Residential Care Home Vaccination Programme (RVP) 2025/26

Briefing to the Private Doctors

29 July 2025

(Updated on 1 December 2025)





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1. Background





Background

Residential Care Home Vaccination Programme (RVP)

Aims

- Provides **free** and **convenient** vaccination services for eligible persons in:
- Residential Care Homes (RCHs)
- Residential Child Care Centres (RCCCs)
- Designated Institutions (DIs*)

Format

- A form of public private partnership
- RCHs/RCCcs/DIs invite to the Private Doctors to provide on-site vaccination

Subsidy

Reimbursement to to the Private Doctors through eHealth after the injections





^{*} DIs includes designated day activity centres, sheltered workshops and special schools serving non-institutionalised Persons with Intellectual Disability (PID) in Hong Kong

2. Review of RVP 2024/25





Summary of Vaccination Statistics 2024/25 - SIV

Around 2,089,500 doses (+11.8%) administered under different vaccination programmes (record high)

(as at 22 June 2025 day end)





Vaccination Statistics of RVP 2024/25

1. Seasonal Influenza Vaccine (as at 13.7.2025)

Category	Type of Institution	Coverage in RVP (2023/24 vs 2024/25)	Total no. of dose
Residents	RCHEs	83.2% → 78.0%	
	RCHDs	78.3% → 75.7%	64,095
	RCCCs	82.4% → 79.5%	
Staff	RCHEs	42.5% → 39.8%	
	RCHDs	28.2% → 25.4%	15 100
	RCCCs	13.4% → 9.4%	15,102
	DIs	11% → 8.5%	
Service User	DIs	48.1% → 13.0% (calculated based on the number of service users in DIs enrolled under RVP)	1,756

2. Pneumococcal Vaccine (as at 13.7.2025)

Category	Type of Institution	No. of PCV15 administered in 2024/25 (PCV 13 - 2023/24)	No. of 23vPPV administered in 2024/25 (2023/24)
Daoidanta	RCHEs	6,533 (8,166)	3,744 (4,711)
Residents	RCHDs	354 (352)	255 (299)





Highlights of Evaluation of RVP 2024/25

- Structured questionnaire survey was sent to the Private Doctors in February 2025
- Opinions on the changes on workflow were collected:
 - Informed consent / Opt-out policy
 - Co-administration of SIV and COVID-19 vaccine





Highlights of Evaluation of 2024/25

1. Informed consent to replace written consent forms

- Majority of the Private Doctors supported this initiative as it lessens workload/ time involved, saves the trouble from having to keep the consent forms for 7 years, and lessens the chance for clerical/ human error.
- Some preferred written consent mainly due to concern on liability.

2. Co-administration of SIV and COVID-19 vaccine

- Majority of the Private Doctors supported this initiative as it increases the vaccination rate of SIV and COVID-19 vaccine, facilitates operational need and lessens workload/ time involved.
- > Some the Private Doctors did not support this initiative mainly due to concern of clerical/ human error and clinical incident.





3. Overview and new initiatives of RVP 2025/26





SCVPD recommendations for 2025-26

 Scientific Committee on Vaccine Preventable Diseases (SCVPD) -Recommendations on Seasonal Influenza Vaccination for the 2025-26 Season (As of 21 March 2025)



Scientific Committee on Vaccine Preventable Diseases

Recommendations on Seasonal Influenza Vaccination For the 2025-26 Season in Hong Kong (As of 21 March 2025)

Introduction

Seasonal influenza causes a significant disease burden in Hong Kong. Since 2004, the Scientific Committee on Vaccine Preventable Diseases (SCVPD) reviews the scientific evidence of influenza vaccination and makes recommendations on influenza vaccination in Hong Kong annually. This document sets out the scientific evidence, local data as well as overseas practices, and provides recommendations in relation to seasonal influenza vaccination in Hong Kong for the 2025-26 season.

Summary of Global Influenza Activity

2. According to World Health Organization (WHO)'s updates on seasonal influenza activity published in February 2025, influenza activity published in February 2025, influenza activity was reported in all regions from September 2024 through January 2025, and the overall activity was lower compared to the same period in 2023-2024. The predominating viruses varied among regions and between countries. Globally, influenza A virus detections greatly outnumbered those of influenza B, although the predominating subtype varied across regions. Among the subtyped A virus detections, A(H1N1) viruses were detected more frequently throughout the reporting period in Asia, South America and Northern and Western Africa. Eastern Europe and North America areported similar proportions of influenza A(H1N1) and A(H3N2) viruses. Influenza B detections were lower than those of influenza A, and all influenza B



https://www.chp.gov.hk/en/static/24008.html





SCVPD recommendations for 2025-26

Vaccine types

- Inactivated influenza vaccine (IIV), live attenuated influenza vaccine (LAIV) and recombinant influenza vaccine (RIV) are recommended for use in Hong Kong
 - Based on review of available evidence, WHO recommendation and overseas practice, both IIV and RIV are recommended for use in the residential care home setting.
 - When available, RIV which may offer improved protection against influenza illness in older adults is preferred for older adults living in residential care homes.
- Both trivalent and quadrivalent vaccines could be used in the 2025-26 season.





SCVPD recommendations for 2025-26

Vaccine composition

 Follows the recommendations by the WHO for the 2025-26 Northern Hemisphere influenza season

Quadrivalent vaccine

	1 rivalent vaccine	Quadrivalent vaccine		
Egg-based	 A/Victoria/4897/2022 	 A/Victoria/4897/2022 		
vaccines	(H1N1)pdm09-like	(H1N1)pdm09-like virus		
	virus	 A/Croatia/10136RV/2023 		
	 A/Croatia/10136RV/20 	(H3N2)-like virus		
	23 (H3N2)-like virus	B/Austria/1359417/2021		
	 B/Austria/1359417/202 	(B/Victoria lineage)-like		
	1 (B/Victoria lineage)-	virus		
	like virus	 B/Phuket/3073/2013 		
		(B/Yamagata lineage)-		
		like virus		
Cell culture or	 A/Wisconsin/67/2022 	 A/Wisconsin/67/2022 		
Recombinant	(H1N1)pdm09-like	(H1N1)pdm09-like virus		
based vaccines	virus	A/District of		
	A/District of	Columbia/27/2023		
	Columbia/27/2023	(H3N2)-like virus		
	(H3N2)-like virus	 B/Austria/1359417/2021 		
	B/Austria/1359417/202	(B/Victoria lineage)-like		
	1 (B/Victoria lineage)-	virus		
	like virus	 B/Phuket/3073/2013 		
		3 (B/Yamagata lineage)-		
		like virus		

Trivalent vaccine

Given B/Yamagata lineage viruses are no longer circulating in the population, both **trivalent** and **quadrivalent** vaccines could be used in 2025-26 season





New initiatives of 2025/26 seasonal influenza vaccination

- Unless contraindicated, RIV for all RCHE residents and RCHD residents aged 65 or above. Others can still receive IIV.
- IT system migration to eHealth
 - > All doctors must register with eHealth
 - Doctors enrollment and subsidy claim make on eHealth
- eHealth is mandatory for vaccine recipients aged 18 or above
 - "opt-out" approach for vaccine recipients aged below 18 years old





- A. Seasonal Influenza Vaccination (SIV)
 - Starting from 25 September 2025 (tentatively)
 - early initiation improved vaccination coverage and protection from previous experience
 - Vaccination activities should be held by December 2025, before winter and flu season
 - Subsidy: \$105 per dose
- **B. Pneumococcal Vaccination (PV)**
 - All year-round
 - √ 23-valent pneumococcal polysaccharide vaccine (23vPPV)
 - √ 15-valent pneumococcal conjugate vaccine (PCV15)
 - Subsidy: \$105 per dose





Seasonal Influenza Vaccine (SIV)

Inactivated Influenza Vaccine (IIV) composition:

- an A/Victoria/4897/2022 (H1N1)pdm09-like virus;
- an A/Croatia/10136RV/2023(H3N2)-like virus;
- a B/Austria/1359417/2021(B/Victoria lineage)-like virus; and
- (a B/Phuket/3073/2013(B/Yamagata lineage)-like virus) ←

Not for TIV

Recombinant Influenza Vaccine (RIV) composition:

- an A/Wisconsin/67/2022 (H1N1)pdm09-like virus;
- an A/District of Columbia/27/2023 (H3N2)-like virus; and
- a B/Austria/1359417/2021(B/Victoria lineage)-like virus
- (a B/Phuket/3073/2013(B/Yamagata lineage)-like virus)

Not for TIV





Pneumococcal Vaccination (PV)

Eligibility		
RCHEs	All residents	
RCHDs	Residents aged 65 or above	



 No re-vaccination is needed after the completion of PCV13 / PCV15 and 23vPPV vaccination





