



UK Health
Security
Agency



Adolescent vaccination programme

Briefing for secondary schools

This leaflet explains the NHS adolescent vaccination programme delivered to young people in secondary schools and the important role that schools play in its successful delivery.



We are very grateful for the support of schools in hosting vaccination sessions and in enabling communications to parents and young people to support the consent process. Delivering the programme through schools makes it more accessible to pupils, ensures timely protection, reduces inequality and results in higher vaccine uptake.

Three vaccines are routinely offered to young people as part of a long-standing programme to protect them from serious and life-threatening preventable diseases: the HPV vaccine (which helps protect against cancers caused by the human papillomavirus (HPV)), the MenACWY vaccine (which helps protect against meningococcal groups A, C, W and Y which can cause meningitis and septicaemia), and the 3 in 1 teenage booster (which protects against tetanus, diphtheria and polio).

The measles, mumps and rubella (MMR) vaccine is also offered as a catch-up programme to young people if they have missed any doses when they were younger.

In the autumn term flu vaccination is also offered as part of the Government's wider winter planning to reduce transmission and illness from flu, and its potential impact on the NHS.

During the COVID-19 pandemic, for a number of reasons, the number of young people getting their routine vaccinations fell. It is essential that young people who missed out, as well as the newly eligible, are offered this important protection. This will help protect young people and the wider community against serious illness at a time when we are seeing the return of vaccine preventable illnesses circulating amongst the unvaccinated.

The school aged immunisation service teams have been offering catch-up opportunities to maximise vaccination uptake amongst those school aged children who remain unvaccinated. These teams may contact schools to book additional catch-up visits or may be offering any missed vaccinations alongside other routine school aged vaccinations offered in Years 8 and 9.

To maximise opportunities to get young people vaccinated, it is important that there are robust processes in place for identifying eligible children and obtaining consent via the appropriate routes.

The immunisation team will be sending consent forms to parents and will also allow young people to self-consent if, after assessment, they are deemed competent to do so. Some immunisations teams may use e-consent forms which will be sent to parents to complete. Schools play a vital role in ensuring that all eligible children in school have been identified and had the opportunity of an offer for the vaccine that they require.

Benefits to schools

- vaccines help provide a healthy environment through the reduction of vaccine preventable diseases in schools and in the wider community, including amongst the children's immediate and extended family
- vaccines reduce the likelihood of outbreaks in schools
- vaccines protect children which in turn reduces pupil and staff absenteeism rates



Frequently asked questions

What vaccines are offered to young people?

The flu vaccine is an annual vaccination programme offered to those in Years 7 to 11. It helps protect those who receive it and reduces transmission of flu to the wider community. Most young people are offered a nasal spray vaccine which is quick and easy to administer and is the preferred flu vaccine for children and young people. A small number of children cannot have the nasal spray because of pre-existing medical conditions or treatments and are offered protection through an injected vaccine instead. The nasal vaccine contains a very small amount of highly processed porcine gelatine to keep the vaccine stable. For those who may not accept the use of porcine gelatine in medicines, a flu vaccine injection is available that does not contain gelatine.

The HPV vaccine is offered to boys and girls in Year 8 to protect against genital warts and HPV-related cancers such as cervical cancer, other genital cancers and cancers of the head and neck. Only one dose of HPV vaccine is now required to protect against HPV infection in this age group (unless individuals have specific health reasons, such as a severely weakened immune system, which may mean they require 3 doses).

The MenACWY vaccine is offered to young people in Year 9 and protects against meningitis (inflammation of the lining of the brain and spinal column) and septicaemia (blood poisoning) caused by meningococcal groups A, C, W and Y.

The 3 in 1 teenage booster is offered to young people in Year 9 and boosts protection against tetanus, diphtheria and polio. This is the final dose in a course of routine vaccines against these diseases and protects the young person into adulthood.

Ahead of vaccination sessions, **the MMR vaccine** status of the young person should be checked to see if any doses have been missed earlier in childhood. This vaccine is needed to provide protection against measles, mumps and rubella. If a dose has been missed this will be given by the school-aged immunisation team if they are able to, or a referral made to the young person's registered General Practice. It is particularly important that young people are protected against these diseases before they leave school and mix with others, e.g. University, college, armed forces, places of work etc.

