Directorate for Primary Care General Practice Division



Scottish Government Riaghaltas na h-Alba gov.scot

For Action Chief Executives

For Information Scottish General Practitioners Committee **GP** Practices

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Dear Colleagues

11 August 2022

The Vaccination Transformation Programme

1. I am pleased to announce the publication of The Primary Care (Vaccinations Transfer) (Scotland) Directions 2022 ("the Directions"). The Directions provide a framework for concluding the role played by most GP practices in delivering vaccinations and the ongoing arrangements for those practices required to continue vaccinating on a more permanent basis due to distance, inadequacy of means of communication, or other exceptional circumstances.

Notices to practices required to vaccinate

2. PCA(M)(2022)07 advised Health Boards to issue further interim notices under paragraph (1) of schedule 2A (vaccination services) of the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018¹ to those practices that would require to continue to provide vaccinations into the new financial year. This extended the period to 15 June 2022² by which point the Scottish Government anticipated that the Directions would have been published and the National Oversight Group would have made a final decision on the rural options appraisals by then allowing for final notices under paragraph (1) of schedule 2A (vaccination services) of the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018³ to be issued.

¹ Or as the case may be, schedule 3A of the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018

² The Scottish Government subsequently advised that interim notices be extended to 13 July 2022 and then to 10 August 2022.

³ Or as the case may be, schedule 3A of the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018

3. The following sections set out how practices that require to vaccinate on a time limited basis and practices that require to until notice is withdrawn by the Health Board should be notified.

Practices Vaccinating on a Time Limited Basis

4. The Directions provide that GP practices cannot be asked to provide vaccinations on a time limited basis beyond 1 April 2023. Health Boards are advised to issue notices those GP practices to cover this period. <u>PCA(M)(2022)07</u> set out the item of service fees which should be paid to these Transitional Practices. This is in addition to the practices' payments for historic vaccination activity which should be calculated as set out in <u>PCA(M)(2019)03</u>.

Practices Vaccinating until Notice is Withdrawn by the Health Board

5. Where the National Oversight Group has decided that a GP practice is required to continue delivering vaccinations by reason of distance, inadequacy of means of communication, or other exceptional circumstances, Health Boards should issue those practices an unlimited notice under either paragraph 1 of schedule 2A (vaccination services) of the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018 or paragraph 1 of schedule 3A of the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018 to vaccinate until the notice is withdrawn by the Health Board. The Directions provide a process for GP practices to request a review of this notice. PCA(M)(2022)07 set out the item of service fees which should be paid to these practices. This is in addition to the practices' payments for historic vaccination activity which should be calculated as set out in PCA(M)(2019)03.

Division of responsibility

6. The following sections outline the division of responsibility between General Practice and Health Boards for all aspects of vaccine delivery from 1 April 2023 or earlier if the service has already transferred.

Delivery

- 7. Health Boards are responsible for the delivery of all vaccinations and immunisations except in those instances where GP practices have been given notice to continue vaccinating. The vaccinations will include all those previously delivered by GPs and any future vaccination programmes as created or amended by the Chief Medical Officer. The Scottish Government and the Scottish GP Committee of the BMA (SGPC) will agree Item of Service fees for any new vaccination programmes created by the Chief Medical Officer for practices which have been given notice to continue vaccinating.
- 8. At the current time these vaccines include:

- (6 in 1) Dtap / IPV / Hib (1 year old)
- (6 in 1) Dtap / IPV / Hib (2 years old)
- (4 in 1) DTaP/IPV booster (5 years)
- COVID-19
- Flu (primary school aged children)
- Flu (secondary school aged children)
- Flu (at risk individuals)
- Flu (aged 65+)
- Hib / MenC booster (2 years old)
- HPV (12-13 years old) (Female)
- HPV (12-13 years old) (Male)
- HPV (13-14 years old) (Female)
- MenB (1 year)
- MenB booster (2 years)
- Meningococcal ACWY conjugate vaccine (MenACWY) (14-15 years)
- MMR(2 years old)
- MMR(5 years old)
- MMR(5 years old)
- PCV
- PCV booster Flu (2-3 years old)
- PPV
- Rotavirus (1 year)
- Shingles vaccination
- Whooping cough
- 9. Health Boards are also responsible for providing the following vaccinations for the purposes of travel or other specific purposes as provided in the Green Book:
 - Anthrax
 - Cholera
 - D.T.P
 - Hep A (adult)
 - Hep A (jr)
 - Hep A + B (3 dose course) (Twinrix Adult)
 - Hep A + B (3 dose course) (Twinrix junior)
 - MMR
 - Meningitis ACWY
 - Paratyphoid⁴
 - Poliomyelitis -
 - Rabies (IM)
 - Smallpox⁵

⁴ No vaccine currently exists for the immunisation of paratyphoid.

