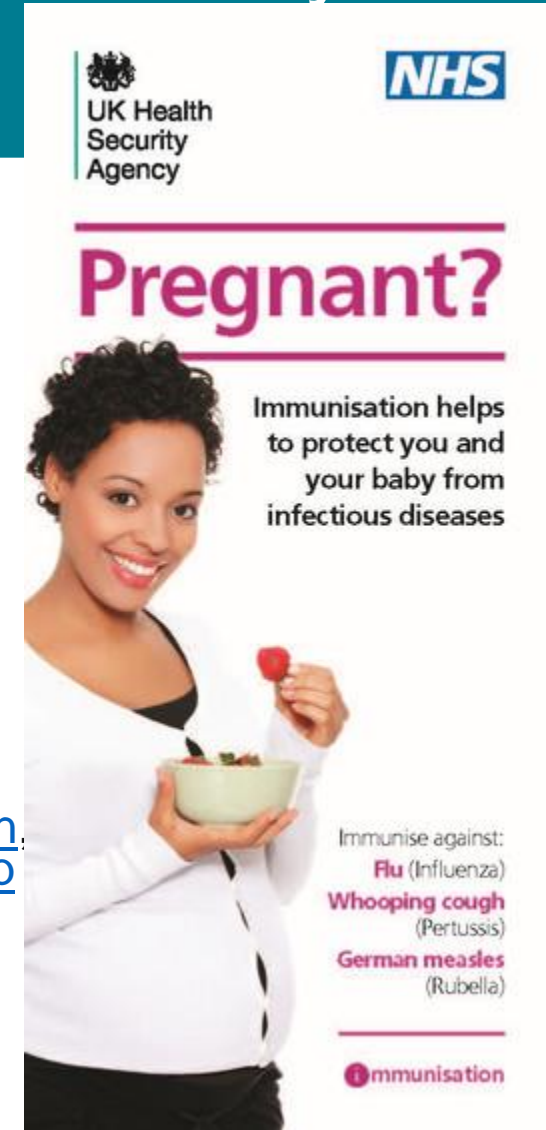
[Albanian](#), [Arabic](#), [Bengali](#), [Bulgarian](#), [Chinese \(simplified\)](#), [Chinese \(traditional, Cantonese\)](#), [Estonian](#), [Farsi](#), [French](#), [Greek](#), [Gujarati](#), [Hindi](#), [Latvian](#), [Lithuanian](#), [Panjabi](#), [Pashto](#), [Polish](#), [Portuguese](#), [Romanian](#), [Romany](#), [Russian](#), [Somali](#), [Spanish](#), [Tagalog](#), [Turkish](#), [Twi](#), [Ukrainian](#), [Urdu](#) and [Yiddish](#).

An [English large print](#) version is available to order.

A British Sign Language (BSL) video is available to [view](#) or [download](#).



A [Braille version](#) of this leaflet is available to order.

An audio version of this leaflet is available to [download](#).








# Which pertussis vaccine: poster

- poster describing pertussis-containing vaccines suitable for infant, pre-school and maternal programmes
- to be displayed in any setting offering the pertussis vaccines and in areas where vaccines are stored and prepared for administration
- available to print or download from the Health Publications website with product code [24WVP01](#)



## Which pertussis-containing vaccine should be given?

Given to pregnant women in each pregnancy	Given to babies at 8, 12 and 16 weeks	Given as a pre-school booster vaccine at age 3 years 4 months
<p><b>ADACEL (Sanofi)</b> Low dose diphtheria, tetanus and acellular pertussis vaccine (Tdap)</p>  <p>Boostrix-IPV or REPEVAX should be given to pregnant women if they have a known severe latex allergy or where ADACEL is not available and to obtain it would result in a delay in vaccination.</p>	<p><b>Infanrix hexa (GSK) or Vaxelis (Sanofi) Hexavalent vaccine DTaP/IPV/Hib/HepB</b> Diphtheria, tetanus, acellular pertussis, polio, Haemophilus influenzae type b (Hib) and hepatitis B</p>  <p>Infanrix hexa and Vaxelis should also be offered to children under 10 years of age who have not completed their primary immunisation course.</p> 	<p><b>Boostrix-IPV (GSK)</b> Low dose diphtheria, tetanus, acellular pertussis and polio vaccine (dTdap/IPV)</p> <p><b>REPEVAX (Sanofi)</b> Low dose diphtheria, tetanus, acellular pertussis and polio vaccine (Tdap/IPV)</p>  <p>Either Boostrix-IPV or REPEVAX can be given as the pre-school booster vaccine (routinely at 3 years and 4 months and to children up to 10 years of age who have not received it). ADACEL does not contain polio and should therefore not be offered as the pre-school booster vaccine. Pertussis-containing vaccine is not routinely offered after 10 years of age, other than to pregnant women and eligible healthcare workers.</p> 

