

2020/21

Vaccination Subsidy Scheme

**Overview of
Vaccination Subsidy Scheme (VSS) 2020/21**

Updated in August 2020



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Department of Health

Overview of Vaccination Subsidy Scheme (VSS) 2020/21

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1. 2019/20 Vaccination Statistics

Number of doses of Seasonal Influenza Vaccination (SIV)
administered to target groups of various vaccination programmes

Government Vaccination Programme (GVP)	Vaccination Subsidy Scheme (VSS)	School Outreach Vaccination (Free of charge)	Total number of doses administered in 2019/20	Compared to 2018/19
556 000	508 000	334 000	1 398 000	+17.0%

(as at 12 July 2020)

1. 2019/20 Vaccination Statistics

Number of persons (and % of the persons in the target group) who received SIV under GVP and VSS

Target group	Number of vaccine recipients (% of the persons in the target group) in 2019/20 (As at 28 June 2020)
Children aged 6 months to <6 years	147,100 (47.3%)
Children aged 6 to under <12 years	253,400 (68.1%)
Persons aged 50 to 64 years	194,400 (10.7%)
Persons aged 65 years or above	610,300 (45.8%)
Others	112,600

Number of elderly (and cumulative %) who received a dose of 23vPPV or PCV13 under GVP and VSS

- Number of vaccine recipients: 88,500 (in 2019/20, as at 1 March 2020)
- Cumulative % of surviving elderly, among elderly population, who had received 23vPPV or PCV13 under the programmes since 2009: 45.5% (as at 1 March 2020)

2. VSS arrangement in 2020/21 – SIV

Eligible groups	Checking eligibility (HK residents)
Persons aged 50 to 64 years	50 years or older in that year
Elderly (aged 65 or above)	65 years or older in that year
Children aged 6 months to under 12 years (or attending primary school)	Photocopy of student handbook or student card (for primary school students aged 12 or above)
Pregnant Women	Pregnancy status confirmed by the enrolled doctor on the consent form
Persons with intellectual disability	<p>One of the following document proof:</p> <ul style="list-style-type: none"> • Registration Card for People with Disability (with indication of intellectual disability*) • Medical Certificate • Certificate issued from designated PID institutions <p>*The term "mentally handicap" is also accepted</p>
<p>Persons receiving disability allowance*</p> <p>Recipients of standard rate of “100% disabled” or “requiring constant attendance” under Comprehensive Social Security Assistance (CSSA) Scheme of SWD ^</p>	<p>*Approval letter for Disability Allowance issued by Social Welfare Department (SWD)</p> <p>^ “Certificate of CSSA Recipients (for Medical Waivers)” issued before 15 Dec 2018; or the new Annex page of “Notification of Successful Application” / “Notification of Revision of Assistance” AND sign a self-declaration form provided at VSS clinics</p>

2. VSS arrangement in 2020/21 – SIV

VSS Clinics or VSS Outreach Vaccination

- Subsidy level: **HK\$240** each dose for persons eligible under VSS
- Enrolled doctors may charge extra fee

VSS School Outreach (Extra charge allowed)

- **School children** (regardless of HK resident status) of participating primary schools (including primary section of special schools, kindergartens, kindergarten-cum-child care centres, child care centres will be subsidised
- **School staff/ family members** of students can also join the activity
- Eligible persons will be subsidised (HK\$240 per dose)
- Those ineligible under VSS can be vaccinated at their own costs

2. VSS arrangement in 2020/21 – Pneumococcal Vaccination

Subsidy level

- 23-valent pneumococcal polysaccharide vaccine (23vPPV) - **HK\$300** per dose
- 13-valent pneumococcal conjugate vaccine (PCV13) - **HK\$760** per dose
- Enrolled doctors may charge extra fee

Type of pneumococcal vaccine to provide

	Has not received any pneumococcal vaccination	Has received 23vPPV	Has received PCV13	Has received both PCV13 and 23vPPV
<u>Without</u> high-risk conditions	One dose of 23vPPV	Not needed	Not needed	Not needed
<u>With</u> high-risk conditions	One dose of PCV13 One dose of 23vPPV one year after	One dose of PCV13 (one year after the previous 23vPPV)	One dose of 23vPPV (one year after the previous PCV13)	