When does the vaccination take place?

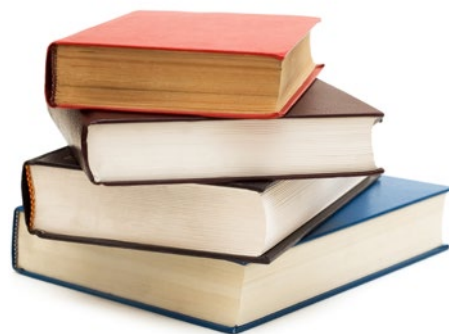
Flu vaccination takes place in the autumn term. This is to make sure that young people are vaccinated before the flu virus circulates.

The other vaccines can be given at any time during the school year. Your school aged immunisation service will let you know when the other vaccinations will be offered. In some instances, it may be that the flu vaccination is provided at the same time as other vaccines such as HPV.

Why does it matter if some young people are not vaccinated?

When a high percentage of the population is vaccinated, it is difficult for infectious diseases to spread, because there are not many people who can be infected. This is called 'herd immunity' and it gives protection to vulnerable people such as newborn babies, elderly people and those who are too sick to be vaccinated.

Herd immunity only works if most people in the population are vaccinated. Even with relatively high vaccination rates in England as a whole, this hides the fact that rates are much lower in some parts of the country and in some communities. If a young person lives in an area where vaccine coverage is low and they are not vaccinated, it's quite likely that many of the people they come into contact with will not be vaccinated either. If one of these people gets an infectious disease like measles, they can easily pass it on to the other unvaccinated people around them, and in some cases the disease can then spread very quickly through the population.



How can schools help to facilitate a successful vaccination programme?

The school aged immunisation team will try and keep disruption to a minimum and will only ask you to do the things that they cannot do themselves.

As in previous years, schools will be asked to:

- ✓ work with the team to agree the best approach for implementing the programme in your school
- ✓ nominate a named contact to liaise with the team
- ✓ agree dates for the routine vaccination sessions or catch-up sessions as required
- ✓ provide class lists with contact details to support the offer to eligible young people
- ✓ agree a process for providing parents/guardians with the invitation letter, information leaflet and consent form
- ✓ encourage young people and their parents/guardians to look out for the consent form and return it by an agreed time
- ✓ send reminders through your usual channels such as email or text distribution lists, parent newsletters, visual display screens, parent evenings
- ✓ communicate these key public health programmes delivered in school on your website
- ✓ let parents know which day vaccinations will take place
- ✓ let young people know what will happen and answer any questions that they or their parents have on the logistics and date of vaccinations

Other practical considerations include:

- ✓ provide a suitable location for the vaccination to take place such as the school hall or large classroom
- ✓ ensure the immunisation team can access the agreed space before the vaccinations are due to start, so they can set-up

Who will be giving the vaccine to the young people?

The programme will be delivered by an NHS commissioned immunisation team which may include nurses, healthcare support workers, administrative staff, and other associated professionals who specialise in delivery of school-aged vaccinations. The team will administer the vaccination according to nationally set standards. Staff will have appropriate qualifications and training, including safeguarding training. All staff will be DBS cleared.

How will parent/guardian consent be obtained?

Information about the vaccination and a consent form will be provided by the immunisation team to seek parental consent. You may be asked to collect these forms from parents on behalf of the immunisation team or it may be done electronically. It is the responsibility of the immunisation team, not the school, to obtain the appropriate consent. However, it is really key to have the support of schools to remind parents to complete and return their consent form in a timely manner. Parents will also be provided with a contact number to call the immunisation team in case of any queries. Forms should be returned by the deadline agreed with the team.

Who decides whether a young person receives a vaccination?

Parents or guardians with parental responsibility make this decision, some young people may also have sufficient maturity to provide their own consent (known as “Gillick-competency”). It is therefore worth reminding parents of the importance of completing the consent form they are sent ahead of the scheduled vaccination session and ideally discuss this with their child.

