

E: vtp01@gov.scot



Dear Colleague

VACCINATION TRANSFORMATION PROGRAMME - TRAVEL HEALTH SERVICES

1. We are writing to provide you with information about Travel Health Services within Scotland as part of the Vaccination Transformation Programme (VTP).

Background

2. On 13 November 2017, to support the 2018 GMS contract, a letter of intent was signed by Health and Social Care Partnership (HSCP) Chief Officers, NHS Chief Executives, Scottish General Practitioners' Committee (SGPC) and the Scottish Government supporting an alternative approach to how vaccination services are delivered across Scotland, which was set out in a co-produced draft [Memorandum of Understanding](#) (MOU).
3. The MoU, supporting the implementation of the new contract in Scotland which began in April 2018, set out a programme of service redesign to ensure that nationally contracted arrangements for GP services better meet the needs of the whole system and the needs of communities.
4. This includes the delivery of vaccinations, with responsibility for operational delivery being transferred to the Local Integration Joint Boards (IJBs), Health and Social Care Partnerships (HSCPs) and territorial Health Boards. This is to allow GP practices to focus on wider GP services.
5. The redesign and implementation of vaccination delivery includes Travel Health advice and travel vaccination services. Our aim is that this will ensure a localised, improved and consistent Travel Health service delivery model is implemented across Scotland.

From the Chief Medical Officer
Chief Nursing Officer
Chief Pharmaceutical Officer
Professor Sir Gregor Smith
Professor Alex McMahon
Professor Alison Strath

31 March 2022

SGHD/CMO(2021)13

For action

General Practitioners
Practice Nurses
Primary Care Leads, NHS Boards
NHS Board Immunisation Coordinators
NHS Board Medical Directors
Nurse Directors, NHS Boards
Directors of Public Health
Infectious Disease Consultants
CPHMs

For information

NHS Board Chief Executives
Directors of Pharmacy
Consultant Physicians
Public Health Scotland
Chief Executive, NHS Health Scotland
NHS 24
Scottish General Practitioners Committee
Royal College of Physicians and Surgeons

Further Enquiries

Policy Issues
Vaccination Policy Team
vtp01@gov.scot

Medical Issues
Dr Syed Ahmed
St Andrew's House
syed.ahmed@gov.scot

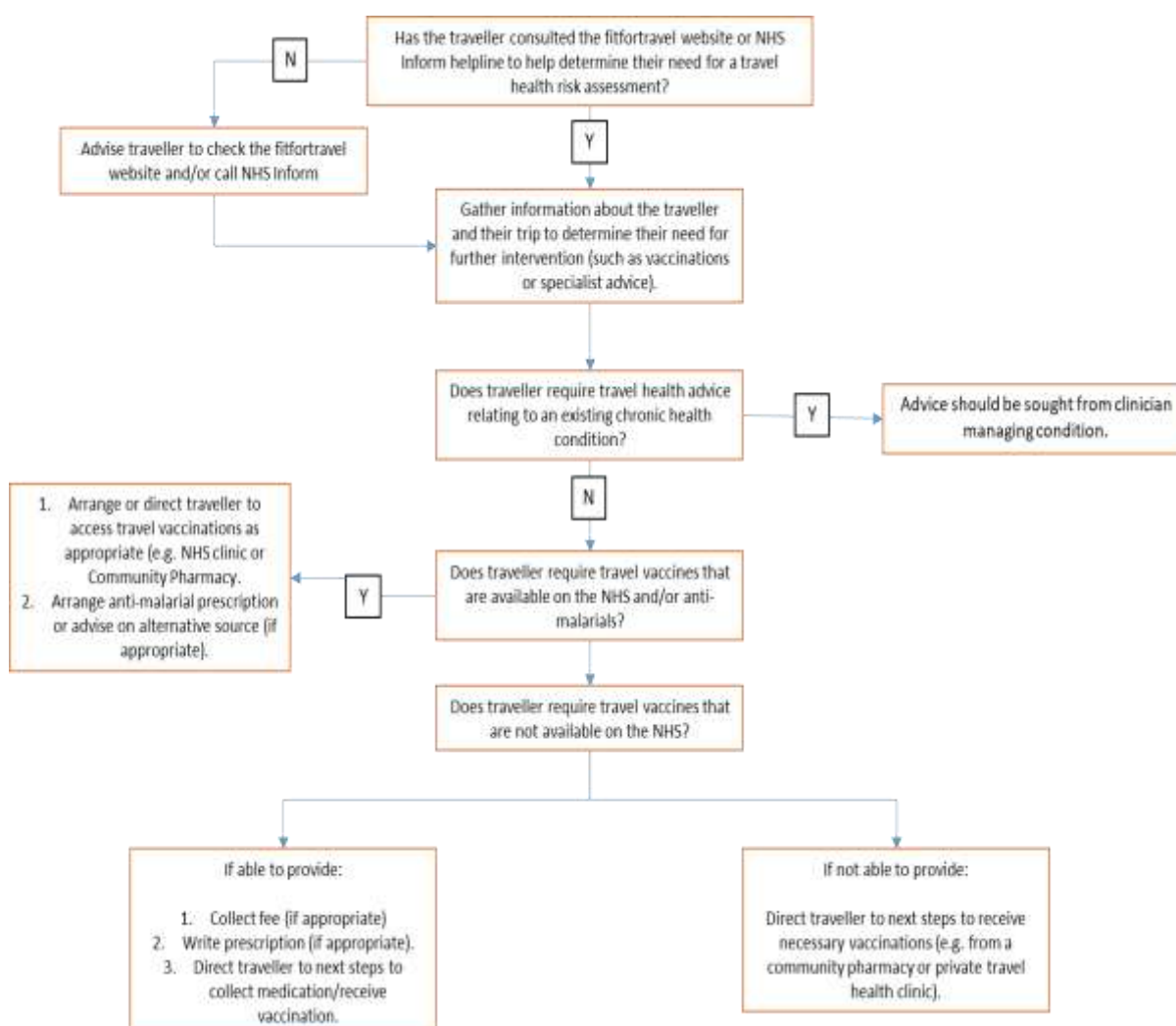
Pharmaceutical and Vaccine Supply
William Malcolm
NHS National Services Scotland
william.malcolm@nhs.scot

