Public-Private-Partnership
DOCTORS’ GUIDE

for
Primary School Outreach and
Kindergarten/Child Care Centre Outreach

2020/21
Seasonal Influenza Vaccination
School Outreach
(Free of Charge)
# PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

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DISCLAIMER

This Guide is for doctors joining the 2020/21 Seasonal Influenza Vaccination (SIV) School Outreach (Free of charge) (SIV School Outreach) for Primary School Outreach and/or Kindergarten/Child Care Centre (KG/CCC) Outreach. It serves as a supplement to the Doctors’ Guide to Vaccination Subsidy Scheme (VSS) (https://www.chp.gov.hk/en/features/45838.html). It highlights the roles and responsibilities of the doctors and areas that he/she should note when offering outreach vaccination services to primary school and KG/CCC children under the SIV School Outreach. Please also refer to the VSS Doctors’ Guide for information about seasonal influenza vaccine (SIV), vaccine cold chain maintenance, and management of adverse events following immunization, as well as the general requirement and logistics under VSS. Doctors participating in the SIV School Outreach are required to read and follow both guides when providing outreach vaccination activities.

This Guide serves as a living document for doctors’ reference. We welcome doctors’ questions, comments or feedback on this Guide so that we can improve on it. The contents of the Guide will be updated continuously in the webpage http://www.chp.gov.hk. If you have any comments or questions, please send them to the Programme Management and Vaccination Division (PMVD) of the Department of Health (DH).

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Always make sure that you have the latest version by checking the CHP website http://www.chp.gov.hk
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

1.  INTRODUCTION

The Government launched the School Outreach Vaccination Pilot Programme in 2018/19 to increase SIV uptake in primary school children. In 2019/20, DH regularised school-based SIV outreach to cover interested primary schools and expanded to KG/CCCs as a pilot programme. The Government has also been providing subsidised/free SIV to eligible children aged 6 months to less than 12 years under VSS.

The responses from the participating doctors, schools and parents are all encouraging, with an increase in the children’s vaccination rate. This year, KG/CCC Outreach will be regularised in 2020/21 SIV School Outreach (Free of charge). All students in the participating schools will be eligible to receive free SIV, irrespective of their HK resident status. The SIV School Outreach (Free of charge) consists of the Primary School Outreach and KG/CCC Outreach.

Primary School Outreach

Under the Primary School Outreach, DH will be responsible for purchasing SIVs and the delivery logistics. PPP doctors will arrange the vaccination date with schools, provide the vaccination and handle clinical waste. Vaccination activities must be arranged during school hours i.e. Monday-Friday, 8am-3pm.

PPP doctors are required to provide the second dose of SIV at schools for those students under 9 years of age who have never received SIV before at least 4 weeks after the first dose. It is expected that the first dose should be given within two vaccination days and the second dose should be given within one vaccination day.

Participating PPP doctors will be given HKD$100 as injection fee for each dose of SIV given to primary school children for the outreach vaccination. They are not permitted to charge extra service fees from schools/parents.

KG/CCC Outreach

Under the KG/CCC Outreach, PPP doctors will be responsible for purchasing SIVs, arranging vaccination date with schools, delivering SIV to the schools, providing the vaccination and clinical waste disposal. SIV provided must be quadrivalent influenza vaccines (QIV). Dates for vaccination activities may be mutually arranged with schools at the convenience of both parties i.e. after-school hours, weekends.

PPP doctors are required to provide the second dose of SIV at schools for those students under 9 years of age who have never received SIV before at least 4 weeks after the first
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dose.

Participating PPP doctors will be given HKD$270 as injection fee for each dose of SIV given to KG/CCC children for the outreach vaccination. They are not permitted to charge extra service fees from schools/ parents.

**Schedule**

The programme will be launched in around October 2020. The official launch date will be announced in due course.

**Joining Criteria**

For any doctors who newly apply or apply for continue enrolment in School Outreach, he/she should have enrolled in the PCD first before he/she is eligible to enrol in School Outreach. PMVD would check against the list of doctors in PCD. The doctor’s application will only be considered, if his/her name is on the list of PCD.

Please visit the PCD website ([www.pcdirectory.gov.hk](http://www.pcdirectory.gov.hk)) for details of enrolment in PCD and the requirements of maintaining in PCD.

The performance of the doctors and/or medical organisations will be closely monitored through feedback from schools, parents and students, inspections, and monitoring of vaccine wastage rate. Their previous performance in VSS/School outreach will also be considered for the enrolment in the coming year.
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2. ROLES AND RESPONSIBILITIES OF PPP DOCTORS

To ensure that the quality of vaccination services is upheld in non-clinic settings, the organiser and enrolled doctor in-charge of the activities must give due consideration to safety and liability issues. The enrolled doctor/healthcare provider is responsible for the overall vaccination activity.

The doctor should observe the Code of Professional Conduct issued by the Medical Council of Hong Kong, the Terms and Conditions of Agreement of Vaccination Subsidy Scheme (VSS) and its Supplementary Agreement for SIV School Outreach (Free of charge) as the standard to provide quality health care.

In particular, we would like to draw your attention to Section 5.2.5 of the Code of Professional Conduct: “Doctors’ services may not be promoted by means of unsolicited visits, telephone calls, fax, e-mails or leaflets by doctors or persons acting on their behalf or with their forbearance.” Organisers and the doctor should stay clear of associating with any improper financial (or advantage) transactions e.g. distribution of vouchers. Please also note that the use of logos of DH, CHP and VSS without prior permission of DH on any materials issued by the participating doctors is prohibited.

Regarding delegation of medical duties to staffs, doctors should seek advice from Part II E21 “Covering or improper delegation of medical duties to non-qualified persons” of the Code of Professional Conduct.

Under Primary School Outreach, vaccines provided are the property of DH. The doctor may be liable to costs related to broken or missing vaccines and DH reserves the right to demand the doctor for payment due to vaccine breakage or missing vaccines.

The following sections will describe the roles and responsibilities of the doctors when organising outreach vaccination activities. DH may perform random onsite inspection of the services provided (please see Appendix 6.2 for a checklist of items during onsite inspection). A simplified schematic diagram outlining the roles and responsibilities of PPP doctors and timeline are depicted below for reference.
# 2.1 Simplified schematic diagram of Roles and Responsibilities of PPP doctors

## Before Vaccination
- Liaise with schools to fix date for vaccination
- Submit **Booking of Timeslot for Outreach Vaccination Activity form** to PMVD
  (Primary School Outreach and KG/CCC Outreach: 14 Aug 2020)
- PMVD to distribute **Consent Forms** to schools by August
- Remind schools to distribute **Consent Forms** at the beginning of the school term or at least 6 weeks before the vaccination day
- Collect **Consent Forms** from schools and sign the **Consent Form Receipt Note** at least 5 days before vaccination day
- Provide password protected Excel table with names of consented students to PMVD via email at least 4 weeks before vaccination day
- Check the first report generated on eHS(S), submit the date of vaccination activity, and rectify any misinformation of student particulars the next calendar day
- Obtain estimation of quantity of vaccine required
- Decide on method of clinical waste disposal at least 2 weeks before vaccination day
- Primary School Outreach: submit **Vaccine Ordering and Unused Vaccine Collection Form** to PMVD at least 2 weeks before vaccination day
- Issue list of students requiring vaccination to teachers at least 1 week before
- Update the number of students requiring vaccination and inform PMVD asap if there are any changes
- Receive **Confirmation Notice** (on vaccine delivery and unused vaccine collection) from PMVD within three days after

## Vaccination Day
- Bring **List of Items to Bring to Venue on the Vaccination Day**
- Primary School Outreach: receive vaccines at school from logistics company and sign the **Vaccine Delivery Note**
- Ensure cold chain maintenance of vaccines
- Check **Consent Forms**, vaccination record, perform health assessment for students
- Conduct vaccination activity
- Fill in and issue **Vaccination Cards and Notifications to Parents - SIV Has Not Been Given** to teachers to students
- Issue a list of students requiring second dose vaccination to the teachers
- Sign two copies of the **Clinical Waste Temporary Storage Handover Note** if temporary storage at schools is required (surrender one copy to schools)

## Post Vaccination
- Observe for adverse effects and provide emergency management as required
- Report to PMVD for any vaccine incidents, adverse effects or cold chain breakage
- Clinical waste disposal
- Primary School Outreach: submit to PMVD **Vaccine Delivery Note** and completed **Vaccine Report and Cold Boxes Return Form within 1 day after the activity**
- KG/CCC Outreach: submit to PMVD **Vaccination Report within 1 day after the vaccination activity**
- Update information and submit claims to eHS(S) by batch upload within 7 calendar days after vaccination day
- Arrange for second dose vaccination
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#### 2.2 Timeline for Preparation by Medical Organisations

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<td>June 2020</td>
<td>- Announcement of Self-Selection results</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td></td>
<td>- Doctors to order SIV from vaccine supplier(s) (1st round: those from Self-Selection)</td>
<td>✗</td>
<td>✓</td>
</tr>
<tr>
<td>Early July 2020</td>
<td>- Announcement of DH-matching results</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td></td>
<td>- Doctors to order SIV from vaccine supplier(s) (2nd round: those from DH-matching)</td>
<td>✗</td>
<td>✓</td>
</tr>
<tr>
<td>Mid July 2020</td>
<td>- Attend briefing about detailed arrangement for medical organisations</td>
<td>✓</td>
<td>✓</td>
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<td></td>
<td>- Receive the Doctors’ Guides from PMVD</td>
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<td></td>
<td>- Communicate with schools on date and venue</td>
<td></td>
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<tr>
<td>24 July 2020</td>
<td>- Deadline for KG/CCC to choose partnering doctor/medical organisation under Self-Selection</td>
<td>✗</td>
<td>✓</td>
</tr>
<tr>
<td>14 Aug 2020</td>
<td>- Deadline to send Booking of Time Slot for Outreach Vaccination Activity (Appendix 6.3) to PMVD</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Mid Aug 2020</td>
<td>- Study VSS Doctors’ Guide and the PPP Doctors’ Guide</td>
<td>✓</td>
<td>✓</td>
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<td></td>
<td>- Start preparing manpower, training for staff, equipment, etc. for vaccination activity making reference to the List of Items to Bring to Venue on the Vaccination Day (Appendix 6.1)</td>
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<td></td>
<td>- Obtain a Clinical Waste Producer Premises Code for outreach services from EPD</td>
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<td>By September 2020</td>
<td>- Receive from PMVD the following documents to bring to vaccination activity:</td>
<td>✓</td>
<td>✓</td>
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<tr>
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<td>i. Seasonal Influenza Vaccination Card (unfilled) [Appendix 6.10]</td>
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<td>ii. Information on Side Effects (unfilled) [Appendix 6.11]</td>
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<td>iii. Information on Side Effects and 2nd dose Arrangement (unfilled) [Appendix 6.12]</td>
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<td>iv. Notification to Parents – Seasonal Influenza Vaccination Has Not Been Given (unfilled) [Appendix 6.17]</td>
<td></td>
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<tr>
<td>October 2019</td>
<td>- Launch of the SIV School Outreach</td>
<td>✓</td>
<td>✓</td>
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<td>At least eight weeks before vaccination day</td>
<td>Remind school to distribute <em>Consent Forms – 2020/21 Seasonal Influenza Vaccination School Outreach (Free of charge)</em> <em>(Appendix 6.7-6.8)</em> to parents</td>
<td>☑️</td>
<td>☑️</td>
</tr>
<tr>
<td>At least six weeks before vaccination day</td>
<td>Collect signed <em>Consent Forms – 2020/21 Seasonal Influenza Vaccination School Outreach (Free of charge)</em> <em>(Appendix 6.7-6.8)</em> from schools and sign the <em>Consent Form Receipt Note</em> <em>(Appendix 6.9)</em></td>
<td>☑️</td>
<td>☑️</td>
</tr>
<tr>
<td>At least four weeks before vaccination day</td>
<td>Provide password protected <em>Excel</em> table with names of consented students <em>(Consented Student List</em> <em>(Appendix 6.6)</em>) to PMVD via designated email account; Download <em>First Report</em> on eHS(S) after upload is complete (within 1 week); Cross check information on consent forms with results from eHS(S); Rectify the uploaded <em>Consented Student List</em> directly on eHS(S) if there is any misinformation; contact parents if there is any discrepancies; Check whether children aged less than 9 years need second dose; Submit documentary proof to PMVD for amendment of document type and/or document number; Double-check the date of vaccination activity on eHS(S) is correct; Estimate the quantity of vaccine required</td>
<td>☑️</td>
<td>☑️</td>
</tr>
<tr>
<td>At least two weeks before vaccination day</td>
<td>Decide method of clinical waste collection and disposal; Liaise with licensed clinical waste collectors for collection date of clinical waste or arrange self-delivery to a licensed disposal facility; and inform schools of the arrangement; Liaise with schools to arrange temporary storage of clinical waste until collection at the school if immediate collection and disposal cannot be arranged; Liaise with licensed clinical waste collectors about how the Waste Producer Copy of the Clinical Waste Trip Ticket would be forwarded to the medical organization for record</td>
<td>☑️</td>
<td>☑️</td>
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<th>KG/CCC</th>
</tr>
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<tbody>
<tr>
<td>At least two weeks before vaccination day</td>
<td>- Submit the Vaccine Ordering and Unused Vaccine Collection Form ((Appendix 6.13)) to PMVD to request vaccine quantity, preferred delivery time and time for unused vaccine and cold box collection</td>
<td>✓</td>
<td>✗</td>
</tr>
<tr>
<td>Within three days after submission of Vaccine Ordering and Unused Vaccine Collection Form</td>
<td>- PMVD will send a Confirmation Notice to doctors confirming the arrangement of vaccine delivery, unused vaccine and cold box collection arrangement</td>
<td>✓</td>
<td>✗</td>
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</tbody>
</table>
| At least one week before vaccination day | - Issue a list of students requiring vaccination to teachers  
- Revise the vaccine order if number of students if different  
- Remind schools to distribute Notice to Parents on Seasonal Influenza Vaccination \((Appendix 6.4-6.5)\) and for children to bring old SIV Vaccination Cards, if any. | ✓ | ✓ |
| Three calendar days before vaccination activity | - Final Report and On-site Vaccination List will be generated on eHS(S) for vaccination eligibilities  
- Generate a list of students requiring 2\(^\text{nd}\) dose vaccination to pass to schools on day of vaccination | ✓ | ✓ |
| Period of first dose vaccination (end of October 2020 and mid of December 2021) | - Bring List of Items to Bring to Venue on the Vaccination Day \((Appendix 6.1)\) to vaccination venue  
- Receive vaccines at school from vaccine distributor and sign the Vaccine Delivery Note  
- Conduct vaccination activity  
- Issue and fill in Notification to Parents – Seasonal Influenza Vaccination Has Not Been Given \((Appendix 6.17)\) to students via teachers  
- Issue a list of students requiring 2\(^\text{nd}\) dose vaccination to teachers  
- If temporary storage of clinical waste at school is required, sign two copies of the Clinical Waste Temporary Storage Handover Note \((Appendix 6.16)\); keep one copy and surrender one copy for schools’ record | ✓ | ✓ |
### PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