If the parents have not returned the consent form, every effort will be made to contact the parent to seek their verbal consent. Some children may be sufficiently mature to provide their own consent if they express a wish to have a vaccine on the day of the session. If the parent cannot be contacted, the immunisation team will speak to the young person to determine if they are Gillick-competent and will be responsible for assessing the appropriateness of administering the vaccine.

Where the parent has declined consent to vaccination, a young person who is assessed as having sufficient maturity to provide their own consent (Gillick-competent), can do so.

Where someone aged 16 or 17 years old consents to vaccination, or is younger and is determined Gillick-competent, a parent cannot override that consent. If the health professional giving the immunisation feels the young person is not Gillick-competent then the consent of someone with parental responsibility would need to be sought before vaccination can proceed. If a person aged 16 or 17 years old or a Gillick-competent child refuses treatment that refusal should be accepted, even where the parent has provided consent.

Parents should be encouraged to speak to their children so that there is agreement on consent wherever possible, in advance of the vaccination session.

How else could the school support the programme?

Schools have a key role to play in promoting uptake of the immunisation programme because of the relationship you have with the parents and young people. Vaccinations are included in the health education curriculum as part of the 'health and prevention' topic at primary and secondary school. It is also a statutory requirement that pupils should be taught the facts and science relating to allergies, immunisation and vaccination.

The UK Health Security Agency have developed a range of teacher resources on germs and bacteria to support learning about microbes, infection prevention and control, antibiotics and vaccination. These resources are available on [e-Bug](#). There is also a lesson on the HPV vaccine co-produced by young people and researchers from the University of Bristol and London School of Hygiene and Tropical Medicine available freely through the [PSHE Association website](#).

Please use all your communication channels to help promote uptake and share this leaflet with staff in your school.

Are the information leaflets available in other languages?

There are NHS leaflets and posters which provide more information on the vaccines offered in adolescence which are aimed at young people. Most of these are available in multiple languages and are free of charge. If there are a number of parents at the school for whom English is not their first language, let the immunisation team know and they may be able to provide translated versions of materials. Some leaflets are also available in Braille, British Sign Language (BSL), audio, large print and simple text. See final page for further information on these resources.

Does GDPR change how information is shared?

The General Data Protection Regulation (GDPR) became UK law in 2018. No change is needed to the ways in which young people's personal information is used and shared by schools with the school aged immunisation service for the purpose of providing vaccinations for this to be lawful under the UK Data Protection legislation.

Schools do not have to obtain the prior consent of young people or their parents or guardians to lawfully share personal information from school rolls with the school aged immunisation service providing vaccinations.

The schools' privacy notices provided to parents and pupils should set out the lawful bases for processing personal data and which other organisations process personal data and why. The sharing of contact details and medical information with the NHS, local authorities and other government bodies including public health agencies (related to the provision of vaccination services) should be covered in such privacy notices.

What about those young people who miss the vaccination session in school?

Young people who missed their HPV, MenACWY or teenage booster vaccine remain eligible and the immunisation team will provide opportunities for catch-up either as an additional visit to schools or as a community clinic appointment. Parents will be written to by the immunisation team to inform them of these catch-up opportunities or they can also contact the team to make an appointment.

GP practices are also contracted to offer these vaccinations. Children from the age of 14 who have missed their HPV, MenACWY and 3 in 1 teenage booster vaccines can receive these at their GP practice.

With the flu vaccine, any pupils who miss the session at school will be provided with further opportunities to get the vaccine (which may be at an alternative venue), the school aged immunisation service will be able to provide further details. For the small number of pupils who may be at increased risk from flu because of underlying health conditions, their parents have the option of requesting the vaccine from their GP practice if they prefer.

What if a young person becomes unwell?

If the immunisation team is still on site, seek advice directly from them. If the team have left the site, manage the situation according to existing policies for pupil sickness in school and contact the immunisation team to ensure they are aware and can report any event related to the timing of administration of the vaccine.

Can teachers get a flu vaccine?

The nasal flu vaccine is not licensed for adults and teachers are not able to get a vaccine through the school aged immunisation programme.

