NHS public health functions agreement 2018-19
Service specification No.7
Hib-containing vaccination programme
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Version number: FINAL

First published: September 2018

NHS England Gateway Number: 07828


Classification: OFFICIAL
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Promoting equality and addressing health inequalities are at the heart of NHS England’s values. Throughout the development of the policies and processes cited in this document, we have:

- Given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic and those who do not share it (as required under the Equality Act 2010); and
- Given regard to the need to reduce inequalities between patients in access to, and outcomes from, healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities (in accordance with the duties under sections 13G and 13N of the NHS Act 2006, as amended).
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Service specification No.7

This is a service specification to accompany the ‘NHS public health functions agreement 2018-19 (the ‘2018-19 agreement’).

This service specification is to be applied by NHS England in accordance with the 2018-19 agreement. Where a specification refers to any other published document or standard, it refers to the document or standard as it existed at the date when the 2018-19 agreement was made between the Secretary of State and NHS England Board, unless otherwise specified. Any changes in other published documents or standards may have effect for the purposes of the 2018-19 agreement in accordance with the procedures described in Chapter 3 of the 2018-19 agreement.

Service specifications should be downloaded in order to ensure that commissioners and providers refer to the latest document that is in effect.

The 2018-19 agreement is available at www.gov.uk (search for ‘commissioning public health’).

All current service specifications are available at www.england.nhs.uk (search for ‘commissioning public health’).

This service specification is not intended to replicate, duplicate or supersede any other legislative provisions that may apply. It must always be read in conjunction with the core service specification and the online version of the Green Book.
1. Purpose of Hib-containing vaccination programme

1.1. This document relates to the Hib conjugate vaccine that protects children against *Haemophilus influenzae* type b (Hib) infection. This immunisation is part of the national childhood immunisation programme which aims to prevent children from catching vaccine preventable diseases that are associated with significant mortality and morbidity. The purpose of the service specification is to enable NHS England to commission Hib immunisation services to a standard which will minimise infections and outbreaks. This means achieving high levels of coverage across England as well as within upper tier local government areas and within the context of populations with protected characteristics as defined by the Equality Act 2010.

1.2. This specification provides a brief overview of the Hib-containing vaccines including the disease they protect against, the context, evidence base, and wider health outcomes, and should be read alongside the core service specification which underpins national and local commissioning practices and service delivery.

1.3. This specification will promote a consistent and equitable approach to the commissioning and delivery of the Hib-containing vaccines across England. However, it is important to note that this programme can change and evolve in the light of emerging best practice and scientific evidence. NHS England and providers will be required to reflect these changes accordingly in a timely way as directed by the national schedule.

1.4. *Immunisation against infectious disease* (known as 'The Green Book'), as issued by Public Health England, provides guidance and has the latest information on vaccines and vaccination procedures for all the vaccine preventable infectious diseases that may occur in the UK. This service specification must be read in conjunction with the core service specification, the online version of the Green Book, related official public health letters and reflected in the commissioning of immunisation programmes. This specification must also be read in conjunction with additional evidence, guidance and literature issued by the Joint Committee on Vaccination and Immunisation (JCVI).

1.5. This service specification is not designed to replicate, duplicate or supersede any relevant legislative provisions that may apply e.g. the Health and Social Care Act 2012. The specification will be reviewed and amended in line with any new recommendations or guidance, and in line with reviews of the Section 7A agreement.
2. Population needs

Background

2.1 Hib-containing vaccines are offered routinely at eight, twelve, and sixteen weeks of age (given as DTaP/IPV/Hib/HepB) and boosted (as Hib/MenC) at 12 months of age. The vaccine provides protection against infections caused by \textit{Haemophilus influenza} type b (Hib).

2.2 The booster is designed to extend the protection offered in infancy during the period of highest risk of this infection (up to five years of age).