Pneumococcal Vaccination (PV)

Past vaccination history	Client should receive
✓ PCV13 / PCV15 only	One dose of 23vPPV <u>≥ one year* after</u> previous PV
✓ 23vPPV only	One dose of PCV15 <u>≥ one year* after</u> previous PV
Both ✓ PCV13 / PCV15 & ✓ 23vPPV	No PV needed
Nil history of PV	First ≥ 1 year* after then PCV15 → 23vPPV

^{* 1} year is assumed to be one calendar year





Eligible groups under RVP 2025/26

Type of	Eligible groups	Types of vaccines to be vaccinated		
institution	Eligible groups	IIV	RIV	PCV15 & 23vPPV
RCHEs	Residents in RCHEs*	(if contraindicated for RIV)	✓	√
	Staff in RCHEs*	✓	*	*
RCHDs	Residents / boarders in RCHDs*	(For residents aged below 65)	(For residents aged 65 or above ONLY)	(For residents aged 65 or above ONLY)
	Staff in RCHDs*	✓	*	*
Designated Institutions (DIs) serving PID	Non-institutionalised PID receiving service in DIs#	✓	*	*
	Staff in DIs	✓	*	*
RCCCs	Residents in RCCCs (children aged six months to 17 years)	✓	*	*
	Staff in RCCCs	✓	*	*

- Route for administration: **Intramuscular ONLY**
- RIV is not fit for persons:
 - who have a history of hypersensitivity to any vaccine component of the RIV
- Private doctors could consider to take special precaution when giving RIV to those with bleeding disorders or on anticoagulants according to their clinical judgment

Does not include non-PID users





^{*} Does not include day care centre users or staff working in day care centre

[^] For those who are not fit for RIV, can receive IIV

Prerequisite of VSS before RVP

- Doctors are required to join Vaccination Subsidy Scheme (VSS) before enrolling RVP.
- Useful materials about VSS 2025/26 are available at CHP website: https://www.chp.gov.hk/en/features/101401.html

<u>Date</u>	Briefing Session		
8 July 2025	Briefing Session on "Recommendations on Seasonal Influenza Vaccination and Pneumococcal Vaccination and Vaccination Subsidy Scheme (VSS) 2025/26"		
	 Review of Vaccination Subsidy Scheme 2024/25 and Overview of Vaccination Subsidy Scheme 2025/26 		
	 Latest Development of Primary Healthcare: Chronic Disease Co-Care Pilot Scheme (CDCC) and Seasonal Influenza Vaccine Arrangement for Specified Family Doctors 		
	 Government Vaccine Contract for VSS Doctors enrolled in the Chronic Disease Co-Care Pilot Scheme 		
	Doctor Enrolement and Vaccine Ordering Arrangement		
	Doctor Enrolement and Vaccine Ordering Arrangement Flow		
	Operational Procedures of VSS		
	Vaccine storage requirement for VSS 2025/26		
	Clinical Waste Management		

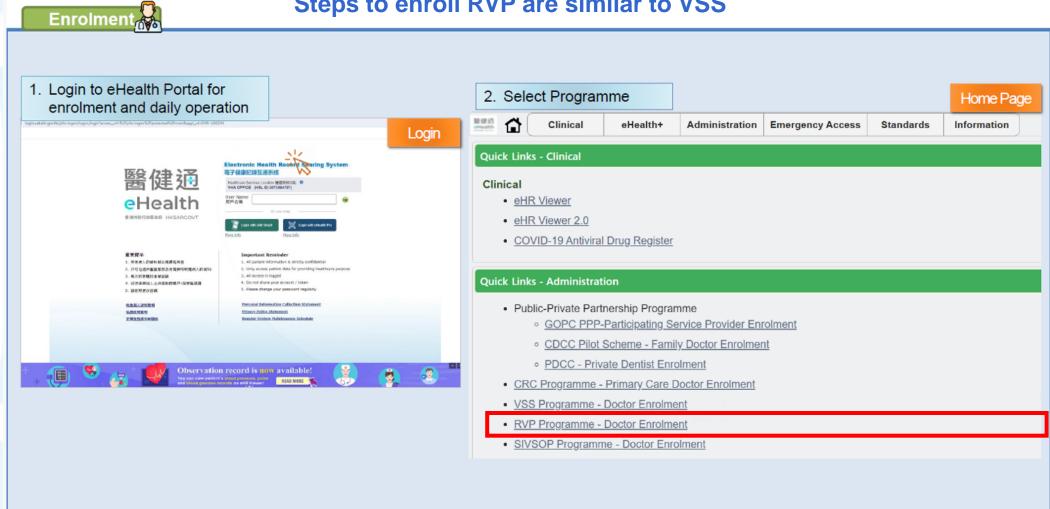




IT System migration to eHealth

Programme Enrolment will be moved to eHealth Portal.

Steps to enroll RVP are similar to VSS

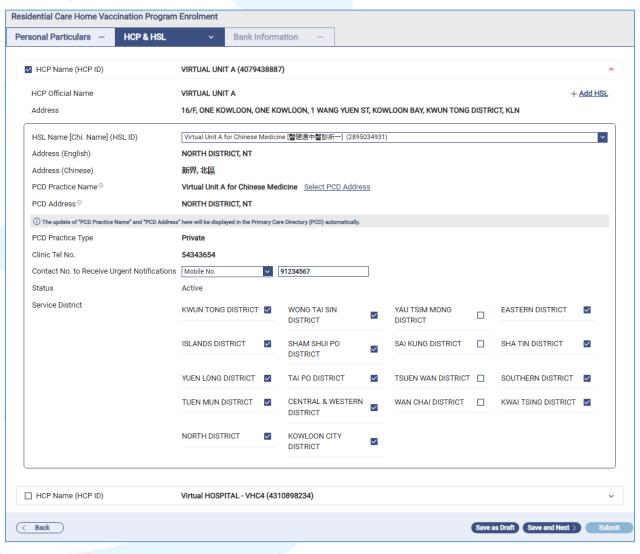






IT System migration to eHealth

Indicate your service preferences on Service District for RVP.







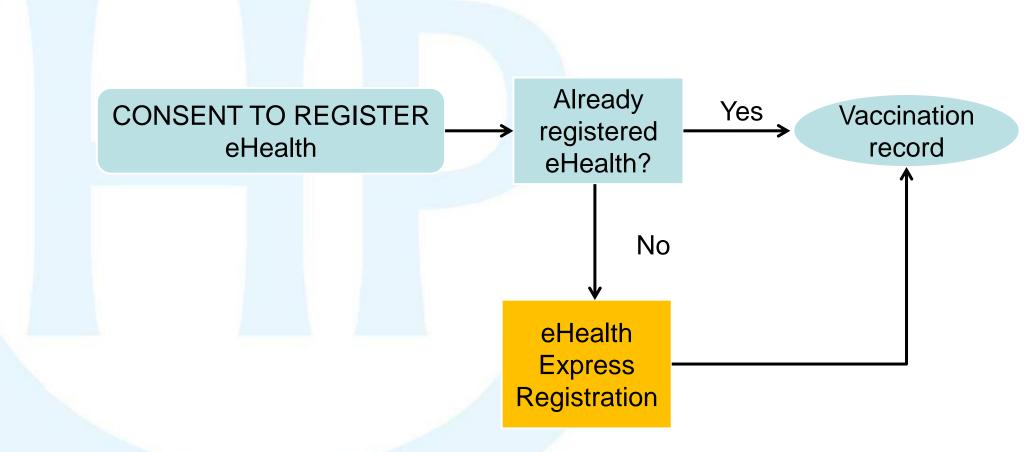
Service Provider List to RCH

- The doctor list will be provided to RCHs for transparent information and planning. Doctors' preference of service locations will be provided on the list.
- Doctors may indicate their preference(s) of service locations when enrolling RVP 2025/26.





eHealth registration (Prerequisite for vaccine recipients aged 18 or above)







Sharing on Vaccination Incidents

Prevent clinical incidents







Case 1

- Mr. LEE transferred from RCHE A to RCHE B in August 2023, and was vaccinated one dose of PCV13 at RCHE A on 1 March 2023.
- Consent for PV vaccination has been obtained from relative.
- Staff of RCHE B did NOT ask relative of Mr. LEE to provide any vaccination card.
- Doctor in-charge of the PV vaccination did NOT check the vaccination history of Mr. LEE at eHealth.
- The doctor then administered a PCV15.
 - → PV Double Dose Incident





Point to learn – Case 1 → PV Double Dose Incident

CHECK vaccination records!!!(Both eHealth and hard copies)





Case 2

- Mr. CHAN received one dose of PCV15 on 25 November 2024.
- Consent for PV vaccination has been obtained from relative.
- Vaccination card marked Mr. CHAN had already received PCV15.
- Doctor in-charge of the PV vaccination checked at eHealth and confirmed Mr. CHAN had received PCV15 on 25 November 2024.
- On 5 November 2025, the doctor administered one dose of 23vPPV to Mr. CHAN.
- → Dose Interval between PVs less than one year.





