

Chapter 2 - Participating in Vaccination Subsidy Scheme (VSS)

This section leads Registered Medical Practitioners through the main steps for participating in Vaccination Subsidy Scheme (VSS), including enrolment application, preparation to start vaccination service under VSS, vaccination arrangements and reimbursement.

A Registered Medical Practitioner can enroll in VSS if he/ she:

- (1) is employed or engaged under a Medical Organisation (including the Medical Organisation which is under the name of the Registered Medical Practitioner, or is the sole proprietor, partner, shareholder, director or other officer of the Medical Organisation), or is practicing in:
 - (a) a “**private healthcare facility**” as contemplated in section 3 of the Private Healthcare Facilities Ordinance (Cap. 633 of the laws of Hong Kong) (“**PHFO**”)) in respect of which (i) the business has been registered under the Business Registration Ordinance (Cap. 310 of the laws of Hong Kong) and (ii) a licence to operate a private healthcare facility has been issued under section 10 of the PHFO; or
 - (b) an “**exempted clinic**” which shall have the meaning given to such term in the PHFO; or
 - (c) a “**clinic**” which shall have the meaning given to such term in the Medical Clinics Ordinance (Cap. 343 of the laws of Hong Kong) (“**MCO**”) and be registered as a clinic under the MCO.
- (2) is registered under Section 14 or Section 14A of the Medical Registration Ordinance (Cap. 161 of the laws of Hong Kong) and holds a valid practicing certificate;
- (3) has enrolled in the Electronic Health System (eHealth); and
- (4) is enlisted in the Primary Care Directory (PCD) or “Primary Care Register” (“PCR”) after its establishment as maintained by the Government.

Please see **Section 2.1 and 2.2** of Chapter 2 for procedures to enroll in VSS.

2.1 Requirements for ALL doctors, including new enrollees and doctors already enrolled in VSS

(1) Vaccine storage requirement for the practice enrolled under VSS

- (a) All Private Doctors enrolled in VSS have to use Purpose-built vaccine refrigerators (PBVR) for vaccine storage. Domestic units or stand-alone domestic refrigerators are not accepted.
- (b) Cyclic defrost and bar refrigerators (a combined refrigerator/ freezer unit with a single exterior door only) are not accepted.
- (c) A temperature monitoring programme for the PBVR is mandatory.
- (d) Records of the temperatures of the refrigerator should be kept for at least one year. Private Doctors should present the records of temperature and photo(s) of the vaccine-storing refrigerator and temperature monitoring device/ programme upon request of the Government.
- (e) When irregularities are identified, appropriate actions should be taken including following up with the concerned patients promptly and assessing the need for revaccination. Centre for Health Protection should be informed if VSS clients are involved and the vaccine manufacturer has replied that the affected vaccines exposed to out-of-range temperatures are not effective/potent.
- (f) For details, please refer to **Section 6.3** of Chapter 6, and the Guidelines for Proper Vaccine Storage and Handling as set out in **Section 3.3 of Chapter 3 of the Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings - Module on Immunisation** (https://www.healthbureau.gov.hk/phcc/rfs/english/pdf_viewer.html?file=download85&title=string105&titletext=string84&htmltext=string84&resources=03_Module_on_Immunisation_Children_chapter3).

(2) Primary Care Directory (PCD) enrolment and continuous medical education (CME) requirement for VSS doctors

- (a) The Private Doctors, 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.
- (b) To be qualified for enrolment in PCD, doctors must be:
 - (i) a registered medical practitioner holding a valid practicing certificate issued under the Medical Registration Ordinance; and

VSS 2025/26 Doctors' Guide – Participating in VSS

- (ii) committed to the provision of directly accessible, comprehensive, continuing and coordinated person-centred primary care services.
- (c) To maintain on PCD, enrolled PCD doctors who are
 - (i) **specialists** will need to remain in the Specialist Register of the Medical Council of Hong Kong and comply with the CME requirements relevant to the specialty; or
 - (ii) **non-specialists** will need to participate in the “CME programme for Practising Doctors who are not taking CME Programme for Specialists” approved by the Medical Council of Hong Kong (MCHK) and shall obtain a yearly CME Certificate or qualified to quote the title “CME-Certified” as approved by MCHK after each CME cycle.
- (d) Please refer to the PCD website (<http://www.pcdirectory.gov.hk>) for details.

2.2 Preparation for enrollees to VSS

2.2.1. **Pre-enrolment**

The Registered Medical Practitioners who are interested in joining VSS are encouraged to:-

- (1) Place purchase orders with pharmaceutical manufacturers/ suppliers early to secure supplies of seasonal influenza vaccines.
- (2) Review your vaccine storage system early to ensure the requirements in **Section 2.1 (1)** of Chapter 2 are fulfilled.
- (3) Ensure that you are enlisted in PCD, or PCR after its establishment as maintained by the Government.
- (4) Ensure that you have enrolled in the eHealth.
- (5) Read through and take reference from the recommendations of the Scientific Committee on Vaccine Preventable Diseases (SCVPD) on seasonal influenza vaccine:
<https://www.chp.gov.hk/en/static/24008.html>
- (6) Read through and take reference from the SCVPD's recommendations on pneumococcal vaccine: <https://www.chp.gov.hk/en/static/24008.html>
- (7) Read “Enrolment Guide for Vaccination Subsidy Scheme” at eHealth carefully.
- (8) Read through and take reference from the Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings - Module on Immunisation (https://www.healthbureau.gov.hk/phcc/rfs/english/pdf_viewer.html?file=download107&title=string127&titletext=string84&htmltext=string84&resources=25_Module_on_Immunisation_Children)

