

Chapter 2 - Participating in Vaccination Subsidy Scheme (VSS)

This section leads doctors 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. It also describes the eHealth System (Subsidies), amendment of particulars, de-enrolment, termination, monitoring and inspection, as well as data security and privacy.

A doctor can enrol in VSS if he/ she:-

- (1) is a registered medical practitioner within the meaning of the Medical Registration Ordinance (Cap 161);
- (2) holds a valid annual practicing certificate;
- (3) works in the private medical sector (including university and non-government organisations); and
- (4) is on Primary Care Directory (before enrolling in VSS for the 2023/24 season).

Please see **Section 2.1 and 2.2** of Chapter 2 for procedures to enrol 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 doctors enrolled in VSS have to use Purpose-built vaccine refrigerators (PBVR) for vaccine storage from 2023/24 season onwards. Domestic units or stand-alone domestic refrigerators are no longer acceptable.
- (b) Cyclic defrost and bar refrigerators (a combined refrigerator/ freezer unit with a single exterior door only) should not be used.
- (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. Enrolled VSS doctors will be requested to provide the records of temperature and photo(s) of the vaccine-storing refrigerator and temperature monitoring device/ programme to Centre for Health Protection.
- (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.

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- (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/pho/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) 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.
- (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
 - (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 new enrollees to VSS

2.2.1. **Pre-enrolment**

Doctors 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 PCD and CME requirements under **Section 2.1 (2)** of chapter 2 are fulfilled.
- (4) 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>
- (5) Read through and take reference from the SCVPD's recommendations on pneumococcal vaccine: <https://www.chp.gov.hk/en/static/24008.html>
- (6) Read "Enrolment Information" at CHP website
(<https://www.chp.gov.hk/en/features/45858.html>) carefully.
- (7) 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/pho/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) **It takes up to 14 working days to process an enrolment application after the duly completed Application Form and Authority for Payment to a Bank Form(s) together with all supporting documents have been received by Vaccination Office.**
- (2) Doctors may login the eHealth System (Subsidies) [eHS(S)] for online enrolment or download the application form for paper enrolment.
- (3) The following documentary proofs should be sent to CHP by mail (preferably registered mail) with the completed and signed Application Form and Authority for Payment to a Bank Form(s) to complete the application process:-
 - (a) HKID (copy);
 - (b) valid annual practicing certificate (copy);
 - (c) address proof of the applicant and where applicable, medical organisation (e.g. copy of public utilities bill);
 - (d) business registration certificate of the medical organisation¹ (copy); and
 - (e) bank account information (e.g. certified true and correct copy of bank correspondence to show the bank name, bank account number, name of the account holder) for reimbursement payment.
- (4) The steps for online and paper enrolment are outlined in the flow charts in **Section 2.2.3 and 2.2.4.**
- (5) Upon completion of processing, the doctor will receive from CHP:-
 - (a) Confirmation letter, authentication token and Smart Card Reader
 - (i) Confirmation letter with Service Provider Identity Number (SPID) (existing HCVS service provider can use the same SPID to access the eHealth System (Subsidies) upon confirmation of enrolment);

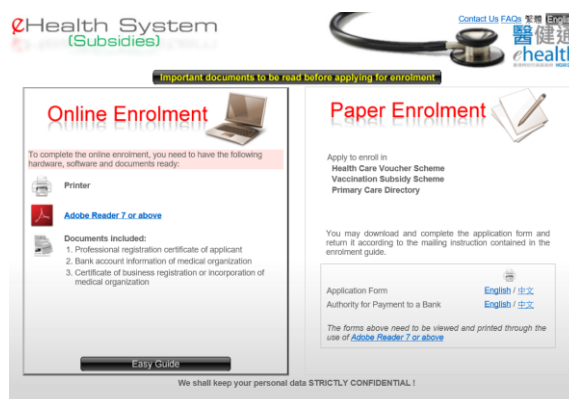
¹Medical Organisation here means:-

- (a) an organisation (whether incorporated or not) which employs or engages a doctor to provide medical services to any person;
- (b) an organisation (whether incorporated or not):-
 - (i) under whose name a doctor provides medical services to any person; and
 - (ii) of which the doctor is the sole proprietor, partner, shareholder, director or other officer.

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- (ii) Authentication token for enrolled doctor to activate his provider account in the eHS(S). Please note that this token cannot be transferred to other parties for use; and
 - (iii) Smart Card Reader (see **Section 2.8.7** of Chapter 2) to facilitate input of personal data of eligible vaccine recipients to eHS(S). Please follow the instruction notes attached to Smart Card Reader for installment. For technical assistance, please call the enquiry lines listed on the back of Smart Card Reader.
- (b) a VSS scheme logo (see **Section 2.4** of Chapter 2);
 - (c) a VSS price poster (see **Section 2.4** of Chapter 2);
 - (d) Vaccination Cards (see **Section 4.2** of Chapter 4); and
 - (e) *Consent to Use Vaccination Subsidy* Forms (see **Section 4.2** of Chapter 4).

2.2.3. Flow chart of electronic application (online enrolment)



Visit the eHS(S) website via CHP website
(<https://apps.hcv.gov.hk/eform/main.aspx?lang=en>)



Type in the required information regarding personal and professional particulars, medical organisation and place of practice(s)



Type in the required information regarding the nominated bank account(s) for reimbursement (upon electronic submission of the enrolment application, an “enrolment reference number” would be provided)



Type in the service fee(s) to charge the eligible groups



Print out the completed enrolment forms



Sign the “Application Form”
(Part V - “Execution”: to be signed by the applicant;
and where applicable, the authorised signatory of the medical organisation)



Sign the “Authority for Payment to a Bank” form(s) (Part 2 - “Declaration”: to be signed by the applicant;
and where applicable, the authorised signatory of the medical organisation)