2. VSS arrangement in 2020/21 – Pneumococcal Vaccination

List of high-risk conditions of severe invasive pneumococcal diseases

- History of invasive pneumococcal disease;
- Immunocompromised states:
 - ◆ Asplenia, HIV /AIDS , primary immunodeficiency
 - ◆ Immunodeficiencies related to malignancies and transplantation
 - ◆ Immunodeficiencies related to use of immunosuppressive drugs / systemic steroid
- Chronic disease
 - ◆ Chronic cardiac, pulmonary, liver or renal disease
 - ◆ Diabetes mellitus or Cerebrospinal fluid leakage
- With cochlear implants

Under VSS, elderly with chronic metabolic diseases, obesity (BMI 30 or above), chronic neurological conditions that can compromise respiratory functions, the handling of respiratory secretions, increase the risk for aspiration or those who lack the ability to take care of themselves are eligible for subsidised pneumococcal vaccination

3. Roles and Responsibility of Enrolled Doctors

Eligibility to enroll (or continue enroll) in VSS

- VSS doctors have to be listed in the **Primary Care Directory** (PCD)
 - ◆ www.pcdirectory.gov.hk for information
- For maintenance in the PCD, doctors need Continuing Medical Education (**CME**)
 - ◆ Specialists: should be in Specialist Register
 - ◆ Non-specialists:
 - join the “CME programme for practising doctors who are not taking CME for specialists” of **the Medical Council of Hong Kong**
 - accumulate the required CME points for obtaining the yearly CME certificate or become qualified to quote the title “CME-Certified”

3. Roles and Responsibility of Enrolled Doctors

Overall role and responsibility

- It is the prime responsibility of all doctors to ensure **safety and quality** of vaccination service, at clinics or outreach settings

Supervision

- Enrolled doctors should
 - ◆ Ensure **sufficient number** of qualified healthcare/ trained personnel to provide service and medical support
 - ◆ **Train and supervise** the staff providing the vaccination service
 - ◆ **Retain personal responsibility** for treatment of patients/ vaccine recipients

3. Roles and Responsibility of Enrolled Doctors

Prescription and health assessment

- Place order for vaccines early
- Proper vaccine storage and maintain cold chain
- Check the recommendation, **age** registered for use, dosage, route of administration, **expiry date**, **vaccine contraindications** and **precautions** in package inserts
- The enrolled doctor is **highly preferred to be present** at the vaccination venue, and should be personally and physically reachable in case of emergency

3. Roles and Responsibility of Enrolled Doctors

Preparation, procedures and vaccination skills

- **Check vaccination history / record**
- Explain about the vaccinations (e.g. type of vaccines, side effects and how to manage, subsidy)
- **Conduct health assessment** of recipients' suitability for receiving vaccination
- Screen for contraindications and take the precautions
- Ensure "Consent to Use Vaccination Subsidy" form is completed and signed