2.2.2. **Enrolment application**

(1) Online Application through eHealth

The Registered Medical Practitioner are recommended to study and understand the Transaction Documents accessible at eHealth. They shall follow the following procedures to submit an application to enrol in the VSS for the first time (“Application”):

- (a) Complete the online Application Form on eHealth by clicking the “Administration” button and then the “Vaccination Subsidy Scheme” button; and
- (b) Registered Medical Practitioner are required to acknowledge and agree with the T&Cs and provide the following information for participating in the VSS:
 - i. Personal Particulars;
 - ii. Service Location(s) (registered under eHealth) joining the VSS with urgent contact number;
 - iii. Specify the types of Vaccine(s) and the Target Group(s) covered by each such Vaccine to whom he intends to provide Vaccination;
 - iv. Scheme Participant Co-payment fee for each type of vaccines at each service location of clinic and/or non-clinic settings;
 - v. Bank Account Information; and
 - vi. Specified VSS FDs¹ opt to indicate their intent to order IIV from Government contract on a voluntary basis by 31 August 2025 (if applicable). If opted to order IIV from Government contract, Specified VSS FDs must indicate the option² for each service location and set co-payment of IIV for all Scheme Participants as \$0 accordingly.

Subject to the terms of the Agreement, enrolment in VSS is for Registered Medical Practitioner's first-time application submitted by the Registered Medical Practitioner. If the Private Doctor wishes to renew his enrolment to VSS for the next Vaccination Period, the Private Doctor shall apply for annual renewal by updating his/her particulars and information as necessary and the Co-payment chargeable for each type of Services in the IT Platform when directed by the Government.

¹ Specified VSS FDs are Private Doctors who have successfully enrolled in the VSS and the Chronic Disease Co-Care Pilot Scheme (CDCC).

² The option is only available for service location that provides CDCC services and allow doctors to indicate on the ordering platform (eHealth) by 31 August 2025.

VSS 2025/26 Doctors' Guide – Participating in VSS

- (c) Upon submission of the online application form, the following appendix items will be made available for Registered Medical Practitioner to save/print (as applicable):
- i. Online Application form;
 - ii. Part I: Covering Notes for Private Doctor's Application to Enrol in the Specified Programme entitled "Vaccination Subsidy Scheme";
 - iii. Part II: Enrolment Guide for Vaccination Subsidy Scheme;
 - iv. Part III: Specified Programmes: General Terms and Conditions;
 - v. Part IV: Specified Programme: Vaccination Subsidy Scheme Specific Terms and Conditions
 - vi. Part V: Undertakings and Declarations for Vaccination Subsidy Scheme; and
 - vii. Part VI: Personal Information Collection Statement for Vaccination Subsidy Scheme.
- (d) Registered Medical Practitioner are required to submit the following supporting documents to "the Government" by email (vssdoctor@healthbureau.gov.hk) for verification:
- i. Authority for Payment to a Bank (to be downloaded from enrolment page);
 - ii. Copy of Bank Statement;
 - iii. Copy of Business Registration Certificate (for business bank account); and
 - iv. A completed "Record of the Vaccine Storage Refrigerator".

(2) Enrolment Form Processing

- (a) The Government will review the online application form for VSS on eHealth and supporting documents provided by the Registered Medical Practitioner. In case of any clarifications required, the Government will inform the Registered Medical Practitioner via email for editing the online application form as required and re-submission.
- (b) In considering whether to accept the Application submitted by the Registered Medical Practitioner ("**Applicant Registered Medical Practitioner**"), or his/her application for annual renewal of enrolment in VSS, the Government will consider all the circumstances and factors as it thinks fit which include but are not limited to

VSS 2025/26 Doctors' Guide – Participating in VSS

fulfillment of enrolment criteria, the conduct, integrity, reputation, management of his/her medical or healthcare services, and past and recent performance of the Registered Medical Practitioner's obligations under the Agreement as specified in the Application. In any event, acceptance of the Application or application for annual renewal of enrolment in the VSS by the Applicant Registered Medical Practitioner is at the absolute discretion of the Government.

- (c) Upon successful Application, the Applicant Registered Medical Practitioner will be referred to as the Private Doctor in the documents regarding VSS. The Private Doctor will receive a confirmation email from the Government. The information kit will be sent to the Private Doctor with the following information provided (including but not limited to), VSS scheme logo, VSS price poster, and information leaflets, etc.
- (d) The Private Doctor enrolled for VSS may provide subsidised Vaccination(s) to Scheme Participants falling within the Target Group(s) which he has opted at the time of Application or his/her application for annual renewal of enrolment in VSS from time to time while he remains enrolled in VSS.