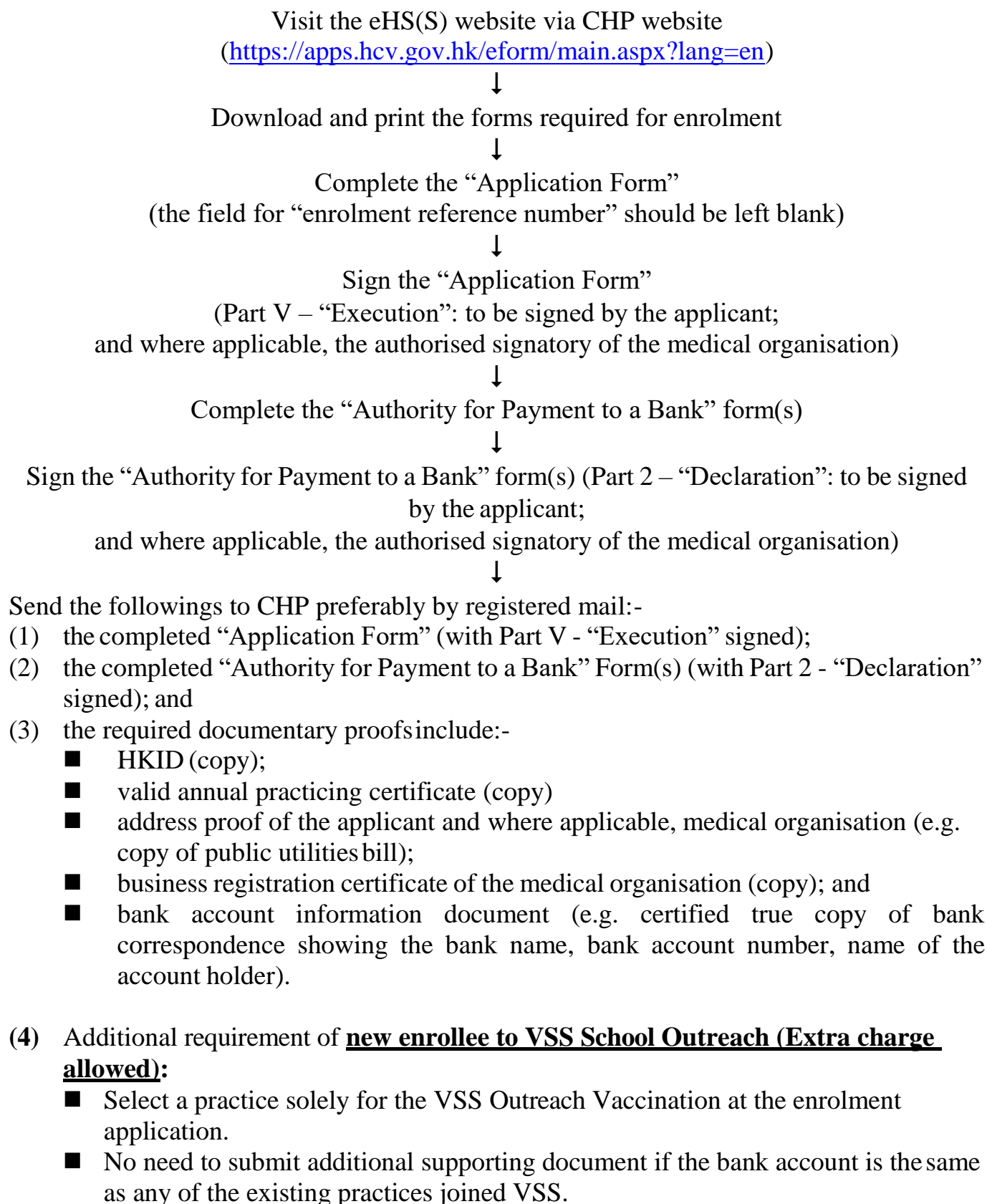
Send the following to CHP preferably by registered mail:-

- (1) the completed “Application Form” (with Part V - “Execution” signed);
- (2) the completed “Authority for Payment to a Bank” Form(s) with (Part 2 - “Declaration” signed); and
- (3) the required documentary proofs include:-
 - HKID (copy);
 - valid annual practicing certificate (copy)
 - address proof of the applicant and where applicable, medical organization (e.g. copy of public utilities bill);
 - business registration certificate of the medical organisation (copy); and
 - bank account information document (e.g. certified true copy of bank; correspondence showing the bank name, bank account number, name of the account holder).

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- (4) Additional requirement of **new enrollee to VSS School Outreach (Extra charge allowed)**:
- Select a practice solely for the VSS Outreach Vaccination at the enrolment application.
 - No need to submit additional supporting document if the bank account is the same as any of the existing practices joined VSS.

2.2.4. **Flow chart of paper enrolment**



2.3 Preparation for doctors already enrolled in VSS

Existing enrolled doctors will receive a letter from CHP regarding the arrangement of VSS before start of the coming season. Re-enrolment is NOT required. However, they need to join PCD and obtain the necessary CME to maintain listed on PCD. Please refer to **Section 2.1(2)** of Chapter 2 and check the following link for enrolment to PCD:

(<http://www.pcdirectory.gov.hk>)

Furthermore, existing enrolled doctors need to provide the information on service fee they would charge the recipients of eligible groups for providing subsidised seasonal influenza vaccination and/ or pneumococcal vaccination. Enrolled doctor who does not provide such information cannot submit the vaccination subsidy claims through eHS(S), and their names and practice addresses will not be displayed on the Centre for Health Protection website.

After confirmation of enrollment, enrolled doctor will receive the following by mail from CHP:

- (i) a VSS scheme logo,
- (ii) a VSS price poster,
- (iii) Vaccination Cards,
- (iv) information leaflets, and
- (v) *Consent to Use Vaccination Subsidy Forms* for VSS.

Doctors have to 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.

If there is any change of doctor's enrollment or information related to clinical practice or service fee, please fill in and return the *Change Form* (see **Section 4.2** of Chapter 4) available at CHP website (<https://www.chp.gov.hk/en/features/45851.html>).

2.4 Starting vaccination service under VSS

Enrolled doctor please take the following steps to start vaccination service under VSS:

- (1) For newly enrolled doctor, please activate your “Service Provider Account” via eHealth System (Subsidies) (see **Section 2.8.2** of Chapter 2) and set up the Smart Card Reader (see **Section 2.8.7** of Chapter 2).
- (2) Display VSS scheme logo at/ near clinic entrance. Only one logo should be displayed even if there is more than one enrolled doctor in the clinic.
- (3) Set the service fee for each type of vaccines for each target groups. For seasonal influenza vaccination, only the service fee information for QIV will be displayed in the website. Service fee includes all booking fees, consultation fee and other vaccine fees related to the vaccination. Enrolled doctors shall not charge other fee, other than service fee. If any pre-payment or deposit is charged but the appointment for vaccination is cancelled, any Service Fee which may have already been paid prior to the cancellation shall be refunded.