© Crown copyright 2024. Version 1. UK Health Security Agency Catalogue Number: 2024165. Product code: 24WVP01. 1P.20.1 June 2024 (AFC). To order more copies of the poster, please visit: www.healthpublications.gov.uk or call 0300 123 1002.

# Pertussis: stickers (coming soon)



# Pertussis: further guidance and training

- vaccination against pertussis for pregnant women [slideset for training healthcare practitioners](#)
  - this resource has been updated to align with the recently updated information document for healthcare practitioners
  - it's designed to support healthcare practitioners involved in the vaccination against pertussis in pregnancy programme so that they can provide women with evidence-based information



# Pertussis: further guidance and training

- NHSE-elfh [training on pertussis](#) alongside other vaccine-preventable diseases

The screenshot shows a web interface for a training catalogue. At the top left, there are three icons (grid, list, panel) and the text 'Panel View'. At the top right, there is a link 'Full catalogue'. Below this is a breadcrumb trail: 'Full catalogue > Immunisation (IMM) > Vaccine preventable diseases > Vaccine preventable diseases - pertussis'. On the left is a vertical sidebar with a scroll bar, containing a list of categories: 'influenza', 'Vaccine Preventable diseases - measles, mumps and rubella', 'Vaccine preventable diseases - meningococcal', 'Vaccine preventable diseases - pertussis' (which is bolded and has a blue selection bar), 'Vaccine preventable diseases - pneumococcal', 'Vaccine preventable diseases - polio', 'Vaccine preventable diseases - rotavirus', and 'Vaccine preventable diseases -'. The main content area on the right displays a video card for '03\_008 Vaccine Preventable Diseases - Pertussis'. To the right of the video title are an information icon (i) and a purple 'Play' button.

# Pertussis: further guidance and training

- [PGD template](#) to support the national pertussis vaccination for pregnant women programme, and vaccination of contacts of pertussis in accordance with guidelines
- [guidance](#) for public health management of pertussis, which looks at evolving evidence on the effectiveness of some public health measures and the current epidemiological context



UK Health Security Agency

UKHSA publications gateway number: GOV-16448

### Pertussis Vaccine Patient Group Direction (PGD)

This PGD is for the administration of low dose diphtheria, tetanus and acellular pertussis-containing vaccine, with or without inactivated poliomyelitis (Tdap or dTaP/IPV) to pregnant women from week 16 of pregnancy, in accordance with the national immunisation programme and to pertussis contacts aged 10 years and over in accordance with [Guidelines for the Public Health Management of Pertussis in England](#) and [Guidelines for the Public Health Management of Pertussis Incidents in Healthcare Settings](#).

This PGD is for the administration of Tdap or dTaP/IPV vaccine by registered healthcare practitioners identified in [Section 3](#), subject to any limitations to authorisation detailed in [Section 2](#).

Reference no: Pertussis vaccine PGD  
Version no: v7.00  
Valid from: 1 July 2024  
Review date: 1 January 2027  
Expiry date: 1 July 2027

**The UK Health Security Agency (UKHSA) has developed this PGD to facilitate the delivery of publicly-funded immunisation in England in line with national recommendations.**

Those using this PGD must ensure that it is organisationally authorised and signed in Section 2 by an appropriate authorising person, relating to the class of person by whom the product is to be supplied, in accordance with Human Medicines Regulations 2012 (HMR2012)<sup>1</sup>. **The PGD is not legal or valid without signed authorisation in accordance with [HMR2012 Schedule 16 Part 2](#).**

Authorising organisations must not alter, amend or add to the clinical content of this document (sections 4, 5 and 6); such action will invalidate the clinical sign-off with which it is provided. In addition, authorising organisations must not alter section 3 (Characteristics of staff).

