



2021/22

Vaccination Subsidy Scheme

**Overview of
Vaccination Subsidy Scheme (VSS) 2021/22**

July 2021



衛生署
Department of Health

Overview of Vaccination Subsidy Scheme (VSS) 2021/22

Outline

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2. VSS arrangement in 2021/22
3. Roles and Responsibility of Enrolled Doctors
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1. 2020/21 Vaccination Statistics

Number of doses of Seasonal Influenza Vaccination (SIV) administered to target groups of various vaccination programmes

Government Vaccination Programme (GVP)	Vaccination Subsidy Scheme (VSS)	School Outreach Vaccination (Free of charge)	Total number of doses administered in 2020/21	Compared to 2019/20
546 200	527 000 (+4% compared to 2019/20)	250 800	1 324 000	-5.0%

(as at 27 June 2021)

1. 2020/21 Vaccination Statistics

Number of persons (and % of the persons in the target group) who received SIV under GVP, VSS and school outreach (free of charge)

Target group	Number of vaccine recipients (% of the persons in the target group) in 2020/21 (As at 27 June 2021)
Children aged 6 months to <6 years	115,100 (38.2%)
Children aged 6 to <12 years	220,300 (60.2%)
Persons aged 50 to 64 years	222,000 (12.3%)
Persons aged 65 years or above	614,700 (44.7%)
Others	122,000

Number of elderly (and cumulative %) who received a dose of 23vPPV or PCV13 under GVP and VSS

- Number of vaccine recipients: 68,200 (in 2020/21, as at 27 June 2021)
- Cumulative % of surviving elderly, among elderly population, who had received 23vPPV or PCV13 under the programmes since 2009: 45.8% (as at 28 Feb 2021)

2. VSS arrangement in 2021/22 – SIV

<u>Eligible groups</u>	Checking eligibility (HK residents)
Persons aged 50 to 64 years	50 years or older in that year
Elderly (aged 65 or above)	65 years or older in that year
Children aged 6 months to under 12 years (or attending primary school)	Photocopy of student handbook or student card (for primary school students aged 12 or above)
Pregnant Women	Pregnancy status confirmed by the enrolled doctor on the consent form
Persons with intellectual disability	One of the following document proof: <ul style="list-style-type: none"> • Registration Card for People with Disability (with indication of intellectual disability*) • Medical Certificate • Certificate issued from designated PID institutions *The term "mentally handicap" is also accepted
- Persons receiving disability allowance* - Recipients of standard rate of “100% disabled” or “requiring constant attendance” under Comprehensive Social Security Assistance (CSSA) Scheme of SWD ^	- *Approval letter for Disability Allowance issued by Social Welfare Department (SWD) - ^ “Certificate of CSSA Recipients (for Medical Waivers)” issued before 15 Dec 2018; or the new Annex page of “Notification of Successful Application” / “Notification of Revision of Assistance” AND sign a self-declaration form provided at VSS clinics

2. VSS arrangement in 2021/22 – SIV

VSS Clinics or VSS Outreach Vaccination

- Subsidy level: **HK\$240** each dose for persons eligible under VSS
- Enrolled doctors may charge extra fee

VSS School Outreach (Extra charge allowed)

- **School children** (regardless of HK resident status) of participating primary schools (including primary section of special schools, kindergartens, kindergarten-cum-child care centres, child care centres will be subsidised
- **School staff/ family members** of students can also join the activity
- Eligible persons will be subsidised (HK\$240 per dose)
- Those ineligible under VSS can be vaccinated at their own costs

2. VSS arrangement in 2021/22 – Pneumococcal Vaccination

Subsidy level

- 23-valent pneumococcal polysaccharide vaccine (23vPPV) - **HK\$300** per dose
- 13-valent pneumococcal conjugate vaccine (PCV13) - **HK\$760** per dose
- Enrolled doctors may charge extra fee

Type of pneumococcal vaccine to provide

	Has not received any pneumococcal vaccination	Has received 23vPPV	Has received PCV13	Has received both PCV13 and 23vPPV
<u>Without</u> high-risk conditions	One dose of 23vPPV	Not needed	Not needed	
<u>With</u> high-risk conditions	One dose of PCV13 One dose of 23vPPV one year after	One dose of PCV13 (one year after the previous 23vPPV)	One dose of 23vPPV (one year after the previous PCV13)	Not needed