⁵ The smallpox vaccine exists but is not generally available.

- Tetanus⁶
- Typhoid

Appointments

- 10. Health Boards are responsible for arranging appointments for patients to be vaccinated and all associated administration (see exceptions below on updating and accessing records) unless GP practices have been given notice to continue vaccinating.
- 11. Where the service has transferred and GP practices are still currently arranging appointments for patients to be vaccinated despite not having received notices to continue vaccinating, Health Boards should ensure that this is discontinued by 1 October 2022 with appointments subsequently arranged by the Health Board.

Records

- 12. Where Health Boards do not use the Vaccination Management Tool (VMT) to record the vaccination event, existing arrangements for updating patient records for vaccinations will continue. Where this is done by practices, resourcing of this activity is covered by the payments GP practices receive for their historic role in delivering vaccinations. Resourcing of this activity is covered by the payments GP practices receive for their historic role in delivering vaccinations.
- 13. Where patients cannot access their vaccination records directly, GP practices will retain responsibility for providing vaccination records where held by the practice. Resourcing of this activity is covered by the payments GP practices receive for their historic role in delivering vaccinations.
- 14. The Scottish Government will review progress towards full Health Board recording of vaccinations delivered and providing vaccination records before 2023/24 and consider whether these arrangements are necessary beyond April 2023.

Travel Advice

15. Health Boards are responsible for accompanying travel vaccinations with the appropriate travel health advice. GPs will retain responsibility for providing advice about fitness to travel to patients where their clinical condition requires individual consideration.

Venues

16. It is the responsibility of Health Boards to secure vaccination venues and any use of GP practice premises should be by agreement.

⁶ Tetanus doses following a wound are likely to be given delivered as part of Community Treatment & Care Services.

Action

17. NHS Boards are asked to action this guidance and to bring this circular to the attention of all relevant staff and contractors.

Yours sincerely

TIM Mª RONNEL-

Tim Mcdonnell OBE Director of Primary Care Directorate

DIRECTIONS

NATIONAL HEALTH SERVICE (SCOTLAND) ACT 1978

The Primary Care (Vaccinations Transfer) (Scotland) Directions 2022

The Scottish Ministers give the following Directions in exercise of the powers conferred by sections 2(5) and 105(7) of the National Health Service (Scotland) Act 1978 (⁷) (the "1978 Act"), paragraph 1(10) of Schedule 2A of the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018 (⁸) and paragraph 1(10) of Schedule 3A of the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018 (⁹) and all other powers enabling them to do so.

PART 1

GENERAL

Citation and commencement

1. These Directions may be cited as the Primary Care (Vaccinations Transfer) (Scotland) Directions 2022.

2. These Directions come into force on 10 August 2022.

Application and interpretation

3.—(1) The provisions in these Directions apply to Health Boards in Scotland in relation to all notices issued by those Health Boards to—

- (a) a contractor which is a party to a general medical services contract with the Health Board, under paragraph
 (1) (requirement to provide vaccination services) of schedule 2A (vaccination services) of the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018,
- (b) a provider which is a party to a primary medical services section 17C agreement with the Health Board, under paragraph (1) (requirement to provide vaccination services) of schedule 3A (vaccination services) of the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018.