**Sections 2 and 7 can be edited within the designated editable fields provided, but only for the purposes for which these sections are provided, namely the responsibilities and governance arrangements of the NHS organisation using the PGD. The fields in section 2 and 7 cannot be used to alter, amend or add to the clinical content. Such action will invalidate the UKHSA clinical content authorisation which is provided in accordance with the regulations.**


Operation of this PGD is the responsibility of commissioners and service providers. The final authorised copy of this PGD should be kept by the authorising organisation completing Section 2 for 25 years after the PGD expires if the PGD relates to children only, or adults and children. Provider organisations adopting authorised versions of this PGD should also retain copies for the periods specified above.

**Individual practitioners must be authorised by name, under the current version of this PGD before working according to it.**

Practitioners and organisations must check that they are using the current version of the PGD. Amendments may become necessary prior to the published expiry date. Current versions of UKHSA PGD templates for authorisation can be found from: [Immunisation patient group direction \(PGD\) templates](#)

<sup>1</sup>This includes any relevant amendments to legislation

Pertussis vaccine PGD v7.00 Valid from: 1 July 2024 Expiry: 1 July 2027 Page 1 of 18




## Guidance on the management of cases of pertussis in England during the re-emergence of pertussis in 2024

Update: June 2024

# Complete routine immunisation schedule: from 1 July 2024


- main English version of the UK complete routine immunisation schedule available to download from the Health Publications website with product code [RS1EN](#)
- this leaflet will also be available in 33 translations: Albanian, Arabic, Bengali, Bulgarian, Chinese (simplified), Chinese (traditional), Dari, Estonian, Farsi, Greek, Gujarati, Hindi, Italian, Latvian, Lithuanian, Nepali, Panjabi, Pashto, Polish, Portuguese, Romanian, Romany, Somali, Spanish, Tagalog, Tigrinya, Turkish, Twi, Ukrainian, Urdu, Yiddish and Yoruba


 UK Health Security Agency

**The complete routine immunisation schedule** From July 2024

Age due	Diseases protected against	Vaccine given and trade name		Usual site <sup>1</sup>
Eight weeks old	Diphtheria, tetanus, pertussis (whooping cough), polio, <i>Haemophilus influenzae</i> type b (Hib) and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	Meningococcal group B (MenB)	MenB	Bexsero	Left thigh
	Rotavirus gastroenteritis	Rotavirus <sup>2</sup>	Rotarix <sup>2</sup>	By mouth
Twelve weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	Pneumococcal (13 serotypes)	Pneumococcal conjugate vaccine (PCV)	Prevenar 13	Thigh
	Rotavirus	Rotavirus <sup>2</sup>	Rotarix <sup>2</sup>	By mouth
Sixteen weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	MenB	MenB	Bexsero	Left thigh
	Hib and MenC	Hib/MenC	Menitorix	Upper arm/thigh
One year old (on or after the child's first birthday)	Pneumococcal	PCV booster	Prevenar 13	Upper arm/thigh
	Measles, mumps and rubella (German measles)	MMR	MMRVaxPro <sup>3</sup> or Priorix	Upper arm/thigh
	MenB	MenB booster	Bexsero	Left thigh
Eligible paediatric age groups <sup>4</sup>	Influenza (each year from September)	Live attenuated influenza vaccine LAIV <sup>5,6</sup>	Fluenz Tetra <sup>3,6</sup>	Both nostrils
Three years four months old or soon after	Diphtheria, tetanus, pertussis and polio	dTaP/IPV	Boostrix-IPV	Upper arm
	Measles, mumps and rubella	MMR (check first dose given)	MMRVaxPro <sup>3</sup> or Priorix	Upper arm
Boys and girls aged twelve to thirteen years	Cancers and genital warts caused by specific human papillomavirus (HPV) types	HPV <sup>5</sup>	Gardasil 9	Upper arm
Fourteen years old (school Year 9)	Tetanus, diphtheria and polio	Td/IPV (check MMR status)	Flavaxis	Upper arm
	Meningococcal groups A, C, W and Y	MenACWY	MenQuadfi	Upper arm
65 years old	Pneumococcal (23 serotypes)	Pneumococcal Polysaccharide Vaccine (PPV23)	Pneumovax 23	Upper arm
65 years of age and older	Influenza (each year from September)	Inactivated influenza vaccine	Multiple	Upper arm
65 from September 2023 <sup>7</sup>	Shingles	Shingles vaccine	Shingrix	Upper arm
70 to 79 years of age (plus eligible age groups and severely immunosuppressed) <sup>7</sup>	Shingles	Shingles vaccine	Zostavax <sup>3,7</sup> (or Shingrix if Zostavax contraindicated)	Upper arm