(3) Clinic Administrator

- (a) Private Doctors may choose to return the details of the clinic administrator(s) (refer to *the received confirmation email for VSS enrolment*) to the Government by email (vssdoctor@healthbureau.gov.hk) to authorize them to undertake data management works, including but not limited to:
 - i. Verify the eligibility of Scheme Participant at point of service provision;
 - ii. Search/retrieve Scheme Participants' eHealth or eHS(S) accounts and create eHealth or eHS(S) accounts (as the case may be);
 - iii. Register transaction information but have limited authority access to the eHealth for handling administrative tasks. The transactions registered through the Clinic Administrator need to be confirmed by the Private Doctor before they can be passed for processing reimbursement; and
 - iv. Ordering vaccine on behalf of the Private Doctor.

Private Doctors shall login the eHealth for checking and confirming all information entered through the Clinic Administrator.

2.3 Preparation for doctors

After confirmation of enrollment, the Private Doctor will receive the following by mail:

- (i) a VSS scheme logo,
- (ii) a VSS price poster,
- (iii) information leaflets.

The Private Doctors shall display VSS scheme logo near clinic entrance and price poster with fee schedules of seasonal influenza vaccination and/ or pneumococcal vaccination at clinic waiting area.

Please approach the Government for replacement of damaged scheme logo or price poster. The Government will re-issue a replacement by mail.

If there is any change of the Private Doctor's enrolment or information related to clinical practice, co-payment or availability of service, please update the information on eHealth.

The Government will publicise the Private Doctors' names, clinic addresses, telephone numbers and information for service of seasonal influenza vaccination and/ or pneumococcal vaccination on website and electronic platforms.

The Private Doctors should prepare and keep a small number of copies of *Vaccination Subsidy Scheme - Consent Form* for Scheme Participants/parents/guardians to fill in at the clinic and non-clinic settings, in case e-Consent is not applicable.

2.4 Vaccine Supply through Government Contract

2.4.1. Opt to Order Vaccine from Government Contract

- (a) During the VSS enrolment through eHealth, Specified VSS FDs opt to indicate their intent to order IIV from Government contract on a voluntary basis by 31 August 2025.
- (b) The option of ordering IIV from Government contract is only available for
 - i. service location that provides CDCC Pilot Scheme services
 - ii. service location that provides vaccination service under clinic setting
- (c) If opted to order IIV from Government contract, Specified VSS FDs must indicate the option for each service location and set co-payment of IIV for all Scheme Participants as \$0 accordingly.

2.4.2. Vaccine Price

The Government-subsidised specified price for each dose of IIV ordered from Government contract is HKD\$20.

2.4.3. Vaccine Ordering and Delivery

- (a) All legal and contractual relations relating to purchase of IIV through the Government contract by Specified VSS FDs shall be between the Vaccine Supplier and the Specified VSS FDs, and the Government shall hold no liability. The Government only provides a platform to facilitate the ordering mechanism, and shall have no liability on its actual execution in the private market. The actual operation is up to the Vaccine Supplier.
- (b) Specified VSS FDs will only be able to access the vaccine ordering function under VSS when he/she has indicated to order vaccines through Government contract during VSS enrolment.
- (c) To order IIV, Specified VSS FDs must place the vaccine orders via the designated ordering platform (eHealth) to the Vaccine Suppliers.
- (d) Each order requires a minimum order of 30 doses and made in multiple of 10 doses.
- (e) Order requested by Specified VSS FD is service location-based and limited to once per day.
- (f) After a vaccine order is submitted, Specified VSS FDs need to communicate with the Vaccine Supplier if there is any amendment of the vaccine order. The vaccine fee is settled between Specified VSS FD and Vaccine Suppliers.

VSS 2025/26 Doctors' Guide – Participating in VSS

- (g) All purchased vaccines belong to the Specified VSS FDs.
- (h) Specified VSS FDs can appoint a Clinic Administrator to place vaccine orders. The Clinic Administrator would need to use their own eHealth account to place vaccine orders for the Specified VSS FDs.
- (i) Specified VSS FD is required to select delivery address when they place a vaccine order. Delivery address for VSS will be the same address registered in eHealth that indicated to order vaccines through Government contract.

2.4.4. Vaccine Orderable Quantity

- (a) Initial quantity for Specified VSS FDs
 - i. 100 doses will be reserved for each indicated service location.
 - ii. Valid for 4 weeks from the launch date of 2025/26 season (order placed within 4 weeks).
 - iii. Pre-ordering is available on the ordering platform 2 weeks before the launch date of 2025/26 season.
- (b) Re-ordering quantity for Specified VSS FDs according to the following conditions
 - i. Re-ordering quantity at each indicated service location is based individual doctor's submitted vaccination records for Scheme Participants at that particular service location.
 - ii. Up to 50 doses can be re-ordered for every 50 vaccination records submitted on the ordering platform on eHealth.
 - iii. Re-ordering of vaccines is on a first come first served basis while stocks last (real time status of vaccine stock will be displayed on the ordering platform).

2.5 Vaccination period for VSS

The vaccination period for 2025/26 seasonal influenza vaccination will be announced by the Government separately. Eligible persons can receive one dose of subsidised influenza vaccine in 2025/26. For eligible children who have never received seasonal influenza vaccination before and the first dose is given below 9 years old, the Government will provide subsidy for the second dose (to be given 4 weeks after the first dose) even if the child will be over 9 years old by then.