2. VSS arrangement in 2021/22 – Pneumococcal Vaccination

List of high-risk conditions of severe invasive pneumococcal diseases

- History of invasive pneumococcal disease;
- Immunocompromised states:
 - ◆ Asplenia, HIV /AIDS , primary immunodeficiency
 - ◆ Immunodeficiencies related to malignancies and transplantation
 - ◆ Immunodeficiencies related to use of immunosuppressive drugs / systemic steroid
- Chronic disease
 - ◆ Chronic cardiac, pulmonary, liver or renal disease
 - ◆ Diabetes mellitus or Cerebrospinal fluid leakage
- With cochlear implants

Under VSS, elderly with chronic metabolic diseases, obesity (BMI 30 or above), chronic neurological conditions that can compromise respiratory functions, the handling of respiratory secretions, increase the risk for aspiration or those who lack the ability to take care of themselves are eligible for subsidised pneumococcal vaccination

3. Roles and Responsibility of Enrolled Doctors

Eligibility to enroll (or continue enroll) in VSS

- VSS doctors have to be listed in the **Primary Care Directory** (PCD)
 - ◆ www.pcdirectory.gov.hk for information
- For maintenance in the PCD, doctors need Continuing Medical Education (**CME**)
 - ◆ Specialists: should be in Specialist Register
 - ◆ Non-specialists:
 - join the “CME programme for practising doctors who are not taking CME for specialists” of **the Medical Council of Hong Kong**
 - accumulate the required CME points for obtaining the yearly CME certificate or become qualified to quote the title “CME-Certified”

3. Roles and Responsibility of Enrolled Doctors

Overall role and responsibility

- It is the prime responsibility of all doctors to ensure **safety and quality** of vaccination service, at clinics or outreach settings

Supervision

- Enrolled doctors should
 - ◆ **Train and supervise** the staff providing the vaccination service
 - ◆ **Be present** at the vaccination venue if possible, and should be personally and physically reachable in case of emergency
 - ◆ **Retain personal responsibility** for treatment of patients/ vaccine recipients

3. Roles and Responsibility of Enrolled Doctors

Preparation of vaccines and equipment

- Place order for vaccines **early with pharmaceutical manufacturer/supplier**
- Provide vaccination before the influenza peak season
- Proper **vaccine storage** and maintain cold chain
- Consent Forms, Health Assessment Form, Vaccination Card,
- Plan for clinical waste disposal
- **VSS Doctors' Guide** (<https://www.chp.gov.hk/en/features/45838.html>)
- **Recommendation from Scientific Committee** on Vaccine Preventable Diseases (<https://www.chp.gov.hk/en/static/24008.html>)
- Infection control guidelines (<https://www.chp.gov.hk/en/resources/346/index.html?f=13>)

3. Roles and Responsibility of Enrolled Doctors

Screen for contraindication and check vaccination history

- Check the recipient's identity and eligibility
- Check vaccination record/ history
- Interval of at least 14 days between SIV/ pneumococcal vaccine and COVID-19 vaccine (BNT162b2 or Coronavac)

Will update guidelines when new recommendation is available

- Obtain consent
- Check recommendation, dosage, expiry date, contraindications and precautions
- Provide information and explain to vaccine recipient
- For PCV13 vaccination, perform health assessment to confirm high-risk condition and sign on the consent form

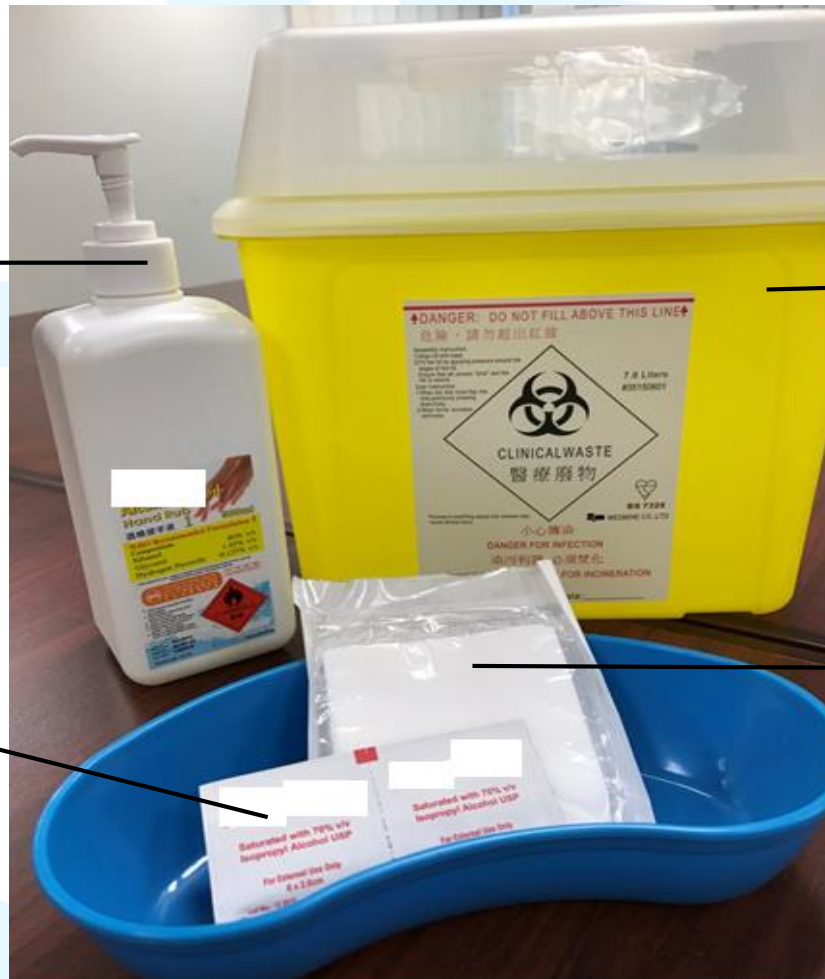
4. Preparation, Procedures and Vaccination Skills