4. Preparation, Procedures and Vaccination Skills

Vaccination equipment

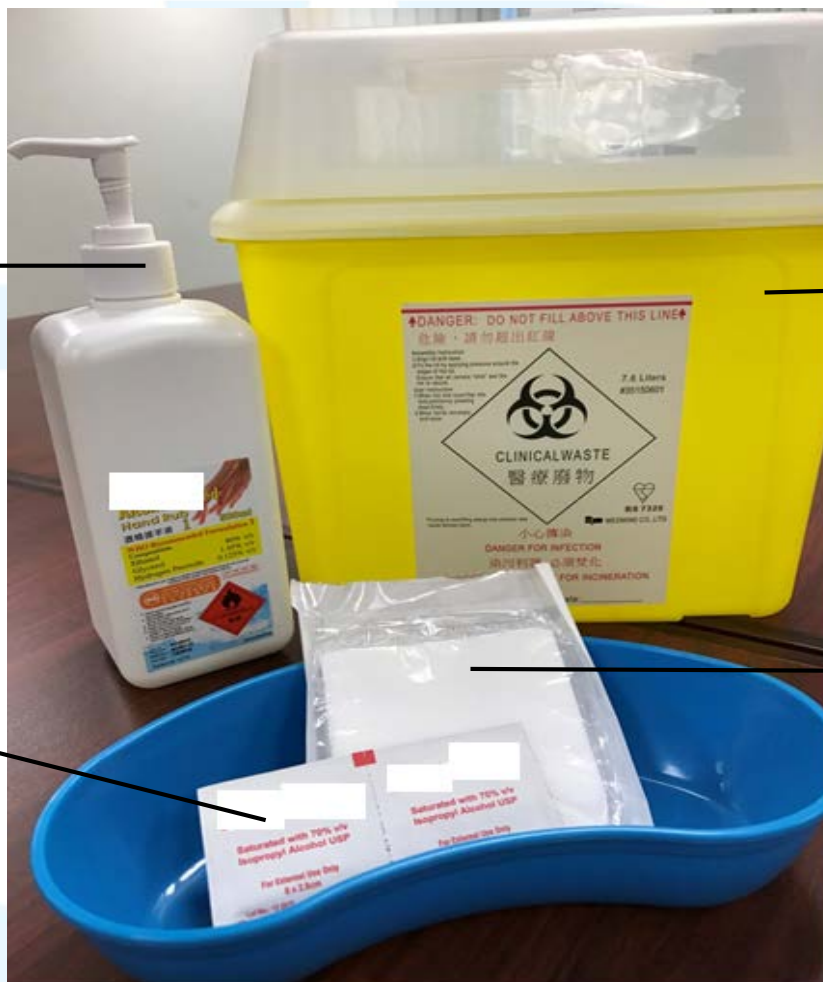
- **Ensure equipment are not expired**

70-80 %
Alcohol-
based
Handrub

Alcohol
Preps

Sharps
Box

Dry
clean
Gauze



4. Preparation, Procedures and Vaccination Skills

Prepare for emergency situations

- Qualified personnel to standby to provide **timely intervention**
- Ensure all emergency **equipment** (e.g. Bag Valve Mask, BP monitor) is **sufficient**, and emergency **drugs** (e.g. adrenaline auto injector or adrenaline) are **not expired**
- Keep written protocol and training materials for reference



**Written protocol for
emergency management**

4. Preparation, Procedures and Vaccination Skills

Hand hygiene practice

<https://www.youtube.com/watch?v=YGSbWriRI6U&feature=youtu.be>



4. Preparation, Procedures and Vaccination Skills

Infection control

- Use **70-80%** alcohol-based hand rub for hand hygiene
- Use new alcohol prep/ swab for skin disinfection and allow the site to **DRY** completely before vaccination
- For skin disinfection, wipe the skin area from **centre outwards**, without touching the same area repeatedly
- Use another **new** alcohol swab or clean gauze for post vaccination compression of injection site
- **DO NOT self-prepare** alcohol swab by soaking cotton wool in a container of alcohol as there will be contamination in the process

4. Preparation, Procedures and Vaccination Skills

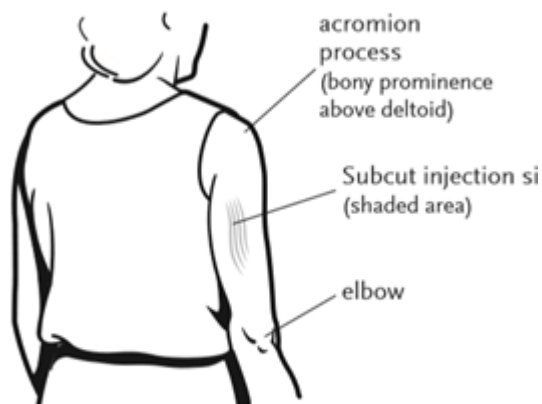
3 checks and 7 rights before vaccination

- **3 Checks:**
 - ◆ Check when taking out vaccine from storage
 - ◆ Check before preparing the vaccine
 - ◆ Check before administering the vaccine
- **7 Rights:**
 - ◆ **Right recipient**
 - ◆ Right vaccine
 - ◆ Right dosage
 - ◆ Right time (e.g. correct age, correct interval, **vaccine not expired**)
 - ◆ Right site
 - ◆ Right route, needle length and technique
 - ◆ Right documentation

4. Preparation, Procedures and Vaccination Skills

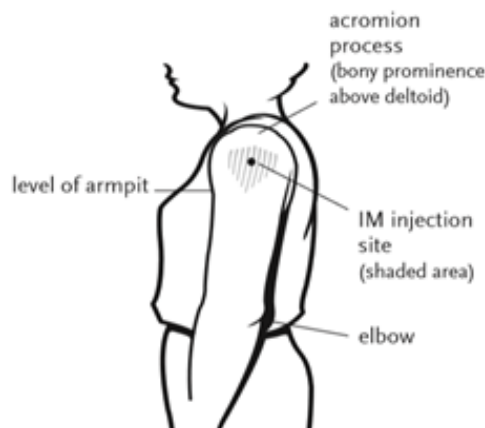
Vaccination skills

Fatty tissue over triceps



Insert needle at a 45° angle into the fatty tissue overlying the triceps muscle. Make sure you pinch up on the subcutaneous tissue to prevent injection into the muscle.