Under VSS, pneumococcal vaccination (23vPPV or PCV15) for eligible elderly would be on-going.

2.6 Vaccination arrangement for VSS

- (1) On condition that (i) a Scheme Participant does belong to a Target Group for a Vaccine which the Private Doctor has opted to provide the Services under VSS; and that (ii) he/she (or his/her parent or guardian if he/she is a minor or mentally incapacitated) has expressed his intension for receiving the Services provided by the Private Doctor under VSS, the Private Doctor shall provide the requested type of Vaccination to such Scheme Participant by following the requirements set out in the steps below:
 - (a) request such Scheme Participant (or his parent or the guardian if he/she is a minor or mentally incapacitated) to produce original Documentary Proof of Eligibility for verification;
 - (b) log on to the IT Platform;
 - (c) check the symbol on the Hong Kong Identity Card of the Scheme Participant(s) before Vaccination; and if the symbol of the Hong Kong Identity Card of the person to receive the vaccination is 'C' or 'U', ascertain that such Scheme Participant's permission to stay in Hong Kong as granted by the Government will not have been expired by the time when he receives Vaccination.
 - (d) obtain Consent in accordance with Clause 2.11 of VSS Specific Terms and Conditions, search and retrieve the eHealth or eHS(S) account (as the case may be) of such Scheme Participant, or if such account is not yet created, proceed with the creation of an eHealth or eHS(S) account for such Scheme Participant (to which the Scheme Participant has given Consent). Private Doctor should use card reader to collect eConsent;
 - e-Consent for SIV/ PV is for adult Scheme Participants (18 years old or above) inserting the valid Hong Kong Identity Card into the smart card

VSS 2025/26 Doctors' Guide – Participating in VSS

reader which will capture the card face data.

- For those presenting a Smart Hong Kong Identity Card issued before 26 November 2018 were no longer supported by the smart card reader, Private Doctors should input the personal particulars of the Scheme Participant to the system manually.
 - Persons who do not use the ID card for insertion into the smart card reader should use paper consent forms. For persons below 18 years old or mentally incapacitated persons, they should use the paper consent forms.
 - Before vaccination, Private Doctor should display the “eConsent under the Vaccination Subsidy Scheme” Notice (available at <https://www.chp.gov.hk/en/features/45851.html>) in his/ her clinic, explain to recipients and obtain consent for receiving subsidized vaccination under VSS, registering eHealth or eHS(S) (as the case may be) account if such account has not been created and agreeing on the Statement of Purpose of Collection of Personal Data; and document in relevant check box of IT platform.
- (e) ascertain whether the Private Doctor is entitled to claim for Government Subsidy for providing the Services to such Scheme Participant through a search using the IT Platform during the prevailing Vaccination Period;
- (f) verify such Scheme Participant's vaccination history and vaccination record, including check for any repeated Vaccinations of the same type within one Vaccination Period, and consider and decide whether he is clinically indicated for the requested type of Vaccination;
- (g) before administering pneumococcal vaccination to such Scheme Participant (whether it be 23vPPV or PCV15 vaccination), or seasonal influenza vaccination to such Scheme Participant if he is (i) a Hong Kong resident of age 18 to under 50 and (ii) has specified chronic medical conditions, assess whether or not such Scheme Participant indeed has any one of the specified chronic medical conditions (as defined in Clause 2A of the Schedule to VSS Specific Terms and Condition) or the high-risk conditions (as defined in Clause 2B of the Schedule to VSS Specific Terms and Conditions) and record such assessment in the IT Platform; it is only if the assessment is affirmative that he shall proceed with the Vaccination on that Scheme Participant;
- (h) provide the requested type of Vaccination promptly if (i) Government Subsidy for the Private Doctor to claim for providing Services to such Scheme Participant is

VSS 2025/26 Doctors' Guide – Participating in VSS

available as shown in the IT Platform, and (ii) such Scheme Participant is clinically indicated for the requested type of Vaccination and (iii) other requirements for availability of the Government Subsidy as stated in the Schedule are also satisfied including whether such Scheme Participant has any one of the high-risk conditions as defined in Clause 2B of the Schedule to VSS Specific Terms and Conditions (viz for those types of Scheme Participants as mentioned in Clause 2.13(g) of VSS Specific Terms and Conditions);

- (i) keep a copy of such Scheme Participant's Documentary Proof of Eligibility as specified in the Schedule to VSS Specific Terms and Conditions for such type of Eligible Person (except for documentary proof for Hong Kong resident status); and
 - (j) input all information required by the Government and make a claim for Government Subsidy immediately, in any case within seven calendar days counting from the date of the Vaccination. This will ensure Scheme Participant can receive the SMS message on Co-payment immediately.
- (2) Clinic staff are advised to take the following precautionary measures on safe injection practices and sharps handling.
- (a) The staff should adhere to basic aseptic technique for the preparation and administration of parenteral medications.
 - (b) Sharps injury, especially involving disposable needles, are well-known risks in all healthcare settings. Safe handling, use and disposal of sharps are necessary to prevent injury and the possible transmission of bloodborne diseases, including hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV).
 - (c) The general principles of prevention of sharps injury are listed in the CHP guidelines "Prevention of Sharps Injury and Mucocutaneous Exposure to Blood and Body Fluids" at:
https://www.chp.gov.hk/files/pdf/prevention_of_sharps_injury_and_mucocutaneous_exposure_to_blood_and_body_fluids.pdf
 - (d) Postexposure management involves provision of first aid, reporting, risk assessment and counselling. It is important that healthcare facilities should have a protocol in place. Please refer to the CHP guideline "Recommendations on the Management and Postexposure Prophylaxis of Needlestick Injury or Mucosal Contact to HBV, HCV and HIV" at
https://www.chp.gov.hk/files/pdf/recommendations_on_postexposure_management.pdf