Process

6. The national specification outlines a two part operational model to be delivered by each Health Board which covers:

Part 1	The prescription and administration of vaccines that are currently available free of charge in the NHS.
Part 2	Facilitated access to non-NHS provided Travel Health services, including prescription or signposting of anti-malarial prophylaxis and vaccines which are not available free of charge in the NHS.

7. The model allows for a national entry at operational part 1, where the traveller accesses the “FitForTravel” Website or NHS Inform, which will provide non-patient specific general advice on Travel Health and vaccinations.
8. Each Health Board is responsible for developing a service delivery model most suitable to their local needs and adheres to the minimum standards set out in the Travel Health for Scotland: Best Practice and [Minimum Standards document](#) and including a clinical review and risk assessment.
9. The diagram below outlines a traveller’s journey at the consultation stage:



“FitForTravel” Website

10. Phase 1 of the “FitForTravel” website ([Home - Fit for Travel](#)) redevelopment includes a landing page, which signposts individuals to Travel Health services within their local area. This is being developed to meet the April 2022 rollout of VTP. Phase 1 will not provide the facility for a user to self-assess their need for a Travel Health appointment, beyond the user’s ability to assess and interpret the information as currently displayed on the “FitForTravel” website.
11. Phase 2 of “FitforTravel” website, due to be delivered by March 2023, will enable individuals to preliminary self-assess the requirement for vaccination for their destination and will direct them to the relevant health protection/disease prevention advice on the site before directing them to the local Travel Health service.
12. The TRAVAX website will run alongside “FitForTravel”, and is available to support the health professional audience. TRAVAX is funded by the Scottish Government and is provided free to those using the service for NHS purposes in Scotland. There is a small charge for NHS users in other parts of the United Kingdom. For those working in the UK but outside the NHS, group, private and overseas subscriptions are available.
13. Health Board Travel Health services delivery models will vary, with some solely providing the NHS vaccines (Category 1) and others who will also provide private services beyond the NHS Travel Vaccines (Category 2). Category 1 users will be eligible for free TRAVAX access, whilst Category 2 users will require to subscribe to TRAVAX.
14. Health Boards should forward the requests for TRAVAX access for Category 1 users to phs.travax@phs.scot. Category 2 users should register independently with TRAVAX at <https://www.travax.nhs.uk/login/register>.