Point to learn – Case 2- Dose Interval between PVs less than one year.

Pay attention to dosing interval





Case 3

- A 70-year-old RCHE staff agreed to receive PCV15.
- The staff presented a vaccination card, showing no PV vaccinations had been administered before.
- Doctor in-charge of vaccination administered one dose of PCV15 to that RCHE staff.
- → Vaccination provided to ineligible recipient.





Point to learn – Case 3- Vaccination provided to ineligible recipient

 Staff should receive pneumococcal vaccine in their family doctor's clinic instead of at RCH





Case 4

- The staff in RCH received 60 doses of JN.1 mRNA COVID-19 vaccine.
 The responsible staff in RCH checked the vaccine quantity and
 temperature, then unpacked the vaccines and placed them in the
 medical fridge. However, the staff did not verify the batch number and
 the use by date and time.
- Three days later, Doctor provided vaccination activity to 50 residents in the RCH. The RCH staff placed the previously unpacked vaccines on a small trolley and vaccinated residents one by one.
- Later, another COVID-19 vaccination activity for 10 residents was arranged. Since only 50 residents were vaccinated previously and there were 10 remaining doses. Therefore, attending doctor did not ordered new batch vaccine.
- After the vaccination, it was discovered that the doctor administrated the COVID-19 vaccines to the 10 residents beyond the vaccine use by date and time.

→Used mRNA vaccines beyond use by date and time 32





 Point to learn- Case 4 - Used mRNA COVID-19 vaccines beyond use by date and time

 Always check use by date and time for mRNA COVID-19 vaccines





Important reminder of mRNA (e.g. Spikevax JN.1)COVID-19 vaccine storage, preparation and administration (1)

- According to the manufacturer's recommendation, the vaccine should be stored at 2 to 8 degrees Celsius after thawing and should be used within 30 days.
- ensure the integrity of vaccine for irregularity, e.g. damage, contamination, expiry date and time. Please check the "Use by Date & Time" on the outer carton, as the information is not shown on the label of individual prefilled syringes or individual vaccine vial. Vaccines that are beyond the use by date and time should not be used.

i	Use by Date & Time:	BPR No.:	
i	(YYMMDDTTTT) (at 2°C to 8°C)	!:	
_	Thawed Date & Time:		
i	(YYMMDDTTTT)	' !	
1	Expiry date:	li li	
İ	(YYMMDD) (at -50°C to -15°C)		
1	Storage: Store at 2°C to 8°C after receipt	F-00172204.01	
		<i>-</i>	/





Important reminder of mRNA (e.g. Spikevax JN.1)COVID-19 vaccine storage, preparation and administration (2)

- Starting from 18 Aug 2025, an additional yellow label will be affixed to the front of the outer box of Spikevax JN.1 vaccine to enhance the visibility of "use-by date".
- For daily operation, please be reminded to check the remaining shelf-life after thawing by referring to the "use-by date & time" on the outer carton on a regular basis and prior to vaccine preparation, as the information is not shown on the label of individual pre-filled syringe.
- Vaccines that are beyond the "use-by date and time" should not be used.







Important reminder of mRNA (Spikevax JN.1) COVID-19 vaccine storage, preparation and administration

- You and the RCH staff should follow the requirements of
 - (1) regular checking of the recommended **Use by Date & Time** of the vaccines,
 - (2) separate storage of vaccines with different recommended use-by dates, and
 - (3) timely disposal of expired vaccines in accordance with the guidelines of the COVID-19 Vaccination Programme.
- > 3 Checking of vaccines and 7 rights of medication administration should be adopted.





Arrangements for RVP 2025/26

Major areas	RVP 2025/26
Consent Form	E-consent for residents and staff providing consent for themselves
	Paper consent form for minor and MIP with legal guardian only
Opting for vaccination	Opting out of vaccination (Informed consent is still required)
Interval between SIV and COVID-19 vaccine	Co-administration of SIV and COVID-19 vaccine









院舍防疫注射計劃

反對院友接種季節性流感疫苗或 肺炎球菌疫苗回條。 (只適用於未能表達意願的院友)

院舍名稱:	
院友姓名:	
本人是上述院友的*父母/監護人/家屬,知悉若上述院友於日後獲醫生/ 接種季節性流感疫苗及肺炎球菌疫苗,本人反對為其接種以下疫苗: (請於遵當的位置加上"人") 2025/26 季度季節性流感疫苗(滅活流感疫苗)	
□ 2025/26 季度季節性流感疫苗 (滅活流感疫苗)	-
□ 2025/26 季度季節性流感疫苗 (重組流感疫苗) ²	•
□ 十五價肺炎球菌結合疫苗 ²	
□ 二十三價肺炎球菌多醣疫苗²	
如反對接種以上疫苗,請提供原因:	
本人亦明白如沒有接種疫苗,會增加院友感染季節性流感或肺炎球菌疫苗後罹患重症 或死亡的風險,亦有可能為其他院友、院舍員工和整體院舍運作帶來風險。	
本人明白我須在院舍發出通知書後十四天內交回此回條,否則醫生會如常按醫療判斷,在認為合適接種疫苗的情況下,為院友進行接種。	
院友*父母/監護人/家屬簽名 :	
日期 : *請刪去不適用者	



¹父母/監護人/家屬可透過與院舍慣常的溝通方式(例如親自交付、短訊、郵寄、傳真或電郵等) 遠交回條。

 $^{^2}$ 重組流感疫苗及肺炎球菌疫苗只適用在居於安老院舍的院友及 65 歲或以上居於殘疾人士院舍的院友。

Arrangements for RVP 2025/26

	2025/26
Vaccination records checking & claims submission	The Private Doctors have 2 options to choose: By individual vaccine recipient; OR By Excel batch upload
2. Vaccine ordering	The Private Doctors to submit vaccine order form to Vaccination Division via fax or email
3. Vaccination equipment	Institutions will support the preparation of vaccination equipment on vaccination day
4. Infection control	Infection control practice must be complied by all personnel
5. Clinical waste management	Arranged by the Private Doctors, with assistance from Institutions and supported by DH





RCHs/RCCCs/DIs

 Submit completed consent forms (if indicated) and list of consented residents to the Private Doctors <u>at least 25</u> <u>working days</u> before the vaccination

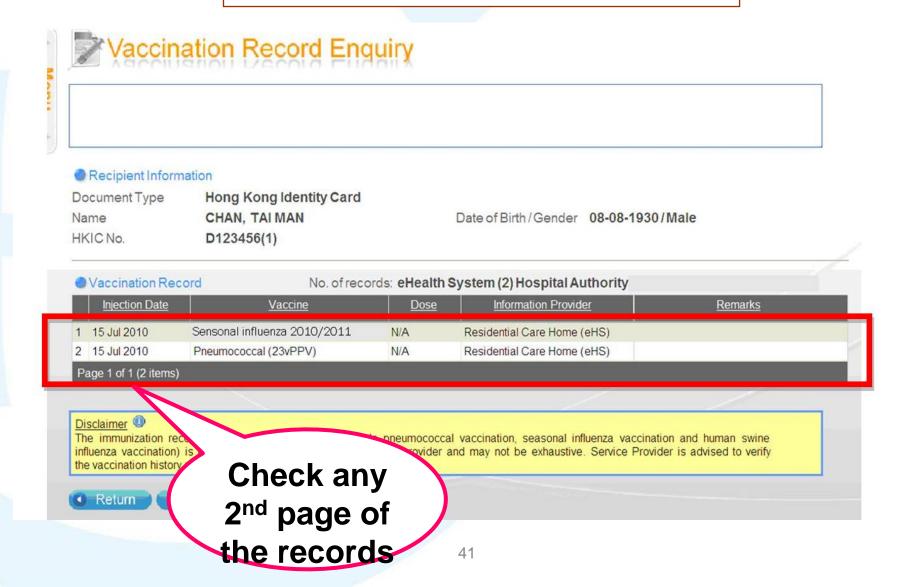
The Private Doctors

- Verify past vaccination history & eligibility for all recipients through eHealth by:
 - ✓ Individual vaccine recipient; OR
 - ✓ Excel batch upload