Some staff will be entitled to a free NHS flu injectable vaccine if they have certain medical conditions that put them at risk from flu or are pregnant. Eligible staff should contact their GP practice or a participating pharmacy. See www.nhs.uk/flujab for further information.

Schools may choose to provide flu vaccines for staff through an occupational health provider. Schools can also access this [CCS framework](#) for flu vaccine vouchers or on-site provision of flu vaccines at competitive rates.

Staff who are uncertain about their vaccination status for flu or the other vaccines should discuss this with their GP practice.

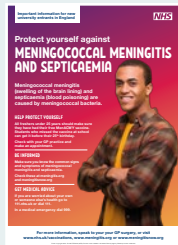
Young people are offered the following vaccines in secondary school:

Vaccine	School year offered	Diseases protected against
Flu vaccine	Annual vaccine offered to all in Years 7 to 11	Protects against flu, which can lead to acute bronchitis and pneumonia
Human papillomavirus (HPV) vaccine	Year 8	HPV related cancers such as cervical cancer, some cancers of the head and neck, some genital cancers and genital warts
MenACWY vaccine	Year 9	Meningococcal groups A, C, W and Y (which can cause meningitis and septicaemia)
3 in 1 teenage booster (Td/IPV)	Year 9	Tetanus, diphtheria and polio
MMR – for those that have not had 2 doses of MMR	Catch-up – offered opportunistically	Measles, mumps and rubella



Further information on supporting immunisation in education and child care settings, including colleges and universities can be found at: www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/supporting-immunisation-programmes

Information resources for parents and young people



MenACWY vaccination

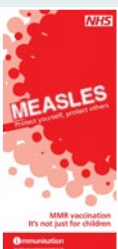
Leaflet: 'Protect yourself against meningitis and septicaemia: Have the MenACWY vaccine'

GOV.UK: www.gov.uk/government/publications/menacwy-vaccine-information-for-young-people

NHS Website: www.nhs.uk/conditions/vaccinations/men-acwy-vaccine

Poster: "Protect yourself against meningococcal meningitis and septicaemia". Information for students in schools and sixth form colleges.

GOV.UK: www.healthpublications.gov.uk/ViewProduct.html?sp=Smeningitisandsepticaemiaa3poster-514



Measles, mumps and rubella (catch-up) vaccination

Leaflet: 'Measles: Protect yourself, protect others'

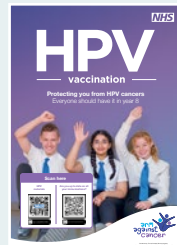
www.gov.uk/government/publications/measles-protect-yourself-protect-others

Flyer: 'Measles: Don't let your child catch it'

www.gov.uk/government/publications/measles-dont-let-your-child-catch-it-flyer-for-schools

NHS website: www.nhs.uk/conditions/vaccinations/mmr-vaccine

Translations are available



HPV vaccination

Leaflet: 'HPV vaccination – Protecting against HPV infection to help reduce your risk of cancer', also available in translated versions and British Sign Language from:

Leaflet: 'Easy Read Guide to the HPV vaccination' www.gov.uk/government/publications/hpv-vaccine-vaccination-guide-leaflet

Poster: 'Don't forget to have your HPV vaccination' www.gov.uk/government/publications/hpv-vaccination-programme-from-september-2014-poster

NHS Website: www.nhs.uk/conditions/vaccinations/hpv-human-papillomavirus-vaccine

EDUCATE resource: pshe-association.org.uk/resource/educate-hpv-vaccine



Flu vaccination programme

Leaflet: 'Protect yourself against flu', available in translated versions, braille, audio, and British Sign Language.

GOV.UK: www.gov.uk/government/publications/flu-vaccination-leaflets-and-posters

NHS Website: www.nhs.uk/child-flu

Poster: 'Five reasons to have the flu vaccine', also available in multiple languages.



3-in-1 teenage booster (tetanus, diphtheria, polio)

Leaflet: 3-in-1 teenage booster

GOV.UK: www.gov.uk/government/publications/a-guide-to-the-3-in-1-teenage-booster-tdipv

NHS website: www.nhs.uk/conditions/vaccinations/3-in-1-booster-questions-answers



www.nhs.uk/vaccinations

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