NHS Inform

15. For those individuals who cannot access the “FitForTravel” website, they will be able to call the NHS Inform helpline number, 0800 22 44 88, where call handlers will be available to talk individuals through the process over the phone.
16. NHS Inform website ([Travel health and vaccinations | NHS inform](#)) includes links to “FitForTravel” website.

Consultation/risk assessment

17. As part of operational level 2, Health Boards must provide a Travel Health risk assessment/consultation.
18. After completion of a Travel Health risk assessment, Health Boards should direct the traveller to access local administration of vaccines or prescription/signposting to anti-malarial prophylaxis and non-NHS funded vaccines if appropriate. Health

Boards only provide NHS vaccines for those who reside within their Health Board territory.

Patient Group Direction

19. The national specimen Patient Group Direction (PGD) templates for administration of each of the travel vaccines, both NHS and non-NHS funded, to support Health Boards through VTP, are available on the Public Health Scotland website at:

https://publichealthscotland.scot/publications/?q=&fq=phs_publication_type%3APatient+Group+Direction%23

20. Health Boards may use these to develop locally approved PGDs to meet local needs.
21. Health Boards using community pharmacies to deliver NHS funded travel vaccines through local SLA can use and share their own locally approved Health Board PGDs with their appointed community pharmacies.
22. For non-NHS funded vaccines, an independent healthcare provider registered in England and Wales can enter into an arrangement with a pharmacist based in a Scottish community pharmacy to operate under a PGD. This applies even if the provider is not registered in Scotland.

Vaccine usage

23. Full details on use, dosage, administration, concomitant administration with other vaccines, contraindications, consent and reporting of adverse reactions with Travel Vaccines is set out in chapters 14, 15, 17, 18, 20, 22, 27, 31, 32, 33 and 35 of the Green Book. Please see Annex B for links to the Green Book.

Recording vaccinations

24. The “FitForTravel” website will provide non-patient specific general advice on Travel Health and vaccinations, including a landing page, where the public will be signposted to Health Board landing pages detailing how to access local Travel Health services.
25. Recording of Travel Health vaccinations will be developed in two phases.
26. Phase 1 will allow for the recording of five free travel vaccinations, available on the NHS being recorded, to be recorded on the Vaccine Management Tool (VMT). This minimal viable product (MVP) will:
- capture demographics (CHI look up.)
 - capture ethnicity – this data will be used for statistics, research and public health planning to tackle health inequalities.
 - centrally record vaccinations given to travellers, reducing the risk of unnecessary re-vaccination in future.
 - enable data flows into NCDS and GPIT to update clinical records.

- ability to manually add vaccine batch numbers for products not centrally procured.

27. Five free travel vaccinations provided by the NHS in Scotland (Phase 1 recording - delivery by mid-April 2022, though date is yet to be confirmed.):

- Diphtheria, Polio and Tetanus (combined booster)
- Hepatitis A
- Typhoid
- Hepatitis A / Typhoid
- Cholera

Patient Vaccine Record

28. Patients are entitled to request vaccination reports held by GPs by making a Subject Access Request (SAR) under GDPR, and will be able to view their records free of charge. To support delivery of travel vaccines by Health Boards, there should be standard sharing of information by GPs.

Vaccine supply

29. Travel Vaccines are not centrally procured, either by the UK or Scotland.
30. The Diphtheria, Polio and Tetanus vaccine is used as part of the Schools' Immunisation programme. This UK procured stock should not be used for travel purposes, as this could result in insufficient vaccine for the National Immunisation Programme.
31. Travel Vaccines, both free and chargeable, should be procured from the manufacturers directly or pharmaceutical wholesalers.

Reporting of adverse reactions

32. Suspected adverse drug reactions (ADR) to vaccines should be reported via the Yellow Card Scheme (www.mhra.gov.uk/yellowcard). Chapter 9 of the Green Book gives detailed guidance about which ADRs to report and how to do so. Additionally, Chapter 8 of the Green Book provides detailed advice on managing adverse events following vaccination. Information on the side effects of Travel Vaccinations are available in the Chapters 14, 15, 17, 18, 20, 22, 27, 31, 32, 33 and 35 of the Green Book. These chapters are available at:

<https://www.gov.uk/government/organisations/public-health-england/series/immunisation-against-infectious-disease-the-green-book>

Workforce Education

33. In order to support registered practitioners who will be providing the Scottish Government Travel Health level 2 specification of the VTP Travel Health vaccination services, workforce education will be delivered in two phases.