Doctors who are also enrolled in Health Care Voucher Scheme (HCVS) may accept voucher from eligible elderly for settling the Service Fee. Doctors should comply with all regulations and guidelines under HCVS.

- (4) Fill in the information about service fee on the VSS price poster and display the price poster at clinic waiting area.

Sample of scheme logo



Sample of price poster

2023/24 疫苗資助計劃 Vaccination Subsidy Scheme		
本診所為以下合資格的香港居民 提供資助接種疫苗 This clinic provides subsidised vaccination to the following eligible Hong Kong residents	政府資助額 (每劑疫苗) Government subsidy (Per dose of vaccine)	本診所收費 (已扣除政府資助) Service fee in this clinic (After deducting the Government subsidy)
季节性流感疫苗 (逢逢每年接種) (適用於所有由內地的政府資助接種疫苗) Seasonal Influenza Vaccine (annual vaccination is recommended) (Please check with the clinic staff for the types of influenza vaccines provided and the service fee)		
<input type="checkbox"/> 今年50歲至64歲人士 Persons aged between 50 and 64 years this year	\$260	\$ _____
<input type="checkbox"/> 今年65歲或以上長者 Older aged 65 years or above this year		\$ _____
<input type="checkbox"/> 孕婦 Pregnant women		\$ _____
<input type="checkbox"/> 接種當日年齡介乎6個月至未滿18歲； 或18歲或以上就讀於普通中學的學生 Persons aged between 6 months and under 18 years, or aged 18 years or above studying at secondary schools in Hong Kong on the vaccination day		\$ _____
<input type="checkbox"/> 智障人士 Persons with intellectual disability		\$ _____
<input type="checkbox"/> 領取殘疾津貼 / 護理津貼或獲頒發為 「殘疾程度達 100%」或「需安撫護理」的人士 Recipients of Disability Allowance / disability rate of "100% disability" or "requiring constant attendance" under CRBA		\$ _____
肺炎球菌疫苗 (今年65歲或以上的人士) Pneumococcal Vaccine (65 years or above this year)		
<input type="checkbox"/> 二十三價肺炎球菌多糖疫苗 23-valent Pneumococcal Polysaccharide Vaccine	\$400	\$ _____
<input type="checkbox"/> 肺炎球菌結合疫苗(有高危風險情況的長者) Pneumococcal Conjugate Vaccine (Elderly with high-risk conditions)	\$800	\$ _____
<input type="checkbox"/> 十二價肺炎球菌結合疫苗 12-valent Pneumococcal Conjugate Vaccine		\$ _____
<input type="checkbox"/> 十五價肺炎球菌結合疫苗 15-valent Pneumococcal Conjugate Vaccine		\$ _____
診所請在 <input type="checkbox"/> 填上 <input checked="" type="checkbox"/> Clinic please put a ✓ in the <input type="checkbox"/>		
所需文件: • 香港居民身份證文件 • 其他所需文件, 請向診所查詢 Documents required: • Identity document of Hong Kong resident • For other documents required, please check with the clinic staff		

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For the sake of price transparency, enrolled doctors are required to display their information for service for seasonal influenza vaccination and/ or pneumococcal vaccination on the VSS price poster.

CHP website will publicise enrolled doctors' names, clinic addresses, telephone numbers and information for service of seasonal influenza vaccination and/ or pneumococcal vaccination.

- (5) A doctor who plans to raise the service fees for seasonal influenza vaccination and/ or pneumococcal vaccination has to inform CHP by fax (see **Section 4.2** of Chapter 4) at least two working days in advance, so that the fee information on the VSS website can be updated in time.
- (6) A doctor who plans to reduce fees also has to inform CHP by fax, but the fee reduction may take immediate effect on the same day of informing CHP.
- (7) Please approach CHP for replacement of lost or damaged scheme logo or price poster. CHP will re-issue a replacement by mail.
- (8) Make available copies of *Consent to Use Vaccination Subsidy* Form (**Section 4.2** of Chapter 4) for eligible persons/ parents/ guardians to fill in at the clinic. The Form is available at CHP website (<https://www.chp.gov.hk/en/features/45851.html>) and hard copies can be obtained from CHP.

2.5 Vaccination period for VSS

The vaccination period for 2023/24 seasonal influenza vaccination starts from 28 September 2023 until stocks of vaccines expire. Eligible persons can receive one dose of subsidised influenza vaccine in 2023/24. For 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, PCV13 or PCV15) for eligible elderly would be on-going. Vaccination for PCV15 will start from 30 November 2023.

2.6 Vaccination arrangement for VSS

- (1) Check eHealth System (Subsidies) accounts
 - (a) Login to the eHealth System (Subsidies) [eHS(S)] and click to select the target group and type of vaccine to be administered.
 - (b) Input the information as required by the eHS(S) to search for the vaccine recipient's eHealth (Subsidies) Account manually or using Smart Card Reader (for HKID only).
- (2) Check the recipient's identity and eligibility
 - (a) Check vaccine recipient's identity document and confirm his/ her eligibility to receive VSS subsidy (see **Section 1.4** of Chapter 1). If the vaccine recipient is not holding a HKID, please refer to **Appendix A** for checking the eligibility.
 - (b) Check the vaccine recipient's vaccination records in the eHS(S) for vaccination history and the type of pneumococcal vaccine (PCV13, PCV15 or 23vPPV) that has been given before, if any. The doctor cannot make claim for vaccination subsidy if the recipient has previously received the vaccinations and therefore used up the subsidy.
- (3) Check vaccination record/ history
 - (a) Please note that vaccine recipient's eHS(S) Account may not be found if he/ she is using a different identity document for subsequent vaccination (for children under the age of 12 only).
 - (b) The record of eHS(S) may not be updated if previous vaccination was given less than 7 days ago.