Deltoid muscle of arm



Give in the central and thickest portion of the deltoid muscle – above the level of the armpit and approximately 2–3 fingerbreadths (~2") below the acromion process. See the diagram. To avoid causing an injury, do not inject too high (near the acromion process) or too low.

Anterolateral thigh muscle



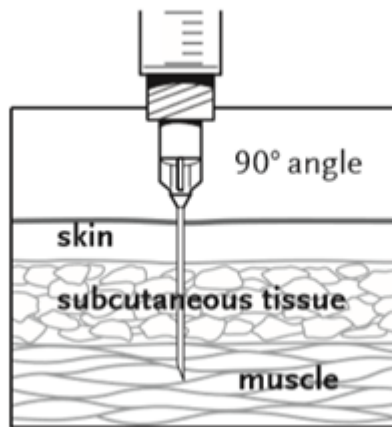
Insert needle at a 90° angle into the anterolateral thigh muscle.

Source: Immunization Action Coalition (IAC), U.S.A.

4. Preparation, Procedures and Vaccination Skills

Vaccination skills

Intramuscular (IM) injection

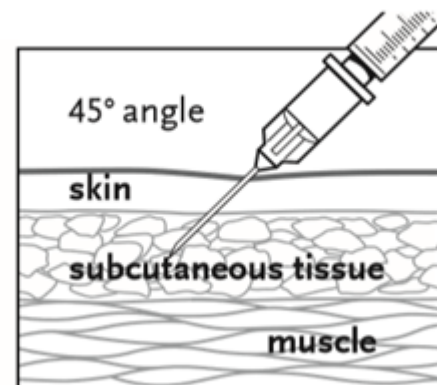


Source: Immunization Action Coalition (IAC), U.S.A.

Intranasal injection



Subcutaneous (SC) injection



Source: Immunization Action Coalition (IAC), U.S.A.

4. Preparation, Procedures and Vaccination Skills

Prevention of sharps injuries

- Ensure that the recipient is adequately prepared
- **Avoid recapping** needles
- Discard used sharps **directly after use** and dispose them into a robust sharps box
- Place the sharps box **within arm's reach**
- Seal and replace sharps container when three-quarters full

Proper disposal of clinical waste

- Clinical waste should be properly handled and disposed in accordance to EPD's Waste Disposal (Clinical Waste) (General) Regulation.

4. Preparation, Procedures and Vaccination Skills

Documentations

- **Vaccination record/ clinic log** for record tracing or checking
 - ◆ Contents: recipients' identity, vaccine type / date / expiry date / lot number of vaccine, name of personnel who administered the vaccine, etc.
- **Recipients' self-held vaccination card**
 - ◆ Contents: name of vaccine recipient, type of vaccine given, date of vaccination and name of vaccine provider

Advise on arrangement of second dose of SIV

- For children aged below 9 years and have never received seasonal influenza vaccine before

4. Preparation, procedures and vaccination skills

On-site inspection of vaccination at non-clinic settings in 2019/20

- Areas for improvement identified during inspections, examples:
 - ◆ Venue: space, safety
 - ◆ Emergency equipment: preparation, sizes for age groups
 - ◆ Cold chain: positioning of thermometer probe, use of max-min thermometer,
 - ◆ Sharps handling: position of sharps box
 - ◆ Infection control practice: hand hygiene, skin disinfection
 - ◆ Injection technique
 - ◆ Documentation: vaccination cards, clinic record

5. Vaccine storage and cold chain

Prevent cold chain breakage

- Equipment to prepare: fridge, thermometer, socket, etc
- Procedures to follow: routines and contingency plan
- Follow vaccine manufacturers' recommendations
- Maintain cold chain and **store vaccines between 2-8°C**
- **Do not use bar refrigerators**
- Purpose-built vaccine refrigerators (PBVR) are preferred for vaccine storage

Reference: Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings – Module on Immunisation