34. In both phases, the workforce education provided will be only one strand of the anticipated learner journey to achieve proficiency in the delivery of the Travel Health level 2 specification. Engaging with this learning will not be considered sufficient to achieve all the necessary knowledge and skills to deem the registered practitioner proficient to undertake this service. Health Boards are expected to refer to the specific Travel Health RCN competencies (Level 5 of the NHS career framework) to ascertain what additional training is required by staff. Employers will remain responsible for recruitment, support and supervision of learners and proficiency assessment, prior to practice. Mandatory and essential learning including, but not limited to anaphylaxis and basic life support, infection prevention and control remain the responsibility of the employer under their clinical and educational governance procedures.
35. Phase 1: Procured by the Scottish Government, an external training provider, **TREC** has been awarded the contract to deliver Phase 1 of Travel Health training. TREC will deliver 5 Travel Health training courses from the end March through to April 2022.
36. Course Overview - [TREC 2 Day Travel Health Training Course details.pdf](#)
37. The course will be held over 2 consecutive days (9am until 4pm), and it is expected and essential that participants attend the full course.
38. Health Boards have been allocated a proportionate number of training spaces which will be delivered virtually.
39. Phase 2: NHS Education for Scotland (NES), working closely with stakeholders including Public Health Scotland (PHS), will provide an eLearning programme. It is anticipated this will be available in later in the year and will be hosted on Turas Learn. The workforce education resource will help support registered practitioners who will be providing the Level 2 Tier of the new Travel Health service for Scotland being introduced at local Health Board level.
40. For those providing more specialist Travel Health services. further education will be required. Courses available in travel medicine include that offered at- [Faculty of Travel Medicine Home Page \(rcpsg.ac.uk\)](#)

Transitional Arrangements

41. SG Primary Care intend to publish formal directions on transitional arrangements for GP practices which will be continuing to provide vaccinations shortly. As the interim notices will expire at the end of the financial year, Health Boards have been advised to issue further holding notices asking practices to provide vaccination where applicable until **15 June 2022**.
42. The holding notices will mitigate the risk of any gaps arising between the initial notices and the notices that Health Boards may issue following the issue of directions. It is anticipated that direction would be published by that date, including a final decision on the rural options appraisals.

43. Health Boards have been asked to action this guidance before 1 April 2022.

Communications

Communication materials for patients

44. All communications to support the changes to Travel Health services should be coordinated both nationally and locally and released **4 April 2022**.
45. PHS and SG are working together to produce high level Travel Health (TH) national communications. This will involve a social media toolkit that will be shared with Health Boards on **30 March 2022**. This will promote key messages and signpost the public to the “FitForTravel” website where they can access local Health Board contacts and information.
46. Online information for the public can be found within the Travel Health service page on NHS inform at: [Travel health and vaccinations | NHS inform](#) and “FitForTravel” at: [Home - Fit for Travel](#)
47. There should be local communication strategies developed to inform the local population of the changes to local Travel Health delivery.

Communications with GPs

48. GP practice staff should direct enquirers to the local webpage, and provide a record of a patients’ vaccination record, If requested.

Financial

49. The [GMS Statement of Financial Entitlements 2020-21](#) (Table 15) contains information about which vaccinations may be provided by the NHS for the purposes of foreign travel.

Action

50. Health Boards and participating GP practices are requested to action this guidance and ensure that their vaccination teams and community pharmacy contractors are aware of it.

Yours sincerely,

Professor Sir Gregor Smith Professor Alex McMahon Professor Alison Strath

Chief Medical Officer Chief Nursing Officer Chief Pharmaceutical Officer

TRAVEL HEALTH

Definitions

1. A traveller is any individual travelling to a country out-with the UK and includes children, pregnant travellers, and those with underlying medical conditions.
2. Travel Health Provision does not apply to post travel service provision other than the ability to recognise and refer common syndromes in returning travellers.
3. The essential aspects of "Travel Health Provision" are:
 - A pre travel risk assessment in order to triage and signpost to appropriate travel health services
 - Provision of pre travel advice to include, but not limited to: personal safety and environmental risk, infection risk, and advice regarding existing health conditions pertinent to travel (this does not include general management of existing health conditions)
 - Provision of pre travel vaccination advice and administration of recommended vaccines to include all vaccinations whether NHS or non-NHS
 - Assessment of malaria risk and provision of advice on malaria prevention if needed. This includes bite avoidance advice and the prescription of anti-malarial chemoprophylaxis.