VSS 2025/26 Doctors' Guide – Participating in VSS

[nt and prophylaxis of needlestick injury or mucosal contact to hbv hcv and hiv en r.pdf](#)

- (e) For details, please refer to **section 5.5 of Guide to Infection Control In Clinic Setting.**
(https://www.chp.gov.hk/files/pdf/guide_to_infection_control_in_clinic_setting.pdf).

(3) Personal Protective Equipment (PPE)

- (a) Personal protective equipment should be used as indicated. Please refer to Personal Protective Equipment Section of ICB Infection Control Guidelines for PPE indications and usage
(<https://www.chp.gov.hk/en/resources/346/365.html>)

(4) Hand hygiene and use of glove

- (a) Hand hygiene practice should be adopted and strictly followed during vaccination procedure.

- (b) Hand hygiene with proper hand rubbing by using soap and water or alcohol-based handrub for at least 20 seconds and 7 steps of hand hygiene techniques should be performed between each and after last vaccination. (Refer to Figure 1 below - CHP poster of “7 steps on hand hygiene”)



Figure 1 - CHP poster of “7 steps on hand hygiene”

- (c) Medical gloves use by health care workers (HCWs) is recommended to reduce the risk of contaminating HCWs' hands with blood and other body fluids, and reduce the risk of germ dissemination to the environment and of transmission from the HCWs to the patient and vice versa, as well as from one patient to another.
- (d) Medical gloves should be discarded immediately after removal. Gloves should not be washed, decontaminated, or reprocessed for any reuse purpose. Disinfection of gloved hands with alcohol based hand rub is not recommended. The use of gloves does not replace the need for hand hygiene. Please refer to the

Recommendations on Hand Hygiene and Use of Gloves in Health Care Settings
(https://www.chp.gov.hk/files/pdf/recommendations_on_hand_hygiene_and_use_of_gloves_in_health_care_settings.pdf)

- (5) Additional infection control measures when administering LAIV
 - (a) There is no requirement or recommendation for wearing full personal protective equipment. Healthcare providers should follow standard precautions, wear surgical mask and gloves when administering intranasal vaccines because of the increased likelihood of coming in contact with a patient's mucous membranes and body fluids. Healthcare providers should also change their gloves between patients in addition to performing hand hygiene. Administration of LAIV is not considered an aerosol-generating procedure and thus, the use of an N95 or higher-level respirator is not recommended.
- (6) Please refer to the following for more details about the infection control guidelines at <https://www.chp.gov.hk/en/resources/346/index.html> .
- (7) More details about vaccination procedure and infection control practice can be found in **Section 3.2.2** - of Chapter 3.
- (8) Vaccination
 - (a) There are different types for vaccines with different recommendations, indications and contraindications. Check the recommendation, vaccine dosage, expiry date, vaccine contraindications and precautions
 - (b) Perform health assessment for potential Scheme Participant to ascertain the need and suitability for vaccination before administration. The Health Assessment Form available in **Section 4.2** of Chapter 4 can be used for screening for contraindications and as part of the medical records.
 - (c) Decide if one/ two dose(s) of seasonal influenza vaccine and which type of pneumococcal vaccine (PCV15 or 23vPPV) is/ are required. (For children aged under 9 years who have never received any influenza vaccination, advise them to return four weeks later for the second dose.)
 - (d) Explain to Scheme Participant (or parent/ guardian) about the vaccine being administered, the possible side effects of vaccination and management.
 - (e) For PCV15 vaccination, the Private Doctor should perform health assessment to confirm whether the elderly has high-risk condition.
 - (f) For SIV vaccination, the Private Doctor should perform health assessment to confirm whether the Scheme Participant has specified chronic medical conditions.