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- (c) Enrolled doctors should therefore take history from the recipient (or parent/guardian) and cross check with the vaccination card provided by the recipient.
- (d) If no eHS(S) Account matching the vaccine recipient's particulars is found, create an eHS(S) Account for him/ her.
- (4) Obtain consent and check the *Consent to Use Vaccination Subsidy Form*
 - (a) Make available copies of the *Consent to Use Vaccination Subsidy Forms* (**Section 4.2** of Chapter 4) for eligible persons (or parents/ guardians) to fill in at the clinic. The enrolled doctor can provide the pre-printed *Consent to Use Vaccination Subsidy Form* or generate the *Consent to Use Vaccination Subsidy Form* from eHS(S) for the eligible person (or parent/guardian) to sign.
 - (b) The original format of the form must be kept. Any alteration of the format may result in failure to reimburse the concerned subsidy. Please see **Appendix A0** for illustration on how to complete the *Consent to Use Vaccination Subsidy Form*.
 - (c) One *Consent to Use Vaccination Subsidy Form* is required for each dose of vaccine given. Two *Consent to Use Vaccination Subsidy Forms* are required for two doses of seasonal influenza vaccine given to the same child or one dose of seasonal influenza plus one dose of pneumococcal vaccine given to the same adult.
 - (d) If the vaccine recipient has mental capacity but is illiterate, check that the witness has signed the *Consent to Use Vaccination Subsidy Form*.
 - (e) Check that the particulars on the identity document match with those on the *Consent to Use Vaccination Subsidy Form*.
 - (f) For the part relating to pneumococcal vaccination on the *Consent to Use Vaccination Subsidy Form*, if there are any changes made to data (eg. high risk or not, PCV13, **PCV15** or 23vPPV having been used) recorded on this particular section of the *Form* subsequent to the signing by the recipient, the amendments should be countersigned by the recipient as well.
- (5) Use of Smart ID Card Reader for e-Consent for adults using Hong Kong Identity Card

e-Consent for SIV/ PV is for adult vaccine recipients (18 years old or above) inserting the valid Hong Kong Identity Card into the smart card reader which will capture the card face data and recorded in the eHS(S).

Persons who do not use the ID card for insertion into the smart card reader should continue

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to use paper consent forms as in 2022/23 season. For persons below 18 years old and mentally incapacitated persons, they should use the paper consent forms. The relevant forms are available at (<https://www.chp.gov.hk/en/features/45851.html>).

Before vaccination, doctors should display the “eConsent under the Vaccination Subsidy Scheme” Notice (English version: https://www.chp.gov.hk/files/pdf/econsent_eng.pdf , Chinese version: https://www.chp.gov.hk/files/pdf/econsent_chi.pdf) in your clinic, explain to recipients and obtain verbal consent for vaccination and consent to use subsidy for vaccination and consent for collection of personal data; and document in relevant check box of eHS(S).

- (6) With effect from 20 October 2023, the eHS(S) screen for vaccination input will pre-set a "tick" in the box of joining eHealth (醫健通). VSS doctors and clinic staff must ask for consent from vaccine recipients to join eHealth and should remove the "tick" if recipient does not give consent. Please note that joining eHealth is optional for vaccine recipients and does not affect one's eligibility to receive subsidised vaccination. The screen cap is attached for your easy reference.

Claim

1. Search eHealth (Subsidies) Account>>> 2. Enter Details 3. Complete Claim

Enter Details

Account Information **Vaccination Record**

Document Type: Hong Kong Identity Card

Name: CHAN, CC

HKIC No. / Symbol: C892XXX(X) / A

Date of Birth / Gender: 01-01-1950 / Male

Date of Issue: 01-01-01

Claim Information

Practice: CHAN TAI MAN Clinic (22)

Scheme: Vaccination Subsidy Scheme

(Provide vaccination services at non-clinic setting)

Service Date: 10-10-2023

Category: ☐ Elders ☐ Persons with Intellectual Disability ☐ Persons receiving Disability Allowance / standard rate of "100% disabled" or "requiring constant attendance" under CSSA

Contact No. (Please provide a contact number which can receive Hong Kong SMS notification)

☒ The healthcare recipient consents to register with eHealth / The Substitute Decision Maker(SDM) consents the healthcare recipient to register with eHealth, which enables authorised healthcare providers to access and share the healthcare recipient's ehealth records (including COVID-19 vaccination records) for healthcare purposes. (optional)

Cancel X Claim

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- (7) 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_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).
- (8) 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>)
- (9) 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 in 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.

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- (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)

(10) 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.

(11) Please refer to the following for more details about the infection control guidelines at <https://www.chp.gov.hk/en/resources/346/index.html> .

(12) More details about vaccination procedure and infection control practice can be found in **Section 3.2.2** - of Chapter 3.

(13) 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 recipients 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 medical records.
- (c) Decide if one/ two dose(s) of seasonal influenza vaccine and which type of pneumococcal vaccine (PCV13, **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 vaccine recipient (or parent/ guardian) about the vaccine being administered, the possible side effects of vaccination and management.
- (e) For PCV13 **or PCV15** vaccination, the doctor should perform health assessment to confirm whether the elderly has high-risk condition.

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- (f) The doctor in charge must sign on the *Consent to Use Vaccination Subsidy Form* after confirming a patient's eligibility for PCV13 or PCV15 vaccination or pregnancy status.
- (g) Ensure availability of resuscitation equipment and drugs necessary for the management of anaphylaxis.
- (h) Administer seasonal influenza vaccination and/ or pneumococcal vaccine covered in VSS to eligible persons (see **Section 1.4** of Chapter 1).

(14) Documentation

- (a) Keep medical record of the vaccination
- (b) Keep clinic log/ database, with documentation of the following details for record storage and retrieving.
 - the name of vaccine,
 - lot number,
 - expiry date,
 - 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 Centre for Health Protection may request the doctor to submit these vaccination record for checking when necessary.

- (c) For pneumococcal vaccination, record whether the elderly has high-risk conditions in the eHS(S).
- (d) Self-held vaccination card should be issued to the vaccine recipients (or parent/ guardian) after vaccination. The card should include the name of vaccine recipient, type/ name of vaccine given, date of vaccination and name of vaccination service provider.
- (e) For paper *Consent to Use Vaccination Subsidy 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 Department of Health upon request.