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<th>Primary School</th>
<th>KG/CCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Period of first dose vaccination</td>
<td>- Complete and sign two copies of the <em>Vaccine Report and Cold Boxes Return Form – Primary School Outreach</em> (Appendix 6.14); surrender one copy to vaccine distributor on collection and submit one copy to PMVD (see below)</td>
<td>✓</td>
<td>✗</td>
</tr>
<tr>
<td>(end of October 2020 and mid of December 2021)</td>
<td></td>
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</table>
| Within one day after vaccination activity | - Submit the following to PMVD  
  i. *Vaccine Delivery Note*, and  
  ii. Completed and signed *Vaccine Report and Cold Boxes Return Form – Primary School Outreach* (Appendix 6.14) | ✓              | ✗      |
|                                           | - Submit the following to PMVD  
  i. Completed *Vaccination Report – KG/CCC Outreach* (Appendix 6.15)                                                                                                                      | ✗              | ✓      |
| Within seven days after vaccination activity | - Update the *Consented Student List* (Appendix 6.6) and submit claims to eHS(S) by batch upload  
  - Claims should be submitted within 7 CALENDAR days and the vaccination day is Day 1. Claim requests made after 7 days may not be considered.                                                   | ✓              | ✓      |
| Within two weeks after vaccination activity | - Temporarily stored clinical waste for first dose activity to be collected by licensed clinical waste collector                                                                                     | ✓              | ✗      |
| At least four weeks before the second dose vaccination activity | - Start preparation for second dose vaccination  
  - Similar to first dose vaccination                                                                                                           | ✓              | ✓      |
| Before second dose vaccination day         | - Receive confirmation from PMVD on the vaccine delivery                                                                                                                                              | ✓              | ✗      |
| Period of second dose vaccination          | - Similar to first dose vaccination                                                                                                                                                                  | ✓              | ✓      |
| Within two weeks after second dose         | - Temporarily stored clinical waste to be collected by licensed clinical waste collector                                                                                                            | ✓              | ✓      |
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3. PREPARATION BEFORE THE OUTREACH VACCINATION ACTIVITY

3.1 Administrative procedures required by the doctor

- PPP doctor should have enrolled into VSS and the Primary Care Directory (PCD).
- Attend detailed briefing provided by DH.
- Obtain matching results and school list from DH.
- Liaise early with each of the schools to fix the date and venue for vaccination. Available dates are subject to logistics arrangement of DH.
- Consider arranging health talk on SIV to school.
- The outreach activity should be completed before arrival of winter flu season, i.e. the first dose by December 2020 and second dose by January 2021.
  
  i. The first dose vaccination activity should be conducted between October 2020 and mid of December 2021. The exact launching date will be announced in due course.
  
  ii. The second dose vaccination activity should be conducted before end of January 2021.
  
  iii. Since the two doses need to be at least four weeks apart, it is recommended that the vaccination dates of the first and second dose to be at least six weeks apart to allow logistic preparation for the second dose (e.g. vaccine ordering).
  
  iv. The SIV vaccination date is recommended to be at least one week apart from the day of vaccination activity organized by the School Immunization Team, DH under the Childhood Immunization Schedule.

- If you have prepared any materials on the vaccination activity, ensure the information provided is correct.

- Once confirmed the plan of vaccination activity, the doctor should notify PMVD as soon as possible the dates of vaccination for BOTH the first dose and second dose by using the Booking of Time Slot for Outreach Vaccination Activity (Appendix 6.3). For KG/CCC Outreach, please indicate which type of vaccine you would provide. Please see sample in the attached appendix or downloadable from the CHP website http://www.chp.gov.hk.
  
  i. For both Primary School Outreach and KG/CCC Outreach, submit the form on or before 14 August 2020.

- Remind schools one week before first and second dose vaccination activity to issue Notice to Parents on Seasonal Influenza Vaccination. Example of school notice can be found in Appendix 6.4 – 6.5.
3.2  Choice of vaccination venue

(Video on venue preparation is available at: https://www.youtube.com/watch?v=UecF8eGv8tQ&feature=youtu.be)

- Considerations on outreach vaccination venue: Hygiene, safety, privacy, lighting and ventilation.
- The vaccination venue should be well lit, ventilated and clean. It should be divided into 5 parts with adequate and separate areas for the vaccine recipients to
  i. register;
  ii. wait for vaccination;
  iii. receive vaccination;
  iv. stay for post vaccination observation; and
  v. receive first aid treatment (with mattress) if necessary.
- The vaccination venue should have enough space to allow for any emergency treatment or resuscitation.
- Liaise with school for temporary storage of clinical waste until collection by licensed clinical waste collectors as necessary; the school should be able to provide an independent, locked and labeled cabinet (label to be prepared by medical organisation) in a suitable area for temporary storage of clinical waste. Please refer to Guideline for Temporary Storage of Clinical Waste Generated in Outreach Vaccination Activities provided by the EPD in Appendix I of VSS Doctors’ Guide.

3.3  Checking of Consent Forms and Eligibility

- PMVD will send the Consent Forms – 2020/21 Seasonal Influenza Vaccination School Outreach (Free of charge) (Consent Form) (Appendix 6.7-6.8) to schools at least eight weeks before the vaccination day. Remind schools to distribute the Consent Forms to students for their parents/guardians to sign in around two weeks’ time.
- Collect the signed Consent Forms from schools at least six weeks before vaccination day. Sign the Consent Form Receipt Note (Appendix 6.9) upon collection.
- It is the responsibility of the doctor to ensure that the Consent Forms are completely filled out and signed by parents/guardians.
- Doctors should send PMVD a password protected Excel table with the name of consented students (Consented Student List (Appendix 6.6)) at least four weeks before vaccination day via a designated email account.
- PMVD will batch upload the Consented Student List (Appendix 6.6) on to eHS(S) for verification of students’ vaccination history and eligibility status.
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

- All students attending the participating schools and are eligible for free SIV vaccination under SIV School Outreach. Those under the age of 9 who have never received SIV before are eligible to receive two doses of SIV in that season.

- The first report will be available within one week after submission to PMVD. Doctors should log on to eHS(S) at least three weeks before vaccination day to verify and match the information on the collected Consent Forms (Appendix 6.7-6.8) with the Consented Student List (Appendix 6.6) on eHS(S). Rectify if there is any misinformation. For amendment of document type and document number, doctors will need to submit documentary proof to PMVD for updating.

- Issue a list of students requiring vaccination to teachers at least one weeks before the vaccination day.

- Inform PMVD immediately if there are any discrepancies in the final list of students requiring vaccination and the original vaccine order.

- Download and double-check the final report and On-site Vaccination List 3 CAL ENDAR DAYS BEFORE vaccination day. To avoid double dose, doctors must check the final results on eHS(S) before administering vaccination.

- After final report becomes available, generate a list of students requiring 2nd dose vaccination to bring on the 1st dose vaccination day. The list is to be provided to teachers upon completion of 1st dose vaccination for their future reference.

**** Note on the First and Final Report of the Consented Student List:

The Reports serve to streamline the preparation before vaccination. It is, however, ultimately the responsibility of PPP doctors to check whether the students on reports should receive vaccination or not, taking into consideration the information in the Consent Forms, past vaccination record/card, and thorough health assessment before providing vaccination. The doctor is ultimately responsible for any error in the Reports and resulting health consequence of the concerned students. ****

3.4 Vaccine ordering

According to the Pharmacy and Poisons Ordinance (Cap.138), vaccines are prescription only medicines. Under Primary School Outreach, DH will order the vaccines. Under KG/CCC Outreach, PPP doctors are responsible for purchasing and delivery of vaccines.

3.4.1 Primary School Outreach

- Obtain an estimation of SIV required for vaccination day using the Consented Student List on eHS(S).

- Fill out the Vaccine Ordering and Unused Vaccine Collection Form (please see sample
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

in Appendix 6.13 and also downloadable at the CHP website https://www.chp.gov.hk/en/features/100675.html) **at least two weeks** prior to vaccination day to confirm with PMVD:

i. quantity of vaccines required (it should be equivalent to the number of consented less the ineligible students who have already received SIV this season, those with contraindications SIV vaccination and those absent for 1st dose vaccination (if for 2nd dose vaccine order));

ii. the preferred vaccines delivery time (usually between 7:30 am to 9:00 am);

iii. expected collection time of unused vaccine/ equipment; and

iv. contact person and contact numbers on the vaccination day.

- Ad hoc vaccination for students who consented **after submission** of Vaccine Ordering and Unused Vaccine Form (Appendix 6.13) **should not be entertained.** Please advise students to visit any VSS doctors for subsidised vaccination.

- Reconfirm the number of students requiring vaccination and inform PMVD asap if there are any changes to the original vaccine order **at least one week** prior to vaccination day.

- PMVD will confirm the exact quantity of SIV and delivery arrangement **within three working days** after submission of Vaccine Ordering and Unused Vaccine Collection Form (Appendix 6.13). Please contact PMVD if you do not receive a Confirmation Notice from PMVD **after three working days**.

- Arrange designated staff to receive the vaccines at the school **before** starting vaccination (preferably 1 hour before starting time of vaccination activity).

3.4.2. **KG/CCC Outreach**

- Doctors are responsible for pre-ordering sufficient vaccines on their own. Shortage of vaccine is highly possible if doctor does not arrange pre-order appropriately.

- DH will not take part in ordering vaccines for doctors under KG/CCC Outreach.

- Obtain an estimation of SIV required for vaccination day using the Consented Student List on eHS(S). It is a mandatory requirement for doctors to purchase QIV under KG/CCC Outreach, either inactivated influenza vaccine or live-attenuated influenza vaccine.

- Pre-ordering vaccines well ahead of time (i.e. several months before the start of the SIV School Outreach) directly from the vaccine supplier(s) is recommended. Pre-ordering may start in March or April. Vaccines usually needed to be ordered around by **June to July every year** to secure the supply.

- **Special note on proper use of vaccines**

There are different brands and preparations of seasonal influenza vaccine available in
the market. Special attention should be paid to the product insert, in particular the registered indications, **age-range of vaccine indication**, recommended dosage and route of administration (e.g. intramuscular, subcutaneous, intranasal). It is important to use the registered vaccine in accordance to the recommendations on the drug insert.

- Maintain good communication with the vaccine supplier(s) and/or distributor(s) and allow enough time for the vaccine to be delivered before the outreach vaccination activities.

- Vaccines must only be received by the designated staff. When receiving the vaccines, staff must check them against the purchase order for discrepancies and leakage or damage. Vaccines must be stored properly according to the manufacturer’s recommendations from delivery receipt until they are administered. Vaccine types, brands, quantities, batch numbers and expiry dates should be recorded with the date and time at which the vaccines are received.

- Expired vaccines must NOT be administered to recipients. Seasonal influenza vaccine of the previous season should not be used for the next season. Any expired vaccine should be labeled clearly and removed from the refrigerator immediately. Expired vaccines should be disposed according to guidelines from the Environmental Protection Department (EPD) [http://www.epd.gov.hk/epd/english/environmentinhk/waste/guide_ref/waste_guidelines.html](http://www.epd.gov.hk/epd/english/environmentinhk/waste/guide_ref/waste_guidelines.html)

3.5 Vaccine delivery, receipt and storage

(Video concerning cold box packing is available at: [https://www.youtube.com/watch?v=8k8m9Ar7fY&feature=youtu.be](https://www.youtube.com/watch?v=8k8m9Ar7fY&feature=youtu.be))

3.5.1. Primary School Outreach

(Video concerning procedures on receiving vaccines is available at: [https://www.youtube.com/watch?v=O8TIBUCUgN4&feature=youtu.be](https://www.youtube.com/watch?v=O8TIBUCUgN4&feature=youtu.be))

- Vaccines must only be received by the designated staff. When receiving the vaccines, staff must check whether the seal is intact and whether cold chain is maintained before opening the cold box(es). Reject the vaccines if temperature excursion occurred during its delivery.

- After opening the cold box(es), check against the order for vaccine type, brand and quantity. Check also the batch number and expiry date of the vaccine delivered; and if a steel box (with temperature data logger inside) is present in every cold box. Report to PMVD in case of discrepancies, leakage or damages.
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

- Designated staff are required to record the date, time, and temperature of the vaccines delivered on the Vaccine Delivery Note provided by the vaccine distributor. Sign and then chop with the company/clinic stamp after confirmation of the above.

- If the vaccines are not delivered 30 minutes after the expected time, please call the vaccine distributor for remedial measure and inform PMVD immediately.

- Vaccines and cold chain equipment (including steel boxes with temperature data loggers inside, carton boxes and ice packs) must be properly stored and handled according to the manufacturer’s and vaccine distributor’s recommendations from delivery receipt until they are administered or returned.

3.5.2. KG/CCC Outreach

- Purpose-built vaccine refrigerators (PBVR) are the preferred means of storage for vaccines in clinics (Please refer to Section 4.3 in Chapter 4 of the VSS Doctors’ Guide for requirements and recommendations on vaccine storage in refrigerators. Available at https://www.chp.gov.hk/en/features/45838.html).

- Cold box can be used to store the vaccine temporarily for vaccination activities in non-clinic settings. Vaccine temperature should be continuously monitored using a temperature data logger/ maximum-minimum thermometer during vaccine transport (to and from the venue) and temporary storage at the venue.

- The whole setup, i.e. cold boxes with conditioned ice packs and insulating materials, should be tested for insulation time and temperature stability in cold chain before it is used for transporting vaccines (to and from venue) and storing them temporarily at the venue.

- Alternatively, vaccines can be delivered directly to the venue by the vaccine supplier, with equipment provided for temporary storage (extra service fee may be charged). In such case, doctors should maintain good communication with the vaccine supplier(s) and/or distributor(s), to allow enough time for the vaccine to be delivered before the outreach vaccination activities, to ensure cold chain is maintained during temporary storage at the venue until vaccines are finally administered, and to ensure equipment are properly handled and returned.

- Vaccines must only be received by the designated staff. When receiving the vaccines, staff must check them against the purchase order for discrepancies and leakage or damage. Vaccine types, brands, quantities, batch numbers and expiry dates should be recorded with the date and time at which the vaccines are received.

- Vaccines must be stored properly according to the manufacturer’s recommendations from delivery receipt until they are administered, regardless of how they are transported to the venue, i.e. by PPP doctors or by vaccine supplier.

- Please refer to Section 4.4 and 4.6.1 in Chapter 4 of the VSS Doctors’ Guide for
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach


3.6 Management of cold chain breach

- Breach in the cold chain may render the vaccines ineffective. In case of temperature excursion (i.e. if vaccines have been exposed to temperatures outside the recommended range), take appropriate actions, including:
  - Immediately isolate the affected vaccines and label “Do NOT use”;
  - Record the range, date and duration of temperature breach;
  - Contact the vaccine supplier(s) to evaluate the stability/effectiveness of the exposed vaccines and determine whether the vaccines are still potent. It should not be used until all queries are clarified.
  - Assess the impact and inform PMVD as soon as possible, and
  - Follow up with the concerned patients (if any) promptly and assess the need for revaccination.