By individual vaccine recipient







20 working days before vaccination

By Excel batch upload

Submit consent lists in Excel format to DH via email



Download First Report on eHealth to check vaccination records

Rectify invalid accounts for recipients

Input vaccination date for the batch

10 working days before vaccination

Submit vaccine order to DH via fax

Confirm batches

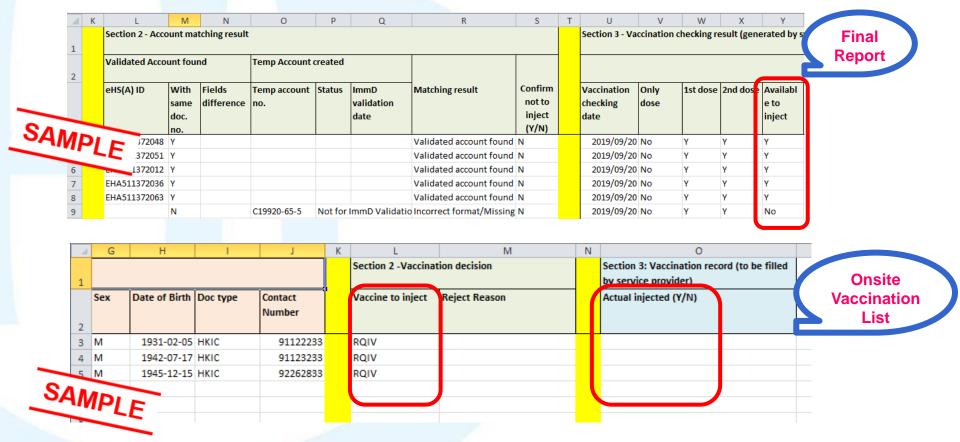
Check Final Report and other documents





By Excel batch upload

 Bring the Final Report & Onsite Vaccination List to the vaccination activity







2. Vaccine ordering

- Liaise with RCHs/RCCCs/DIs to confirm:
 - Vaccination dates of SIV & PV
 - Vaccine delivery date, time and designated staff to receive vaccines
 - No. of remaining dose(s) of SIV & PV (if any) in RCHs/RCCCs/DIs & ensure they are stored properly and not expired
 - The place and fridge for proper vaccine storage with continuous temperature monitoring

Ensure cold chain is maintained at 2-8 °C





2. Vaccine Ordering

Vaccine ordering

Fill in the vaccine order form based on the <u>number of remaining doses & results from vaccination record</u> <u>checking on eHealth</u>

Vaccine order form (乙部)

乙部 訂單及送貨資料 疫苗資源	寶貴,請珍惜,勿浪	費。		
	季節性流	流感疫苗	肺炎球	菌疫苗
	"重組流感疫苗 (RIV)	滅活流感疫苗	15 價肺炎球菌 結合液苗 (PCV15)	23 價肺炎球菌 多酸疾苗 (23~PPV)
* 庫存疫苗數目: (即過往年度 <u>剩餘未過期</u> 的 肺炎球菌疫苗)	建議所有院 不合適接種 I 是否合適接種	z接種 RIV。如院友 RIV,則由醫生評估 重 IIV	已有 針(K1) 如私家醫生使用的 期的肺炎球菌疫苗 時扣除庫在	苗,請在申請疫苗
申請疫苗數目:	需訂 針 (A) (『只有 10 支裝)	需訂 針	需訂 針 (C)	需訂 針 (D)
申請注射針頭 (1 盒 100 支)	盒	不適用	不適用	不適用
	*庫存疫苗數目: (即過往年度剩餘未過期的 肺炎球菌疫苗) 申請疫苗數目:	*庫存疫苗數目: (即過往年度剩餘未過期的 肺炎球菌疫苗) 申請疫苗數目: (即,	季節性流感疫苗 *庫存疫苗數目: (即過往年度剩餘未過期的 肺炎球菌疫苗) • 建議所有院友接種 RIV。如院友不合適接種 RIV,則由醫生評估是否合適接種 IIV • 職員只可接種 IIV • 職員只可接種 IIV • 職員只可接種 IIV (次) (公) (公) (公) <t< th=""><th>季節性流感疫苗 肺炎球 *童存疫苗數目: (即過往年度剩餘未過期的 肺炎球菌疫苗) *職員只可接種 IIV 申請疫苗數目: (常只有10 支裝) (即過往年度剩餘未過期的 所換球菌疫苗) (K1) 如私家醫生使用過期的肺炎球菌疫苗 (以1) (K1) 如私家醫生使用過期的肺炎球菌疫苗 (以2) (K1) (以3) (K1) (以4) (公1) (以3) (公1) (以4) (公1) (以4) (公1) (公2) (公3) (公3) (公4) (公4) <</th></t<>	季節性流感疫苗 肺炎球 *童存疫苗數目: (即過往年度剩餘未過期的 肺炎球菌疫苗) *職員只可接種 IIV 申請疫苗數目: (常只有10 支裝) (即過往年度剩餘未過期的 所換球菌疫苗) (K1) 如私家醫生使用過期的肺炎球菌疫苗 (以1) (K1) 如私家醫生使用過期的肺炎球菌疫苗 (以2) (K1) (以3) (K1) (以4) (公1) (以3) (公1) (以4) (公1) (以4) (公1) (公2) (公3) (公3) (公4) (公4) <

- > Submit form to DH at least 10 working days before vaccination
- ➤ Contact DH if the Private Doctors cannot receive order confirmation 3 working days after order submission





訂單編號	送針日期
由衞生署聯	

衞生署 2025/26 院舍防疫注射計劃 疫苗申請表格 (安老院舍)

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訂針

機註:
1. 由於訂轉疫苗及安排重送隔時,請於接種日期前最少 10 個工作天填宏本老格並傳真或電郵至本署 (傳真號碼: 2713 6916;電郵地址: rppedb.gor.hk)。私家醫生如於傳真或電郵本表格後三個工作天內仍未收到本署的訂單筛認通知,過數電 3975 4474 與本署整員聯絡。
2. 私家醫生兩責任於申請疫苗的,確認院及 / 職員是否符合常格免費接租字節性流感 / 財災球菌检查。
3. 私家醫生兩聯絡院治安排負責人員接收疫苗:並確認院治有負遇的電腦所存疫苗。請確定所存疫苗的電腦在接收疫苗前7天操作正常、電腦內的湿度必須保持在脈失2 度至48 度。

4. 於 2025/2026 季度開始,18 歲或以上	參與院舍防疫注射計劃的合	資格人士 <u>必須登記醫健通</u> 。		
甲部 安老院舍資料				_
名稱:				
編號:	院友總人數:		職員總人數:	
	口 醫療用雪櫃			
現時使用雪櫃類型:	□ 家用無需雪槽(冰格和冷藏格分開)		
况时 庆 用				
	口 單門家用無霜雪	植 (只有冷臧格)		
乙部 訂單及送貨資料 疫苗資源	寶貴,請珍惜,勿消	費。		
	季節性流	舵感疫苗	10124	菌疫苗
	*重組流感疫苗 (RIV)	滅活流感疫苗 (IIV)	15 價肺炎球菌 結合疫苗 (PCV15)	23 價肺炎球菌 多醣疫苗 (23vPPV)
*庫存疫苗數目:		支接種 RIV。如院友 RIV,則由醫生評估	已有 <u>(KI)</u> 針	已有 針
(即過往年度 <u>剩餘未過期</u> 的 肺炎球菌疫苗)	是否合適接種		()	過往年度剩餘未過
加火 体困役田 /	• 職員只可接	種 IIV	期的肺炎球菌疫苗 時扣除庫在	苗, <u>請在申請疫苗</u> 字疫苗數目
申請疫苗數目:	需訂 針	需訂 針	需訂 針	
	("只有10支裝)	(A1)	(C)	(D)
申請注射針頭(1 盒 100 支)	盒	不適用	不適用	不適用
按额次共约日报	年	月日(時間:上午/下午/	/全日)
接種疫苗的日期:		日期,本署會聯絡院 上午十時至下午一時		至五時(下午)。
送貨地址:	DCHWOO-JIHOW B LI	工 1 1 1 1 1	(1) 3(1) -3(.	Tilled ()
(請用中文填寫及註明送針樓層) 院舍負責接收疫苗的		院全台書	接收疫苗職員的	
職員姓名:				
丙部 私家醫生資料				
姓名:	註冊編號	‡: _M		
聯絡電話:	傳真號碼	j:	醫生簽署	写:

Methods of Submission

- 1. Fax
- 2. Email





3. Vaccination Equipment

- Liaise with RCHs/RCCCs/DIs to prepare vaccination equipment
- Pay attention to the expiry date of the equipment & medication
- Emergency equipment & medication must be ready in the vaccination venue