(15) Submission of claims

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- (a) Charge vaccine recipient (or parent/guardian) according to the displayed information on service fee.
 - (b) Immediate submission of claims using the eHS(S) after the vaccination is provided to the eligible person 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 Consent to Use Subsidy have to be made between two different parties, therefore, an enrolled 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 “Consent to Use Vaccination Subsidy Form” giving consent to use subsidy for the concerned children or wards. The doctor can provide vaccination for their dependents (e.g. children) and claim Government subsidy for the vaccination only when the consent to use subsidy is given by the parent/guardian other than the doctor (e.g. the other parent of the children).
- (16) Clinical waste generated (e.g. used needles, intranasal sprayer, syringes and cotton wool balls fully soaked with blood) must be properly handled and disposed of according to the Waste Disposal (Clinical Waste) (General) Regulation. For details of handling of clinical waste generated from outreach vaccination activities, 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**.
- (17) 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.

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- (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/pho/rfs/english/reference_framework/pre_care_for_child.html)

- (c) Doctors are encouraged to report any suspected adverse events following immunization 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, Department of Health, 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

- (18) Management of vaccination incidents (e.g. incorrect vaccine administered or breaking of cold chains).

- (a) Clinical incident is defined as any events or circumstances that caused injury to vaccine recipients or posed risk of harm to vaccine recipients in the course of provision of clinical service.

- (b) VSS doctor should have plans to handle clinical incidents (e.g. incorrect vaccine administered). Appropriate actions should be taken, including inform the recipients/ parents/ guardians as appropriate and make necessary arrangements.

- (c) VSS doctor should attend all clinical incident immediately and provide appropriate interventions. Clear documentation of clinical assessment and interventions, including but not limited to medications used, should be done according to the practice of VSS doctor/ clinic.

- (d) Explain to the recipient/ parent/ guardian timely.

- (e) Record the recipient's condition and treatment provided

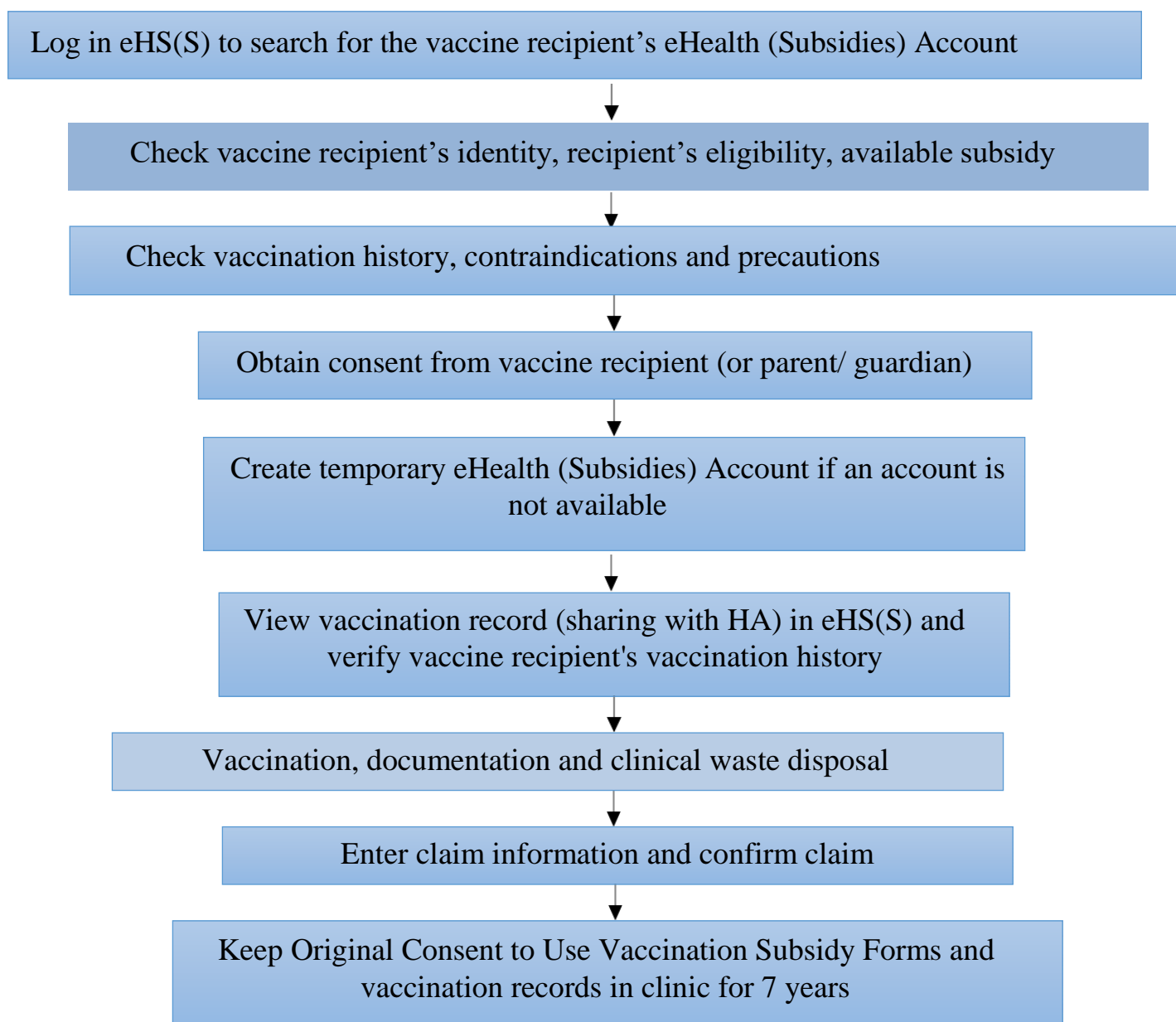
- (f) Following all necessary immediate interventions, the VSS doctor should inform the PMVD at the earliest possible at 2125 2299, followed by the

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Clinical Incident Notification Form (Section 4.2 of Chapter 4 (<https://www.chp.gov.hk/en/features/45838.html>)). The form should be returned to the PMVD by fax or email with password protection of the file within the same day of occurrence of the incident.

- (g) Summary of the incident, with preliminary assessment and immediate remedial actions should be included in the notification form.
 - (h) The VSS doctor should conduct a full investigation of the medical incident and submit the Clinical Incident Investigation Report (Section 4.2 of Chapter 4(<https://www.chp.gov.hk/en/features/45838.html>)) to the PMVD within 7 days from the occurrence of the incident.
 - (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 PMVD 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)
- (19) 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

2.6.1 Flow chart of vaccination



2.7 Reimbursement

(1) Vaccine Cost (PCV13 or PCV15 Only)

The subsidy to be provided by the Government under the VSS to the doctor is \$800 each dose of PCV13 or PCV15 administered to eligible elderly with high-risk conditions. Only one brand of PCV13 and one brand of PCV15 have been registered for sale in Hong Kong and the manufacturers supplying these brands 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.

