

Travel vaccines (DROP-List)

Annually over £5.3 million (ePACT April 2014) is spent nationally on vaccines that are potentially not suitable to be prescribed on the NHS as they are mainly used for travel.

There has traditionally been a lack of clarity regarding the provision and charging for vaccinations for patients in at-risk groups, prior to travel and for occupational reasons. Most misunderstandings of the regulations are due to the confusion between the clinical advice for when to administer an immunisation for travel (as set out in the Green Book¹) and the regulations indicating how practices are paid for it (as set out in the former Red Book²).

This bulletin has therefore been developed to assist practices receiving requests from patients for travel immunisation, clarify national guidance on which immunisations may be prescribed on the NHS and which should be privately prescribed. Supporting data, a briefing and a patient information leaflet are also available here:

<http://www.prescqipp.info/resources/viewcategory/263-travel-vaccines-drop-list>

Areas not covered by this bulletin include the childhood primary immunisation schedule, national vaccination programmes (including catch-up programmes) and vaccination as indicated under the advice of the Health Protection Agency.³

Provision of travel advice: NHS patients are entitled to receive advice on recommended immunisations and malaria prophylaxis free of charge.⁴

Recommendations

- Vaccinations not allowed on the NHS should not be prescribed or supplied on the NHS for travel purposes. Patients should be charged for these vaccinations and associated costs.
- Hepatitis B vaccination is not commissioned under the NHS and this vaccination should be prescribed privately.¹
- Local policy should be established to agree whether combined hepatitis A and B vaccination can be prescribed on the NHS for travel purposes or should be prescribed as separate component vaccines with the hepatitis A on FP10 prescription and the hepatitis B prescribed privately. This should be discussed with the Local Medical Committee (LMC).
- Cost of different products for the same vaccines should be considered. Single vaccines are cheaper than combined in the case of hepatitis A and typhoid.

National guidance

Travel immunisations that can be given as part of NHS provision⁵

The following immunisations for travel are part of additional services under General Medical Services (GMS) and Personal Medical Services (PMS).⁴ Patients should not be charged a fee for these specified travel immunisations if the service is provided to registered patients. Practices can opt out of this provision and refer patients to a travel clinic.⁶

- Hepatitis A [infectious hepatitis] - first and second/booster dose
- Typhoid - first and any booster doses
- Combined hepatitis A and typhoid - first dose (second dose is Hepatitis A alone)

(Note: separate vaccinations are cheaper and more appropriate as they have different booster dosage schedules.⁷)

- Tetanus, diphtheria and polio combined vaccine
- Cholera.

Some vaccines are available on the NHS because they protect against diseases thought to represent the greatest risk to public health if they were brought into the country.

The vaccines for these are available at NHS expense in one of two ways:

- Purchased by the practice and personally administered payment claimed through FP34PD.
- Obtained by the patient on FP10 prescription. A prescription charge is payable to the pharmacy unless the patient is exempt. In this situation no claim for personal administration fees should be made through FP34PD.

Travel immunisations that cannot be given as an NHS service⁵

The following immunisations are not remunerated by the NHS as part of additional services:

- Hepatitis B (single agent)
- Meningitis ACWY (quadrivalent meningococcal meningitis vaccine; A, C, Y and W135)
- Yellow fever
- Japanese B encephalitis
- Tick borne encephalitis
- Rabies.

The practice may therefore charge a registered patient for the immunisation if requested for travel. The patient may either be given a private prescription to obtain the vaccines, or they may be charged for stock purchased and held by the practice. The process of administration of the immunisation is also chargeable. Practices should give the patient written information on the immunisation schedule proposed and the charges involved at the outset of the process.⁸ An FP10 (or equivalent NHS prescription) must not be used to provide these vaccines.

There is some ambiguity over the combined hepatitis A and B vaccination. Although the combination is prescribable on the NHS as a travel vaccine because it contains hepatitis A, hepatitis B is not commissioned by the NHS as a travel vaccine, so prescribers are not obliged to give the combination product as a travel vaccine on the NHS.

Local policy should be agreed on whether hepatitis A and B combined vaccine can be prescribed locally on the NHS for travel or whether the hepatitis A alone can be prescribed on an FP10 and hepatitis B vaccine should be given and charged as a separate private vaccination.

Private provision

The ambiguity on when to supply travel vaccines under the NHS or privately stems from the regulations regarding the charging of patients that are registered with the practice. Schedule 5 of the NHS regulations leaves the decision as to whether the practice levies a charge or not to the discretion of the practice.⁴ The regulations do not impose any circumstances or conditions as to when these immunisations should be given on the NHS or as a private service. Practices have to ensure that their policy is non-discriminatory and that this is not done contrary to the Equality Act 2010 (formerly the Disability Discrimination Act).⁹

For travel vaccines not available on the NHS a charge may be levied for:⁴

- The vaccine
- Administration
- Private prescription writing.

The level of charges should be determined by the practice; it is advisable to develop a practice protocol available to patients in the form of a leaflet or section of the practice leaflet or website.

Patients should be advised to compare prices as there may be variation in the amount that individual pharmacies will charge to supply the vaccination. Alternatively, practices may choose to buy in the vaccine directly and charge patients for the cost of the vaccine.

Possible charges after vaccination:

- Post-vaccination serological testing in the case of Hepatitis B administration, if performed for travel reasons.
- Provision of certification of immunisation (for example, confirmation of Meningitis ACWY135 administration).

Occupational health

Under the Health and Safety at Work Act,¹⁰ employers must pay for protective measures such as immunisation. In occupations where there is a risk to health from any form of work related infection it is the employer's duty to assess that risk and, if present, to protect the workforce.¹¹

Costs

Cost of individual products as per BNF 67 (March 2014) are shown in table 1.⁷ The lowest cost product or combination should always be supplied unless there is a clinical reason not to do so.