(2) In these Directions—

"area medical committee" has the meaning given in section 9 of the 1978 Act,

"notice recipient" means a contractor which is a party to a general medical services contract or a provider which is a party to a primary medical services section 17C agreement, which has received a notice to which these Directions apply,

"options appraisal" means a process for considering whether, by reason of distance, inadequacy of means of communication, or other exceptional circumstances, the Health Board will have serious difficulties in delivering any vaccination service to the notice recipient's patients,

"practice area" -

(a) in respect of a contractor which is a party to a general medical services contract, has the meaning given in the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018

⁷ 1978 c29

⁸ SSI 2018/66

⁹ SSI 2018/67

(b) in respect of a provider which is a party to a primary medical services section 17C agreement, has the meaning the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018,

"second Health Board" means a Health Board that is not a party or prospective party to the unlimited notice,

"time-limited notice" means a notice issued under direction 4(2)(a),

"unlimited notice" means a notice issued under direction 4(2)(b),

"vaccination services"-

(a) in respect of a contractor which is a party to a general medical services contract, has the meaning given in the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018

(b) in respect of a provider which is a party to a primary medical services section 17C agreement, has the meaning given in the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018.

Notices

4.—(1) A notice to which these Directions apply must state the particular vaccination services which the notice recipient is to provide as a consequence of the notice.

(2) A notice to which these Directions apply must state—

- (a) that the notice recipient is to provide vaccination services until a specified date (a "time-limited notice"), or
- (b) that the notice recipient is to provide vaccination services until the notice is withdrawn by the Health Board (an "unlimited notice").
- (3) A time-limited notice must specify a date no later than 1 April 2023.

Options Appraisals

5.—(1) An unlimited notice under direction 4 may not be issued unless—

- (a) an options appraisal has been completed by the Health Board in respect of the particular vaccination services which are to be provided by the notice recipient as a consequence of the notice,
- (b) the notice recipient was consulted by the Health Board during that options appraisal,
- (c) representatives of a second Health Board were consulted by the Health Board during the options appraisal to give their view on whether they consider that the Health Board is correct to conclude that, by reason of distance, inadequacy of means of communication, or other exceptional circumstances, the Health Board will have serious difficulties in delivering any vaccination service to the notice recipient's patients,
- (d) the GP sub-committee of the area medical committee was consulted by the Health Board during the options appraisal,
- (e) the Health Board has afforded people living in the notice recipient's practice area an opportunity to comment during the options appraisal,
- (f) the Health Board has notified the Scottish Ministers of the conclusions of the options appraisal, and
- (g) the Scottish Ministers have notified the Health Board that they accept the conclusions of the options appraisal.

(2) For the purposes of direction 4, the Health Board may issue an unlimited notice on the basis of a single options appraisal which was conducted to consider service provision by multiple notice recipients, provided that each of the conditions in direction 5 is met in respect of each notice recipient.

(3) For the purposes of direction 4, the Health Board may issue an unlimited notice on the basis of a single options appraisal which was conducted to consider the provision of multiple services, provided that each of the conditions in direction 5 is met in respect of each service.

(4) Before notifying the Health Board of their acceptance of the conclusions of an options appraisal, the Scottish Ministers must consult such persons as appear to them to be representative of general medical services contractors and primary medical services providers.

(5) The Health Board must record all evidence used in an options appraisal.

(6) The Scottish Ministers may request sight of the evidence when considering an options appraisal.

Reviews

6.—(1) The requirements of this direction apply where a notice recipient requests a review of an unlimited notice issued to them under—

- (a) paragraph 1(7) of schedule 2A of the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018, or
- (b) paragraph 1(7) of schedule 3A of the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018.

(2) Before providing the notice recipient with a written statement of the outcome of the review in accordance with paragraph 1(9)(c) of schedule 2A of the National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018, or paragraph 1(9)(c) schedule 3A of the National Health Service (Primary Medical Services Section 17C Agreements) (Scotland) Regulations 2018, the Health Board must send the draft statement to the Scottish Ministers.

(3) The Health Board may not issue its written statement of the outcome of the review unless the Health Board has been notified by the Scottish Ministers that the Scottish Ministers accept the outcome of the review.

(4) Before notifying the Health Board of their acceptance of the outcome of the review, the Scottish Ministers must consult such persons as appear to them to be representative of general medical services contractors and primary medical services providers.

(5) The Health Board must record all evidence used in a review of an unlimited notice.

(6) The Scottish Ministers may request sight of the evidence when considering the review of an unlimited notice.

Edinburgh 11 August 2022 *Tim Mcdonnell OBE* authorised signatory on behalf of the Scottish Ministers Primary Care Directorate