VSS 2025/26 Doctors' Guide – Participating in VSS

- (g) The doctor in charge must sign on the *Vaccination Subsidy Scheme - Consent Form* after confirming a patient's eligibility for SIV or PV vaccination, including pregnancy status, intellectual disability status, specified chronic medical condition or high-risk condition.
 - (h) Ensure availability of resuscitation equipment and drugs necessary for the management of anaphylaxis.
 - (i) Administer seasonal influenza vaccination and/ or pneumococcal vaccine covered in VSS to Scheme Participants (see **Section 1.4** of Chapter 1).
- (9) Documentation
- (a) Keep medical record of the vaccination
 - (b) Keep clinic log/ database, with documentation of the following details for record storage and retrieving.
 - i. the name of vaccine,
 - ii. lot number,
 - iii. expiry date,
 - iv. name of personnel who administered the vaccination and doctor responsible
- Such information can be recorded on the Health Assessment Form (see **Section 4.2** of Chapter 4) or a separate vaccination record maintained by the clinic. Please note that government may request the doctor to submit these vaccination record for checking when necessary.
- (c) For pneumococcal vaccination and seasonal influenza vaccination to Scheme Participants, record whether the Scheme Participant has high-risk conditions and chronic medical problems in the IT platform.
 - (d) Self-held vaccination card should be issued to the Scheme Participants (or parent/ guardian) after vaccination. The card should include the name of Scheme Participant, type/ name of vaccine given, date of vaccination and name of vaccination service provider.
 - (e) For *Vaccination Subsidy Scheme - Consent Forms* and vaccination records, they need to be kept in the clinic for a period of not less than 7 years. The clinic should keep vaccination record (e.g. medical record or vaccination log book) which could ascertain the vaccination provided and provided to the Government upon request.

VSS 2025/26 Doctors' Guide – Participating in VSS

(10) Submission of claims

- (a) Charge Scheme Participant (or parent/guardian) according to the displayed information on co-payment.
- (b) Immediate submission of claims using the IT platform after the vaccination is provided to the Scheme Participant is highly recommended for timely processing of claims. Claims must be submitted **WITHIN SEVEN CALENDAR DAYS** after the delivery of service (vaccination day is regarded as day 1). Otherwise, the input will be blocked by the system.
- (c) According to the legal advice, the informed consent have to be made between two different parties, therefore, the Private Doctor cannot make claims for Government subsidy of any vaccination that he/ she provided to himself/ herself or his/her children or wards when acting as the parent / guardian who signed the “*Vaccination Subsidy Scheme - Consent Form*” giving consent to receive subsidised vaccination for the concerned children or wards. The Private Doctor can provide vaccination for their dependents (e.g. children) and claim Government subsidy for the vaccination only when the informed consent is given by the parent/guardian other than the Private Doctor (e.g. the other parent of the children).

(11) Handling of clinical waste (Video on the related management is available at <https://www.youtube.com/watch?v=gbphrC3DsG8&feature=youtu.be>)

- (a) Clinical waste generated (e.g. used needles, intranasal sprayer, syringes and non-woven balls fully soaked with blood) must be properly handled and disposed of according to the Waste Disposal (Clinical Waste) (General) Regulation (Cap. 354O of the laws of Hong Kong) and any other applicable laws and regulations. Alcohol swabs and non-woven balls slightly stained with blood, which are not clinical waste by legal definition, should also be properly handled and disposed of as general refuse.
- (b) Used syringes, needles and other sharp instruments should be disposed directly into sharps box(es) and properly sealed by the proprietary closure. The sharps box(es) should be placed on a flat, firm surface and at an optimal position near to the staff providing vaccination.
- (c) For details, please refer to the “**Guideline on Proper Handling and Temporary Storage of Clinical Waste Generated from Outreach Vaccination Activities**” provided by EPD in **Appendix G**.

VSS 2025/26 Doctors' Guide – Participating in VSS

(12) Reporting vaccine adverse reaction

- (a) Adverse drug reaction (ADR) reporting is important for vaccine safety surveillance and programme monitoring. Health care professionals are therefore encouraged to report suspected serious or unexpected ADR. Serious ADR is defined as an adverse reaction which:
 - (i) is fatal;
 - (ii) is life-threatening;
 - (iii) results in or prolongs hospitalisation;
 - (iv) causes persistent incapacity or disability; or
 - (v) causes birth defects.
- (b) Please refer to **Appendix F** or Section Chapter 5 of the Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings - **Module on Immunisation** for Monitoring and Management of Adverse Events Following Immunisation.
(https://www.healthbureau.gov.hk/phcc/rfs/english/reference_framework/pre_care_for_child.html)
- (c) The Private Doctors are encouraged to report any suspected adverse events following immunisation which are serious (even if the reaction is well-known), non-serious but deemed medically significant by the healthcare professional, or unexpected, to the Pharmacovigilance Unit of the Drug Office, DH, to facilitate assessment process.
- (d) Further information and Adverse Drug Reaction (ADR) report form are available at the following link:
https://www.drugoffice.gov.hk/eps/do/en/healthcare_providers/adr_reporting/index.html

(13) Complaint Management

- (a) Complaints and feedback are taken as opportunities to improve the VSS, and complaint management is one of the internal control measures to monitor the performance of the VSS. A complaint management mechanism is established to receive and handle complaints properly and coordinate appropriate follow-up or remedial actions in a timely manner.

VSS 2025/26 Doctors' Guide – Participating in VSS

(b) Definition of Complaint and Feedback:

- i. A complaint is defined as an expression of dissatisfaction by individuals with policy or services, or the way in which the policy is implemented or service is delivered.
- ii. Feedback includes communication initiated by individuals that cannot be classified as a complaint, request for assistance, or an enquiry.

(c) Private Doctors shall develop a robust system for handling of complaints falling under its purview. Private Doctors shall immediately report to the Government any complaints of clinical incidents or professional misconduct and to submit written reports and take other follow-up actions in respect of the reported incident or complaint as may be, and by the deadlines, directed by the Government, to the satisfaction of the the Government.