- For guidelines on management of cold chain breach, please refer to Section 4.5 in Chapter 4 of the VSS Doctors’ Guide (Available at https://www.chp.gov.hk/en/features/45838.html) and Section 3.3 of the Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings - Module on Immunisation (Available at https://www.fhb.gov.hk/pho/english/resource/files/Module_on_Immunisation_Children.pdf).

3.7 Provision of adequate information to vaccine recipients

- Consent Forms (Appendix 6.7-6.8) will include essential information on SIV so parents/guardians can make an informed choice.

- If requested, liaise with school to provide students and their parents/guardians with more information to ensure that they understand
  i. the aims of the vaccination;
  ii. the contraindications and precautions of the vaccine; and
  iii. possible side-effects of vaccination

- The doctor is encouraged to provide health talks to school and their parents/guardians on SIV before vaccination day.
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

- Student’s participation in the SIV School Outreach is **strictly voluntary**.
- The doctor **cannot charge extra service fee** from schools/parents under the SIV School Outreach.
- The doctor is required to provide contact information to students/parents/guardians to contact them for more information on SIV or for follow up after vaccination.

### 3.8 Preparation for Clinical Waste Collection and Disposal

(Video on clinical waste management is available at: [https://www.youtube.com/watch?v=gbphrC3DsG8&feature=youtu.be](https://www.youtube.com/watch?v=gbphrC3DsG8&feature=youtu.be))

- Regulation of clinical waste is under the purview of EPD.
- PMVD would notify EPD the time and venue of the vaccination activity. EPD may conduct random checks on outreach activity for compliance to the Waste Disposal (Clinical Waste) (General) Regulation in regards to clinical waste management.
- All clinical waste generated should be properly handled and disposed of (including proper packaging, storage and disposal) in accordance with the Waste Disposal (Clinical Waste) (General) Regulation (the Regulation). For details, please refer to the Code of Practice for the Management of Clinical Waste (Small Clinical Waste Producers) (the CoP) published by the EPD ([https://www.epd.gov.hk/epd/clinicalwaste/en/information.html](https://www.epd.gov.hk/epd/clinicalwaste/en/information.html)).

#### 3.8.1 Packaging of clinical waste

- Clinical waste generated (mainly used needles, syringes, cartridges, and cotton wool balls fully soaked with blood) should be disposed of directly into sharps box with cover. Clinical waste must not be collected or disposed of as municipal solid waste or other types of wastes.
- The specifications of a typical sharps box are given in Annex B of Code of Practice for the Management of Clinical Waste (Small Clinical Waste Producers) (the CoP) published by the EPD ([https://www.epd.gov.hk/epd/clinicalwaste/file/doc03.pdf](https://www.epd.gov.hk/epd/clinicalwaste/file/doc03.pdf)).
- Alcohol swabs and cotton wool balls slightly stained with blood, which are not clinical waste by definition, should also be properly handled and disposed of as general refuse.
3.8.2. Disposal methods of clinical waste

- There are three choices for handling clinical waste generated in outreach vaccination activities, please refer to Diagram below. Doctors should pre-arrange and decide method of clinical waste collection and disposal **at least two weeks before** the vaccination activity. For details, please refer to **Appendix I of VSS Doctors’ Guide**.

**Diagram:** different ways of handling clinical waste generated in outreach vaccination

- Regardless of the disposal method chosen, doctors should obtain a Clinical Waste Producer Premises Codes from the Environmental Protection Department (EPD) before consigning clinical waste for disposal. You will need this code for completing the Clinical Waste Trip Ticket.
- Please note that a separate Premises Code is required for outreach vaccination activities and must be different from the Premises Codes for clinic use. Please note that a single outreach Premises Code can be used for various outreach locations.
- Premises code can be obtained from EPD by submitting the Premises Code Request Form, on which ‘outreach service’ should be annotated in the Producer Name for outreach vaccination activities. For more information please refer to EPD’s website on Obtaining a Premises Codes (https://www.epd.gov.hk/epd/clinicalwaste/en/producer_code.html).
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

3.8.3. Immediate collection of clinical waste by licensed collectors

- Doctors should pre-arrange with licensed clinical waste collectors at least two weeks before the vaccination activity to collect the clinical waste at the end of the activities and inform school of the arrangement.
- For list of licensed clinical waste collectors, please refer to EPD’s website on Licensed Clinical Waste Collectors (http://epic.epd.gov.hk/EPICDI/clinicalwaste/list/)
- In case the clinical waste could not be disposed immediately after the activities, temporary storage of clinical waste in the school may be considered (see section 3.8.5)

3.8.4. Delivery of clinical waste by healthcare professionals

- Doctors could also choose to self-deliver their clinical waste to the Chemical Waste Treatment Centre (CWTC) at Tsing Yi(a) by private car on the same day after the event.
- Alternatively, they may ask their employee who is healthcare professional (HCP)(b) to deliver the waste on their behalf.
- Such waste delivery is subject to fulfilling the following requirements specified in the Regulation and the CoP:
  1. Clinical waste carried is not more than 5 kg;
  2. Clinical waste is packaged in an appropriate type of container (e.g. sharps boxes), sealed and labelled properly;
  3. Only private car(c) within the meaning of the Road Traffic Ordinance (Cap. 374) is used for the delivery;
  4. The clinical waste must be delivered directly to CWTC within 24 hours after the clinical waste begins to be so delivered and must not be left unattended during the delivery; and
  5. Adequate and appropriate first-aid equipment and cleaning equipment (e.g. spare red bags and sharps boxes) must be provided for use in case of injury to any person and spillage of clinical waste. For details, please refer to the Annex D of the CoP.
- In addition, the healthcare professional must:
  1. Provide a clinical waste trip ticket(d) filled with relevant information, such as the name of the HCP, his/her HCP body registration number and the assigned Premises Code of the Clinical Waste Producer;
  2. Show his/her identity card and provide HCP body registration number at the CWTC. For the sake of convenience, copies of HCP registration document is accepted.
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

3. Arrive CWTC during reception hours(e).

- A charge at $2,715 per 1,000 kg (or $2.715 per kg)(f) will be levied on the clinical waste as received and treated at the CWTC. The amount to be paid depends upon the weight of clinical waste received and only cash is accepted.

# Note:

(a) CWTC is located at 51 Tsing Yi Road South, Tsing Yi, New Territories, Hong Kong.
(b) Healthcare professionals include registered medical practitioners, dentists and veterinary surgeons, registered or listed Chinese medicine practitioners, and registered or enrolled nurses as defined in the various ordinances detailed in the Waste Disposal (Clinical Waste) (General) Regulation.
(c) Private car means a motor vehicle constructed or adapted for use solely for the carriage of a driver and not more than 7 passengers and their personal effects but does not include an invalid carriage, motor cycle, motor tricycle or taxi.
(d) Blank clinical waste trip tickets can be obtained from EPD by submitting the Request Form for Clinical Waste Trip Tickets (a minimum of 3 working days after written request is required). A set of 10 blank trip tickets will be distributed for each request. Please refer to EPD’s website on Self-delivery - Request Form for Clinical Waste Trip Tickets. (https://www.epd.gov.hk/epd/clinicalwaste/en/information.html)
(e) The reception hours for receiving clinical waste delivered by HCP at the CWTC are 9:00 a.m. - 12:00 noon and 1:00 p.m. - 4:30 p.m. on Monday to Friday (except for public holiday) (No prior appointment is required). For special circumstances and upon request with 3-day advance notice with CWTC site office (tel: 2434 6372), the reception hour can be extended to 5:30pm.
(f) The charge is stipulated under the Waste Disposal (Charges for Disposal of Clinical Waste) Regulation.

3.8.5. Temporary storage of clinical waste

- Prolonged storage of clinical waste on the premises should be avoided. It is recommended to dispose the clinical waste on the same day after the event.

- In case the clinical waste could not be collected at the end of activities, liaise with the school two weeks before the vaccination day to arrange temporary storage of used sharp box(es) in an independent, locked and properly labeled cabinet at venue until collection by licensed clinical waste collector.

- Liaise with licensed clinical waste collectors for collection and inform the school of the arrangement.

  i. Primary School Outreach: clinical waste to be collected within 2 weeks after each of the 1st and 2nd dose activity
ii. KG/CCC Outreach: clinical waste to be collected within 2 weeks after the 2nd dose activity.

- Bring Clinical Waste Temporary Storage Handover Note (Appendix 6.16) to vaccination activity. Doctors should complete the form with the school representative. Both the medical organization and the school should keep a copy of the completed form for their reference.
- Doctor should affix a label on each clinical waste container requiring temporary storage (see Figure 1). The label should clearly display (1) the name of the responsible healthcare worker, (2) name of his/her organisation, (3) emergency contact number, (4) address of waste generation (i.e. the venue address) and (5) the date of sealing.
- The temporary storage area of clinical waste should meet with following requirements and specifications:
  i. the storage area should be an independent lockable storage cabinet, locker or drawer, and keep away from the area of food preparation and storage;
  ii. a warning sign and a label comprising (1) the name of the responsible healthcare worker, (2) name of his/her organisation and (3) emergency contact number should be affixed on the door of the storage area (see Figure 2). The warning sign could be obtained from the Environmental Protection Department free of charge;
  iii. the storage area should only be used for storage of clinical waste; and
  iv. any unauthorised access to the temporary storage area should be prohibited.

- When the licensed collector comes to collect clinical waste stored on-site, the school representative should sign on the Clinical Waste Trip Ticket. School chop is not necessary.
- Liaise with the licensed collector and/or the school and arrange the Waste Producer Copy (pink copy) of the Clinical Waste Trip Ticket be forwarded to the medical organisation for record. Doctors must provide the record to the EPD for inspection when so required.
- According to the Regulation, except to the CWTC direct, delivery of clinical waste to any other places by healthcare workers (including to their own clinics) is not permitted.
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

Figure 1. Example of a labelled clinical waste container

![Image of a labelled clinical waste container]

<table>
<thead>
<tr>
<th>Name of organisations/healthcare worker</th>
<th>ABC Clinic/Dr Chan Tai-man</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency contact no.</td>
<td>9123 4567</td>
</tr>
<tr>
<td>Address of clinical waste generation</td>
<td>DEF Elderly Centre, G/F, XX House, XX Estate</td>
</tr>
<tr>
<td>Date of sealing</td>
<td>DD/MM/YYYY</td>
</tr>
</tbody>
</table>

Figure 2. Example of warning sign and label on a temporary storage cabinet

![Image of a warning sign and label on a temporary storage cabinet]

<table>
<thead>
<tr>
<th>Name of organisations/healthcare worker</th>
<th>ABC Clinic/Dr Chan Tai-man</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency contact no.</td>
<td>9123 4567</td>
</tr>
</tbody>
</table>

3.9 Preparation of emergency situation

(Vide on preparation of emergency equipment is available at: [https://www.youtube.com/watch?v=It3tMplmTVk&feature=youtu.be](https://www.youtube.com/watch?v=It3tMplmTVk&feature=youtu.be))

- Ensure all the emergency equipment with age-appropriate parts for vaccine recipients in the emergency kit (e.g. Bag Valve Mask, BP monitor, and syringes & needles suitable for IMI adrenaline administration) is sufficient, and vaccines and emergency drugs (e.g. adrenaline injection with appropriate dilution or adrenaline auto-injector) are registered in Hong Kong and not expired.
- Keep written protocol and training material for reference.
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

- Arrange qualified personnel to standby for emergency management and give timely intervention as indicated. The PPP doctor is highly preferred to be present at the venue during the vaccination activity, and should be personally and physically reachable in case of emergency. Please refer to Section 5 of the 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).

Photo: Examples of essential equipment for emergency at outreach vaccination activity
4. ON THE DAY OF VACCINATION ACTIVITY

4.1 Professional staffing

- Vaccine administration is a medical procedure that carries risks. DH recommends that the **doctor should be present at the venue** during the vaccination activity; he/she should be **personally and physically reachable** in case of emergency.
- For the safety of vaccine recipients, vaccination should be administered by qualified healthcare professionals or trained personnel under personal supervision.
- The doctor should:
  - Arrange sufficient number of **qualified/ trained healthcare personnel** to provide service, medical support and assess recipients’ suitability to receive vaccination.
  - Arrange **at least one** qualified personnel, who is **trained in emergency management** of severe immediate reactions and equipped to do so, with qualifications such as Basic Life Support, to standby for emergency management and give timely intervention as indicated. The doctor/ his qualified personnel should keep training up-to-date and under regular review.
  - Exercise effective supervision over the trained personnel who cover his duty.
  - Retain personal responsibility for the vaccination activity and treatment of vaccine recipients.
  - Improper delegation of medical duties to non-qualified persons transgresses accepted codes of professional ethical behavior which may lead to disciplinary action by the Medical Council. Please refer to Part II E21 “Covering or improper delegation of medical duties to non-qualified persons” of the **Code of Professional Conduct**.
  - The doctor should also ensure there are adequate trainings/ briefings to:
    - All personnel including the logistics of vaccination activities, infection control practice and safety concerns before the vaccination activity starts.
    - Relevant staffs on the terms of services and they all understand their responsibilities.
  - **Suggested manpower for reference:**

<table>
<thead>
<tr>
<th>Primary school (6 classes in a grade)</th>
<th>KG/CCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide at least 1 doctor/ registered nurse/ enrolled nurse to provide supervision on-site &amp; at least 1 staff with first-aid training</td>
<td>Provide at least 1 doctor/ registered nurse/ enrolled nurse to provide supervision on-site &amp; at least 1 staff with first-aid training</td>
</tr>
<tr>
<td>6 injection staff for primary schools with 6 classes in a grade</td>
<td>Injection staff work in pair with 1 injection staff with 1 assistant for proper positioning of child</td>
</tr>
</tbody>
</table>
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

- The doctor and attending staff should study the VSS Doctors’ Guide and this supplementary guide before the vaccination activity.

4.2 Vaccination procedure and infection control practice

(Video on vaccination skills is available at:
https://www.youtube.com/watch?v=MP1pudsGFP4&feature=youtu.be)

- The doctor is required to bring items such as the Consented Student List (Appendix 6.6), Consent Forms (Appendix 6.7-6.8), and vaccination equipment, etc. to the venue on the vaccination day. Please refer to the Appendix 6.1 List of Items to Bring to Venue on the Vaccination Day for reference. In addition, doctors will receive from PMVD the following documents to be brought to the venue for completion on vaccination day:
  - Seasonal Influenza Vaccination Cards (unfilled) [Appendix 6.10];
  - Information on Side Effects (unfilled) [Appendix 6.11];
  - Information on Side Effects And 2nd dose Arrangement (unfilled) [Appendix 6.12];
  - Notification to Parents – SIV Has Not Been Given (unfilled) [Appendix 6.17].

4.3 Vaccination venue

Adequate and separate areas should be arranged for:

- Registration;
- Waiting area
- Vaccination area;
- Observation after vaccination; and
- Treatment area for emergency treatment (with mattress) if necessary.