	Prepared by Private doctors	Prepared by Institutions
1. Equipment	Emergency Equipment	 Sharps boxes Dry sterile gauzes/non- woven balls Alcohol pads 70-80% alcohol-based hand-rub solution Kidney dishes / containers Vaccines
2. Forms & Documents	 Signed consent forms (if indicated) Batch upload: Final report and Vaccination list Individual vaccine recipient: Consent list 	Vaccination cards (including old records if available)
3. Stationery	 Clinic / doctor's name chops (for vaccination card) Organization / clinic stamp (for clinical waste collection) 	 Date chops Pens Institution stamp (for clinical waste collection)





3. Vaccination Equipment

Sample of Emergency equipment & medication



Written protocol for emergency management

Bag Valve Mask Set (with appropriate mask size)

Adrenaline auto injector/
Adrenaline (1:1000 dilution) for IM injection with appropriate syringes and needles (at least 3 1ml syringes with 25-32mm length needles)

Blood pressure monitor (with appropriate cuff size)



4. Infection Control

Infection control practice must be complied by all personnel

- Wear surgical masks
- Proper hand hygiene
- Maintain social distancing
- Clean and disinfect vaccination area with 1 in 49 diluted household bleach





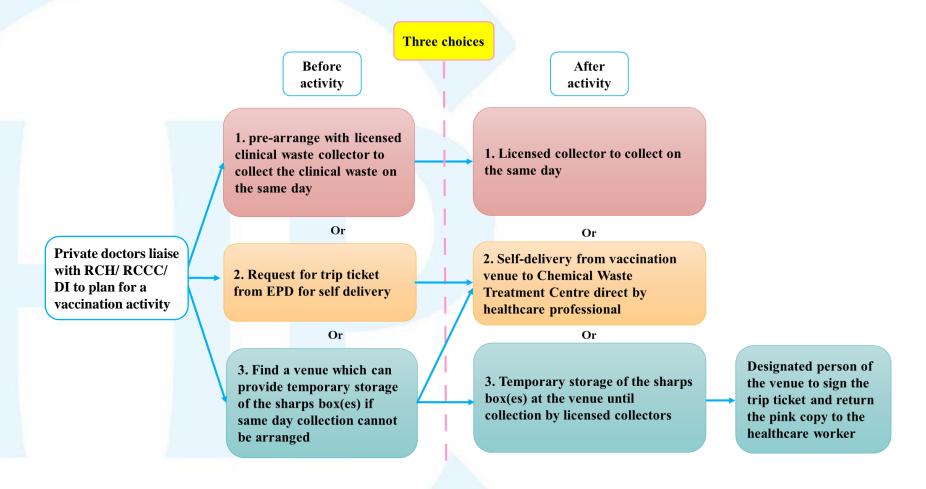
4. Infection Control

For more details about infection control guidelines and social distancing measures, please refer to:

- Guidelines on Prevention of Communicable Diseases in Residential Care Home for the Elderly (Last update: August 2024):
 - Full text:
 https://www.chp.gov.hk/files/pdf/guidelines_on_prevention_of_communicable_diseases_in_rche_eng.pdf
 - Supplementary sheet: https://www.chp.gov.hk/files/pdf/guidelines_on_prevention_of_commu-nicable_diseases_in_rche_supplementary_sheet_eng.pdf
- Guidelines on Prevention of Communicable Diseases in Residential Care Homes for Persons with Disabilities (Last update: April 2023):
 - https://www.chp.gov.hk/files/pdf/guideline_prevention_of_communica ble_diseases_rchd.pdf





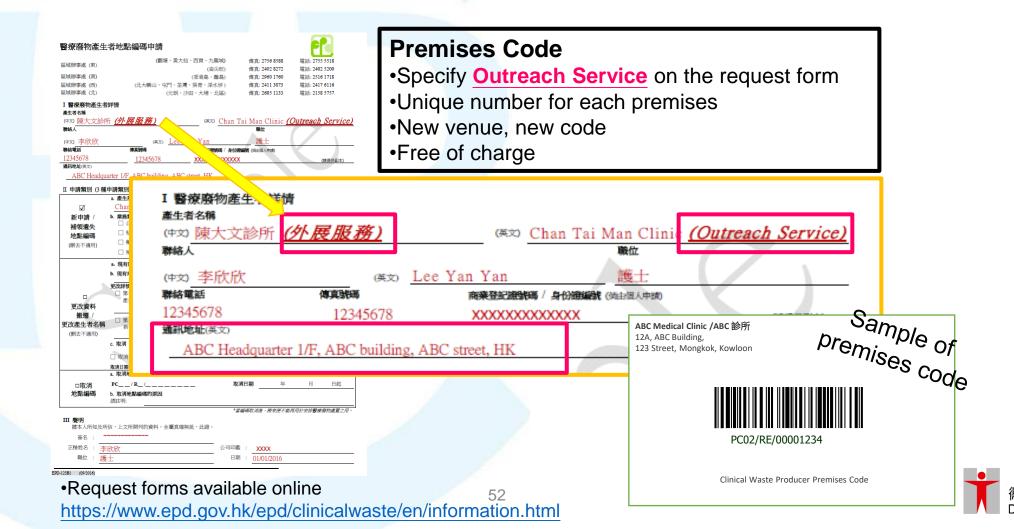


**If necessary, the Private Doctors may liaise with RCHs/RCCCs/DIs to assist in clinical waste disposal in their names for the Private doctors





- Obtain a Clinical Waste Producer Premises Code from EPD
- Premises code is needed for completing the Trip Ticket





Trip ticket

- Same day collection by licensed collector's service → prepared by collectors
- Self-delivery to Chemical Waste
 Treatment Centre → obtain blank
 trip ticket from EPD by the Private
 Doctors in advance¹
- Institutions to assist disposal in their names → The Private
 Doctors should obtain certified true copy of the trip ticket from institution after disposal

Sample of clinical waste trip ticket:







- The Private Doctors may liaise with RCHs/RCCCs/DIs to assist in clinical waste disposal in their names for the Private Doctors
- If the Private Doctors still encounter difficulties in clinical waste disposal, they may seek assistance from DH

Code of RCH ¹ / PID ² / RCCC ³	Name of RCH1 / PID2/ RCCC3	Quantity of Sharp Box(es)	Total Weight (kg)	SAM	
Example: AB1234	ABC Elderly Home	1	0.5		
CH – Residential Care I	Iome(s) ion(s) serving Persons with Intellectual Disability				





- For more information, please refer to:
 - EPD's Code of Practice (CoP) for the Management of Clinical Waste (Small Clinical Waste Producers)
 (www.epd.gov.hk/epd/clinicalwaste/file/doc06_en.pdf)
 - RVP Doctors' Guide
 - Information Sheet and FAQ about Clinical Waste Management in CHP website (<u>www.chp.gov.hk/files/pdf/rvp_infosheet_clinicalwaste.pdf</u>)



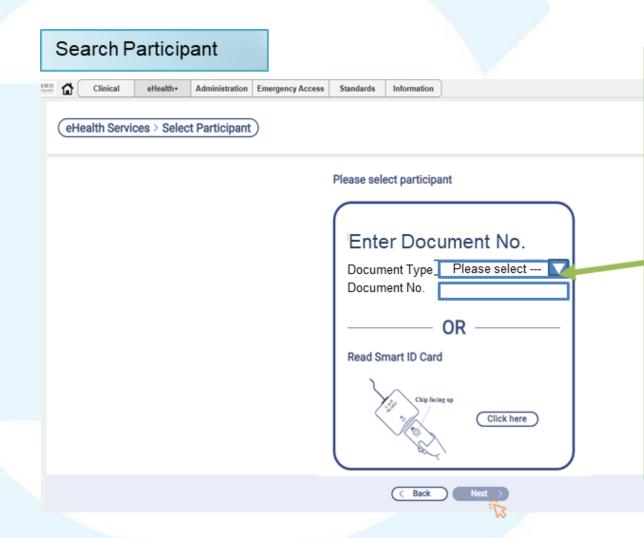


Login to eHealth Portal.