\textit{Haemophilus influenzae} type b (Hib)

2.3. Hib can cause invasive infections, such as meningitis (inflammation of the membranes surrounding the brain), septicaemia (blood poisoning), epiglottitis and pneumonia, which can be fatal and leave survivors with serious long-term complications. Individuals can carry Hib bacteria in their nose and throat without showing signs of the disease. Hib is spread through coughing, sneezing or close contact with a carrier. Since the introduction of Hib immunisation in the UK, disease incidence has fallen. In 2010 there were only 30 reported cases of confirmed invasive Hib infection in the England and Wales compared to more than 1,000 in the early 1990s.

Hib conjugate vaccine – key details

2.4 The combined Hib/MenC conjugate vaccine given at 12 months builds on the Hib immunity provided by the DTaP/IPV/Hib/HepB vaccine doses given as part of the infant immunisation programme at 8, 12 and 16 weeks of age.

2.5 The vaccine has a strong evidence base, an excellent safety profile and is highly effective.
3 Scope

Aims

3.1 The aim of the Hib vaccination programme is to protect children against Hib infection associated with significant mortality and morbidity.

Objectives

3.2 The aim will be achieved by delivering a population-wide immunisation programme that:

- identifies the eligible population based on the target population set out in the Green Book and ensures optimal coverage;
- is safe, effective, timely and of a high quality and is independently monitored;
- is delivered and supported by suitably trained, competent healthcare professionals who participate in recognised ongoing training and development in line with national standards;
- delivers, manages and stores vaccine in accordance with national guidance;
- is supported by regular and accurate data collection using the appropriate returns.

Direct health outcomes

3.3 The Hib vaccination programme aims to:

- protect the health of individuals and the wider population;
- reduce the number of preventable infections and their onward transmission;
- achieve high coverage across all groups identified;
- minimise adverse physical/psychological/clinical aspects of immunisation (e.g. anxiety, adverse reactions).

Baseline vaccine coverage

3.4 Local services must ensure they maintain and improve current immunisation coverage (with reference to vaccine coverage public health outcomes framework indicators) with the aim of 100% of relevant individuals being offered immunisation in accordance with the Green Book and other official DHSC/PHE guidance. This includes performance indicators and key deliverables that are set out in Annex B of NHS Public Health Functions Agreement (Section 7A) for 2018-19.
4 Service description / care pathway

Local service delivery

4.1 This section of the document specifies the high-level operational elements of the Hib vaccination programme, based on best practice that NHS England must use to inform local commissioning, contracts and service delivery. There is also scope to enable NHS England and providers to enhance and build on specifications to incorporate national or local service aspirations that may include increasing local innovation in service delivery. However, it is essential, in order to promote a nationally aligned, high-quality programme focusing on improved outcomes, increasing coverage and local take-up that all core elements that are set out in the core service specification are included in contracts and specifications.

Target population

4.2 NHS England must ensure that the Hib vaccination programme:

- is available to all children both registered and unregistered with a GP, as part of the childhood immunisation programme, up to the age of ten years;
- has no upper age limit for vaccination, and ensures those at particular high-risk can access vaccination with a different product, even if above the age of the current national programme. (Hib should be offered routinely to unvaccinated or partially vaccinated individuals up to the age of ten years, or for those at high-risk as outlined in the Green Book chapters 16, 22 and 7);
- addresses poor uptake, where local delivery is lower than the key deliverables set out in the S7A agreement and in accordance with the objective to reduce the variation in local levels of performance.

4.3 In addition:

- the vaccination status of every child must be checked at each visit and missing doses of relevant immunisations should be offered as appropriate to ensure that everyone has completed an age-appropriate course.

Vaccine schedule

4.4 One dose of Hib-containing vaccine should be given at 8, 12 and 16 weeks (as DTaP/IPV/Hib/HepB) and boosted at 12 months of age (as Hib/MenC – given along with the routine PCV, MMR and MenB booster).

4.5 In order to provide early protection, service providers must aim to complete the schedule at near as possible to the recommended ages.

4.6 Sufficient immunisation appointments must be available so that children can receive vaccinations on time. Waiting lists for immunisations are not acceptable.
4.7 Further information on scheduling for risk groups is available in the relevant chapters of the Green Book.

Vaccine ordering

4.8 All centrally procured vaccines must be ordered via the ImmForm online ordering system, details of which are given in the core specification.