Vaccination equipment/ consumables

- **Ensure they are not expired**

70-80 %
Alcohol-
based
Handrub

Alcohol
Preps



Sharps
Box

Dry
clean
Gauze

4. Preparation, Procedures and Vaccination Skills

Prepare for emergency situations

- Qualified personnel to standby to provide **timely intervention**
- Ensure all emergency **equipment** (e.g. Bag Valve Mask, BP monitor) is **sufficient**, and emergency **drugs** (e.g. adrenaline auto injector or adrenaline ampoule + **1 ml Syringe**) are **not expired**
- Keep written protocol and training materials for reference



**Written protocol for
emergency management**

4. Preparation, Procedures and Vaccination Skills

Hand hygiene practice

<https://www.youtube.com/watch?v=YGSbWriRI6U&feature=youtu.be>



4. Preparation, Procedures and Vaccination Skills

Infection control

- Use **70-80%** alcohol-based hand rub for hand hygiene
- For skin disinfection, wipe the skin area from **centre outwards**, without touching the same area repeatedly
- Use new alcohol prep/ swab for skin disinfection and allow the site to **DRY** completely before vaccination
- Use clean gauze for post vaccination compression of injection site
- Additional measures for LAIV
- Preventive measures for COVID-19
 - Social Distancing
 - Face mask
 - Temperature checking
 - Disinfection of environment and working area

4. Preparation, Procedures and Vaccination Skills

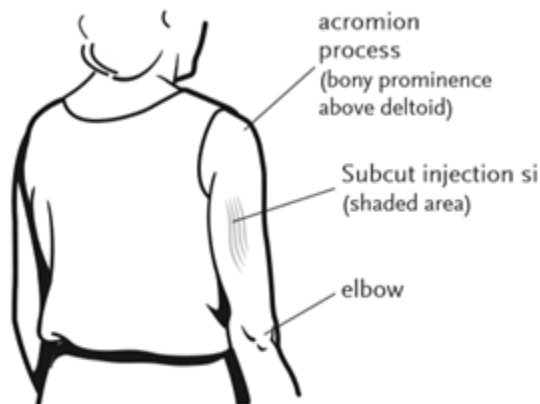
3 checks and 7 rights before vaccination

- **3 Checks:**
 - ◆ Check when taking out vaccine from storage
 - ◆ Check before preparing the vaccine
 - ◆ Check before administering the vaccine
- **7 Rights:**
 - ◆ Right recipient
 - ◆ Right vaccine
 - ◆ Right dosage
 - ◆ Right time (e.g. correct age, correct interval, **vaccine not expired**)
 - ◆ Right site
 - ◆ Right route, needle length and technique
 - ◆ Right documentation

4. Preparation, Procedures and Vaccination Skills

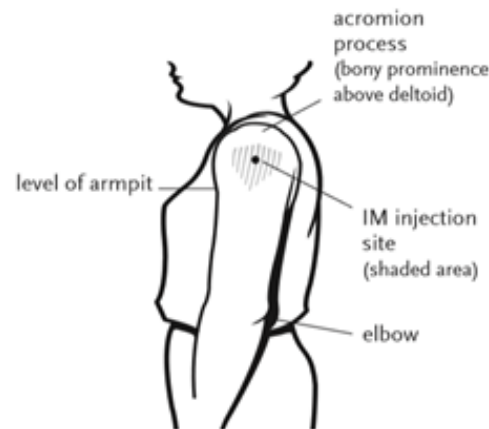
Vaccination skills

Fatty tissue over triceps



Insert needle at a 45° angle into the fatty tissue overlying the triceps muscle. Make sure you pinch up on the subcutaneous tissue to prevent injection into the muscle.