4.4 Vaccination equipment

Vaccination equipment should be well prepared beforehand and should be checked the expiry date, including:

- 70-80% alcohol-based hand rub for hand hygiene;
- alcohol pads for skin disinfection before vaccination;
- dry clean gauze/cotton wool for post vaccination compression to injection site;
- sharps boxes (at least 1 for each vaccination station) (visit the following website to obtain more information for the specification of sharps box: https://www.epd.gov.hk/epd/clinicalwaste/file/doc03.pdf);
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

- emergency equipment (Please see 3.9 & 4.13 for details); and
- other accessories and stationery as indicated.

Photo: Examples of vaccination equipment at outreach vaccination activity

4.5 Health Assessment

- Health care professionals should obtain vaccination history, screen for contraindications to SIV to be administered, and assess fitness for vaccination before administering SIV (e.g. any fever or feeling unwell on the vaccination day);
- Collect and check the signed Consent Form (Appendix 6.7-6.8) for each vaccine recipient and screen for contraindications;
- Check for any previous vaccination records;
- Immediately before and after vaccination: check the student’s identity document (e.g. School Hand Book/Student ID) against the signed Consent Forms (Appendix 6.7-6.8) and the Consented Student List (Appendix 6.6);
- Write down the date of the vaccination activity and name of the responsible doctor on the Consent Forms (Appendix 6.7-6.8);
- Sign and chop with company logo; and
- Be sure the name of doctor responsible for the vaccination activity is filled out legibly on the Consent Form (Appendix 6.7-6.8) for processing of reimbursement claims.
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

4.6 Checking of vaccines

- Check the recommendation, vaccine dosage, damage, contamination and expiry date before administration.
- As basic requirements, procedures of vaccine checking should be adopted, including:
  - 3 checks: when taking out the vaccine from storage, before preparing the vaccine and before administering the vaccine
- The “rights of medication administration” should be applied to vaccine administration, including:
  - 7 rights:
    1. The right patient;
    2. The right vaccine or diluent;
    3. The right time (e.g. correct age, correct interval, vaccine not expired);
    4. The right dosage;
    5. The right route, needle length (should be long enough to reach the muscle mass for IMI injection) and technique (for the route of administration of each vaccine, healthcare professionals may refer to individual package inserts);
    6. The right site; and
    7. The right documentation.

4.7 Vaccine Administration

4.7.1. For injectable vaccine (IIV)

- School student preparation
  1. Invite the student to sit down or invite an assistant to secure the student on his/her lap;
  2. Ask the student to state his/her name and date of birth;
  3. Inform the student the type of vaccine to be given;
  4. Ensure the injection site (deltoid muscle) is exposed properly; and
  5. Take out the vaccine from the storage (First Check).

- Immediate vaccine preparation
  1. Perform hand hygiene.
  2. The injection site is swabbed with alcohol pad (from the centre of deltoid muscle outwards in a circular motion, without going the same area) and allowed to dry before vaccine injection.
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3. Prepare the vaccine (Second Check) and inspect the vaccine vial for any manufacturing defect. Shake vaccines before use according to the drug insert, if necessary.

- Vaccine injection
  1. Recheck the vaccine before administering (Third Check);
  2. The injection staff should keep the student informed of the vaccine to be administered;
  3. Administer the vaccine by right route and injection site with aseptic technique;
  4. Withdraw the needle gently and quickly cover the injection site with a dry clean gauze/cotton wool ball after completion of injection;
  5. Instruct the student to gently apply pressure for 1-2 minutes over the injection site or till bleeding stops; and
  6. Do not recap the needle. The used syringe and uncapped needle should be discarded directly into sharps box.
  7. Perform hand hygiene before documentation.

4.7.2. For nasal spray vaccine (LAIV)

- School student preparation
  1. Invite the student to sit down or arrange an assistant to secure the student on his/her lap;
  2. Ask the student to state his/her name and date of birth;
  3. Inform the student the type of vaccine to be given;
  4. Arrange the student to sit in an upright position and brief the student that spray of the vaccine is administered in each nostril, one after another; and
  5. Take out the vaccine from the storage (First Check).

- Immediate vaccine preparation
  1. Perform hand hygiene.
  2. Prepare the vaccine (Second Check) and inspect the pre-filled intranasal sprayer for any manufacturing defect.

- Vaccine administration
  1. Recheck the vaccine before administering (Third Check);
  2. The vaccination staff should keep the student informed of the vaccine to be administered. Ask the student to breath normally;
  3. Remove rubber tip protector. Do not remove dose-divider clip at the other end of the sprayer. Place the tip just inside the nostril to ensure the vaccine is
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delivered into the nose. With a single motion, depress plunger as rapidly as possible until the dose-divider clip prevents from going further.

4. Pinch and remove the dose-divider clip from plunger. Then place the tip inside the other nostril and administer remaining vaccine;

5. The student is advised to hold a piece of tissue for wiping any excessive vaccine without sneezing;
6. The used sprayer should be discarded directly into sharps box; and
7. Perform hand hygiene before documentation.

4.8 Plans for variant circumstances

Have plans of the following situations and make records. Inform parent as soon as possible and make necessary arrangement.

- Failed injection attempts
- Student who refused injection on-site
- Student has contraindications
- Student is not fit for injection
- Broken needle/ wastage
- Others (e.g. adverse event following immunisation)
- For reference, please refer to the Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings - Module on
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**Immunisation.**


### 4.9 Infection control practice

- Proper infection control practice must be complied with by all personnel.
- Observe infection control guideline and hand hygiene protocol.
- **Hand hygiene practice** should be adopted and strictly followed during vaccination procedure. Hand hygiene can be achieved by rubbing hands with 70-80% alcohol-based formulation or washing hands with soap and water before first, in between each and after last vaccination.
- Hand rubbing with 70-80% alcohol-based handrub (ABHR) (when hands are not visibly soiled)
  - Apply a palmful of ABHR (~3-5ml) and cover all surfaces of the hands including palms, back of hands, between fingers, back of fingers, thumbs, finger tips and wrists (7 steps); and
  - Rub all hand surfaces for at least 20 seconds until hands are dry.
  - Ensure the alcohol-based handrub:
    - with “70-80% alcohol” indicated on the bottle;
    - should be in original packing; and
    - is not expired.
- Handwashing with soap and water (when hands are visibly soiled or likely contaminated with body fluid)
  - Wet hands with water and apply enough amount of liquid soap necessary to cover all hand surfaces;
  - Rub all surfaces of the hands for at least 20 seconds before rinsing under running water; and
  - Dry hands thoroughly with paper towel or hand dryer.
  - The whole procedure usually takes about 40-60 seconds
- Wearing surgical gloves cannot replace hand hygiene. If surgical gloves are used, they should be changed before each vaccination. Moreover, hand rubbing should also be performed before putting on and after taking off the gloves.
- Use an alcohol pad for skin disinfection before vaccination and use a new clean gauze/cotton wool ball for post vaccination compression of injection site.
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4.10 Handling of clinical waste during vaccination

- For definition of clinical waste and specifications of sharps box, please refer to section 3.8 and relevant materials published by the EPD.
- The sharps box should be placed on a flat, firm surface and at an optimal position near the injection staff.
- Secure sharps box in an upright position or place in the rack for sharps box
- Do not overfill sharps box. Dispose sharps box when the disposable sharps reach the warning line (70-80%) for maximum volume. Seal up sharps box afterwards for proper disposal.

4.11 Post vaccination observation

- After vaccination, the doctor shall keep the vaccine recipient under observation in the venue for at least 15 minutes to provide appropriate treatment in case he/she experiences an immediate adverse event. For details, please refer to Appendix H: an extract of the Section 5 of the Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings - Module on Immunisation about Monitoring and Management of Adverse Events Following Immunisation of the VSS Doctors’ Guide (https://www.fhb.gov.hk/pho/english/resource/files/Module_on_Immunisation_Children.pdf).
- Provide a telephone number to vaccinated students or their parents/guardians for enquiries concerning the vaccination.
- In case there are vaccination incidents (e.g. incorrect administration of vaccine or breaking of cold chain), take appropriate follow-up actions, e.g. notify PMVD timely and take follow-up action with the concerned recipients.
- Remind the vaccinated students possible adverse reactions and advise the management of side effects

4.12 Documentation

- All vaccination given should be clearly documented on the Consented Student List (Appendix 6.6).
- Students not vaccinated should be remarked as well.
- Document information on the Seasonal Influenza Vaccination Card (Appendix 6.10) after vaccination (including the name of vaccine recipient, type of vaccine, date of injection and name of vaccine provider, etc.). If students have brought their own SIV Vaccination Card from the previous year, please document date of injection, name and
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type of vaccine, and name of vaccine provider onto the old Vaccination Card.

- For students **requiring 2nd dose**, document date of injection, contact information and date of 2nd vaccination on Information on Side Effects and 2nd dose Arrangement (Appendix 6.12).
- For students who **do not require 2nd dose**, document contact information on Information on Side Effects (Appendix 6.11).
- For students **completed 1st and 2nd dose**, document contact information on Information on Side Effects (Appendix 6.11).
- Injection staff should provide name and signature on the Consent Form (Appendix 6.7-6.8) after vaccination.
- Pass the list of students requiring 2nd dose vaccination to teachers for their future reference.
- After vaccination, the doctor needs to **pass** the following document filled in to teachers for distribution to students:
  - Filled in Seasonal Influenza Vaccination Cards (Appendix 6.10)
  - Information on Side Effects (Appendix 6.11)
  - Information on Side Effects and 2nd dose Arrangement (Appendix 6.12).
  - Notification to Parents – Seasonal Influenza Vaccination Has Not Been Given (Appendix 6.17) for students on the Student Vaccination List who are unable to receive vaccination on the vaccination day (e.g. having fever or absent from school). Please see appendix and also downloadable from the CHP website [http://www.chp.gov.hk](http://www.chp.gov.hk).

4.13 Emergency management

- Vaccination may cause untoward reactions. Some recipients may even develop allergic reactions to the vaccine(s). Failure to give timely intervention may result in serious consequences.
- The doctor should arrange qualified personnel, who are trained in emergency management of severe immediate reactions and equipped to do so, with qualifications such as Basic Life Support, to standby for emergency management and give timely intervention as indicated. The doctor/ his qualified personnel should keep training up-to-date and under regular review.
- The PPP doctor is highly preferred to be present at the vaccination venue; he/she should be personally and physically reachable in case of emergency.
  i. Emergency kit equipment (with age-appropriate parts) should include, but is not limited to:
    i. Appropriate size of Bag Valve Mask;
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ii. BP monitor with appropriate size of cuffs; and

iii. Registered adrenaline injection (1:1000) with sufficient amount of 1 ml syringes and 25-32mm length needles for adrenaline injection/ auto-injector.

- Ensure there is sufficient stock of all the emergency equipment and that the drugs have not reached expiry.

- Keep written protocol and training material for reference.

Photo: Examples of essential equipment for emergency at outreach vaccination activity

- **Should anaphylaxis happen after vaccination:**
  - call ambulance;
  - inform the doctor (on-site or via phone) immediately, and seek advice and approval on adrenaline administration, if appropriate;
  - use bag valve facemask to assist ventilation (give oxygen if available); and
  - monitor blood pressure and pulse every 5 minutes and stay with patient until ambulance arrives.
  - If no improvement within 5 minutes - seek advice from doctor (on-site or via phone) for approval on repeat dose of adrenaline injection (maximum 3 doses in total) if appropriate.

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4.14 Vaccination incident

- Take appropriate action with the concerned student.
- Record the student’s condition and treatment provided.
- Explain to the teacher and parents concerned timely.
- Notify VO as soon as possible of any vaccination incident
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5. UPON COMPLETION OF VACCINATION ACTIVITY

5.1 Management of unused/ surplus vaccines

5.1.1. Primary School Outreach

- Unused/surplus vaccines should be stored properly in cold box with ice packs and insulating materials, etc. provided by the vaccine distributor. The cold boxes should be closed properly to maintain cold chain at 2-8°C.
- Unused/surplus vaccines are the property of DH and should not be taken back to the Doctor’s office/ clinic.
- Cold chain equipment (including steel boxes with temperature data loggers inside, carton boxes and ice packs) are the property of the vaccine distributor and should be returned intact to vaccine distributor upon completion of vaccination activity.
- Assign designated staff from your medical organization to stay at the venue and return the unused/surplus vaccines, cold boxes and cold chain equipment to the vaccine distributor. Vaccines or cold chain equipment must not be returned through a school representative.
- The staff should complete sign the two copies of the Vaccine Report and Cold Boxes Return Form – Primary School Outreach (Appendix 6.14) upon handing over the unused vaccine to the vaccine distributor (please see appendix and also downloadable from the CHP website https://www.chp.gov.hk/en/features/100675.html). A copy of the Note should be submitted to PMVD within 1 day after the vaccination activity.
- If the vaccine distributor fails to collect the unused/surplus vaccine and cold boxes 30 minutes after the expected time (even after contacting them or fail to reach them), please inform PMVD immediately.

5.1.2. KG/CCC Outreach

- Unused/surplus vaccines should be properly disposed or returned to the vaccine-storing refrigerator in the doctor’s clinic/ medical organisation as soon as possible.
- To transport unused/surplus vaccines, cold box(es) equipped with ice packs and insulating materials (e.g. bubble wrap or Styrofoam) should be used.
- Vaccine temperature should be monitored continuously using a temperature data logger/ maximum-minimum thermometer during vaccine transport.
- For details, please refer to the requirements and recommendations on vaccine storage and handling under non-clinic settings as set out in Section 4.4 in Chapter 4 of the VSS Doctors’ Guide (https://www.chp.gov.hk/en/features/45838.html).
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5.1.3. Monitor vaccine wastage rate

- The vaccine wastage rate for each PPP doctor will be monitored closely.
- The PPP doctor may be asked to explain if the wastage rate is considered too high (usually not more than 5%).
- If the vaccine wastage rate for an individual PPP doctor is high which no reasonable explanation can be given, the participation of the doctor to the programme in the future may be affected.

5.2 Other vaccination incidents under Primary School Outreach

- Vaccines provided under Primary School Outreach is the property of DH. The doctor may be liable to costs related to broken or missing vaccines and DH reserves the right to demand the doctor for payment of vaccine costs due to vaccine breakage or loss.

5.2.1. Broken vaccines

- If vaccine is found to be broken upon unwrapping or by staff of the Primary School Outreach Teams, take photos of all the broken vaccines and document the batch number and quantity. Broken vaccines should be discarded into sharps boxes immediately and disposed of as clinical waste.
- If the breakage is extensive, inform the PMVD as soon as possible for any remedy actions (e.g. urgent delivery of vaccines to the venue).
- The information of broken vaccine should be recorded in the Vaccine Report and Cold Boxes Return Form – Primary School Outreach (Appendix 6.14) and provided to PMVD within 1 day after the vaccination activity.
- Broken vaccines should never be administered to students.