- i. All written complaints shall be acknowledged within ten (10) calendar days after receipt; and
- ii. A substantive reply shall be issued within thirty (30) calendar days after receipt of the complaint as far as possible. For complicated cases requiring longer processing time, the complainant should be kept informed of the progress of the case and the reasons why a longer time is needed to provide a substantive reply and, if possible, the estimated time frame.

(d) Private Doctors shall refer complaints outside of their purview to the Government for handling, such as those concerning the design of the VSS and policy set by the Government.

(e) Handling of Personal Data

All complaints should be handled in strictest confidentiality, including the personal data of the complainants. Any disclosure of content of the complaint should be confined to related parties and on a need-to-know basis to facilitate the investigation. All staffs should comply with the requirements of the Personal Data (Privacy) Ordinance (Cap. 486) and the Code on Access to Information when handling requests from members of the public.

(14) Management of vaccination clinical incidents (e.g. incorrect vaccine administered or breach of cold chains).

- (a) Incident is defined as an irregular or exceptional event that may adversely affect the patient care or the quality or safety of the services provided to Scheme Participants.

VSS 2025/26 Doctors' Guide – Participating in VSS

- (b) Clinical incident is defined as any events or circumstances that caused injury to Scheme Participants or posed risk of harm to Scheme Participants in the course of provision of clinical service.
- (c) The Private Doctor should have plans to handle clinical incidents (e.g. incorrect vaccine administered). Appropriate actions should be taken, including inform the Scheme Participants/ parents/ guardians as appropriate and make necessary arrangements.
- (d) The Private Doctor should attend all clinical incident immediately, assess severity, provide appropriate interventions and investigations. Clear documentation of clinical assessment and interventions, including but not limited to medications used, should be done according to the practice of the Private Doctor/ clinic.
- (e) Explain to the Scheme Participant/ parent/ guardian timely.
- (f) Record the Scheme Participant's condition and treatment provided
- (g) Following all necessary immediate interventions, the Private Doctor should inform the Government at the earliest possible at 2125 2299, followed by the Incident Reporting Form. The form should be returned to the Government email with password protection of the file within 24 hours after incident identification.
- (h) Summary of the incident, with factual account of the incident, preliminary assessment, immediate actions taken, impact on the Scheme Participant(s)/ service provision, potential cause of the incident, initial investigation results as well as the contingency arrangement / remedial actions taken should be included in the notification form.
- (i) Depending on the severity of the incidents, disclosure to the public may be needed. In such cases, the vaccination team should work closely with the Government to investigate, provide necessary information, and get prepared for press announcements or other actions as necessary.
- (j) Management of breaching of cold chain (Please see Chapter 6)

VSS 2025/26 Doctors' Guide – Participating in VSS

- (15) Management of vaccination non-clinical incidents (e.g. breach of personal data privacy)
- (a) Incident is defined as an irregular or exceptional event that may adversely affect the patient care or the quality or safety of the services provided to Scheme Participants.
 - (b) All other incident which cannot be classified as clinical incident should be classified as non-clinical incident.
 - (c) The Private Doctor should have plans to handle non-clinical incidents (e.g. service interruption or suspension caused by facilities, environment, equipment, manpower, drugs and medical consumables). Appropriate actions should be taken, including inform the Scheme Participants/ parents/ guardians as appropriate and make necessary arrangements.
 - (d) The Private Doctor should attend all non-clinical incident immediately, assess severity, and provide appropriate interventions and investigations. Clear documentation of incident and interventions, including but not limited to remedial action taken, should be done according to the practice of VSS doctor/ clinic.
 - (e) Explain to the Scheme Participant/ parent/ guardian timely.
 - (f) Record the remedial action taken
 - (g) Following all necessary immediate interventions, the Private Doctor should inform the Government at the earliest possible at 2125 2299, followed by the Incident Reporting Form. The form should be returned to the Government through email with password protection of the file within 24 hours after incident identification.
 - (h) Summary of the incident, with factual account of the incident, preliminary assessment, immediate actions taken, impact on the Scheme Participant(s)/ service provision, potential cause of the incident, initial investigation results as well as the contingency arrangement / remedial actions taken should be included in the notification form.
 - (i) Depending on the severity of the incidents, disclosure to the public may be needed. In such cases, the vaccination team should work closely with the Government to investigate, provide necessary information, and get prepared

VSS 2025/26 Doctors' Guide – Participating in VSS

for press announcements or other actions as necessary.

- (16) Co-administration of SIV with COVID-19 vaccine
 - (a) COVID-19 vaccines can be co-administered with, or at any time before or after, seasonal influenza vaccine (including inactivated influenza vaccine, live attenuated influenza vaccines and recombinant influenza vaccine) under informed consent.
 - (b) Please refer to Appendix H – Vaccination Guide for Co-Administration of Seasonal Influenza Vaccine and COVID-19 Vaccines at Same Visit

2.7 Reimbursement

(1) *Vaccine Cost (PCV15 Only)*

The subsidy to be provided by the Government under the VSS to the Private Doctor is \$800 each dose of PCV15 administered to eligible elderly with high-risk conditions. Only one brand of PCV15 have been registered for sale in Hong Kong and the manufacturers supplying this brand have a special price programme and agreed to offer it to the doctor at a net price of \$660 per dose for administration under the VSS.