Doctor eHealth Services Clinical Administrative & |||| Health Profile To-do List Provider-based User Profile Vaccination Record Referral VSS Vaccination RVP Vaccination Vaccination File Enrolment Management Management **Participant** (S) Drug Order Drug Report Participant Participant Enrolment Management Payment & Charging Profile **4**\$) Submit Profile Reimbursement Consolidation







To search recipient by document no. with following 8 document types in future

- Hong Kong Identity Card
- 2. Certificate of Exemption
- Document of Identity for Visa purposes
- 4. Hong Kong Birth Certificate
- 5. Hong Kong SAR Re-entry Permit
- Certificate Issued by the Births and Deaths Registry for Adopted Children
- 7. Permit to Remain in HKSAR (ID 235B)#
- 8. Non-Hong Kong Travel Documents#

Not supported in eHRSS





By Individual Claim

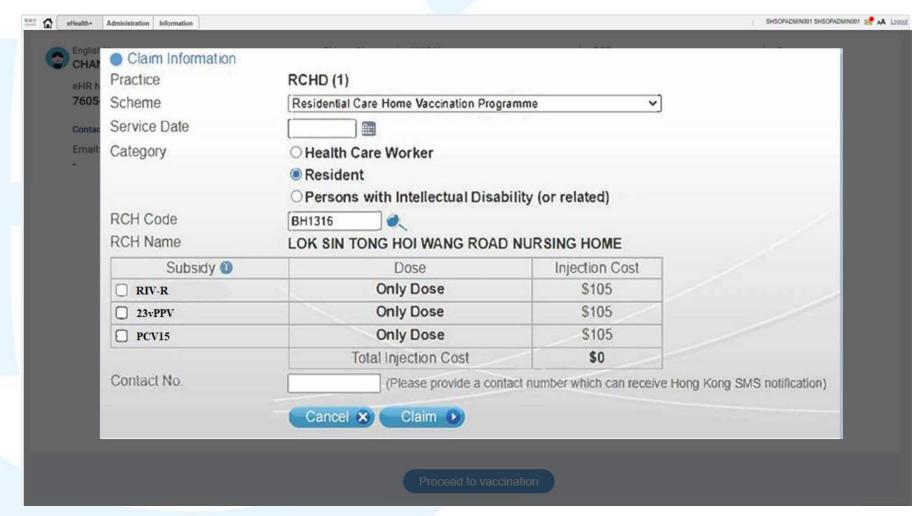
Proceed to eHealth express registration (if the recipient has not registered before).

	eHRSS Registration	O Confirmation	
S Registration			
Participant has not given sharing cons	sent to your organisation. Please click the checkbox to give sharing	consent to your organisation.	
healthcare recipient / The substitute deci	sion maker(SDM) consents to give sharing consent to the healthcare pro-	ovider.	
O Composite has always by motion	A Comment to be given by Outsitute Besisien Males (Office	214)	
	Onsent to be given by Subsitute Decision Maker (SI	DM)	
eHR No.:	2210-8623-3597		
Registration Date:	18-Jul-2025		
Communication Language: Mobile Contact No.:	Chinese 61234567		
Communication Means:	6123450/ SMS		
	SINIS		
eHRSS Sharing Consent:	Service Provider	T(0)	
HCP ID 6515286304	Bell Elsa	Type of Sharing Consent Indefinite Sharing Consent	
SDM-For HCR under 16/ at 16 or abo	ve and is incapable of giving consent		
SDM-For HCR under 16/ at 16 or abo * HKIC No.: T42435		Type of HCR:	Mentally Incapable Person
* HKIC No.: T42435		,	Mentally boxpublie Person Guardian appointed under Guardian
* HKIC No.: T42435	3 (0)	Type of HCR:	
* HKIC No.: T42435 * ID Doc Type: HKID Co	3 (0)	Type of HCR: * Type of SDM:	Guardian appointed under Guardian
* HKIC No.: T42435 * ID Doc Type: HKID C: ID Doc No.:	3 ([□]) ard (香港身份證)	Type of HCR: * Type of SDM:	Guardian appointed under Guardian
* HKIC No.: T42435 * ID Doc Type: HKID Co. ID Doc No.: Title.:	3 (「□」) ard (香港身份證) V	Type of HCR: * Type of SDM:	Guardian appointed under Guardian
* HKIC No.: T42435 * ID Doc Type: HKID Co. ID Doc No.: Title.: * English Name: CHAN Chinese Name:	3 (「□」) ard (香港身份證) V	Type of HCR: * Type of SDM:	Guardian appointed under Guardian
* HKIC No.: T42435 * ID Doc Type: HKID Co. ID Doc No.: Tritle.: * English Name: CHAN Chinese Name: I confirm the healthcare recipient a a. The identity and communic	3 (0) ard (香港身份證) TWO Single Name Ind his/her SDM have expressly declared and confirmed that: cation information of the healthcare recipient (HCR) and his/her su	Type of HCR: * Type of SDM: * Mobile Phone No. (SDM) :	Guardian appointed under Guardian
* HKIC No.: T42435 * ID Doc Type: HKID Co. ID Doc No.: Tritle.: * English Name: CHAN Chinese Name: I confirm the healthcare recipient a a. The identity and communic	3 (①) ard (香港身份證) TWO Single Name Ind his/her SDM have expressly declared and confirmed that:	Type of HCR: * Type of SDM: * Mobile Phone No. (SDM) :	Guardian appointed under Guardian
* HKIC No.: T42435 * ID Doc Type: HKID Co. ID Doc No.: Title.: * English Name: CHAN Chinese Name: I confirm the healthcare recipient a a. The identity and communic b. The relationship proof of the the SDM has confirmed that	3 (「0」) ard (香港身份館) TWO	Type of HCR: * Type of SDM: * Mobile Phone No. (SDM): bstitute decision maker (SDM) have been verified.	Guardian appointed under Guardian
* HKIC No.: T42435 * ID Doc Type: HKID Co. ID Doc No.: Title.: English Name: CHAN Chinese Name: I confirm the healthcare recipient a a. The identity and communic b. The relationship proof of the Communication of the Com	ard (香港身份證) TWO Single Name Ind his/her SDM have expressly declared and confirmed that: Dation information of the healthcare recipient (HCR) and his/her subtract the HCR and his/her SDM has been verified (if applicable).	Type of HCR: * Type of SDM: * Mobile Phone No. (SDM): bstitute decision maker (SDM) have been verified.	Guardian appointed under Guardian
* HKIC No.: T42435 * ID Doc Type: HKID Ci ID Doc No.: Title.: * English Name: CHAN Chinese Name: I confirm the healthcare recipient a a. The identity and communic b. The relationship proof of th The SDM has confirmed that i. The HCR meets the conditi ii. He/she is an eligible SDM i	3 (「0」) ard (香港身份館) TWO	Type of HCR: * Type of SDM: * Mobile Phone No. (SDM): bistitute decision maker (SDM) have been verified.	Guardian appointed under Guardian





Enter vaccination details at the popup window

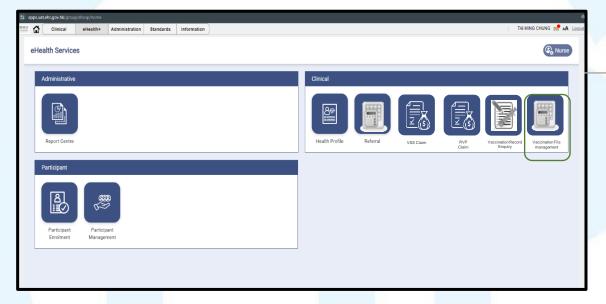


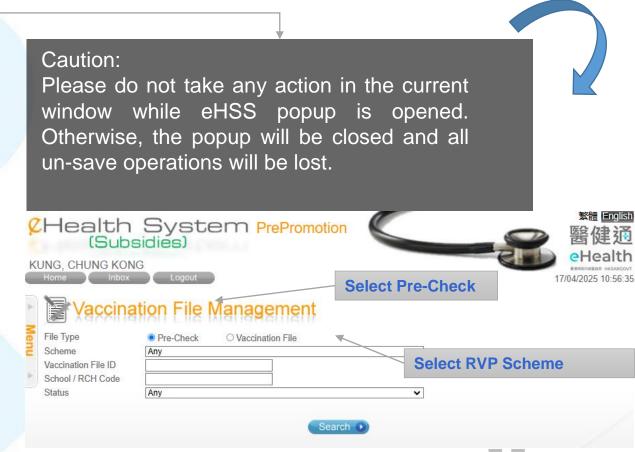




By Batch Upload

Vaccination Record Management









By Batch Upload

Rectify recipient information

CHealth System PrePromotion (Subsidies)

KUNG, CHUNG KONG

Logout





Vaccination File ID	RCH Code		Progress	- Status	
Vaccanason i no 10	<u>Norrouse</u>	<u>Upload Date</u> ▼	Rectify Account, Assign Date and Mark Client Vaccination	<u> </u>	Download Report
VF20250417-002	[BB001] HONG KONG LUTHERAN SOCIAL SERVICE MARTHA BOSS DAY ACTIVITY CENTRE	2025-04-17	Rectify Assign Date Mark Vaccination	Pending Pre- Check Generation	First Report Vaccination Name List



In file upload date

- 1. All recipients will be checked whether has eHealth account
- 2. If not, optional to register eHealth registration (<18)



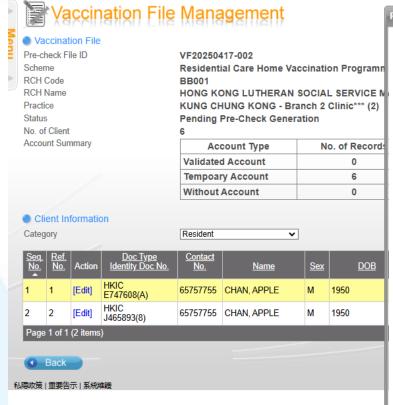


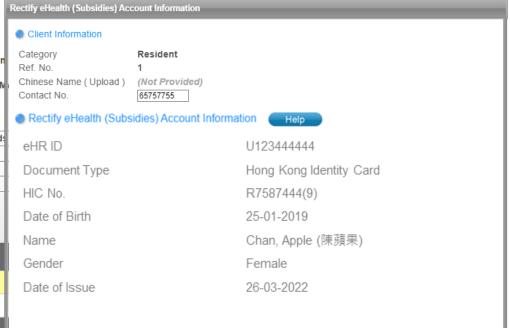
By Batch Upload



CHealth System PrePromotion (Subsidies)

KUNG, CHUNG KONG





Recipient's account detail do not allow to edit

Only recipient information can be edited such as contact no.