5.2.2. Defective vaccines

- If vaccine is found to be defective, take photos of the defective vaccine and document the batch number, quantity, and reason for defection (e.g. temperature out of range, expired vaccine).
- Separate the affected vaccines from other vaccine supplies and mark “DO NOT USE” on the outer wrapper of the affected vaccines.
- Inform PMVD as soon as possible for any remedial action taken (e.g. urgent delivery of vaccines to the venue).
- Defective vaccines should never be administered to students.

5.2.3. Missing vaccines
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- SIV will be delivered by vaccine distributor appointed by DH in quantity requested by medical organisation and agreed by PMVD. If any discrepancy was found on delivery, remark on the Vaccine Delivery Note and document in the Vaccine Report and Cold Boxes Return Form – Primary School Outreach (Appendix 6.14) later.

- If the discrepancy is extensive, inform the PMVD as soon as possible for any remedy action taken (e.g. urgent delivery of vaccines to the venue).

- The Vaccine Report and Cold Boxes Return Form – Primary School Outreach (Appendix 6.14) should be provided to PMVD within 1 day after the vaccination activity.

- For cases of missing vaccines, PMVD may launch investigation or refer to authority shall a felony is suspected.

5.3 Disposal of Clinical Waste and Record Keeping

- Upon completion of vaccination, the used sharps box(es) should be properly sealed by the proprietary closure and disposed as soon as possible. For details, please refer to section 3.8 and Appendix I of VSS Doctors’ Guide. All clinical waste generated must be properly handled and disposed of according to the Waste Disposal (Clinical Waste) (General) Regulation. EPD may also conduct surprise inspection to check any non-compliance of clinical waste management in the vaccination activities. For details, please refer to EPD’s Code of Practice for the Management of Clinical Waste (Small Clinical Waste Producers) ([https://www.epd.gov.hk/epd/clinicalwaste/file/doc06_en.pdf](https://www.epd.gov.hk/epd/clinicalwaste/file/doc06_en.pdf)) and Appendix I of the VSS Doctor’s Guide, or contact Miss CHOI of EPD at 3178 9356 for any enquiries.

- Doctors must retain the Waste Producer Copy (pink copy) of the Clinical Waste Trip Ticket for 12 months from the date of consignment/delivery and provide the record to the EPD for inspection when so required. For details, please refer to EPD’s website on Record Keeping for Small Producers. ([https://www.epd.gov.hk/epd/clinicalwaste/en/smallproducer_duty_record.html](https://www.epd.gov.hk/epd/clinicalwaste/en/smallproducer_duty_record.html))

5.4 Submitting reports

5.4.1 Primary School Outreach

- After vaccination, the doctor needs to submit the following documents within 1 day of vaccination activity:
  1. the Vaccine Delivery Note signed by designated staff upon receipt of vaccine;
  2. the Vaccine Report and Cold Boxes Return Form – Primary School Outreach (Appendix 6.14) to DH indicating
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- the number of vaccine used and unused;
- the number of unserviceable vaccine (e.g. broken on delivery, broken needle on administration or defective vaccines); and
- signed by both the designated staff and vaccine distributor upon collection of unused vaccine and cold boxes.

5.4.2. KG/CCC Outreach

• After vaccination, the doctor needs to submit the Vaccination Report – KG/CCC Outreach (Appendix 6.15) within 1 day of vaccination activity.

5.5 Submitting claims on eHS(S) and reimbursement

• Claims should only be made after vaccination has been given.
• Claims have to be submitted WITHIN SEVEN CALENDAR DAYS after the delivery of vaccination service (both days inclusive) for online processing for reimbursement. The doctor is highly recommended to make claims immediately after the vaccination to prevent double dosing.
• Doctors can click the names directly on eHS(S) to confirm recipients have received vaccinations, in a batch of around 20 recipients per page.
• The doctor who makes a claim for reimbursement has a duty to ensure that the date of vaccination is accurate and consistent with the record on recipient’s vaccination card and Consent Form (Appendix 6.7-6.8).
• DH will verify with schools/ PPP doctors in case of doubt.
• DH will conduct random post-payment check on the vaccination services provided.
• Please refer to Chapter 2 of the VSS Doctors Guide for more information on the reimbursement process.

5.6 Planning for second dose vaccination activity

• The doctor is required to provide the second dose to consented students under age of 9 years who have not received SIV before. The second dose vaccination activity should be held within one vaccination day (for Primary School Outreach) and at an interval of at least 4 weeks after the first dose and before end of January 2021.
• It is recommended the vaccination date of the first and second dose to be at least six weeks apart to allow logistic preparation for the second dose (e.g. Consent Form
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

collection and checking for the second dose).

- For both Primary School Outreach and KG/CCC Outreach, the doctor should notify PMVD the date of second dose vaccination on or **before 14 August 2020** using the *Booking of Time Slot for Outreach Vaccination Activity Form* (Appendix 6.3.).

- Doctors are required to generate and handover a list of students requiring 2nd dose vaccination to the teachers upon the completion of the 1st dose vaccination activity (minus those who have not turned up for 1st dose).

- Follow the administrative procedures for the first dose vaccination activity. Please refer to section 3.1 for details.

- Mop up vaccination for the first dose and ad hoc vaccination should not be entertained. Please advise students to visit any VSS doctors for subsidised vaccination.

5.7 Record keeping

- Documents including *Consent Forms*, vaccination records/ documents and photocopies, if any, collected from eligible vaccine recipients should be kept in a locked cabinet for at least **seven years**. The number of persons who can access the personal data should be limited, to protect against indiscriminate or unauthorized access, processing and use. **Doctors must keep a record of clinical waste disposal. Please refer to section 5.3 for details.**

5.8 Special weather arrangement

In case of school suspension due to extreme weather conditions, please contact PMVD as soon as possible.
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6. Appendix

6.1 List of Items to Bring to Venue on the Vaccination Day
6.2 Checklist of Inspection on PPP Outreach Vaccination Activities
6.3 Booking of Time Slot for Outreach Vaccination Activity
6.4 Notice to Parents on Seasonal Influenza Vaccination – First Dose
6.5 Notice to Parents on Seasonal Influenza Vaccination – Second Dose
6.6 Student Vaccination List
6.7 Consent Form – 2019/20 Seasonal Influenza Vaccination School Outreach (Free of charge) – Injectable Vaccine
(同意書 – 2019/ 20 季節性流感疫苗學校外展 （免費）– 注射式疫苗)
6.8 Consent Form – 2019/20 Seasonal Influenza Vaccination School Outreach (Free of charge) – Nasal Spray Vaccine
(同意書 – 2019/ 20 季節性流感疫苗學校外展 （免費）– 噴鼻式疫苗)
6.9 Consent Form Receipt Note
(同意書交收記錄)
6.10 Seasonal Influenza Vaccination Card
(季節性流感疫苗接種卡)
6.11 Information on Side Effects
(副作用資料頁)
6.12 Information on Side Effects and 2nd dose Arrangement
(副作用資料頁及第二劑的安排)
6.13 Primary School Outreach Vaccine Ordering and Unused Vaccine Collection Form
(疫苗申請及疫苗送收時間表格)
6.14 Primary School Outreach Vaccine Report and Cold Boxes Return Form
(疫苗使用報告及冰箱收集記錄)
6.15 KG/CCC Outreach Vaccination Report
(接種記錄報告)
6.16 Clinical Waste Temporary Storage Handover Note
(醫療廢物暫存轉交記錄)
6.17 Notification to Parents – Seasonal Influenza Vaccination Has Not Been Given
(家長通知書 – 未有接種季節性流感疫苗)
### 6.1 List of Items to Bring to Venue on the Vaccination Day

(Relevant video is available at: [https://www.youtube.com/watch?v=L0cABMrIlII&feature=youtu.be](https://www.youtube.com/watch?v=L0cABMrIlII&feature=youtu.be))

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<tr>
<th>Items</th>
<th>Primary School</th>
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<tbody>
<tr>
<td><strong>For Injection and cold chain maintenance</strong></td>
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<td>Sharps boxes (at least 1 for each vaccination station)</td>
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<tr>
<td>Dry clean gauzes / cotton wool balls</td>
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<td>Alcohol pads / swabs</td>
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<td>70-80% Alcohol-based hand rub solution (1 for each vaccination station)</td>
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<td>Kidney dishes / containers</td>
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<td>Vaccines and cold boxes</td>
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<td>Maximum and minimum thermometers (1 for each cold box)</td>
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<td>Additional ice packs with adequate insulating materials for cold chain maintenance</td>
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<td><strong>For Emergency</strong></td>
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<td>Bag Valve - Mask, including both child and adult size masks</td>
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<td>Registered Adrenaline in pre-filled pen or auto-injector / Adrenaline injection 1:1000 (With appropriate syringe, i.e. 1 ml syringes and 25-32mm needles, each of 3 numbers at least)</td>
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<td>Blood Pressure monitor</td>
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<td>Clinic chops (For vaccination card)</td>
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<td>(For vaccines delivery note and clinical waste collection)</td>
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<td><strong>Forms and Documents</strong></td>
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<td>Signed Students' Consent Form – Seasonal Influenza Vaccination</td>
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<td>［同意書 - 2020/21 季節性流感疫苗學校外展（免費）］（已簽署）</td>
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<td>Seasonal Influenza Vaccination Cards (Appendix 6.10)</td>
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<td>(副作用資料頁)</td>
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### PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

<table>
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<tr>
<th>Items</th>
<th>Primary School</th>
<th>KG/CCC</th>
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<td>Information on Side Effects and 2nd dose Arrangement <em>(Appendix 6.12)</em> (副作用資料頁及第二劑的安排)</td>
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<td>Updated Consented Student List (1st dose &amp; 2nd dose) <em>(Appendix 6.6, i.e. list printed out on or 3 days before vaccination day)</em></td>
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<td>Surgical Mask</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Plastic bags (for domestic rubbish)</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>
6.2 Checklist of inspection on PPP outreach vaccination activities

A) Venue setting and staff support
1) Waiting and registration area
2) Vaccination area
3) Post vaccination observation area
4) Area for emergency treatment (with mattress)
5) Number and Qualification of the on-site staff(s) handling vaccination
6) Whether on-site doctor is present at the venue of the activity
7) Who is the Basic Life Support provider with valid license

B) Vaccine and vaccination procedures
1) Receiving vaccine (designated staff, checking of vaccine intactness) – for Primary School Outreach
2) Vaccine arrangement (self-delivery of vaccines by KG/CCC Outreach, including cold box(es), equipped with conditioned ice packs, maximum-minimum thermometers, & insulating materials, etc.)
3) Cold chain handling (packing, temperature, thermometer)
4) Name of vaccine(s) and expiry date with caution on recommendation for appropriate age-range recipients
5) Vaccination equipment (Alcohol pads/ swabs and gauzes/ cotton wool balls)
6) Sharps handling (sharps boxes, 1 for each vaccination station)
7) Health assessment before vaccination (vaccination history and allergic history) (verbal or using a form)
8) 3 Checks – Procedures of vaccine checking
9) 7 Rights – Vaccine administration
10) Infection control practice (hand hygiene, disinfection and care of injection site)
11) Advice after vaccination (on-site post vaccination observation, advice on adverse reactions)
12) Emergency preparation (Bag Valve Mask of age-appropriate size, Registered Adrenaline auto injector/ Adrenaline (1:1000 dilution) (with appropriate syringes, i.e. 1 ml syringe with 25-32mm needles), Blood Pressure monitor with age-appropriate cuffs and Protocol for emergency management)

C) Documentation
1) Consent Form – 2020/21 Seasonal Influenza Vaccination School Outreach (Free of charge) (Appendix 6.7-6.8)
2) Seasonal Influenza Vaccination Card (Appendix 6.10)
3) Vaccination record
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

4) Information on Side Effects (Appendix 6.11).
5) Information on Side Effects and 2nd dose Arrangement (Appendix 6.12).
6) Updated Consented Student List (Appendix 6.6)

D) Others
1) Handling of unused vaccine
2) Disposal of clinical waste
3) Handing of medical incidents (report and follow up)
4) Filling the Vaccine Report and Cold Boxes Return Form – Primary School Outreach (Appendix 6.14)
5) Filling the Vaccination Report – KG/CCC Outreach (Appendix 6.15)
6) Issuing Notification to Parents – Seasonal Influenza Vaccination Has Not Been Given (Appendix 6.17)

The above notes are by no means exhaustive. Please refer to CHP website for more information regarding outreach vaccination activities, including the VSS Doctors’ Guide. You are required to follow all necessary steps in using the schemes, failing which release of injection fee may be affected.
### 6.3 Booking of Time Slot for Outreach Vaccination Activity

**Booking of Time Slot for Outreach Vaccination Activity**

*under 2020/21 Seasonal Influenza Vaccination School Outreach (Free of Charge)*

**PRIMARY SCHOOL ONLY**

We have checked with the following school and would like to book the following time slot for the outreach vaccination activity:

| Name and Address of Primary School (in English) | | |
| Name and Contact Number of Responsible Teacher | | |

| NOTE: vaccination activities should be conducted during normal school hours (Mon-Fri, 8am-5pm) | 1st dose | 2nd dose |
| Proposed Date | 1st visit | 2nd visit (if required) |
| Proposed Time | From: | From: |
| Date and Time of Health Talk (if arranged) | To: | To: |

**Clinic/Medical Organization**

---

**Name of Enrolled Doctor**  
**Fax Number**

---

**Date**  
**Contact Phone Number**

---

FOR OFFICE USE ONLY

To: Dr. (Fax number: )

The date(s) of the vaccination on for the captioned school is / are confirmed.