Deltoid muscle of arm



Give in the central and thickest portion of the deltoid muscle – above the level of the armpit and approximately 2–3 fingerbreadths (~2") below the acromion process. See the diagram. To avoid causing an injury, do not inject too high (near the acromion process) or too low.

Anterolateral thigh muscle



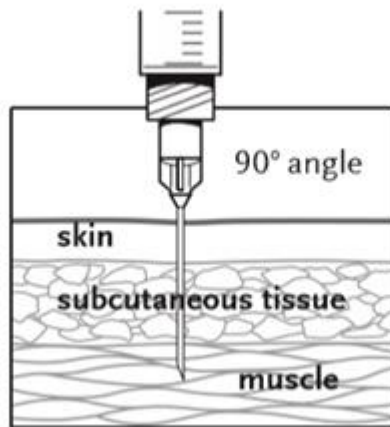
Insert needle at a 90° angle into the anterolateral thigh muscle.

Source: Immunization Action Coalition (IAC), U.S.A.

4. Preparation, Procedures and Vaccination Skills

Vaccination skills

Intramuscular (IM) injection

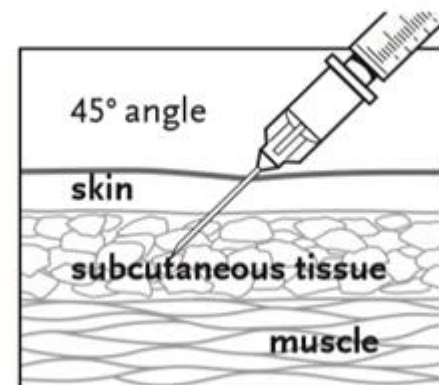


Source: Immunization Action Coalition (IAC), U.S.A.

Intranasal injection



Subcutaneous (SC) injection



Source: Immunization Action Coalition (IAC), U.S.A.

4. Preparation, Procedures and Vaccination Skills

Prevention of sharps injuries

- Ensure that the recipient is adequately prepared
- **Avoid recapping** needles
- Discard used sharps **directly after use** and dispose them into a robust sharps box
- Place the sharps box **within arm's reach**
- Seal and replace sharps container when three-quarters full

Proper disposal of clinical waste

- Clinical waste should be properly handled and disposed in accordance to EPD's Waste Disposal (Clinical Waste) (General) Regulation.

5. After Vaccination

Documentations

- **Vaccination record/ clinic log** for record tracing or checking
 - ◆ Contents: recipients' identity, vaccine type / date / expiry date / lot number of vaccine, name of personnel who administered the vaccine, etc.
- **Recipients' self-held vaccination card**
 - ◆ Contents: name of vaccine recipient, name of vaccine given, date of vaccination and name of vaccine provider

Advise on arrangement of second dose of SIV

- For children aged below 9 years and have never received seasonal influenza vaccine before

5. After Vaccination

After vaccination, observation for 15 minutes

Adverse event following immunisation (AEFI)

- report any suspected AEFI which are serious, non-serious but deemed medically significant by the healthcare professional, or unexpected, to the Pharmacovigilance Unit of the Drug Office, Department of Health.

https://www.drugoffice.gov.hk/eps/do/en/healthcare_providers/adr_reporting/adr_report_form.html

Emergency management

- Standby for emergency management
- Provide emergency treatment
- Call ambulance and refer to hospitals as necessary

Management of clinical incident

The screenshot shows the 'Adverse Drug Reactions (ADR) Online Reporting' form. The page header includes the Drug Office logo and the text 'Department of Health, The Government of the Hong Kong Special Administrative Region'. The form is titled 'Adverse Drug Reactions (ADR) Online Reporting' and includes a warning: '** Please DO NOT use this report form for reporting COVID-19 Vaccine adverse event.' The form is divided into two sections: 'Section (A): Patient Information' and 'Section (B): About the Adverse Drug Reaction'. Section (A) includes fields for 'Patient initials or ref. no.', 'Sex', 'Weight', 'Date of birth', and 'Ethnic group'. Section (B) includes fields for 'Date of onset of ADR', 'Description', 'ADR category', 'Severity', 'Hospitalised on', and 'Laboratory result'. The form also includes a 'Print Page' button and a 'Consumer Pharmaceutical Trade' logo.