1. Intramuscular injection into deltoid muscle in upper arm or anterolateral aspect of the thigh.  
2. Rotavirus vaccine should only be given after checking for SCD screening result.  
3. Contains porcine gelatine.  
4. See annual flu letter at: [www.gov.uk/government/collections/annual-flu-programme](http://www.gov.uk/government/collections/annual-flu-programme)  
5. See Green Book HPV Chapter 18a for details on immunising immunocompromised young people who will need 3 doses.  
6. If LAIV (live attenuated influenza vaccine) is contraindicated or otherwise unsuitable use inactivated flu vaccine (check Green Book Chapter 19 for details).  
7. See Green Book Shingles Chapter 28a for details on eligible age groups including severely immunosuppressed individuals from age 50.

 For vaccine supply information for the routine immunisation schedule please visit [portal.immform.phe.gov.uk](http://portal.immform.phe.gov.uk) and check Vaccine Update for all other vaccine supply information: [www.gov.uk/government/collections/vaccine-update](http://www.gov.uk/government/collections/vaccine-update)

**Immunisation** The safest way to protect children and adults 

# How to order pertussis resources

The screenshot shows the NHS Health Publications website. At the top, there is a navigation bar with links for Home, Order Publications, View Campaigns, Find Digital Assets, and Quiz. A search bar is also present. Below the navigation, there is a 'Health Publications' section with a welcome message and a 'Download Adobe Reader' button. The main content area features a grid of searchable topics, each with a 'Search Now' button: Flu Search, Maternal Vaccination, MMR/Measles, Shingles, Hepatitis, Meningitis, Schools, COVID-19 Vaccination Programme, HPV Universal Programme, and TB/BCG.

The screenshot shows the search results page on the NHS Health Publications website. The navigation bar is visible at the top. The search results are displayed in a list format, with filters on the left. The search results include:

- BCG
- COVID-19
- Diphtheria
- DTaP/IPV
- DTaP/IPV/Hib/HepB (hexa)
- Haemophilus influenza type b (HiB)
- Hepatitis A
- Hepatitis B
- Hepatitis C
- Human papillomavirus (types 11, 16, and 18)
- Immunoglobulins
- Infanrix hexa
- Influenza
- LAIV nasal
- Measles
- Meningococcal group B
- Meningococcal group C
- Meningococcal groups A, C, W and Y
- MMR
- Monkeypox
- Mumps
- PCV
- Pertussis (whooping cough)

- the [Health Publications website](#) is a free service where resources can be ordered or downloaded, with delivery in 3 to 5 working days
- accessible versions and translations are also available

# Vaccine Update: immunisation bulletin

- CQC endorsed – ‘registering and reading Vaccine Update is one of the indicators of best practice’
- previous versions are available at [www.gov.uk/government/collections/vaccine-update](http://www.gov.uk/government/collections/vaccine-update)
- audience: screening and immunisation teams, clinics, GP practices, practice nurses, midwives, student nurses and health professionals
- one-stop shop for policy, supply or vaccine programme implementation including the training, guidance documents, examples of best practice, implementation guidance and patient facing resources to promote the campaign
- [sign up to receive Vaccine Update](#)

**UK Health Security Agency**  
**Vaccine Update**  
Issue 326 - April 2022

## Gay and bisexual men and those aged 15 and over to receive 2 doses of the HPV vaccine

People with HIV or known to be immunocompromised will continue to receive 3 doses.

From Friday 1 April, gay and bisexual men and those aged 15 and over will only need to receive 2 doses of the human papillomavirus (HPV) vaccine instead of 3 to be fully vaccinated, based on advice from the Joint Committee on Vaccination and Immunisation (JCVI).

The vaccine helps to prevent HPV infection which can cause genital warts and HPV-associated cancers such as cervical cancer, some other cancers of the genital area and anus and some cancers of the head and neck. Those who are eligible for the HPV vaccine can get it free on the NHS up until their 25th birthday.

There is also a HPV vaccination programme for gay and bisexual men and other men who have sex with men (MSM) up to 45 years of age, who attend sexual health or HIV clinics.

The routine adolescent HPV vaccination programme, offered to 12 to 13 year olds in school, has been following a 2-dose schedule since September 2014. In May 2020 the JCVI, who regularly review all vaccination programmes, advised that the 2-dose schedule could be extended to adults as the evidence showed 2 doses offers good protection in older individuals. The 2 doses should be given at least 6 months apart.