Programme Management and Vaccination Division  
Centre for Health Protection

SITSO_D_A1(P5)  
Last update: May 2020
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

To: Programme Management and Vaccination Division, Centre for Health Protection
(Fax: 2984 9600)

Booking of Time Slot for Outreach Vaccination Activity under 2020/21 Seasonal Influenza Vaccination School Outreach (Free of Charge)

**KINDERGARTEN/CHILD CARE CENTRE (KG/CCC) ONLY** Notes 1 - 5

We have checked with the following school and would like to inform the following time slot for the outreach vaccination activity:

<table>
<thead>
<tr>
<th>Name and Address of KG/CCC (in English)</th>
<th>Name and Contact Number of Responsible Teacher</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1st dose 2nd dose 2nd dose Notes 4 - 5</td>
</tr>
<tr>
<td></td>
<td>1st visit 2nd visit (if required)</td>
</tr>
<tr>
<td>Proposed Date</td>
<td></td>
</tr>
<tr>
<td>Proposed Time</td>
<td>From : From : To : To :</td>
</tr>
<tr>
<td>Type of Vaccine</td>
<td>Ticked as appropriate</td>
</tr>
<tr>
<td></td>
<td>□ Inactivated Influenza Vaccine Injectable</td>
</tr>
<tr>
<td></td>
<td>□ Live Attenuated Influenza Vaccine Nasal Spray</td>
</tr>
<tr>
<td>Date and Time of Health Talk (if arranged)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Chop of Clinic/ Medical Organisation</td>
<td></td>
</tr>
</tbody>
</table>

Name of Enrolled Doctor Fax Number

Date Contact Phone Number

STVSO_D_A1(KG)
Last update: May 2020
Appendix

6.4 Notice to Parents on Seasonal Influenza Vaccination – First Dose

Notice
Seasonal Influenza Outreach Vaccination

(Date of issue)

To All Parents,

Department of Health will arrange vaccination team (by DH or through public private partnership) to provide 1st dose seasonal influenza outreach vaccination at our school on (Date of vaccination). Please kindly note the following remarks:

1. Inform our school immediately if your child has received 2020/21 seasonal influenza vaccine after 1-September 2020
2. Bring Seasonal Influenza Vaccination Card on the vaccination day (if available)
3. Remind your child to have breakfast on the vaccination day
4. Wear clothes such that the arm can be exposed easily for vaccination (if receiving injectable vaccine)

Principal/Teacher in charge: ____________________
通告

有關季節性流感疫苗到校接種事宜

衛生署將於 ________________（日期）安排疫苗接種隊（由衛生署或透過公私營合作）到校為貴子女提供第一劑季節性流感疫苗接種服務。請貴家長細閱以下注意事項：

1. 如在 2020 年 9 月 1 日後已接種 2020/21 年度流感疫苗，請立即通知學校
2. 請於接種當日攜帶季節性流感疫苗接種卡（如有）
3. 請提醒貴子女接種當天早上要進食早餐
4. 請安排貴子女穿著方便外露手臂的衣服，以便接種（如接種注射式疫苗）

此致
各位家長

校長/負責老師：_______ 謹啟

____年____月____日
6.5 Notice to Parents on Seasonal Influenza Vaccination – Second Dose

Notice
2nd dose Seasonal Influenza Outreach Vaccination

(Date of issue)

To Parents/ Guardians of ______________________ (Name of Student/ Class),

Department of Health will arrange vaccination team (by DH or through public private partnership) to provide 2nd dose seasonal influenza outreach vaccination* at our school on (Date of vaccination). Please kindly note the following remarks:

1. Inform our school immediately if your child has received 2nd dose 2020/21 seasonal influenza vaccine (SIV) after 1 September 2020 or you disagree for your child to receive the above vaccination.
2. Bring Seasonal Influenza Vaccination Card on the vaccination day (if available)
3. Remind your child to have breakfast on the vaccination day
4. Wear clothes such that the arm can be exposed easily for vaccination (if receiving injectable vaccine)

Principal/Teacher in charge: ______________________

*Children under 9 years old who have never received any SIV are recommended to have 2 doses of SIV with a minimum interval of 4 weeks.
通告
有關（第二劑）季節性流感疫苗到校接種事宜

（學生姓名／班別）的家長／監護人:

衛生署將於______________（日期）安排疫苗接種隊（由衛生署或透過公私營合作）到校為本校學生提供第二劑季節性流感疫苗接種服務*。請貴家長細閱以下注意事項：

1. 如貴子女在2020年9月1日後已接種第二劑2020/2021年度流感疫苗，或你不同意貴子女於上述安排中接種疫苗，請立即通知學校。
2. 請於接種當日攜帶季節性流感疫苗接種卡（如有）。
3. 請提醒貴子女接種當天早上要進食早餐。
4. 請安排貴子女穿著方便外露手臂的衣服，以便接種（如接種注射式疫苗）。

校長/負責老師：________ 謹啟

______年______月______日

*9 歲以下從未接種過季節性流感疫苗的學生，建議應接種兩劑流感疫苗，而兩劑疫苗的接種時間必須最少相隔4星期。
## 6.6 Consented Student List

<table>
<thead>
<tr>
<th>Class No.</th>
<th>Name</th>
<th>Sex</th>
<th>Date of Birth</th>
<th>Document Type</th>
<th>Document Number</th>
<th>Date of Issue</th>
<th>Permit to retain until</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>TAI  CHIU MIU</td>
<td>M</td>
<td>08-01-2012</td>
<td>Birth Certificate - HK</td>
<td>WD187163(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>YUEN</td>
<td>FUK CHIX</td>
<td>F</td>
<td>18-11-2011</td>
<td>Birth Certificate - HK</td>
<td>VB652775(3)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>FUNG</td>
<td>SIK KWONG</td>
<td>M</td>
<td>21-04-2009</td>
<td>Birth Certificate - HK</td>
<td>TR625122(8)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>陳小明</td>
<td>CHAN</td>
<td>SIU MING</td>
<td>M</td>
<td>03-02-2012</td>
<td>Birth Certificate - HK</td>
<td>F4340740</td>
</tr>
<tr>
<td>5</td>
<td>YUE</td>
<td>NING YI</td>
<td>F</td>
<td>10-05-2015</td>
<td>HKID Card</td>
<td>FE082356(8)</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>陳小雯</td>
<td>LEE</td>
<td>SIU MAN</td>
<td>F</td>
<td>15-08-2013</td>
<td>HKID Card</td>
<td>K1454250</td>
</tr>
<tr>
<td>7</td>
<td>張百言</td>
<td>CHEUNG</td>
<td>PAK YIN</td>
<td>M</td>
<td>21-10-2015</td>
<td>Recognizance (Form No. 8)</td>
<td>ABC12345</td>
</tr>
<tr>
<td>8</td>
<td>CHU</td>
<td>KA PO</td>
<td>F</td>
<td>11-11-2014</td>
<td>Birth Certificate - HK</td>
<td>C986460A</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>陳小南</td>
<td>WONG</td>
<td>HOI MING</td>
<td>F</td>
<td>18-10-2012</td>
<td>Permit to Remain in HKSAR (ID 235B)</td>
<td>ID122005</td>
</tr>
<tr>
<td>10</td>
<td>陳小雲</td>
<td>WONG</td>
<td>MAN HEUNG</td>
<td>F</td>
<td>01-03-2010</td>
<td>Adoption Certificate</td>
<td>S975329/90027</td>
</tr>
<tr>
<td>11</td>
<td>陳小軍</td>
<td>CHEUNG</td>
<td>YUK KING</td>
<td>F</td>
<td>07-10-2009</td>
<td>HKID Card</td>
<td>W724676(8)</td>
</tr>
<tr>
<td>12</td>
<td>陳小壯</td>
<td>SUN</td>
<td>YUAN</td>
<td>M</td>
<td>23-10-2007</td>
<td>Two-way Permit</td>
<td>W4762039</td>
</tr>
</tbody>
</table>
6.7 Consent Form – 2020/21 Seasonal Influenza Vaccination School Outreach (Free of charge) – Injectable Vaccine

**Consent Form**

Please complete this form in BLOCK LETTERS with a blue or black pen and put "✓" into the appropriate box(es).

- I have read and understood the appended information, including contraindications, and **agree** for my child (named below) to receive the seasonal influenza vaccination (1st AND 2nd doses*) as arranged by the Department of Health (DH) in year 2020/21 and to release the related information to DH for verification when necessary. [*DH will arrange 2nd dose of seasonal influenza vaccine (SIV) at least 4 weeks after the 1st dose for children who are under 9 years old and have never received any SIV before.*]

Has your child received SIV in the past?  
☐ Yes (Last administration date: ________________ / ________________ (MM/YY))  
☐ No

**School Name:**  
**Student’s Full Name (Surname):**  
**Given name:**  
**Gender:**

**Date of Birth:**  
**Sex:**

**Identity Document:**  
☐ Hong Kong Birth Certificate  
☐ Hong Kong Identity Card

**Document No.:**  
**Date of Issue:**  
**Sex:**

☐ Others (Please attach a copy of the identity document)

**Signature of Parent/Guardian:**  
**Name of Parent/Guardian:**  
**Contact number (mobile):**  
**Date:**

---

**Refusal Form**

☐ I have read and understood the appended information, including contraindications, and **disagree** for my child (named below) to receive the seasonal influenza vaccination as arranged by the Department of Health (DH) in year 2020/21.

**Student’s Full Name:**  
**Gender:**  
**Class:**  
**Class no.:**

**Signature of Parent/Guardian:**  
**Name of Parent/Guardian:**  
**Date:**

---

**To be filled in by the healthcare worker providing the vaccination**

**First dose** vaccination day

☐ Seasonal influenza vaccine was provided to the student

☐ Seasonal influenza vaccine was NOT provided to the student as the student:  
☐ was absent from school  
☐ refused vaccination  
☐ had physical discomfort [e.g. flu symptoms / fever (body temperature ______^oC) others]  
☐ others (please specify):  

**Follow-up:**  
☐ "Notification to Parents" was given to parent/guardian concerned (via school) for reminding them to arrange the vaccination at their family’s / private doctors’ clinics.

**Name of Medical Organisation:**

**Name of Doctor:**  
**Signature of Vaccination Staff:**  
**Name of Vaccination Staff:**  
**Remarks:**

---

**Second dose** vaccination day

☐ Seasonal influenza vaccine was provided to the student

☐ Seasonal influenza vaccine was NOT provided to the student as the student:  
☐ was absent from school  
☐ refused vaccination  
☐ had physical discomfort [e.g. flu symptoms / fever (body temperature ______^oC) others]  
☐ others (please specify):  

**Follow-up:**  
☐ “Notification to Parents” was given to parent/guardian concerned (via school) for reminding them to arrange the vaccination at their family’s / private doctors’ clinics.

**Name of Medical Organisation:**

**Name of Doctor:**  
**Signature of Vaccination Staff:**  
**Name of Vaccination Staff:**  
**Remarks:**

---

SIV50_5_A4  
Last updated: June 2020
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

Dear Parents/Guardians,

2020/21 Seasonal Influenza Vaccination School Outreach (Free of Charge)

To increase Seasonal Influenza Vaccination (SIV) uptake in school children, the Department of Health (DH) is launching the Seasonal Influenza Vaccination Outreach (Free of Charge) in the School Year 2020/21. The school which your child is attending has joined this outreach. DH will arrange vaccination teams (by DH or through public-private partnership) to provide free seasonal influenza vaccine at your child’s school on __________ (date). Inactivated Seasonal Influenza Vaccine (by injection) will be provided.

DH has the following advice on SIV:
1. Influenza vaccination is a safe and effective mean to prevent influenza and its complications.
2. The “Scientific Committee on Vaccine Preventable Diseases” recommends children aged 6 months to 11 years as one of the priority groups. Vaccinating young school children can reduce school absenteeism and influenza transmission in the community.
3. To develop adequate immunity against seasonal influenza, children under 9 years old who have never received any SIV are recommended to have 2 doses of SIV with a minimum interval of 4 weeks. The vaccination team will provide 1st and 2nd doses of SIV at school.
4. Please consult your family doctor if you have any concerns about whether your child could receive influenza vaccine.

Please note:
- If your child is attending more than one school, please choose to receive vaccination at only one of the schools.
- If your child (applicable to consented students) has received the 2020/21 SIV before this outreach activity, please inform the school immediately.

Please read the attached information carefully and fill in the reply slip (either the consent or the refusal form) and return it to the school upon completion by __________ (date).

For enquiries, please contact the Programme Management and Vaccination Division during office hours 2125 2128 (Programme issues) or 2125 2537 (Vaccination nursing care).

Frequently Asked Questions on Inactivated Seasonal Influenza Vaccines (by injection)

(For further information, please visit website of Centre for Health Protection of DH: https://www.chp.gov.hk/tc/pdfs/rules181702041.html)

1. What is the recommended composition of the 2020/21 seasonal influenza vaccine?
The quadrivalent, egg-based, influenza vaccine recommended by the Scientific Committee on Vaccine Preventable Diseases for the 2020/21 season contains the following:
- an A/Hong Kong/156/2019 (H1N1)pdm09-like virus;
- an A/Hong Kong/2671/2019 (H3N2)-like virus;
- a B/Phuket/307/2013 (BVicenza-like) strain;
- a B/Phuket/307/2013 (BVicenza-like) strain.

2. Who should not receive inactivated influenza vaccine (IV)?
The IV contains dead viruses and is given by injection. Most IVs are recommended for use among persons aged 6 months or above, including those who are healthy, pregnant women and those with chronic medical problems. Please consult the doctor for details.

3. Who should not receive inactivated influenza vaccine (IV)?
- People who have a history of severe allergic reaction to any vaccine component, antibodies, e.g. Gentamicin/ Neomycin or a previous dose of any influenza vaccine;
- Individuals with mild egg allergy who are considering an influenza vaccination can be given IV in primary care setting, such as health centres or clinics. Individuals with a history of anaphylaxis to egg should have seasonal influenza vaccine administered by healthcare professionals in appropriate medical facilities with capacity to recognise and manage severe allergic reactions. Influenza vaccine contains ovalbumin (a chicken protein), but the vaccine manufacturing process involves repeated purification and the ovalbumin content is very little. Even people who are allergic to eggs are generally safe to receive vaccination. Please consult the doctor for details.
- Individuals with bleeding disorders or on anticoagulants should consult the doctors for advice; and
- In case of fever on the day of vaccination, the vaccination should be deferred till recovery.

