

Barns Medical Practice Service Specification Outline: Travel Vaccine Clinic



Developed August 2019

Review August 2021

What Do I need for my trip?

This is down to individual choice, however please click [NHS Fit for Travel](#) to follow the NHS website as a guide, and our clinical staff will help you decide what you may want or need.

Ideally it is important to make your initial appointment for vaccines as early as possible - at least 6 weeks before you travel – as sometimes further appointments will be required with the travel health nurse to receive all the necessary vaccinations. It is important to understand that some vaccines may have to be ordered and others will need prescriptions organised. Your second appointment should be at least 2 weeks before you travel to allow the vaccines to work.

Travel Health Questionnaire

To help us offer the appropriate advice, please complete our Travel Health Questionnaire which can be found on our website www.medicayr.com or attached at Appendix 1, and return completed by email to the Practice Mailbox at travel@medicayr.com. Alternatively phone on 01292 281439.

The administrative staff will then email or telephone you to provide details of your proposed vaccination schedule and expected costs. Please note we do not currently have a card machine so you are required to pay with cash at the time of the appointment if you are receiving vaccines that are not provided by the NHS.

Recommended Travel Vaccinations

Barns Medical Practice Travel Clinic is a registered Yellow Fever Clinic and can offer this and all other travel injections for your international travel. We aim to accommodate you with a suitable appointment and can offer an evening service weekly. We offer a full range of travel vaccines administered by our travel health practitioners including:

- Diphtheria/Tetanus/Polio

- Meningitis ACWY
- Cholera
- Rabies
- MMR
- HPV
- Chicken Pox
- Hepatitis A
- Hepatitis B
- Japanese B Encephalitis
- Tick-Borne Encephalitis
- Typhoid
- Yellow Fever

Cost

Some travel vaccines are ordered on a private prescription and these incur a charge . This is because not all travel vaccinations are included in the services provided by the NHS.

There are three categories of travel immunisations:

1. Those that must always be given as part of NHS provision through GMS Additional Services

The following immunisations for travel are part of Additional Services under GMS ie **no fee may be charged by the contractor** to a patient registered for NHS services with that contractor:

- Hepatitis A [infectious hepatitis] - first and second/booster dose (6-12 months after first dose)
- Combined hepatitis A and B – all doses
- Typhoid* - first and any booster doses
- Combined hepatitis A and typhoid - first dose (second dose is with Hepatitis A alone)
- Tetanus, diphtheria and polio as given in the combined Td/IPV vaccine
- Cholera

2. Those that cannot be given as an NHS service

The following immunisations are not remunerated by the NHS as part of additional services:

- Yellow Fever
- Japanese B encephalitis
- Tick borne encephalitis
- Rabies

The contractor may therefore charge a patient registered for GMS/PMS/APMS services for the immunisation if requested for travel.

The patient may either be given a private prescription to obtain the vaccines, or they may be charged for stock purchased and held by the practice. The process of administration of the immunisation is chargeable as well. Practices should also give the patient written information on the immunisation schedule proposed and the charges involved at the outset of the process. A NHS prescription must not be used to provide these vaccines.

3. Those that can be given as either NHS or as a private service

The following immunisations for travel are not remunerated by the NHS as part of additional services and are in this category:

- Hepatitis B (single agent) any dose
- Meningitis ACWY (quadrivalent meningococcal meningitis vaccine; A, C, Y and W135)

This category is the one that causes most confusion. The ambiguity in this section stems from the regulations regarding the charging of patients that are registered with the practice.

References

Green Book Immunisation against infectious Diseases Available 2014 at:
<https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book>

The National Travel Health Network and Centre (NaTHNaC) provides health information for health professionals and travellers available at <https://travelhealthpro.org.uk/>

Travax provides travel advice for health care professionals <https://www.travax.nhs.uk>

Fit for Travel –Travel Health website <http://www.fitfortravel.nhs.uk/destinations.aspx>

Barns Medical Practice

Travel Health Questionnaire



One form to be completed per traveller

(Form to be emailed to: Clinical_Practice_BarnsMedicalPractice_80081@aapct.scot.nhs.uk)

Name:		Date of Birth:				
Address:						
Email:		Contact Number:				
PLEASE SUPPLY INFORMATION ABOUT YOUR TRIP IN THE SECTIONS BELOW						
Date of Departure:		Total Length of Trip:				
Country to be visited	Exact Location	City or Rural	Length of Stay			
1.						
2.						
3.						
4.						
5.						
Type of Trip - Please provide details below to best describe your trip						
Type of Trip	Package	<input type="checkbox"/>	Self Organised	<input type="checkbox"/>	Backpacking	<input type="checkbox"/>
	Camping	<input type="checkbox"/>	Cruise Ship	<input type="checkbox"/>	Trekking	<input type="checkbox"/>
Reason for Travel	Business	<input type="checkbox"/>	Pleasure	<input type="checkbox"/>	Other	<input type="checkbox"/>
Accommodation	Hotel	<input type="checkbox"/>	Camping	<input type="checkbox"/>	Family/Friends	<input type="checkbox"/>
Travelling	Alone	<input type="checkbox"/>	Family/Friends	<input type="checkbox"/>	Group	<input type="checkbox"/>
Type of Area	Urban	<input type="checkbox"/>	Rural	<input type="checkbox"/>	Altitude	<input type="checkbox"/>