£5.3 million is spent on vaccines that should not be prescribed on the NHS and can be prescribed privately if required by patients for travel. **Total savings available nationally are £5.3 million (ePACT, April 2014). This equates to £9,400 per 100,000 patients. This savings figure assumes a local commissioning policy not to prescribe Hepatitis A and B combined vaccination on the NHS.**

The accompanying data pack shows prescribing data at CCG level and annual savings available for each CCG. The spend on the vaccines has been apportioned for travel and is an estimate.

Summary

Table 1 on the following page clarifies the availability on the NHS for each vaccine. In the case of travel immunisation it shows the current BNF cost per vaccine and suggests the possible charges that can be levied.⁷

Resources for further information

Further information on which vaccinations are necessary or recommended for the areas patients will be visiting are available on these two websites:

- Fit for Travel¹²
- National Travel Health Network and Centre (NaTHNaC)¹³

Further information on individual vaccines is available from the Summary of Product Characteristics (SPC) available at www.medicines.org.uk

Some countries require an International Certificate of Vaccination or Prophylaxis (ICVP) before you enter.¹⁴ For example, many tropical countries in Africa and South America will not accept travellers from an area where there is yellow fever unless they can prove that they have been vaccinated against it. Saudi Arabia requires proof of vaccination against certain types of meningitis for visitors arriving for the Hajj and Umrah pilgrimages. Providing a certificate of vaccination in such cases can be charged for.

Table 1- Travel vaccines available/not available on the NHS*Epaxal® (hepatitis A vaccine) will be discontinued by Crucell, part of Janssen, during 2014¹⁵

VACCINE	AVAILABLE ON NHS FOR TRAVEL ⁵	PRICE PER DOSE BNF 67 ⁷	POTENTIAL CHARGES
Bacillus Calmette-Guérin (BCG)	NO	N/A	Referral to a respiratory clinic is recommended for tuberculin testing and follow up for all patients requesting vaccination.
CHOLERA	YES The vaccine is not indicated for most travellers.	Dukoral® £23.42 (2 dose pack)	NONE
DIPHTHERIA/TETANUS/ POLIO	YES Stock centrally funded by the Department of Health as part of the childhood immunisation programme must NOT be used for the purposes of travel.	Revaxis® £6.50	NONE
HEPATITIS A	YES	Havrix Monodose® £22.14 Havrix Junior Monodose® £16.77 Vaqta® Adult 1-mL prefilled syringe £18.10 Vaqta® Paediatric £14.74 Avaxim® £18.10 Epaxal®* £23.81	NONE
HEPATITIS A/TYPHOID	YES Hepatitis A/Typhoid available on NHS, booster dosage not aligned so consider separate vaccines.	Hepatyrix® £32.08 ViATIM® £29.80	NONE

B74. Travel vaccines (DROP-List) 2.0

VACCINE	AVAILABLE ON NHS FOR TRAVEL ⁵	PRICE PER DOSE BNF 67 ⁷	POTENTIAL CHARGES
HEPATITIS A/B	<p>Establish local commissioning policy</p> <p>Hepatitis B is not available on NHS for the purposes of travel.</p> <p>Local policy should be agreed on whether hepatitis A and B combined vaccine can be prescribed locally for travel or whether the hepatitis B vaccine should be given as a separate private vaccination.</p>	<p>Twinrix® 1-mL prefilled syringe (Twinrix® Adult) £27.76, 0.5-mL prefilled syringe (Twinrix® Paediatric) £20.79</p> <p>Ambirix® £31.18 (under 16 years only)</p>	<p>If policy agreed to charge privately for hepatitis B as a separate vaccine:</p> <ul style="list-style-type: none"> • Private prescription • Cost of vaccine • Administration • Serological testing
HEPATITIS B	NO	<p>Engerix B® £12.99 (prefilled syringe) (under 16 years £9.67)</p> <p>Fendrix® £38.10</p> <p>HBvaxPRO® £12.20 (under 16 years £8.95)</p>	<ul style="list-style-type: none"> • Private prescription • Cost of vaccine • Administration • Serological testing
JAPANESE ENCEPHALITIS	NO	<p>Ixiaro® £59.50</p>	<ul style="list-style-type: none"> • Private prescription • Cost of vaccine • Administration
MENINGOCOCCAL - MENINGITIS ACWY	NO	<p>ACWY Vax® £16.73</p>	<ul style="list-style-type: none"> • Private prescription • Cost of vaccine • Administration • Certification

B74. Travel vaccines (DROP-List) 2.0

VACCINE	AVAILABLE ON NHS FOR TRAVEL ⁵	PRICE PER DOSE BNF 67 ⁷	POTENTIAL CHARGES
RABIES	NO	Rabipur® £28.80	<ul style="list-style-type: none"> • Private prescription • Cost of vaccine • Administration
TICK-BORNE ENCEPHALITIS	NO	TivoVac® £32.00 TivoVac Junior® £28.00	<ul style="list-style-type: none"> • Private prescription • Cost of vaccine • Administration
TYPHOID	YES	Typhim Vi® £9.30 Typherix® £9.93	NONE
YELLOW FEVER	NO Only available at designated Yellow Fever Vaccination Centre	N/A	SPECIALIST CENTRES ONLY

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Additional PrescQIPP resources



Briefing



Data pack



Patient information leaflet

Available here: <http://www.prescqipp.info/resources/viewcategory/263-travel-vaccines-drop-list>

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Non-subscriber publication December 2014.