4. What are the possible side effects of the inactivated influenza vaccine (IV)?
- IV is very safe and usually well-tolerated start from occasional soreness, redness or swelling at the injection site. Some recipients may experience fever, muscle pain, and stiffness beginning 6 to 12 hours after vaccination and lasting up to 2 days. If fever or discomforts persist, please consult a doctor.
- Immediate severe allergic reactions like hives, swelling of the lips or tongue, and difficulties in breathing are rare but require emergency consultation.
- Influenza vaccination may be rarely followed by serious adverse events such as Guillain-Barré Syndrome (1 to 2 cases per million vaccinated) and severe allergic reaction (anaphylaxis) (9 per 10 million doses distributed). However, influenza vaccination may not necessarily have causal relations with these adverse events. Studies have shown that the risk of Guillain-Barré Syndrome after influenza infection (17.20 per million infected persons) is much higher than after influenza vaccination (1.03 per million vaccine recipients).
6.7 同意書 – 2020/21 季節性流感疫苗學校外展 (免費) – 注射式疫苗

【同意書】
2020/21 季節性流感疫苗學校外展（免費）– 注射式疫苗

同意書

□ 本人已閱讀及明白附頁流感接種資格資料的內容，包括禁忌症及□同意□不滿

日期：

學校名稱：

學生姓名（中文）：

學生姓名（英文）：

出生日期：

身份證明文件類別：

香港出生證明書

香港身份證

其他

簽名日期：

家長/監護人簽署：

簽署日期：

聯絡電話（手機）：

【不同意書】

□ 本人已閱讀及明白附頁流感接種資料的內容，包括禁忌症及□不同意

學生姓名：

性別：

班別：

班號：

家長/監護人簽署：

簽署日期：

以下資料只由提供疫苗接種的醫護人員填寫

第一部分

□ 有無學生接種流感疫苗。

□ 有無為學生接種流感疫苗，原因是學生：

□ 否

□ 是

體溫不正常（例如：額頭不正常/發燒（體溫：____℃））

□ 是

□ 否

□ 其他（請填寫：________）

以上原因由_________（名）（教師/護理人員）確認

護理：□ 医護人員簽名：

醫護人員姓名：

日期：

第二部分

□ 有無學生接種流感疫苗。

□ 有無為學生接種流感疫苗，原因是學生：

□ 否

□ 是

體溫不正常（例如：額頭不正常/發燒（體溫：____℃））

□ 是

□ 否

□ 其他（請填寫：________）

以上原因由_________（名）（教師/護理人員）確認

護理：□ 医護人員簽名：

醫護人員姓名：

日期：

SV5O_S.14

最後更新 2020年6月

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PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach
### Appendix

#### 6.8 Consent Form — 2020/21 Seasonal Influenza Vaccination School Outreach (Free of charge) — Nasal Spray Vaccine

**[Consent Form]**

*Please return to School once completed.*

---

**2020/21 Seasonal Influenza Vaccination School Outreach (Free of Charge) — Nasal Spray Vaccine**

*Please complete this form in BLOCK LETTERS with a blue or black pen and put "✓" into the appropriate box(es).*

**School Name:**

**Class:**

**Class no.:**

**Student’s Full Name:** (Surname) ____________________________ (Given name) ____________________________

**Gender:**

---

1. I have read and understood the appended information, including contraindications:
   - [ ] I agree for my child (named above) to receive the seasonal influenza vaccination (1st AND 2nd doses) as arranged by Department of Health (DH) in year 2020-21 and to release the related information to DH for verification when necessary.  
     - **< PLEASE FILL IN (2) TO (4) >**
     - [*DH will arrange 2nd dose of seasonal influenza vaccine (SIV) at least 4 weeks after the 1st dose for children who are under 5 years old and have never received any SIV before.*]
   - [ ] I disagree for my child (named above) to receive the seasonal influenza vaccination as arranged by the Department of Health (DH) in year 2020-21.
     - **< PLEASE FILL IN (4) ONLY >**

2. Identity document type:
   - [ ] Hong Kong Birth Certificate
   - [ ] Hong Kong Identity Card
   - [ ] Others (Please attach a copy of the identity document)

   **Document no.:**

   **Date of Issue:** / / 
   **(DD/MM/YYYY)**

---

3. Please answer the following relating to your child’s health condition (Please check your child’s vaccination record before filling in this part):

   1. Has your child received SIV in the past?
      - [ ] Yes (Last administration date: ___________ (MM/YY))
      - [ ] No
   2. Does your child have any of the following conditions? [If the answer to any of the following is “Yes”, no answer or uncertainty, your child will not be eligible to participate in the Seasonal Influenza Vaccination School Outreach (Free of Charge). Please consult your family doctor for vaccination at the clinic.]
      - [ ] Lungs problem or weakness after receiving SIV
      - [ ] Allergic reaction to SIV
      - [ ] Allergic reaction to egg
      - [ ] Allergic reaction to antibiotics
      - [ ] Asthma or wheezes
      - [ ] Taking aspirin or receiving salicylate-containing therapy
      - [ ] Heart, lung, kidney disease, or diabetes requiring chronic medication
      - [ ] Immunosuppressive disease, taking immunosuppressive medication or living with persons of immunocompromised state

---

4. **Signature of Parent/Guardian:**

   **Name of Parent/Guardian:** ____________________________

   **Date:**

---

**To be filled in by the healthcare worker providing the vaccination**

<table>
<thead>
<tr>
<th>First dose vaccination day</th>
<th>Second dose vaccination day</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Seasonal influenza vaccine was provided to the student</td>
<td>[ ] Seasonal influenza vaccine was PROVIDED to the student as the student:</td>
</tr>
<tr>
<td>[ ] Seasonal influenza vaccine was NOT provided to the student as the student:</td>
<td>[ ] Seasonal influenza vaccine was NOT provided to the student as the student:</td>
</tr>
<tr>
<td>[ ] was absent from school</td>
<td>[ ] was absent from school</td>
</tr>
<tr>
<td>[ ] refused vaccination</td>
<td>[ ] refused vaccination</td>
</tr>
<tr>
<td>[ ] had physical discomfort [e.g., flu symptoms/fever (body temperature __°C)]</td>
<td>[ ] had physical discomfort [e.g., flu symptoms/fever (body temperature __°C)]</td>
</tr>
<tr>
<td>[ ] others (please specify: ____________________________)</td>
<td>[ ] others (please specify: ____________________________)</td>
</tr>
</tbody>
</table>

**Follow-up:** [ ] “Notification to Parents” was given to parent/guardian concerned (via school) for reminding them to arrange the vaccination at their family/private doctors’ clinics.

**Name of Medical Organisation:** ____________________________

**Name of Doctor:** ____________________________

**Signature of Vaccination Staff:** ____________________________

**Name of Vaccination Staff:** ____________________________

**Remarks:**

---

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**SIIOQ_5_A4(LAV)
Last modified: June 2020**
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

Dear Parents/Guardians,

To increase Seasonal Influenza Vaccination (SIV) uptake in school children, the Department of Health (DH) is launching the Seasonal Influenza Vaccination School Outreach (Fee of Charge) in the School Year 2020/21. The school which your child is attending has joined this outreach. DH will arrange vaccination team (by DH or through public-private partnership) to provide free seasonal influenza vaccine at your child’s school on (date). Live Attenuated Seasonal Influenza Vaccine (by nasal spray) will be provided.

DH has the following advice on SIV:
(1) Influenza vaccination is a safe and effective means to prevent influenza and its complications.
(2) Vaccinating young school children can reduce school absenteeism and influenza transmission in the community.
(3) To develop adequate immunity against seasonal influenza, children under 5 years old who have never received any SIV are recommended to have 2 doses of SIV with a minimum interval of 4 weeks. The vaccination team will provide 1 and 2 dose of SIV at school.
(4) Please consult your family doctor if you have any concerns about whether your child could receive influenza vaccine.

Please note:
- If your child is attending more than one school, please choose to receive vaccination at each one of the schools.
- If your child (applicable to consular students) has received the 2020/21 SIV before this outreach activity, please inform the school immediately.

Please read the appended information carefully and fill in the reply slip (either agree or disagree) and return it to the school upon completion (by 8th August 2020).

For enquiries, please contact the Programme Management and Vaccination Division during office hours: 2125 2128 (Programme issues) or 2537 (Vaccination nursing care).

Programme Management and Vaccination Division
Centre for Health Protection, Department of Health
August 2020

Frequently Asked Questions on Live Attenuated Seasonal Influenza Vaccine (by nasal spray)

(For further information, please visit the website of Centre for Health Protection of DH: https://www.gov.hk/files/afis/3034.html)

1. What is the recommended composition of the 2020/21 seasonal influenza vaccine?
   The quadrivalent influenza vaccine recommended by the Scientific Committee on Vaccine Preventable Diseases for the 2020-21 season for age-based vaccines contains the following:
   - A/California/7/2009 (H1N1)pdm09-like virus
   - A/Victoria/361/2011 (H3N2)-like virus
   - B/Washington/02/2009 (Victoria lineage)-like virus, and
   - B/Hong Kong/33/2013 (Yamagata lineage)-like virus

2. What is live attenuated influenza vaccine (LAV)?
   LAV is a live vaccine that is a weakened vaccine. LAV can be used for people 14 years of age or younger who are pregnant, immunocompromised or with other contraindications. Please consult the doctor for details.

3. Why should not receive live attenuated influenza vaccines (LAV)? What are the contraindications?
   LAV is a live vaccine and is generally contraindicated in the following conditions:
   - People with severe allergies to any vaccine component, antibodies, e.g., penicillin, neomycin or after previous dose of any influenza vaccine;
   - Corticosteroids or salicylate-containing therapy in children and adolescents;
   - Children aged 2 through 4 years who have asthma or who have had a history of wheezing in the past 12 months;
   - Children and adults who are immunocompromised due to the immune system;
   - Close contacts and carers of severely immunocompromised persons who require a protected environment;
   - Pregnancy;
   - Receipt of influenza antiviral medication within previous 48 hours.

   Individuals with a history of allergy who are undergoing an influenza vaccination can be given LAV in primary care setting, such as health centers or clinics. Individuals with a history of allergy who are undergoing an influenza vaccination administered by healthcare professionals in appropriate medical facilities with capacity to recognize and manage severe allergic reactions. Influenza vaccine contains ovalbumin (a chicken protein), but the vaccine manufacturing process involves repeated purification and the ovalbumin is not very effective. Even people who are allergic to eggs generally safe to receive vaccination. Please consult the doctor for details.

4. What are the possible side effects of the live attenuated influenza vaccine (LAV)?
   The most common adverse reactions following LAV administration are nasal congestion or runny nose (in all ages), fever (in children) and sore throat (in adults).

   - Children aged 6 to 11 years will experience wheezing and cough in persons of any age with asthma, as use at increased risk of wheezing following administration.
   - Immediate severe allergic reactions: wheezing, asthma attack, or the larynx, and necessitates in using air but require emergency consultation.

Collection of Personal Data - Statement of Purpose

Parent’s Undertaking and Declaration
1. I understand the information provided in this form is correct.
2. I agree to provide my child/ward’s personal data in this form and any information related to this vaccination for the use by the Government for the purposes set out in the Statement of Purpose of Collection of Personal Data. I hereby consent to transfer and release my child/ward’s personal data and any information related to this vaccination to the Government, its agents, or other persons authorised by the Government. I note that the Department of Health may contact my school to verify the particulars of my child/ward and whether my child/ward has received vaccination when necessary.
3. I hereby consent to transfer and release my child/ward’s personal data and any information related to this vaccination for the purposes set out in the Statement of Purpose of Collection of Personal Data. I hereby consent to transfer and release my child/ward’s personal data in this form to the Government, its agents, or other persons authorised by the Government. I note that the Department of Health may contact my school to verify the particulars of my child/ward and whether my child/ward has received vaccination when necessary.

Statement of Purpose of Collection of Personal Data
5. The personal data provided will be used by the Government for one or more of the following purposes:
   (i) for creation, processing and maintenance of an electronic health (Subsidies) account, audit and administration and monitoring of the School Vaccination Programme, including but not limited to verification procedures by electronic means, with the data kept by the Immunization Information System;
   (ii) for statistical and research purposes, and
   (iii) any other purposes permitted by law.

6. The vaccination record made for the purpose of this consultation will be accessible by health care personnel in the public and private sectors for the purpose of determining and providing necessary health care service to the recipient.

7. Providing the personal data is voluntary. If you do not provide sufficient information, your child’s ward may not be able to receive vaccination.

Clause of Transfer
8. The personal data you provided are mainly for use within the Government but the information may also be disclosed by the Government to other organisations, and third parties for the purposes mentioned in paragraphs 1 and 2 above, if required.

Access to Personal Data
9. You have the right to request access to and correction of your personal data under sections 18 and 22 and principle 6, schedule 1 of the Personal Data (Privacy) Ordinance (Cap. 486). The Department of Health may impose a fee for complying with a data access request.

Execution
10. Inquiries concerning the personal data provided, including the request for access and correction, should be addressed to Executive Officer, Programme Management and Vaccination Division, Centre for Health Protection, Room A, 2/F, 147A, Atylee Street, Kowloon (Telephone No: 2125 2128)
6.8 同意書 – 2020/21 季節性流感疫苗學校外展 (免費) – 噴鼻式疫苗

【同意書】

2020/21 季節性流感疫苗學校外展 (免費) – 噴鼻式疫苗

學校名稱：__________________________ 班級：__________________________ 班號：__________________________
學生姓名 (中文)：__________________________ (性) __________________________ (名) __________________________ 性別：__________________________
學生姓名 (英文)：__________________________ (性) __________________________ (名) __________________________

(一) 本人已閱讀及明白附頁流感疫苗接種資料的內容，包括風險及益處，並
 □ 同意 小孩/小女接觸及看護者安排之 2020/21 年度流感疫苗第一劑及第二劑*，並同意，如有需要，與學校接觸資格
 (優先接種)(二) 附注
 (1) 當年次季節性流感疫苗的學生，完成第一劑後至少 4 星期，本校將安排接種第二劑疫苗。

(二) 填寫申請文件範例

- 畫面身份證明書 證件號碼：__________________________ 證件姓名：__________________________ (發行日期: _______月 _______日)
- 填寫申請文件范例

(三) 請回答以下有關 孩子的健康狀況（請勾選 孩子的接觸接種記錄後填寫）

1. 是否曾经接種過流感疫苗？ □ 是（最近一次接種日期：____月____日） □ 否
2. 有沒有以下各項病史？（請勾選有或否）
   - 有過敏史、免疫缺陷、曾有感染流感
   - 有機動力
   2.1 曾接觸過流感疫苗的家族病史
   2.2 曾接觸過流感疫苗的家族病史
   2.3 曾接觸過流感疫苗的家族病史
   2.4 曾接觸過流感疫苗的家族病史
   2.5 曾接觸過流感疫苗的家族病史

(四) 家長/親人簽署：__________________________ 家長/親人姓名：__________________________ 日期：__________________________

以下資料可由提供疫苗接種的醫護人員填寫

<table>
<thead>
<tr>
<th>第一劑接種日</th>
<th>第二劑接種日</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ 有為學生接種流感疫苗</td>
<td></td>
</tr>
<tr>
<td>□ 沒有為學生接種流感疫苗，原因：學生姓名：</td>
<td></td>
</tr>
<tr>
<td>□ 無效 □ 拒絕接種</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>□ 有效不適 (例如：感冒發燒 / 感染 (體溫：<em><strong><strong>°C) / 其他：</strong></strong></em>_____________________ )</td>
<td></td>
</tr>
<tr>
<td>□ 其他（請補充：__________________________ ）</td>
<td></td>
</tr>
</tbody>
</table>

以上原因經由： __________________________ (護理/職員) 填寫

醫療機構名稱：__________________________ 負責醫生姓名：__________________________ 日期：__________________________

護理人員簽章：__________________________ 性名：__________________________ 備註：__________________________
PPP Doctors’ Guide for Primary School Outreach and KG/CCC Outreach

致：家长/监护人

2020/21 季期流感疫苗及疫苗相关活动 (免費)

為提升學生的季節性流感疫苗（流感疫苗）接種率，衛生署於 2020/21 學年推行季節性流感疫苗學校外展（免費）。貴子女就讀的學校已參加此外展。

衛生署將於 __________ (日期) 安排疫苗接種隊 (由衛生署或疫苗公署委託) 到校為貴子女提供免費及健康性流感疫苗（噴霧式）外展。

就流感疫苗接種，本署有以下建議：
1. 接種流感疫苗是安全有效的預防流感及其併發症的方法。
2. 「疫苗預約採用 Rooney 科學委員會」建議年滿 6 個月至 11 歲兒童為接種流感疫苗的優先群組之一。小學生接種流感疫苗會減少復讀和流感在社區的傳播。
3. 為幫助身體產生足夠的免疫力，凡 9 歲以下或未接種流感疫苗的兒童，應接種兩劑流感疫苗，而兩劑疫苗的接種時間最少相隔 4 星期。接種隊成員到校為貴子女提供第一劑及第二劑流感疫苗。
4. 如你對貴子女是否適合接種流感疫苗有任何疑問，可先諮詢家庭醫生意見。