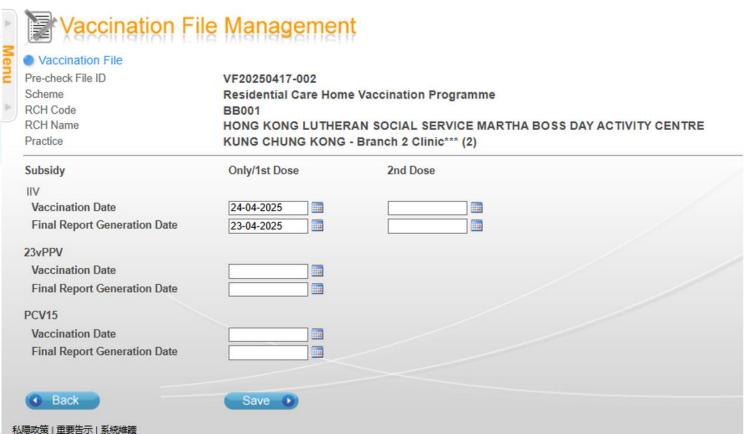
By Batch Upload

Input Vaccination Date and Final Report Date

CHealth System PrePromotion (Subsidies)

KUNG, CHUNG KONG







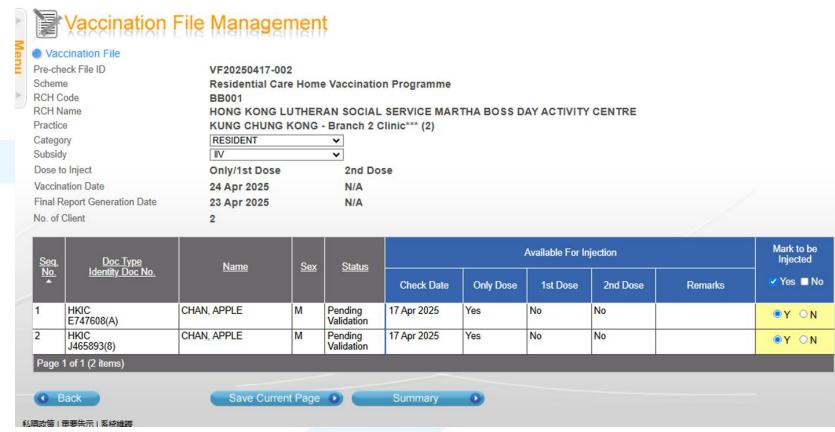


Select recipient to be vaccinated

CHealth System PrePromotion (Subsidies)

KUNG, CHUNG KONG









By Batch Upload

Click Confirm batch

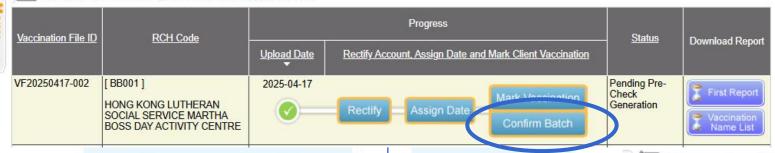
CHealth System PrePromotion (Subsidies)

KUNG, CHUNG KONG





Vaccination File Management



Vaccination File Management

Confirm batch

Vaccination File

Pre-check File ID VF20250417-002

Scheme Residential Care Home Vaccination Programme

RCH Code BB001

RCH Name HONG KONG LUTHERAN SOCIAL SERVICE MARTHA BOSS DAY ACTIVITY CENTRE

Practice KUNG CHUNG KONG - Branch 2 Clinic*** (2)

Status Pending Pre-Check Generation

No. of Client 6

Subsidy	Category	Dose to Inject	Vaccination Date	Final Report Generation Date	No. of Client	Mark to be Injected - Yes	Mark to be Injected - No	Match
IIV	RESIDENT	1st Dose	24 Apr 2025	23 Apr 2025	2	2	0	Yes
IIV	<u>HCW</u>	1st Dose	24 Apr 2025	23 Apr 2025	2	2	0	Yes
IIV	PID	1st Dose	24 Apr 2025	23 Apr 2025	2	2	0	Yes









By Batch Upload

Pre-check process completed

CHealth System PrePromotion (Subsidies)

KUNG, CHUNG KONG





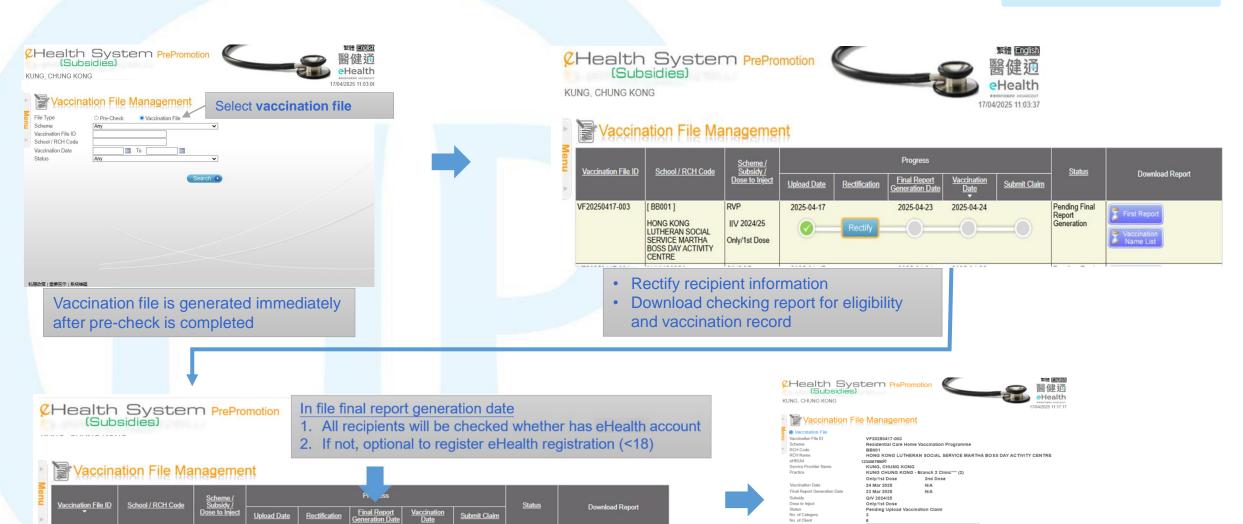
Vaccination File ID	RCH Code		Progress	Status	
<u>racanador r no 15</u>	1011 0000	<u>Upload Date</u> ▼	Rectify Account, Assign Date and Mark Client Vaccination	<u> </u>	Download Report
	[BB001] HONG KONG LUTHERAN SOCIAL SERVICE MARTHA BOSS DAY ACTIVITY CENTRE	2025-04-17	Review	Completed	





By Batch Upload

Input the value by actual injection





VF20250417-003

[BB001]

HONG KONG

LUTHERAN SOCIAL SERVICE MARTHA

BOSS DAY ACTIVITY

2025-04-17

IIV 2024/25

Only/1st Dose

2025-04-24

Pending Upload

Vaccination

Account Type

By Batch Upload



Confirm and submit the vaccination file to proceed to claim



CHealth System PrePromotion (Subsidies)

KUNG, CHUNG KONG





After the submitted to claim stage

1. All recipients will be checked whether has eHRSS account

2. If not, optional to register eHealth registration (<18)

3. >18 + failed to register, the transaction will NOT be created and the result will be marked in the "Claim Result"

-	ASICKALII I							_		
lenu	Vaccination File ID	School / RCH Code	Scheme /			Progress			Status	
>	TOTAL PROPERTY OF THE PARTY OF	<u>Januar Horrows</u>	Subsidy / Dose to Inject	<u>Upload Date</u>	Rectification	Final Report Generation Date	Vaccination Date	Submit Claim	Sund	Download Report
5		[BB001] HONG KONG LUTHERAN SOCIAL SERVICE MARTHA BOSS DAY ACTIVITY CENTRE	RVP IIV 2024/25 Only/1st Dose	2025-04-17	O	2025-04-23	2025-04-24	2025-04-24 Review	Claim (Pending Claim Creation)	Final Report Onside Vaccination