6. Vaccine storage and cold chain

Prevent cold chain breakage

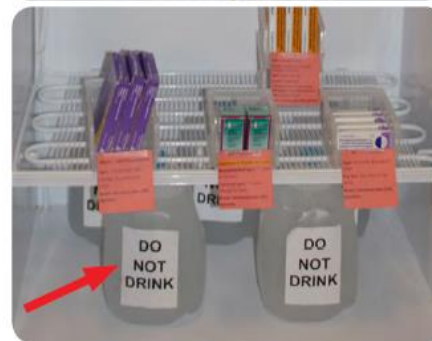
- Equipment to prepare: fridge, thermometer, socket, etc
- Procedures to follow: routines and contingency plan
- Follow vaccine manufacturers' recommendations
- Maintain cold chain and **store vaccines between 2-8°C**
- **Do not use bar refrigerators**
- Purpose-built vaccine refrigerators (**PBVR**) are preferred for vaccine storage
- **Monitor vaccine temperature**
- **All enrolled doctors have to use PBVR for vaccine storage by 2023/24**

6. Vaccine storage and cold chain

Domestic frost-free refrigerator can be used with precautions if PBVR is not available.

Example of **precautions:**

- ◆ water bottles in the floor, drawers and door of the fridge to stabilize the temperature
- ◆ Check spot, maximum and minimum temperature 3 times daily



Water bottles on unit floor



Water bottles in unit door

Details are in the VSS Doctors' Guide (<https://www.chp.gov.hk/en/features/45838.html>)

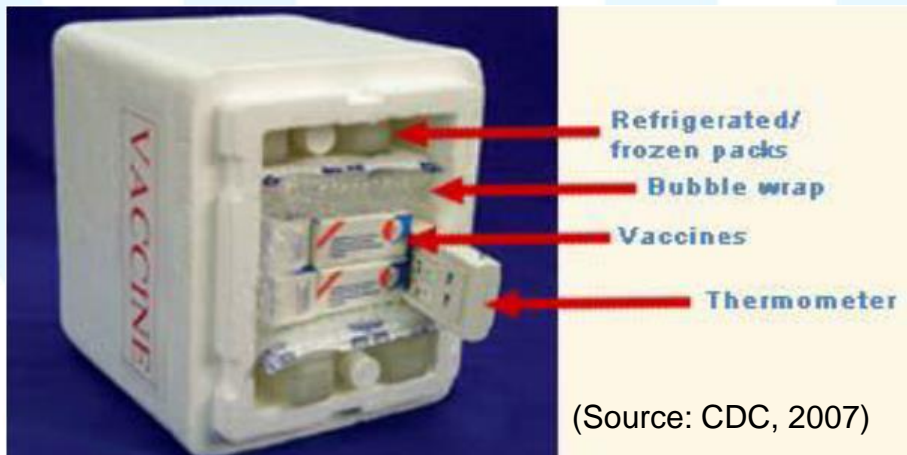
6. Vaccine storage and cold chain

Use of cold boxes at non-clinic setting

- Sufficient stock of ice packs to **meet the needs** of vaccination activity and transport
- Adequate insulating materials between ice packs and vaccines to **prevent freezing of vaccines**
- **Monitor vaccine temperature** during transport to and from the venue

Details are in the VSS Doctors' Guide (<https://www.chp.gov.hk/en/features/45838.html>)

Packing Cold Box



Example of maximum-minimum thermometer (reference only)



6. Vaccine storage and cold chain

Actions to take in case vaccines are exposed to out-of-range temperatures

- Label **“Do Not Use”** on them and **store properly in cold chain**
- Consult vaccine manufacturer whether the vaccines are still effective / usable
- Inform Programme Management and Vaccination Division (PMVD) if
 - ◆ **VSS recipients are involved, and**
 - ◆ Manufacturer replied that the affected vaccines are not effective / usable
- Find out cause, correct the problem, take **preventive measures**
- **Follow up with the recipients** administered with the vaccines and assess the need for re-vaccination

7. More Information

- CHP website – webpage on “Vaccination Schemes”
<https://www.chp.gov.hk/en/features/17980.html>
- CHP website – **videos on procedures/ cold chain**
<https://www.chp.gov.hk/tc/features/102010.html>
- Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings – Module on Immunisation
https://www.fhb.gov.hk/pho/rfs/english/reference_framework/pre_care_for_child.html

項目管理及疫苗計劃科 Programme Management and Vaccination Division

電話
Phone : 2125 2125/ 2125 2299

傳真
Fax : 2713 9576

電郵
Email : vacs@dh.gov.hk

地址
Address : 九龍紅磡德豐街18-22號海濱廣場二座3樓 3/F, Two Harbourfront, 18-22 Tak Fung Street, Hung Hom, Kowloon

網站
Website : <https://www.chp.gov.hk/en/features/17980.html>

Thank You