注：貴子女現時或過去一年內接種過流感疫苗，或貴子女於 2020/21 學年已接種本年度流感疫苗，請立即通知學校。

請確認本文件內資料與學生資料吻合，並於 __________ (日期) 或之前將回條交回學校，如有查詢，請於辦公時間內致電項目管理及發放計劃部 2525 2138（計劃秘書）或 2525 2577（接聽時間）。
6.9 Consent Form Receipt Note

2020/21 Seasonal Influenza Vaccination (SIV) School Outreach (Free of Charge)
Public-Private-Partnership (PPP) Outreach Team

Consent Forms Receipt Note

This is to acknowledge that the PPP Outreach Team under
Dr. ____________________________ (Name of Doctor) of
__________________________________________ (Organisation)
has collected __________ (Quantity) Consent Forms from
__________________________________________ (Name of School) on
__________________________________________ (Date)

__________________________________________
Signature of Collector and Organisation Chop of the PPP Outreach Team

__________________________________________
Signature of School Representative and School Chop

__________________________________________
Name of Collector of the PPP Outreach Team

__________________________________________
Name of School Representative

DRAFT
6.9 同意書交收記錄

2020/ 21 季節性流感疫苗學校外展 (免費)
公私營合作外展隊

同意書交收記錄

XXX (醫療機構名稱) XXX 醫生的公私營合作外展隊已在 XXXX 年 XXX 月 XXX
日，收取 XXX (學校名稱) XXX 張同意書。

公私營合作外展隊同意書收取人
簽署及醫療機構蓋印

學校職員簽署及學校蓋印

公私營合作外展隊同意書收取人
姓名

學校職員姓名

DRAFT
### 6.10 Seasonal Influenza Vaccination Card

(季節性流感疫苗接種卡)

<table>
<thead>
<tr>
<th>項目</th>
<th>資料</th>
<th>項目</th>
<th>資料</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccination Date</td>
<td>項目</td>
<td>Vaccination Date</td>
<td>項目</td>
</tr>
<tr>
<td>Name of Doctor/ Clinic</td>
<td>項目</td>
<td>Name of Doctor/ Clinic</td>
<td>項目</td>
</tr>
<tr>
<td>Name of Influenza Vaccine</td>
<td>項目</td>
<td>Name of Influenza Vaccine</td>
<td>項目</td>
</tr>
</tbody>
</table>

**Please keep properly, and present this card on receiving.**

**Department of Health**

**Seasonal Influenza Vaccination Card**

**Seasonal Influenza Vaccination Card**
6.11 Information on Side Effects

Seasonal Influenza Vaccination
Information on Side Effects (Injectable Vaccine)

The Department of Health (DH) has arranged Vaccination Team (by DH or through public private partnership) to provide your child with Seasonal Influenza Vaccine (SIV) at your child’s school on __________ (date). Inactivated SIV (by injection) was provided. Please note the information below:

1. Inactivated influenza vaccine is very safe and usually well tolerated, apart from occasional soreness, redness or swelling at the vaccination site.
2. Some children may experience fever, muscle pain, and tiredness 6 to 12 hours after vaccination. These usually improve in two days.
3. If fever or discomfort persists, please consult a doctor. Severe allergic reactions like hives, swelling of the lips or tongue, and difficulties in breathing, or serious adverse events such as limb numbness or weakness are rare but require emergency consultation.

If you have any queries regarding SIV, please call ____________________________ (Name of Medical Organisation)

Seasonal Influenza Vaccination
Information on Side Effects (Nasal Spray Vaccine)

The Department of Health (DH) has arranged Vaccination Team (by DH or through public private partnership) to provide your child with Seasonal Influenza Vaccine (SIV) at your child’s school on __________ (date). Live attenuated SIV (by nasal spray) was provided. Please note the information below:

1. The most common side effects following live attenuated influenza vaccination are fever, nasal congestion or runny nose.
2. If fever or discomfort persists, please consult a doctor. Severe allergic reactions like hives, swelling of the lips or tongue, and difficulties in breathing are rare but require emergency consultation.

If you have any queries regarding SIV, please call ____________________________ (Name of Medical Organisation)
6.12 Information on Side Effects and 2nd dose Arrangement

Seasonal Influenza Vaccination
Information on Side Effects (Injectable Vaccine) and 2nd dose Arrangement

The Department of Health (DH) has arranged Vaccination Team(s) (by DH or through public-private partnership) to provide your child (name of student) with Seasonal Influenza Vaccine (SIIV) at your child’s school on ___________ (day). Immunisation SIIV (by injection) was provided. Please note the information below:

1. The injection in the upper arm is very safe and usually well tolerated. Apart from occasional soreness, redness or swelling at the vaccination site
2. Some children may experience fever, muscle pain, and tiredness for 6 to 12 hours after vaccination. These usually improve in two days.
3. If fever or discomfort persists, please consult a doctor. Severe allergic reactions (like hives, swelling of the lips or tongue, and difficulty in breathing; or serious allergic reactions such as fainting or unconsciousness) are rare but require emergency consultation.

The Vaccination Team will visit the school again on ___________ to provide 2nd dose vaccination for your child (Children under 9 years old who have never received any SIIV are recommended to have 2 doses of SIIV with a minimum interval of 4 weeks).

If you have any queries regarding SIIV, please call Vaccination Team: (Name of Medical Organisation)
### 6.13 Primary School Outreach

**Vaccine Ordering and Unused Vaccine Collection Form**

(疫苗申請及疫苗送收時間表格)

<table>
<thead>
<tr>
<th>訂單編號</th>
<th></th>
<th>表格</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**2020/21 季節性流感疫苗學校外展（免費）**

公私營合作外展隊-小學

**疫苗申請及疫苗送收時間表格**

備註：由於訂購疫苗及安排運送或收集時需，請於發送日期前最少1週星期填寫本表格並傳真至衛生署項目管理及疫苗計劃科（傳真號碼：2320 8105）。

<table>
<thead>
<tr>
<th>甲部 隨連資料 (中文／英文)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 醫療機構名稱：</td>
</tr>
<tr>
<td>2. 負責醫生姓名：</td>
</tr>
<tr>
<td>3. 醫生註冊編號：</td>
</tr>
<tr>
<td>4. 學校名稱：</td>
</tr>
<tr>
<td>5. 學校編號：</td>
</tr>
<tr>
<td>6. 學生總人數：</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>乙部 接種疫苗人數資料</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 已同意接種疫苗人數：</td>
</tr>
<tr>
<td>2. 由醫療通（資助）系統得出的今季已接種人數：</td>
</tr>
<tr>
<td>3. 家長／學校表示今季已接種的人數：</td>
</tr>
<tr>
<td>4. 缺席第一劑接種人數：</td>
</tr>
<tr>
<td>5. 預計當天上學人數：</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>丙部 疫苗訂購及送交資料</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 申請疫苗數目： (四價) 季節性流感疫苗</td>
</tr>
</tbody>
</table>
| 2. 接種場次：
| 3. 接種疫苗的日期及時間： |
| 4. 學校地址：(中文／英文) |
| 5. 運送員須知： |
| 6. 負責接收疫苗的職員姓名： |
| 7. 接收疫苗職員的手提電話： |
| 8. 負責醫生簽署： |

<table>
<thead>
<tr>
<th>丁部 收集剩餘疫苗及冰箱資料</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 預計收集時間：</td>
</tr>
<tr>
<td>2. 負責職員姓名：</td>
</tr>
<tr>
<td>3. 手提電話：</td>
</tr>
</tbody>
</table>

---

Appendix
6.14 Primary School Outreach

Vaccine Report and Cold Boxes Return Form

(疫苗使用報告及冰箱收集記錄)

衛生署
2000/21 季節性流感疫苗學校外展（免費）
政府／公營合作外展隊 - 小學
疫苗使用報告及冰箱收集記錄

甲、聯絡資料
1. 機關名稱：（中文／英文）

2. 負責醫生／藥員姓名：（中文／英文）

乙、收集詳情（收貨業務號碼：）

<table>
<thead>
<tr>
<th>物 資</th>
<th>數 量</th>
<th>批 號</th>
</tr>
</thead>
<tbody>
<tr>
<td>制劑疫苗（四價）季節性流感疫苗</td>
<td>十劑裝： 副</td>
<td></td>
</tr>
<tr>
<td></td>
<td>單劑裝： 副</td>
<td></td>
</tr>
<tr>
<td>冰箱運輸盒（內附溫度監控記錄器）</td>
<td>個</td>
<td></td>
</tr>
</tbody>
</table>

丙、簽署及蓋章

由外展隊職員填寫

簽署：

姓名：

職位：

電話：

由衛生署指定物資供應員填寫

簽署：

姓名：

職位：

電話：

丁、疫苗使用記錄（由外展隊職員填寫，物流商不適用）

<table>
<thead>
<tr>
<th>接收</th>
<th>疫苗數量 (a)</th>
<th>已使用</th>
<th>疫苗數量 (b)</th>
<th>被破壞／損壞／已失效</th>
<th>疫苗數量 (c)</th>
<th>剩餘</th>
<th>疫苗數量 (d)</th>
</tr>
</thead>
</table>

* (a) = (b) + (c) + (d)
6.15 KG/CCC Outreach
Vaccination Report

Appendix

2020/21 Seasonal Influenza Vaccination School Outreach (Free of Charge)
Student Vaccination Record (On Vaccination Day)

Please check with medical organisation and fax this form to the Programme Management & Vaccination Division of the Centre for Health Protection (Fax number: 2120 8505) within one working day after completion of each vaccination activity.

<table>
<thead>
<tr>
<th>校名</th>
<th>Name of school</th>
</tr>
</thead>
<tbody>
<tr>
<td>責任醫生</td>
<td>Name of responsible doctor</td>
</tr>
<tr>
<td>名稱</td>
<td>Name of medical organisation</td>
</tr>
<tr>
<td>撰寫日期</td>
<td>Date of vaccination</td>
</tr>
<tr>
<td>接種場次</td>
<td>Vaccination session</td>
</tr>
</tbody>
</table>

第一劑 (1st dose) | 第二劑 (2nd dose)

- □ 第一次接種 (1st visit)
- □ 第二次接種 (2nd visit)
- □ 其他 (Other: )

全校學生人數
Total no. of students in school

同意接種人數
Total no. of consented students

作為校方代表
By school staff

Fill in by medical organisation staff

Signature
Name
Post
Contact No.

(SYSO_S_C11_KG)
最終更新：2020年6月
6.16 Clinical Waste Temporary Storage Handover Note
(醫療廢物暫存轉交記錄)

衛生署
2020/21 季節性流感疫苗學校外展（免費）
公私營合作外展隊
醫療廢物轉交記錄

注意事項：
1. 此表格只適用於非醫療廢物收集箱未能轉到學校由學校保管後，由學校收集暫存於本表內使用，參與外展
   的學校機構及學校均應使用此表格的正／副本本。
2. 當學校機構的醫療廢物收集箱轉交到學校保管後，學校應填妥此表後交回學校保管。
3. 醫療廢物收集箱應於適當處所及時間交回學校保管。

甲、聯絡資料
1. 參與計劃醫生姓名：（中文／英文）
2. 服務提供者號碼：
3. 所屬醫療機構名稱：（中文／英文）
4. 學校名稱：（中文／英文）
5. 學校編號：
6. 轉交日期：
7. 預計更換收集箱收集／重用“日期”（將不適用者刪除）：

乙、醫療廢物轉交詳情：

<table>
<thead>
<tr>
<th>疫苗種類</th>
<th>收集箱數量</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ 接種第一劑（第一天）</td>
<td></td>
</tr>
<tr>
<td>□ 接種第一劑（第二天）</td>
<td></td>
</tr>
<tr>
<td>□ 接種第二劑</td>
<td></td>
</tr>
</tbody>
</table>

丙、醫療機構及學校簽署及蓋印

由醫療機構職員填寫

姓名：
職位：
電話：

由學校職員填寫

姓名：
職位：
電話：

醫療廢物暫存轉交

學校蓋印

SIV52_D_B
版本更新：2020 年 6 月
Appendix

6.17 Notification to Parents –
Seasonal Influenza Vaccination Has Not Been Given (English)

Date __________________

Dear Parents/ Guardians of ___________________ (Name of Student/ Class),

2020/21 Seasonal Influenza Vaccination (SIV) School Outreach (Free of Charge)
Notification to Parents – Seasonal Influenza Vaccination Has Not Been Given

The Department of Health (DH) has arranged vaccination team by designated medical organisation to provide Quadrivalent Seasonal Influenza Vaccination (SIV) to students at your child’s school today.

After the assessment, the vaccination team did not vaccinate your child because* your child:

☐ was absent from school
☐ had physical discomfort [e.g. flu symptoms/ fever (body temperature ________)]
☐ refused vaccination
☐ may require further assessment before vaccination by healthcare professionals in appropriate medical facilities. Please consult your family doctor for further advice.
☐ others (please specify: __________________________)

Vaccination team will not rearrange SIV for your child at his/ her school. Please arrange vaccination for your child at your family doctor’s clinic or any private clinic.

Under the Vaccination Subsidy Scheme (VSS) of DH, children who are Hong Kong residents are eligible to receive SIV, with Government subsidy. Both private doctors enrolled in VSS. Doctors participating in VSS may or may not charge a service fee. Please refer to the “List of Participating Doctors” to see whether the individual doctor charges service fee, the amount they charge and their address (https://www.hk.gov.hk/SDIR-EN/index.aspx).

“List of Vaccination Subsidy Scheme Participating Doctors”

Name of Medical Organisation : __________________________

Telephone Number : __________________________

*Vaccination team please tick the appropriate circle
6.17 Notification to Parents –
Seasonal Influenza Vaccination Has Not Been Given (Chinese)

________________________ (學生姓名/別名) 的家長／監護人：

2021 季節性流感接種外展活動
家長通知書 – 未接種季節性流感疫苗

衛生署已安排由指定的醫術名冊提供的疫苗接種隊於今天到貴子女就讀的學校為學童接種四價季節性流感疫苗。

經評估後，接種隊沒有為貴子女接種流感疫苗，原因如下：

○ 疫苗
○ 身體不適合（例如：感冒徵狀／發燒（體溫 ______ C）／其他 ________________________________________________________________________
○ 拒絕接種
□ 可能需要其他詳盡的評估後，由專責護理人員在適當醫療場所內接種。詳情請通知你的家庭醫生。
□ 其他 ________________________________________________________________________

疫苗接種隊將不會再次到校為貴子女接種季節性流感疫苗。請貴家長自行安排為貴子女到你們的家庭醫生的診所或任何一間私家醫生診所接種。

衛生署的「疫苗資助計劃」下，淮安衛生署資助的兒科，可前由資助計劃的私家醫生診所接種受政府資助的流感疫苗。參與計劃醫生可能收取或不收取服務費。家長可從「參與計劃醫生名單」（https://www.gov.hk/hk-sdr/vaccines/your/child_list.pdf）中，查詢個別醫生會否收取服務費，收費水平及其診所地址。

「參與「疫苗資助計劃」醫生名單」

醫療機構名稱： ______________________

電話： ______________________

日期： ______________________

* 接種除須在合適的 □ 內加上「／」號