**CONTENTS**  
Main points about the changes to the programme.  
Why has the vaccine been changed?  
HPV vaccine specifically reduces cervical cancer.  
How is it given?  
Does the HPV vaccine influence sexual behaviour?  
Great topic on immunisation - HPV chapter 18 A has been published.  
Training and guidance.  
Guidelines - questions and answers.  
Adopting HPV immunisation programme.  
Vaccine coverage collection.  
MVA HPV immunisation programme - vaccine coverage collection.  
The school year 8 HPV vaccine video.  
An agent cancer in school video.  
HPV vaccination options for gay, bisexual and MSM.  
Health professionals resources.  
Registering in a new or updating your existing freeform vaccine ordering system.  
Materials UK areas delivering centrally supplied vaccine are not able to share delivery points.

Subscribe to Vaccine update [here](#). Order immunisation publications [here](#).  
For centrally-supplied vaccine enquiries, email: [vaccinesupply@nhs.gov.uk](mailto:vaccinesupply@nhs.gov.uk)

**UK Health Security Agency**  
**Vaccine Update**  
COVID-19 special - Issue 330 June 2022

## 120 million doses of COVID-19 vaccine given in England

Thank-you to all the vaccinators, vaccinees, and all of the teams working so hard to give the COVID-19 vaccinations - every one is a great step forward.

It's been 1 year and over 5 months since the first COVID-19 vaccination programme started across the UK. Since 8 December 2020, when Margaret Keenan became the first person in the world to receive her first vaccine, there have been more than 120 million vaccinations given across the country. We are seeing good uptake of COVID-19 Spring booster vaccinations which are being offered to people aged over 70 years of age, adult care home residents and individuals aged 12 years and over who are immunosuppressed. We really want to encourage anyone eligible who has not yet come forward to have their vaccine to make an appointment. Having positive vaccination conversations and signposting to trusted sources on information can help to address any concerns and build confidence to then take up the offer.

**CONTENTS**  
Getting your Autumn COVID-19 boosters.  
COVID-19 MMR2021 Update.  
Vaccination programme.  
Insights and communications.  
Monitoring Update.  
Impact.  
Business and challenges.  
Engagement and communication strategies in the remaining 10 weeks.  
COVID-19 Vaccination programme.  
H4 COVID-19.  
Resources for eligible patients, their parents and carers.

<b>People vaccinated</b>	
First dose total	53,386,518
Second dose total	53,386,254
Booster or third dose total	12,247,231
<b>Total</b>	<b>118,019,993</b>

118,019,993 UK

Subscribe to Vaccine update [here](#). Order immunisation publications [here](#).  
For centrally-supplied vaccine enquiries, email: [vaccinesupply@nhs.gov.uk](mailto:vaccinesupply@nhs.gov.uk)

**UK Health Security Agency**  
**Vaccine Update**  
Issue 324 - November 2021

## Flu vaccination programme

In 2021 to 2022 the expanded influenza vaccination programme continues as part of our wider winter planning when we are likely to see both influenza and COVID-19 in circulation. This means that alongside the usual eligible groups, all 65 to 84 year olds are being offered influenza vaccination and the programme is being further expanded into secondary schools up to Year 11 for the first time. In order to support the expanded vaccination programme and achieve even higher vaccine uptake rates compared to last year, DHSC has secured an additional supply of influenza vaccines (see the Vaccine Supply section for more details).

As a result of COVID-19 restrictions influenza activity levels were extremely low globally last year. With social mixing and social contact returning towards pre-pandemic norms, it is expected that winter 2021 to 2022 will be the first winter in the UK when the seasonal influenza virus (and other respiratory viruses) will co-circulate alongside COVID-19.

**CONTENTS**  
Flu vaccine for 65-84 year olds.  
Flu vaccine for 65-84 year olds - first.  
Flu vaccine for 65-84 year olds - second.  
Flu vaccine for 65-84 year olds - third.  
Flu vaccine for 65-84 year olds - fourth.  
Flu vaccine for 65-84 year olds - fifth.  
Flu vaccine for 65-84 year olds - sixth.  
Flu vaccine for 65-84 year olds - seventh.  
Flu vaccine for 65-84 year olds - eighth.  
Flu vaccine for 65-84 year olds - ninth.  
Flu vaccine for 65-84 year olds - tenth.  
Flu vaccine for 65-84 year olds - eleventh.  
Flu vaccine for 65-84 year olds - twelfth.