Enrolled 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 enrolled doctor, name, address and phone number of the practice and the name of the medical organisation and the number of PCV13 or 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 eHS(S). The enrolled 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, two separate duly signed and completed *Consent to Use Vaccination Forms* are required. The Government has NO obligation for reimbursement on claims submitted BEFORE vaccination or WITHOUT a duly signed and completed *Consent to Use Vaccination Subsidy Form*.
- (c) If an enrolled doctor or his medical organisation has not provided service fee information of a particular eligible group to CHP, the enrolled 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 eligible person and also the *Consent to Use Vaccination Subsidy Form* is duly signed and completed.
- (e) Immediate submission of claims to eHS(S) after vaccination is provided

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to the eligible persons 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 31st December 2023, claims for subsidy should be submitted for reimbursement on or before 6th January 2024.

- (f) At the end of each month, eHS(S) will generate payment files, based on the information submitted by the enrolled doctors, for payment directly into the designated bank accounts within 30 days after the end of each month.
- (g) The enrolled 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 recipient is a child), information about the vaccine used (company, lot number, date of purchase, date of use), as well as the original *Consent to Use Vaccination Subsidy Form*, *Health Assessment Form*, and other supporting documents, for a period of not less than seven years. These record may be subjected to checking by CHP.

2.8 eHealth System (Subsidies) [eHS(S)]

2.8.1. **Database of enrolled doctors and vaccine recipients**

The eHS(S) has a database of enrolled doctors and of individual eligible person who have come forth to claim vaccination subsidy through enrolled doctors. In order to facilitate enrolled doctors to familiarize with various functions of the system, an online Easy Guide is now available through the service provider platform at <https://apps.hcv.gov.hk/en/index.htm>.

2.8.2. **Activation of “Service Provider Account”**

Upon successful application, the enrolled doctor (or called enrolled healthcare provider) (EHCP) will receive a confirmation letter, an authentication token and an electronic mail providing a hyperlink to the website for activation of the “Service Provider Account”, or access to the eHS(S) (service provider platform).

To activate the “Service Provider Account”, an EHCP should:-

- (1) check the electronic mail;
- (2) click the hyperlink provided in the electronic mail for accessing the designated webpage; and
- (3) enter the following information into the data field of the webpage:-
 - (a) Service provider identity number (SPID) shown on the confirmation letter;
 - (b) token passcode shown on the authentication token; and
 - (c) new password for accessing the “Service Provider Account” in the future.

Activation of account should be done **within 21 days** from the date of issuance of confirmation letter.

2.8.3. **System Login**

EHCP can access the eHS(S) for operation at <https://apps.hcv.gov.hk/en/index.htm> and select “Service Provider Login”. Type in the SPID, password and token passcode to complete login process.

If the password or token passcode are not correct after 5 attempts, the account will be locked. For unlocking the account, please see **Section 2.8.16** of Chapter 2.

2.8.4. Creating “Data Entry Account”

For each EHCP, a “Service Provider Account” will be created. ECHP can login the eHS(S) with his SPID, password and the authentication token.

To facilitate processing and reimbursement, the ECHP can create “Data Entry Account” for delegating his/ her data management work to other clinic staff.

The ECHP can assign user ID and password to “Data Entry Account” created under his/ her “Service Provider Account”. Data entry staff will then be able to login to eHS(S) using the assigned user ID and corresponding password. Authentication token is not required for accessing “Data Entry Account”.

The “Data Entry Account” will allow certain data management work (such as search/retrieve vaccine recipients’ eHealth accounts, create eHS(S) accounts, and register transaction information but with limited authority. The transactions registered through the “Data Entry Account” need to be confirmed by the ECHP before they can be passed for processing reimbursement. ECHP should login the eHS(S) (using his/ her SPID and authentication token) for checking and confirming the eHS(S) accounts being created for recipients and claim information entered through the “Data Entry Account”.

The also allows EHCP to suspend, to lock or to unlock the created Data Entry Account by clicking the “Data Entry Account Maintenance”.

2.8.5. Creating eHealth (Subsidies) Accounts for vaccination recipients

To create an eHS(S) account for vaccine recipient, the ECHP is required to:-

- (1) collect the *Consent to Use Vaccination Subsidy Form* from the eligible persons (or parent/ guardian) (it is essential that all *Consent to Use Vaccination Subsidy Forms* are duly completed);
- (2) check the HKID/ birth certificate/ other identity documents of the vaccine recipient;
- (3) explain to the eligible person (or parent/ guardian) the need and purpose for collection of personal data, including its subsequent use;
- (4) search in eHS(S) to see if the eligible person’s eHS(S) Account already exists;

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- (5) if no eHS(S) Account is found, input required information of the eligible person to create an eHS(S) Account; and
- (6) upon submission of information to eHS(S), a “temporary” eHealth (Subsidies) Account will be created for the eligible person.

2.8.6. **Viewing electronic vaccination record of eligible person**

ECHP should check the eligible person's electronic vaccination record in the eHS(S) before providing vaccination to avoid over-vaccinating the eligible person.

Electronic vaccination record showed vaccine recipient's vaccination history from eHS(S), Hospital Authority's and Department of Health's databases. The electronic vaccination record can be retrieved through Vaccination Record Enquiry or can be viewed after login to vaccine recipient's eHS(S) Account.

2.8.7. **Smart Card Reader**

For clinics with more than one EHCP, one Smart Card Reader will be provided except when there is special need.

Doctors are encouraged to use the Smart Card Reader as an input measure of vaccine recipient's information into eHS(S) to avoid manual input error.



ECHP should explain to the vaccine recipient (or parent/ guardian) about the purpose of personal data collection and obtain consent to read the vaccine recipients personal data stored in the chip embodied in the Hong Kong Smart Identity Card. The vaccine recipient (or parent/ guardian) should insert the Hong Kong Smart Identity Card into the reader for the system to read the vaccine recipient's personal data. With the new and old Smart Hong Kong

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Identity Cards are being in use, vaccine recipients should be advised to insert the Smart Hong Kong Identity Card into the reader with the chip facing up.