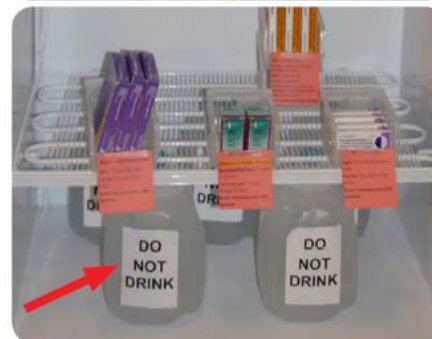
(https://www.fhb.gov.hk/pho/english/resource/files/Module_on_Immunisation_Children.pdf)

5. Vaccine storage and cold chain

Domestic frost-free refrigerator can be used with **precautions** if PBVR is not available.

Example of **precautions**:

- ◆ water bottles in the floor, drawers and door of the fridge to stabilize the temperature
- ◆ Check spot, maximum and minimum temperature twice daily



Water bottles on unit floor



Water bottles in unit door

Details are in the VSS Doctors' Guide (<https://www.chp.gov.hk/en/features/45838.html>)

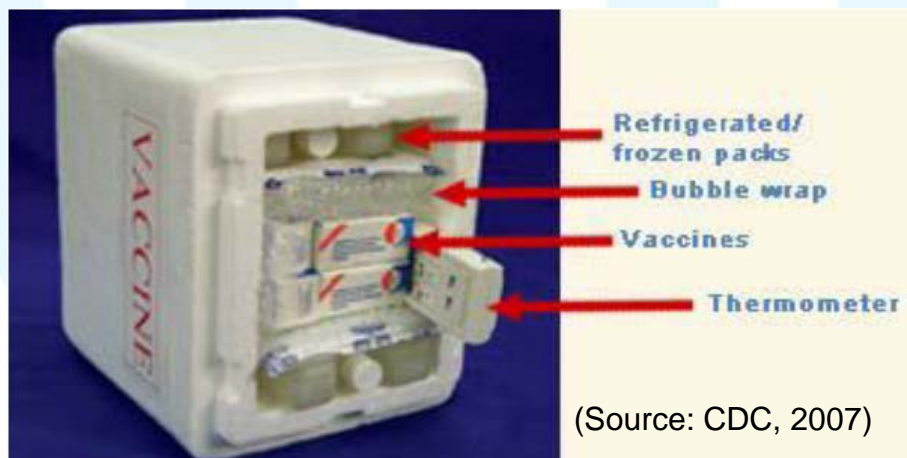
5. Vaccine storage and cold chain

Use of cold boxes at non-clinic setting

- Sufficient stock of ice packs to **meet the needs** of vaccination activity and transport
- Adequate insulating materials between ice packs and vaccines to **prevent freezing of vaccines**
- **Monitor vaccine temperature** during transport to and from the venue

Details are in the VSS Doctors' Guide (<https://www.chp.gov.hk/en/features/45838.html>)

Packing Cold Box



Example of maximum-minimum thermometer (reference only)



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5. Vaccine storage and cold chain

Actions to take in case vaccines are exposed to out-of-range temperatures

- Label **“Do Not Use”** on them and **store properly in cold chain**
- Consult vaccine manufacturer whether the vaccines are still effective / usable
- Inform Programme Management and Vaccination Division (PMVD) if
 - ◆ **VSS recipients are involved, and**
 - ◆ Manufacturer replied that the affected vaccines are not effective / usable
- Find out cause, correct the problem, take **preventive measures**
- **Follow up with the recipients** administered with the vaccines and assess the need for re-vaccination

7. More Information

- CHP website – webpage on “Vaccination Schemes”
<https://www.chp.gov.hk/en/features/17980.html>
- CHP website – **videos on procedures/ cold chain**
<https://www.chp.gov.hk/tc/features/102010.html>
- Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings – Module on Immunisation
https://www.fhb.gov.hk/pho/english/resource/files/Module_on_Immunisation_Children.pdf

項目管理及疫苗計劃科

Programme Management and Vaccination Division

電話 Phone	: 2125 2125
傳真 Fax	: 2713 9576
電郵 Email	: vacs@dh.gov.hk
地址 Address	: 九龍亞皆老街147C號衛生防護中心二樓 2/F, Centre for Health Protection, 147C Argyle Street, Kowloon
網站 Website	: https://www.chp.gov.hk/en/features/17980.html

Thank You