



National Health Service in Scotland  
Management Executive

St. Andrew's House  
Edinburgh EH1 3DG

10 November 1995

Dear Colleague

10852

**ENDING OF THE SCHOOLGIRL RUBELLA  
IMMUNISATION PROGRAMME**

**Summary**

1. In the light of the success of the recent school-based measles/rubella (MR) vaccine campaign the Minister of State has agreed, on the recommendation of the Joint Committee on Vaccination and Immunisation (JCVI), that the schoolgirl rubella immunisation programme should be ended immediately.

**Action**

2. General Managers are asked to ensure that Health Boards and NHS Trusts bring the contents of this letter to the attention of appropriate medical and nursing staff, including general practitioners. **In doing so, the action points set out in Annex A attached should be noted.**

**Background**

3. Last year Scotland participated in a UK-wide immunisation campaign to avert an expected measles epidemic (MELs(1994)89, 101 and 102 refer). In recommending the campaign, JCVI concluded that using measles/rubella (MR) vaccine in the campaign, together with the continuing high uptake of measles/mumps/rubella (MMR) vaccine in children at 12 to 15 months, would bring forward the elimination of rubella in pregnancy by about 5 years. They also concluded that a successful campaign using MR vaccine would have the further advantage of being able to allow the existing schoolgirl rubella programme to be ended.

4. The MR campaign was successfully implemented and in Scotland, as within other parts of the UK, very high levels of MR vaccine uptake were achieved. As a result, JCVI has now

**Addressees**

For action:

General Managers, Health Boards  
Chief Executives, NHS Trusts

For information:

General Manager, Common Services  
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General Manager, Health Education  
Board for Scotland  
Executive Director, SCPMDE  
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confirmed its recommendation that the routine schoolgirl rubella immunisation programme should be ended, subject to the two important provisions set out in Annex A.

Yours sincerely

A handwritten signature in black ink, appearing to read 'D R Steel', with a stylized flourish at the end.

**DAVID R STEEL**  
Head of Health Gain Division

**ACTION**

Health Boards are requested to end their schoolgirl rubella immunisation programmes immediately. **In doing so, the relevant authorities should:**

- (i) ensure that MMR vaccine is offered to any children of school leaving age (or when Tetanus/diphtheria (Td) or polio immunisation is offered) who have not been immunised, either through the school health or primary care services.; **AND**
- (ii) maintain their procedures to ensure that all women of childbearing age are both screened for rubella antibodies and offered immunisation where and when appropriate. Policy in this respect remains unchanged.

The action point at (i) will ensure that both boys and girls receive rubella vaccine, if missed before. The school leaving Td and polio booster immunisation referred to provides an opportunity to ensure that both boys and girls have been appropriately immunised against measles, mumps and rubella. The simultaneous administration of MMR with Td and polio vaccines is not contra-indicated. Attention is also drawn to the most recent guidance issued by the Department with regard to girls who may be pregnant (SOHHD/CMO(94)9 issued 27 September 1994).

The action point at (ii) indicates recognition of the importance of ensuring that all women are protected from rubella. Ending the schoolgirl rubella immunisation programme, therefore, puts an extra emphasis on the policy of immunising rubella susceptible women of childbearing age. Boards should consider whether these procedures need to be strengthened. Monovalent rubella vaccine is available to General Practitioners through arrangements made by Health Boards.