



Public Health
England

Protecting and improving the nation's health

Changes to the 12 month immunisation schedule from May 2016

Aim

To provide information to support immunisers with the introduction of MenB to the 12 month vaccinations on both:

- Clinical support – e.g the national schedule, vaccine safety, paracetamol, parental concerns
- Practical support – e.g. reviewing your immunisation clinics, support from Child Health (CHIS)

MenB Training

All immunisers should have completed training on MenB which was delivered locally last year (via WebEx) and available nationally.

If any immunisers have not yet accessed this training please access the online training slides available here:

<https://www.gov.uk/government/collections/meningococcal-b-menb-vaccination-programme>



MenB key facts refresher

- Meningococcus group B accounts for approximately 80% of all laboratory confirmed cases reported to Public Health England
- Invasive meningococcal disease most commonly presents as meningitis or septicaemia and affects children under 2 years, particularly infants aged 5 months and older adolescents
- Meningococcal disease is associated with significant case-fatality, ranging from around 5% in infants and young children to 25% in older adults.
- Around a quarter of survivors of meningococcal disease will suffer serious long-term complications after recovering from the infection and can include:
 - Loss of hearing, loss of vision, loss of memory and/or concentration, difficulties in coordination and balance, epilepsy, cerebral palsy, limb amputations and may result in death

The routine immunisation schedule

from summer 2015

Age due	Diseases protected against	Vaccine given and trade name		Usual site ¹
Twelve months old	Hib and MenC	Hib/MenC booster	Menitorix	Upper arm/thigh
	Pneumococcal (13 serotypes)	PCV booster	Prevenar 13	Upper arm/thigh
	Measles, mumps and rubella (German measles)	MMR	MMR VaxPRO ³ or Priorix	Upper arm/thigh
	MenB ²	MenB booster ²	Bexsero	Left thigh

- All babies born after 1st May 2015 are eligible for MenB booster vaccination at 12 month. Any babies born before this date are not eligible through the routine immunisation schedule.

Selective immunisation programmes

Target group	Age and schedule	Disease	Vaccines required
Babies born to hepatitis B infected mothers	At birth, 1 and 2 months old Boost at 12 months old ¹	Hepatitis B	Hepatitis B vaccine (Engerix B / HBvaxPRO)

Administering vaccines at 12 months

- It is preferable that the vaccines are given in **separate limbs**. If they need to be administered in the same limb they must be **2.5cm apart**
- Bexsero (MenB) should be given in the **left thigh**, ideally on its own
- Vaccines should not be administered in the same limb as BCG for 3 months
- The sites each vaccine is given needs to be recorded
- Some babies will need their HepB booster: this can also be given at the same appointment.



Parental concerns

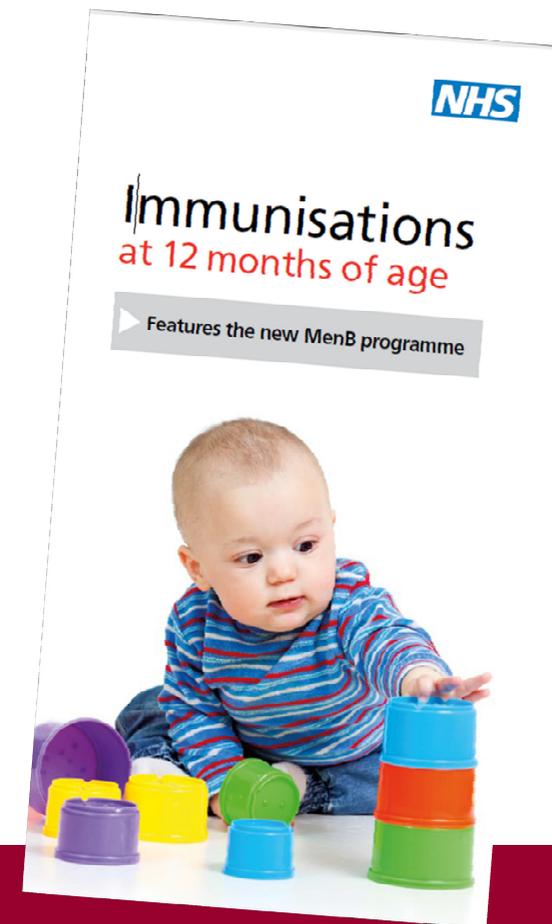
It is understandable that some parents may be concerned about the number of vaccines being given.

- Healthcare professionals have a responsibility to be confident in explaining the benefits and risks to support them to make a well informed decision.
- Many parents will use the internet as an information source, but research shows that information from a healthcare professional is very important in making decisions on whether to vaccinate.

Communication

Most parents will be happy for their child to receive all four vaccines in one session, but some parents will want more support:

- Take time to listen
- Welcome questions
- Consider science vs anecdotes
- Discuss benefits and risks
- Reduce stress



“Too many vaccinations at once will overload the babies immune system”

- There is no evidence that multiple vaccinations ‘overload’ the immune system
- Studies have demonstrated there are no harmful effects from administering multiple vaccines in one session
- Babies are continually exposed to huge numbers of bacteria and viruses daily which their immune systems protect them from
- In theory, a baby could respond effectively to around 10,000 vaccines at any one time. Their immune systems will easily cope with MMR, MenB, PCV and Hib/MenC at the same time
- Vaccines contain either attenuated (weakened) or inactivated (dead) microbes which cause an immune response without causing the disease

“I don't want them to have four vaccinations at once”

- It is safe for them to receive four vaccinations at once
- It is less traumatic for your child having them in one go and you can help to minimise stress by distracting and comforting them
- It will be over quickly
- Babies will have already received four vaccinations in one session (at their 2 month appointment)

“Can I delay some or all the vaccinations?”

- Babies are vaccinated when they are at highest risk of getting sick or dying if they are exposed to the disease. Any time a vaccine is delayed you leave your baby vulnerable to disease.
- If you are very uncomfortable, we can give some vaccines today and schedule you to come back for the rest, **but this is not recommended**





Support

- The national immunisation leaflets contain lots of detail Make sure you them in your sessions
- Check they are accessible for parents to pick up in your waiting rooms.
- If a parent decides to delay vaccination use the leaflet to alert them to signs and symptoms of the diseases they haven't vaccinated against.

Paracetamol

- At 12 months the risk of fever after routine vaccinations is similar with or without MenB
- Paracetamol **does not** need to be given at 12 month vaccinations
- If a 12 month old gets a fever at home or appears in discomfort they can be given paracetamol at that time



Running the session

Think about how you are most comfortable running the sessions. Having two nurses present can add value in different ways. You could:

- Administer vaccinations simultaneously to minimise distress
- Have one nurse hold the child if the parent is anxious
- Have one nurse administering and one nurse supporting (e.g. preparing vaccines)

Reviewing your sessions

The addition of MenB at 12 months is a great opportunity to review your immunisation clinics. Make sure you:

- Have enough time for each appointment to discuss the vaccinations with parents, including time for them to ask questions and to discuss paracetamol use;
- Give yourself enough time to prepare the vaccines;
- Have enough appointments to ensure you don't have any waiting lists;
- Have the right staff support: consider having two nurses at the session. If you change to having two nurses present make sure your clinic room has enough space to accommodate this.

Questions?

Contact the Screening & Immunisations team on:
england.bnsssg.imms@nhs.net

For queries on appointments please contact your local
CHIS lead.