Subscribe to Vaccine update [here](#). Order immunisation publications [here](#).  
For centrally-supplied vaccine enquiries, email: [vaccinesupply@nhs.gov.uk](mailto:vaccinesupply@nhs.gov.uk)

**UK Health Security Agency**  
**Vaccine Update**  
Issue 328 - May 2022

## Do they know it's shingles?

Despite the recent developments in vaccine literacy in our population, many people still associate vaccinations with infants or young children. There is less awareness of the life course of vaccination and the importance of vaccination in older adults other than TB.

Awareness of pneumococcal and shingles vaccinations in adults on social media revealed that the key barriers to vaccination among people living in deprived areas include a lack of awareness that they could be vaccinated against pneumococcal disease or shingles ( herpes zoster) and knowledge about these vaccines more generally.

In an online survey 56% of older adults eligible for routine vaccines in the most deprived areas didn't know they needed the vaccination against pneumococcal disease and 61% didn't know about shingles. 45% had never heard of the former, while 50% hadn't heard of the latter.

Building awareness in these groups is essential to improving uptake. Most people have heard of chickenpox caused by varicella zoster virus.

We have outbreaks of chickenpox across the country. What you cannot catch shingles from chickenpox, you can contract chickenpox from someone who has shingles, if you have not had chickenpox before.

**CONTENTS**  
Shingles - a guide to the vaccine.  
Shingles - a guide to the vaccine - 2.  
Shingles - a guide to the vaccine - 3.  
Shingles - a guide to the vaccine - 4.  
Shingles - a guide to the vaccine - 5.  
Shingles - a guide to the vaccine - 6.  
Shingles - a guide to the vaccine - 7.  
Shingles - a guide to the vaccine - 8.  
Shingles - a guide to the vaccine - 9.  
Shingles - a guide to the vaccine - 10.  
Shingles - a guide to the vaccine - 11.  
Shingles - a guide to the vaccine - 12.

Subscribe to Vaccine update [here](#). Order immunisation publications [here](#).  
For centrally-supplied vaccine enquiries, email: [vaccinesupply@nhs.gov.uk](mailto:vaccinesupply@nhs.gov.uk)

**UK Health Security Agency**  
**Vaccine Update**  
Issue 327 - May 2022

## Changes to the NHS neonatal Bacillus Calmette-Guérin (BCG) immunisation programme

The BCG immunisation programme was introduced in the UK in 1953 and has undergone several changes in response to changing trends in tuberculosis (TB) epidemiology. The BCG vaccine is a live attenuated vaccine and is not given as part of the routine vaccination schedule but only when a child is at increased risk of coming into contact with TB. Eligible babies include all newborns whose parent is or grandparent's was born in a country where the annual incidence of TB is 40 per 100,000 or greater, and/or newborn babies living in areas of the UK where the annual incidence of TB is 40 per 100,000 or greater.

The BCG vaccine has been offered to babies that fall into one of the above categories soon after birth, often whilst the baby is still in hospital. The evaluation of the addition of screening for Severe Combined Immunodeficiency (SCID) to the routine newborn screening test at 5 days of age made it necessary to move the BCG vaccination to when a SCID screening outcome will be available, which may be available from around day 14 to 17 after birth. This is to ensure that babies with SCID are not given the live attenuated BCG vaccine which is contraindicated in these babies.

**CONTENTS**  
Changes to the NHS neonatal BCG immunisation programme.  
Information for parents, caregivers and health professionals.  
Training, resources and guidance.  
COVID programme vaccine coverage data collection.  
BCG vaccination data flow and patient case pathway.  
Key points about the impact of the SCID restriction on routine vaccination.

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# Vaccine Update issue 344: maternal vaccination special

- published November 2023
- available at [www.gov.uk/government/publications/vaccine-update-issue-344-november-2023-pregnancy-special](http://www.gov.uk/government/publications/vaccine-update-issue-344-november-2023-pregnancy-special)