The Private Doctors who joined the special price programme offered by the vaccine company can reimburse the difference between the original price and the special price from the vaccine company for vaccination provided to eligible elderly under VSS. DH will provide the name of the Private Doctor, name, address and phone number of the practice and the name of the medical organisation and the number of PCV15 vaccination subsidy claims to the vaccine company to ascertain that the vaccines are used under VSS.

(2) *Vaccination Subsidies*

- (a) **Vaccination subsidy is claimed through login to the eHealth, where will direct the Private Doctor to eHS(S). The Private Doctor can select the scheme “VSS” and input information required for online submission of claims. eHS(S) will compile the amount of reimbursement payable to each enrolled doctor each month.**
- (b) For children eligible for two doses of seasonal influenza vaccine, two separate duly signed and completed *Vaccination Subsidy Scheme - Consent Forms* are required. The Government has NO obligation for reimbursement on claims submitted BEFORE vaccination or WITHOUT a duly signed and completed *Vaccination Subsidy Scheme - Consent Form*.
- (c) If the Private Doctor has not provided co-payment information of a particular eligible group to the Government, the Private Doctor cannot submit reimbursement claims for that eligible group.
- (d) Claims should only be submitted for reimbursement after confirming that vaccination has been provided to the Scheme Participant and also the *Vaccination Subsidy Scheme - Consent Form* is duly signed and completed.
- (e) Immediate submission of claims to IT platform after vaccination is provided

VSS 2025/26 Doctors' Guide – Participating in VSS

to the Scheme Participants is highly recommended for timely processing of claims. Claims have to be submitted **WITHIN SEVEN CALENDAR DAYS** after delivery of service for processing of reimbursement (vaccination day is regarded as day 1). For example, for vaccinations that are administered on 31 December 2025, claims for subsidy should be submitted for reimbursement on or before 6 January 2026.

- (f) eHealth will generate payment files, based on the information submitted by the enrolled doctors, for payment directly into the designated bank accounts.
- (g) The Private Doctor and his/ her medical organisation shall keep proper record in relation to the vaccination service provided (including date of vaccination, type of vaccine, number of doses received this season if the Scheme Participant is a child), information about the vaccine used (company, lot number, date of purchase, date of use), as well as the original *Vaccination Subsidy Scheme - Consent Form*, *Health Assessment Form*, and other supporting documents, for a period of not less than seven years. Record may be subjected to checking by the Government.

2.8 Post-payment check

The Government will conduct random checks to ensure the proper disbursement of Government Subsidies. The Private Doctors shall cooperate with the Government in the conduct of post-payment checks on payments made to him and provide assistance to facilitate such checks during and after his/her enrollment in VSS. The Private Doctor shall make its books and records of all receipts, payments and contracts, and all information in connection with the Vaccination Service, as well as general ledgers, sub-ledgers, cashbooks and bank statements available to the Government, for inspection and retaining copies of the same without charge, during and after the period the Private Doctors is enrolled in VSS.

2.9 Clinical waste disposal records

In accordance with the Waste Disposal (Clinical Waste) (General) Regulation, doctors must keep the clinical waste disposal records, which may include the waste producer copy (pink in colour) of the clinical waste trip ticket, for 12 months from the date of consignment/delivery. Doctors shall produce such record to EPD for inspection when so required. EPD may also conduct surprise inspection to check for any non-compliance in clinical waste management in the vaccination activities.

2.10 Data security and privacy

Enrolled doctors should be careful in handling personal data of clients. Keep the signed *Vaccination Subsidy Scheme – Consent Form*, *Health Assessment Forms* and photocopies of documents collected from eligible children in locked cabinets and limit the number of persons who can access the personal data, to protect it against indiscriminate or unauthorised access, processing and use.

2.11 Indication of availability of vaccine on the service directory

When a particular type of vaccine is out of stock, Private Doctors or clinic administrative staff shall go to the "My Vaccine Availability" module in the IT Platform. They shall click the "Edit" button to change the availability of a particular type of vaccine to "Out of Stock". The availability of the vaccine will be reflected at the service directory website "List of Enrolled Healthcare Service Providers" on the next day for the information of members of the public. Private Doctors are reminded that timely update of service availability is important.

2.12 Temporarily losing access to eHealth

When a doctor temporarily loses access to eHealth during the provision of vaccination under VSS to Scheme Participants, the following actions can be taken:

- (1) Confirm the eligibility of Scheme Participant;
- (2) Ask the Scheme Participant or his parent/ guardian to complete and sign the hard copy of “*Vaccination Subsidy Scheme - Consent Form*”;
- (3) Record the required information of the Scheme Participant on the Consent Form to facilitate later manual input into the eHealth;
- (4) Manually input the information into the eHealth as soon as the access to eHealth is resumed, no later than seven calendar days (vaccination day is regarded as day 1) after the delivery of vaccination service (both days inclusive).

For any enquiries and assistance required, doctors may contact VSS doctors' hotline at 2125 2299 (Office Hours: Monday to Friday 09:00-17:30 hours. No service on Saturday, Sunday and Public Holiday.) or email to vssdoctor@healthbureau.gov.hk. For enquiries related to eHealth, please call eHealth hotline at 3467 6230.