2.8.8. Claiming vaccination subsidy

Having created an eHealth (Subsidies) [eHS(S)] Account, the eligible person can use the subsidy through any ECHP. The ECHP should go through the following steps to process vaccination subsidy claims.

- (1) Log in to eHS(S) and select the claim function;
- (2) if there are more than one enrolled practices, select practice to proceed;
- (3) search if validated eHS(S) Account of the vaccine recipient is available, if not, create a temporary recipient eHealth (Subsidies) Account by entering his details as required by the system. The ECHP is required to check the HKID/ birth certificate /other valid identity documents of the vaccine recipient to ensure eligibility;
- (4) if a validate eHS(S) Account is found, verify the details and then confirm the account;
- (5) if the person is holding a Hong Kong Identity Card (HKIC), it is necessary to **check the limit of stay of the person via the eHealth System (Subsidies) by inputting the HKIC symbol (i.e. A, C, R. or U).** For HKIC symbol A or R, the person is a permanent resident and eligible for vaccination subsidy. **For HKIC symbol C or U, it is required to ascertain the limit of stay is not expired** on the date of vaccination. The eHealth System (Subsidies) will check the limit of stay if C or U code is submitted. Real time result will be provided. If the limit of stay is expired, the eHealth System (Subsides) will block the reimbursement claim.
- (6) view eligible person's vaccination records in the eHS(S) and ascertain availability of subsidy for the eligible person to receive the vaccination;
- (7) verify the eligible person's past vaccination history and vaccination record, and decide whether the eligible person is clinically indicated for the vaccination;
- (8) provide the vaccination if subsidy is available for the eligible person and the eligible person is clinically indicated for the vaccination;
- (9) enter claim information such as the dose sequence of seasonal influenza vaccine administered (immediate submission of claims in the eHS(S) after vaccination is highly recommended. The contact phone number should also been entered into the

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eHS(S). Claims have to be submitted online WITHIN SEVEN CALENDAR DAYS (vaccination day is regarded as day 1) after delivery of service);

- (10) for eligible persons receiving pneumococcal vaccination, record whether eligible person is with or without high-risk conditions in the eHS(S);
- (11) print out the *Consent to Use Vaccination Subsidy Form* and ask the eligible person (or parent/guardian) to sign if *the Form* has not yet been collected;
- (12) for pregnant woman and elderly with high-risk conditions, ECHP are required to sign at the “*Consent to Use Vaccination Subsidy*” *Form* to confirm the “pregnancy” or “high-risk condition” status.
- (13) mark the system-generated “Transaction Number” on the signed *Consent to Use Vaccination Subsidy Form*; and
- (14) record the relevant details in the vaccination card for the recipient.
- (15) Post-payment check and future inspection will be randomly arranged. Hence, it is necessary to properly keep all the documentation, including
 - (a) the original signed *Consent to Use Vaccination Subsidy Form*, *Health Assessment Form*, and vaccination record; and
 - (b) maintain a master list or a register on those clients receiving vaccinations and using vaccination subsidies.

The eHS(S) Account can be retrieved only if the vaccine recipient is using the **same** identity document throughout the process of record creation and the subsequent claims. The ECHP has to cross check the electronic vaccination record in the eHS(S) with the vaccine recipient (or parent/ guardian) to prevent over-vaccination. Claim of more than two doses of the same vaccine will not be allowed in the eHS(S).

2.8.9. **Confirming transaction record**

If the claim is entered by the ECHP's delegates using “Data Entry Account”, the ECHP is required to login to eHS(S) at the end of each day using his SPID, password and authentication token to review and confirm the transaction records entered by his delegates. Upon confirmation by the ECHP, the information entered through the “Data Entry Account” will be submitted to the eHS(S). Confirmation procedure is not required if transaction claim is made using ECHP's account.

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Records/ transactions voided by the ECHP will not be submitted to the eHS(S).

All records/ transactions claimed/ voided can be reviewed at the “Claim Transaction Management” in the “Service Provider account”.

2.8.10. Voiding claims

The ECHP can void a subsidy claim through the “Claim Transaction Management” function in eHS(S) within 24 hours of making the claims. The concerned transaction record would be selected and marked as “voided”. The ECHP has to input the reason of voiding claims and click “confirm”. The eHS(S) will generate a “Void Transaction Number” for the voided claim.

2.8.11. Validation of temporary eHealth (Subsidies) Account information

The personal data of recipients entered will be validated through matching with database kept by the Immigration Department (ImmD). The input data will be validated at the end of each day. If the personal data cannot be validated with the database of the ImmD (e.g. the HKID number does not exist or the date of birth does not match with the HKID), eHS(S) will notify the ECHP to check and rectify the information accordingly. Amended information upon resubmission will be validated with the database of the ImmD again.

2.8.12. Rectification of temporary eHealth account information that failed validation

Upon receiving notification about failed validation of the “temporary” eHealth (Subsidies) Account, ECHPs are required to rectify the information in eHS(S) as soon as possible. Unless the eHS(S) Account information has been rectified and the “temporary” account is converted to a validated eHS(S) Account, the claims for the subsidy will not be processed and the claim will not be reimbursed.

In case of prolonged failure to rectify the temporary eHealth (Subsidies) Account information, the temporary eHealth (Subsidies) Account may be deleted by the eHS(S) and the claim related to the account in question may be voided.

2.8.13. Reimbursement

Reimbursement of subsidy claims would be performed on a monthly basis. At the end of each month, eHS(S) will generate payment files based on the transaction claims logged by

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eHS(S). eHS(S) will generate notification message to the ECHP (to the “Message Inbox” which will be accessible through login to eHS(S)).

ECHP can access eHS(S) for their monthly statements which contain details of the amount of reimbursement to them under VSS.

Reimbursement will be paid directly into the accounts designated by the ECHPs.

To effect payment, ECHPs are required to ensure that they have rectified information of temporary eHealth (Subsidies) Account that has failed validation with the database of ImmD. They are also required to check transaction records and confirm the entries that have been entered by their delegates using “Data Entry Account”.

To avoid delay in reimbursement, ECHPs are highly recommended to make claims IMMEDIATELY after the vaccination is provided for timely processing of claims. ECHPs are required to log in the eHS(S) for online submission of claims under the scheme “VSS”. Claims have to be submitted WITHIN SEVEN CALENDAR DAYS (vaccination day is regarded as day 1) after the delivery of vaccination service (both days inclusive) for online processing for reimbursement.