The cover of Vaccine Update Issue 344, November 2023, features a photograph of a pregnant woman in a white lab coat interacting with a young child in a kitchen. The title 'Vaccine Update' is at the top right, and 'Issue 344 · November 2023' is below it. The UK Health Security Agency logo is on the left. The main headline is 'Maternal Vaccines Matter!' in large white text. Below this, the text reads: 'Maternal vaccination special. We want to improve maternal vaccination rates and this month's special edition brings together the resources we have to promote vaccination to those who are pregnant, in all settings including midwifery, antenatal, GP practices and pharmacies. We have produced suites of information, training slide sets and guidance designed to help health professionals to talk confidently about maternal vaccination. We hope that all pregnant women are given the offer of vaccination including the seasonal flu, the autumn dose of COVID-19 vaccination if they are in a risk group (unless they have already had a dose of COVID-19 vaccine) and the pertussis vaccination. Opportunities to read and digest leaflet information given to those who are pregnant in the right format to meet their needs is often the start of the consent process. Time and the right accessible information is key.' A small image of a 'Pregnant? how to help protect you and your baby leaflet' is shown with the text 'Pregnancy: how to help protect you and your baby leaflet (weblink 32)'. A 'CONTENTS' list is on the right side of the cover.

**UK Health Security Agency**

## Vaccine Update

Issue 344 · November 2023

### Maternal Vaccines Matter!

**Maternal vaccination special**

We want to improve maternal vaccination rates and this month's special edition brings together the resources we have to promote vaccination to those who are pregnant, in all settings including midwifery, antenatal, GP practices and pharmacies. We have produced suites of information, training slide sets and guidance designed to help health professionals to talk confidently about maternal vaccination.

We hope that all pregnant women are given the offer of vaccination including the seasonal flu, the autumn dose of COVID-19 vaccination if they are in a risk group (unless they have already had a dose of COVID-19 vaccine) and the pertussis vaccination. Opportunities to read and digest leaflet information given to those who are pregnant in the right format to meet their needs is often the start of the consent process.

Time and the right accessible information is key.

**Pregnancy: how to help protect you and your baby leaflet (weblink 32)**

**CONTENTS**

- Update to the Influenza chapter of the Green Book
- Prenatal pertussis vaccination coverage in England from January to March 2023 and annual coverage for 2022 to 2023
- Pregnancy resources round up
- New Video Resources
- Travels with the immunisation stand!
- How we did it!
- Attention all customers – Christmas 2023 and New Year 2024 deliveries warning notice for routine immunisations
- Vaccines for the 2023 to 2024 children's flu programme supplied by UKHSA
- LAIV ordering information for General Practice
- Multi-Branch Practices and LAIV allocations
- LAIV ordering information for school-age providers
- Inactivated flu vaccine ordering
- ImmForm customers should report long-term changes to opening hours for deliveries
- DTaP/IPvHib/HepB vaccine ordering
- Registering for a new or updating your existing ImmForm vaccine ordering account
- MMR vaccine ordering
- Shingrix® vaccine ordering information

Page 5 of Vaccine Update: Issue 344, November 2023. The page title is 'Prenatal pertussis vaccination coverage in England from January to March 2023 and annual coverage for 2022 to 2023'. The text states: 'This report evaluates prenatal pertussis vaccine coverage for women who delivered in the January to March 2023 quarter and estimates annual coverage for the 2022 to 2023 financial year.' The main findings are: 'The main findings were that: 60.7% vaccine coverage was 60.7% in the 2022 to 2023 financial year, compared to 64.7% in 2021 to 2022, 67.8% in 2020 to 2021 and 70.5% in 2019 to 2020. 60.8% pertussis vaccine coverage in pregnant women for the fourth quarter 2022 to 2023 was 60.8%, which was 3.7 percentage points lower than the mean coverage for the same quarter in the 2021 to 2022 financial year. 6.5% the mean coverage for the quarter was also 6.5 percentage points lower than the mean coverage for the same quarter in the 2020 to 2021 financial year. DECREASE IN LONDON NHS COMMISSIONING REGION this observed decline in coverage has largely been driven by a decrease in London NHS Commissioning Region but is also reflected in other regions, particularly the North West and the Midlands.' A call to action says 'Read the full report at weblink 2.' with an icon of an open book. A laptop image shows the report's title page.

5 Vaccine update: Issue 344, November 2023

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This report evaluates prenatal pertussis vaccine coverage for women who delivered in the January to March 2023 quarter and estimates annual coverage for the 2022 to 2023 financial year.

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**DECREASE IN LONDON NHS COMMISSIONING REGION**

this observed decline in coverage has largely been driven by a decrease in London NHS Commissioning Region but is also reflected in other regions, particularly the North West and the Midlands

**Read the full report at weblink 2.**

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