Common Problems in Making claims

- Inputted incorrect category of service recipient (e.g. HCW vs Resident)
- Inputted incorrect type of vaccine (e.g. PCV15 vs 23vPPV)
- Inputted incorrect service recipient (i.e. no service was provided)
- Submitted claims under incorrect service scheme (e.g. VSS vs RVP)





Points to Note





Points to Note

- The Private Doctors providing the vaccination service must be enrolled in RVP
- If there is change of the Private Doctors after vaccine ordering, please notify
 DH as soon as possible
- The Private Doctors should be present and oversee the whole vaccination process. If the Private Doctors cannot be present, the health team under his purview administrating vaccination at RCHs/RCCCs/DIs can be comprised of at least one Registered Nurse with emergency training, such as basic life support, who is supported by an adequate number of trained personnel for vaccination, on condition that the pre-vaccination assessment had been duly completed in advance by the Private Doctors and the Private Doctors are readily accessible in case of queries from the vaccination team on pre-vaccination assessment.





Points to Note

- No extra charge should be imposed on residents / PIDs or staff
- The injection fee should not be shared with RCHs / DIs
- Consent forms (if applicable) should be kept for 7 years
- Inspection to RCHs
 - > To evaluate and improve vaccination procedure and logistics
 - > Staff of DH may randomly perform onsite inspection of the services provided





4. Mandatory CME requirement via joining Primary Care Directory





RVP 2025-26

CME / PCD requirement

- All doctors under VSS, i.e. new enrollees and doctors already enrolled, are required to be on PCD before he/she is eligible to enroll or to continue to participate in VSS
- Applicable to RVP, including doctors who are providing seasonal influenza vaccination, pneumococcal vaccination and COVID-19 vaccination
- Please refer the RVP Doctors' Guide (link) and the PCD website (http://www.pcdirectory.gov.hk) for details





5. A.O.B.





Operational updates for COVID-19 vaccination

- New Vaccination Record Lists and Collection Form of Unused / Expired Vaccines will be used
 - Both RCHs and the Private doctors shall keep the copy / original vaccination record lists under their safe custody.





院舍/宿舍/學校或 服務機構編號

衞生署

附錄甲1

日期:

第___頁/共___頁

院舍防疫注射計劃

2019 冠狀病毒病疫苗接種計劃(新冠疫苗)每月接種名單

院友/宿生/服務使用者

院包	了一个一个一个一个	或服務機構	名稱: _						私	人家醫生	姓	名: (1)		(2)	
	按照接種時間表	麦,可以於 2 院友/宿生/		皆資料	_月 進行接種的 科	私家醫生	新冠	昼 疫苗接	種史				新冠疫苗拉 /團隊負責人	接種記錄 於 <u>接種疫苗後即日</u> 填	寫)
					最近一次 感染 2019 冠狀	評估是否		接種,請填			扎	t次編號: (1)			
編號	姓名	身份證明 文件號碼 (例:A123456(7))	出生日期 (日/月/年)	1	病毒病 日期 (日/月/年) (如未曾感染, 請填 「メ」)	「 ✓ 」 合適 「 ४ 」 不合適	上一劑劑次	上一劑 疫苗 種類*	上一劑 接種 日期 (日/月/年)	批次編號	的有劑次	接種日期	私家醫生	私家醫生/ 國隊負責人 <u>簽署/蓋印</u>	如暫時未能接種,請註明原因 (請於該院友/宿生/ 服務使用者補打當日立 即向本署更新)
1															
2															
3															
4															
5															
6														SAMP	
7														- Inpl	F
8															\sim
9															
10															
*新	冠滅活疫苗:(a):				苗:(b) Bivalent		(d) JN.1	+	'		+=		-	十日土公拉	COS I data
skert, per					3生/服務使用者 人故意填報失實			コケスタ		+ # / -	平月	已接種人數:		本月未能接	埋人數・

院舍/宿舍/學校或服務機構

院舍/宿舍/學校或服務機構負責人/主管簽署

負責人/主管姓名:

或院舍/宿舍/學校或服務機構蓋印:

- 2. 以上個人資料主要供衞生署推行院舍防疫注射計劃之用,亦可能因此向有關部門披露。由於此文件載有個人資料,請院方妥善保存。
- 3. 院友/宿生/服務使用者有權查閱及修正個人資料。如有需要,院友/宿生/服務使用者可向上列院舍/宿舍/學校或服務機構負責人/主管提出。





新冠疫苗接種記錄 (由私家醫生/團隊負責人於接種疫苗後即日填寫)

	(田松多香土/BIM具具人於 <u>按俚按田後即口</u> 模為)								
	# 募	草德納 JN.1 疫	苗/復必す	₹JN.1 疫苗 (#	#刪去不適用)				
	批	t次編號: (1)	(2)	(3)					
解凍後	色的有			(2)	(3)				
批次 編號 (1/2/3)	劑次	接種日期 (日/月/年)	私家醫生 (1/2)	私家醫生/ 團隊負責/ 簽署/ S4	性'萌註明原囚				





衞生署 院舍防疫注射計劃 2019 冠狀病毒病疫苗接種計劃(新冠疫苗) 回收表格

附錄乙

回收

備註: 1. 請院会/宿舍/學校成服務機構於<u>疫苗接種活動後</u>,立即填妥並交回至筆生署項目管理及疫苗計劃料。 (**傳真號碼: 2713 6916 (安老院舍) / 2544 3922 (殘疾人士院舍) : 電郵地址: rvp回dh.gov.hk**) 2. 號交表格後,如有再次接種疫苗活動,請即時納已更新的表格傳真或電郵至衞生署。

部 院舍/宿舍/學校或服務機	青資料						
							
號:		聯絡電話:					
部 新冠疫苗使用情况							
接種日期:20年月日	接收疫苗數量	已為院友/宿生/ 服務使用者接種	已為職員接種				
莫德納 JN.1 疫苗	(A):	(B2):	(F2s): 爺†				
部 可使用之新冠疫苗數量 (尚未	超過接種使用期限)						
現時貯存於雪櫃的新冠疫苗數量		針:批次編號:					
火时对 针形 普德印制 违线田数重	解凍後的有效日期和時	解凍後的有效日期和時間:20年月日(<u>時</u> _分)					
部 待衛生署回收之剩餘/失效 (剩餘/失效疫苗必須交債衛生署		(白行東置)					
	莫德	塞納 JN.1 疫苗 (預充式注射	(音)				
剩餘疫苗 (未超過及 已超過「接種使用期限」的疫苗)	針:批次編號: 解凍後的有效日期和時間:20年月日(<u>時</u> 分)						
失效		針:批次編號:					
(已被污染/損壞或 未進貯存於2至8℃的疫苗)	針: 批次編號: 解凍後的有效日期和時間: 20年月日(<u>時</u> 分)						
無法交遭 (如破爛、遺失的疫苗)							
	•		$=$ S_{Λ} .				
負責	完合/宿舍/學校/服務	機構的職員資料	SAN				
		•					
姓名:							
姓名:							





Important reminder of mRNA (Spikevax) JN.1 COVID-19 vaccine storage, preparation and administration

- According to the manufacturer's recommendation, the vaccine should be stored at 2 to 8 degrees Celsius after thawing and should be used within 30 days.
- Before administering the vaccine, you must check the vaccine identification label and ensure the integrity of vaccine for irregularity, e.g. damage, contamination, expiry date and time. Please check the "Use By Date & Time" on the outer carton, as the information is not shown on the label of individual prefilled syringes or individual vaccine vial. Vaccines that are beyond the use by date and time should not be used.

Use by Date & Time:	BPR No.:
(YYMMDDTTTT) (at 2°C to 8°C)	!
Thawed Date & Time:	
(YYMMDDTTTT)	1!
Expiry date:	li li
(YYMMDD) (at -50°C to -15°C)	1:
Storage: Store at 2°C to 8°C after receipt	F-00172204.01
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Important reminder of mRNA (Spikevax JN.1) COVID-19 vaccine storage, preparation and administration

- You and the RCH staff should follow the requirements of
 - (1) regular checking of the recommended use-by date of the vaccines,
 - (2) separate storage of vaccines with different recommended use-by dates, and
 - (3) timely disposal of expired vaccines in accordance with the guidelines of the COVID-19 Vaccination Programme.
- > 3 Checking of vaccines and 7 rights of medication administration should be adopted.





Contact us

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Thank You