Categories of Traveller

Travellers may be broadly categorised as either Low, Medium, or High risk:

- Low Risk

Low risk travellers are those travellers going to countries where minimal health risks are present; vaccinations are not needed (other than those recommended for visiting/residing in the UK); there are no special needs (e.g. infants, pregnant, underlying medical conditions); there is no malaria risk, and there are no restrictions to the chosen mode of transport ('fitness to fly'). These travellers would not need to consult a healthcare practitioner, and instead could be signposted to an advice source such as "FitForTravel" website and/or NHS Inform helpline.

- Moderate risk

Moderate risk travellers are those travellers going to countries and participate in activities where there may be health risks present; vaccinations may be needed there may be special needs (e.g. infants, pregnant, underlying medical conditions); there may be malaria risk. Moderate risk travellers may also be those travellers going to countries where there is a malaria risk, but where vaccinations are not needed. These travellers would need to have a consultation with a healthcare practitioner with the appropriate competencies in travel medicine (see: [Royal College of Nursing \(2018\) Competencies: travel health nursing: career and competence development, London: RCN](#)), but would not necessarily need to see a travel medicine practitioner in person. These travellers will make up the majority requiring Travel Health service provision.

- High risk

High-risk travellers are those travellers going to countries where there may be health risks present; vaccinations may be needed; there may be special needs (e.g. infants, pregnant, underlying medical conditions); there may be malaria risk. In addition, there are other factors such as: requiring specialist vaccines such as; rabies and yellow fever; there are complex underlying medical conditions such as immunosuppression; there is a complex travel itinerary e.g. multiple malaria countries etc.; there are other complex needs. These travellers will need to have a consultation with a healthcare practitioner and depending on particular circumstances, may need to be referred to a specialist travel clinic for additional advice.

Travel health consultation

- Travellers will initially be sign-posted to a generic, free resource on “FitForTravel.
- Those travellers who do not need to consult with a travel medicine practitioner will be given appropriate travel health advice at point of contact.
- Those travellers who do need to consult with a travel medicine practitioner will be sign-posted to an appropriate provider.

Immunisation against Infectious Disease (The Green Book)

Five free travel vaccinations provided by NHS in Scotland:

51. Diphtheria, Polio and Tetanus (combined booster) (chapter 15): [Immunisation against infectious disease - Chapter 15 - Diphtheria \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/immunisation-against-infectious-disease-chapter-15-diphtheria)
52. Hepatitis A (chapter 17): [Green book chapter 17 hepatitis A \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/green-book-chapter-17-hepatitis-a)
53. Typhoid (Hepatitis A / Typhoid) (chapter 33): [Greenbook chapter 33 typhoid \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/greenbook-chapter-33-typhoid)
54. Cholera (chapter 14): [Immunisation against infectious disease - Chapter 25 - Cholera \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/immunisation-against-infectious-disease-chapter-25-cholera)

And payable vaccinations:

55. Rabies Chapter (chapter 27): [GreenBook chapter 27 rabies.pdf \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/greenbook-chapter-27-rabies-pdf)
56. Yellow Fever (chapter 35): [The Green book of immunisation - chapter 35 - yellow fever \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/the-green-book-of-immunisation-chapter-35-yellow-fever)
57. Japanese Encephalitis (chapter 20): [GreenBook chapter 20 - Japanese encephalitis \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/greenbook-chapter-20-japanese-encephalitis)
58. Tick-borne Encephalitis (chapter 31): [2905811 Green Book Chapter 31 v3_0 \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/2905811-green-book-chapter-31-v3-0)
59. Hepatitis B (chapter 18): [The Green Book on Immunisation - Chapter 18 Hepatitis B \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/the-green-book-on-immunisation-chapter-18-hepatitis-b)
60. Meningitis (chapter 22): [Green Book Chapter 22 Meningococcal v6.1 Meningococcal Chapter 22 Meningococcal \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/green-book-chapter-22-meningococcal-v6.1-meningococcal-chapter-22-meningococcal)
61. Tuberculosis (chapter 32): [Greenbook chapter 32 - tuberculosis \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/greenbook-chapter-32-tuberculosis)