2.8.14. Authentication token

If the ECHP loses or damages the authentication token, he/ she should approach Vaccination Office for replacement. Administrative fee is required for replacement of lost/ damaged authentication token. Information on the amount of administrative fee is available at the CHP website.

After the identity of the ECHP has been confirmed, Vaccination office will suspend the old authentication token. A new token will be issued to the ECHP by registered mail after payment of administrative fee is settled.

Please note that authentication token should not be transferred to other parties for use.

2.8.15. Forgetting password

If the ECHP forgets his/ her password, he/ she should click “Can’t access to your account?” in the login page and enter the SPID, registered email address (which he/ she has provided during application for enrolment to the scheme) together with the token passcode into eHS(S).

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After validation, an email will be sent automatically by eHS(S) and a hyperlink will be provided to the website for the ECHP to reset the new password.

2.8.16. Locked account

An account will be locked after repeated unsuccessful attempts of login to the eHS(S). To unlock the account, ECHP should click “Can’t access to your account?” in the login page and enter the registered email address and token passcode.

After validation, an email with verification code will be sent automatically by eHS(S) to the registered email address. After correct input of verification code and the token passcode again, the account will be unlocked.

2.8.17. Accessing and editing personal information

ECHPs can access and retrieve their particulars, place of practice and bank information from the eHS(S) by login to the system (using the authentication token) and choosing “My Profile” function. Under this function, ECHPs can click the “System Information” tab to view and then “Edit” to change/ select their own username, default web interface language, printing option and web password.

2.8.18. Printing option

For the printing option, ECHP is advised to choose “Not to print” if pre-printed forms are already available in clinic. Even with this mode chosen, ad hoc printing for individual case will be allowed by eHS(S).

2.9 Amendment of particulars

Inform Vaccination Office of any change of information provided (e.g. bank information, address, fee schedule) by furnishing a Change Form (see **Section 4.2** of Chapter 4) (available at CHP website at <https://www.chp.gov.hk/en/features/45851.html>).

For change of address and information on service fee or adding an eligible group for providing vaccination service, send Change Form by fax to Vaccination Office. Notification of change of service fee should be made at least two working days beforehand so that the related information on VSS website may be amended in time.

For change of the registered medical organisation, fax Change Form to Vaccination Office to remove his/ her practice(s) under the “old” medical organisation from the scheme. Then send new Application Form and Authority for Payment to a Bank (available at CHP website at <https://apps.hcv.gov.hk/eform/main.aspx?lang=en>) and the supporting documentary proof for re-enrolment with the “new” medical organisation (registered mail recommended).

For change of bank account information, send Change Form by mail to CHP together with a new Authority for Payment to a Bank (available at CHP website at <https://www.chp.gov.hk/en/features/45851.html>) and the supporting documentary proofs. Acknowledgement will be given by CHP.

2.10 Withdrawal from VSS

An enrolled doctor has the right to leave VSS at any time. In that case, he/ she is required to furnish a Change Form (**Section 4.2** of Chapter 4) (available at CHP website at <https://www.chp.gov.hk/en/features/45851.html>) and fax to Vaccination Office. Upon receiving the notification, CHP will contact the doctor for confirmation and make arrangements for return of the logo and price poster.

Once a doctor has withdrawn from VSS, he/ she should remove the scheme logo from the clinic and not to claim reimbursement for any seasonal influenza vaccination and pneumococcal vaccination given afterwards. However, outstanding claims pending reimbursement will still be processed.

The withdrawn doctor should return any scheme equipment including the authentication token and Smart Card Reader provided by the Government for the purpose of the VSS. His/ her name, clinic addresses and telephone numbers will be removed from the enrolled doctor directory on CHP website.

If an enrolled doctor plans to cease practice, he/ she shall inform CHP using the Change Form at least one month before the practice ends and return any scheme equipment.

2.11 Suspension and Termination

CHP may suspend the Service Provider Account of an enrolled doctor or a particular practice under VSS if:-

- (1) the doctor or practice fail to meet the requirement of VSS;
- (2) the claims submitted by the doctor are under investigation; or
- (3) the practice is being ordered by any other Services of DH/ government departments to suspend the service.

CHP will inform the doctor in writing on the reason of suspension. Once a doctor or a practice has been suspended, the doctor should not provide any subsidized vaccination service to clients. No reimbursement will be made to any claims made during the suspension period. However, outstanding claims pending reimbursement will still be processed. The doctor will be informed in writing for lifting of the suspension.

DH may terminate the Agreement with an enrolled doctor and his/her associated organisation if:-

- (1) he/ she ceases to be so registered under the Medical Council;
- (2) he is being suspended from practicing as registered medical practitioner;
- (3) the Government is of the reasonable opinion that he/ she has failed to provide medical services in a professional manner or is otherwise guilty of professional misconduct or malpractice; or
- (4) the Government considers that he/ she has failed to comply with the provisions in the agreement or direction given by the Government.

CHP will inform the doctor and his/her associated organisation regarding the termination, make arrangement with the doctor for return of any Scheme Equipment, including the security tool and Smart Card Reader provided by the Government for the purpose of the VSS, and remove his name, clinic addresses and telephone numbers from the enrolled doctor directory from CHP website.

Once the enrolment of the doctor' and his/her associated organisation has been terminated, he/ she should remove the logo from the clinic and not to submit any reimbursement claims for vaccination service given afterwards. However, outstanding claims pending reimbursement will still be processed.

2.12 Post-payment check

CHP will conduct random checks of payments to detect possible abuse of the scheme. For monitoring purpose, enrolled doctors are required to retain vaccination records and the original *Consent to Use Vaccination Subsidy Forms* and *Health Assessment Forms* for at least seven years. Be prepared for calls from CHP and for providing relevant documents as required for checking. Medical records and vaccination records may need to be provided for verification of information. Doctors will be required to refund the subsidy reimbursed should an irregularity is detected. Randomly selected vaccine recipients will also be contacted for verification purpose.

2.13 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.

2.14 Data security and privacy

Enrolled doctors should be careful in handling personal data of clients. Keep the signed *Consent to Use Vaccination Subsidy Forms*, *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 unauthorized access, processing and use.