	Coastal	<input type="checkbox"/>	Inland	<input type="checkbox"/>	Jungle	<input type="checkbox"/>
Planned Activities	Safari	<input type="checkbox"/>	Adventure	<input type="checkbox"/>	Other	<input type="checkbox"/>
PERSONAL MEDICAL HISTORY						
Please list any medication you are currently taking:						
Please supply information on any vaccines or malaria tablets taken in the past						
Tetanus/Polio/Diphtheria		MMR		Influenza		
Typhoid		Hepatitis A		Pneumococcal		
Cholera		Hepatitis B		Meningitis		
Rabies		Japanese Encephalitis		Tick Borne Encephalitis		
Yellow Fever		BCG		Other		
Malaria Tablets						
				Yes	No	Details
Are you allergic to anything? (e.g. eggs, nuts, antibiotics)				<input type="checkbox"/>	<input type="checkbox"/>	
If so, please specify:						
Have you ever had a reaction to any vaccine or tablets given?				<input type="checkbox"/>	<input type="checkbox"/>	
If so, please specify:						
Tendency to faint with injection				<input type="checkbox"/>	<input type="checkbox"/>	
Any surgical operations in the past, including e.g spleen or thymus gland removed				<input type="checkbox"/>	<input type="checkbox"/>	
Recent chemotherapy/radiotherapy/organ transplant				<input type="checkbox"/>	<input type="checkbox"/>	
Anaemia				<input type="checkbox"/>	<input type="checkbox"/>	
Bleeding/Clotting disorders (including DVT)				<input type="checkbox"/>	<input type="checkbox"/>	
Heart disease e.g. angina, high blood pressure				<input type="checkbox"/>	<input type="checkbox"/>	
Diabetes				<input type="checkbox"/>	<input type="checkbox"/>	
Disability				<input type="checkbox"/>	<input type="checkbox"/>	
Epilepsy/Seizures				<input type="checkbox"/>	<input type="checkbox"/>	

Gastrointestinal (stomach) complaints	<input type="checkbox"/>	<input type="checkbox"/>	
Liver or kidney problems	<input type="checkbox"/>	<input type="checkbox"/>	
HIV/AIDS	<input type="checkbox"/>	<input type="checkbox"/>	
Immune System condition	<input type="checkbox"/>	<input type="checkbox"/>	
Mental Health issues (including anxiety, depression)	<input type="checkbox"/>	<input type="checkbox"/>	
Neurological(nervous system) illness	<input type="checkbox"/>	<input type="checkbox"/>	
Respiratory (lung) disease	<input type="checkbox"/>	<input type="checkbox"/>	
Rheumatology (joint) conditions	<input type="checkbox"/>	<input type="checkbox"/>	
Spleen problems	<input type="checkbox"/>	<input type="checkbox"/>	
Any other Conditions?			
Women Only: Are you pregnant or breastfeeding?			

Signed:

Date:

FOR OFFICE USE ONLY					
Is the patient fit and well today?		Yes		No	
Name of Vaccine	Dose	Batch Number		Site given	

Vaccine given by:

Doctor's Signature:

Date:

Appendix 2

Travel Vaccines Administration Guidelines

Aim

The Practice provides a full travel vaccination service to our registered patients. We are also a designated yellow fever centre, providing this vaccination to patients and others. Admin staff will ensure a robust record keeping system is in place.

Method

Responsible staff – anyone accessing the appointments system

- Any person not registered will be added as a “private patient” to ensure the clinician can enter details into the computerised record.
- Persons will be informed of any charge at the time of booking.

Stock

Responsible staff – designated vaccine controller and Practice Nurses

The following vaccines can be ordered on a GP10A Stock Order form from the Pharmacy:

- diphtheria/tetanus/polio
- MMR/rubella

No charge will be made to our patients for administration of the above vaccines. Hepatitis A vaccines and Typhoid vaccines are no longer held as stock and prescriptions for these are to be given by the GP or non medical prescriber

The following vaccines will be given on a private prescription:

- hepatitis B
- Japanese encephalitis
- Meningococcal meningitis
- Rabies
- Tick borne encephalitis
- Malaria prophylaxis (although some regimens can be purchased over the counter from a community pharmacist)

No charge will be made to our patients for administration of any of the above vaccines.

Yellow fever

All patients registered with the Practice or otherwise, are charged the cost of the vaccine plus administration of same.

Supplies:-Vaccine – Sanofi Pasteur

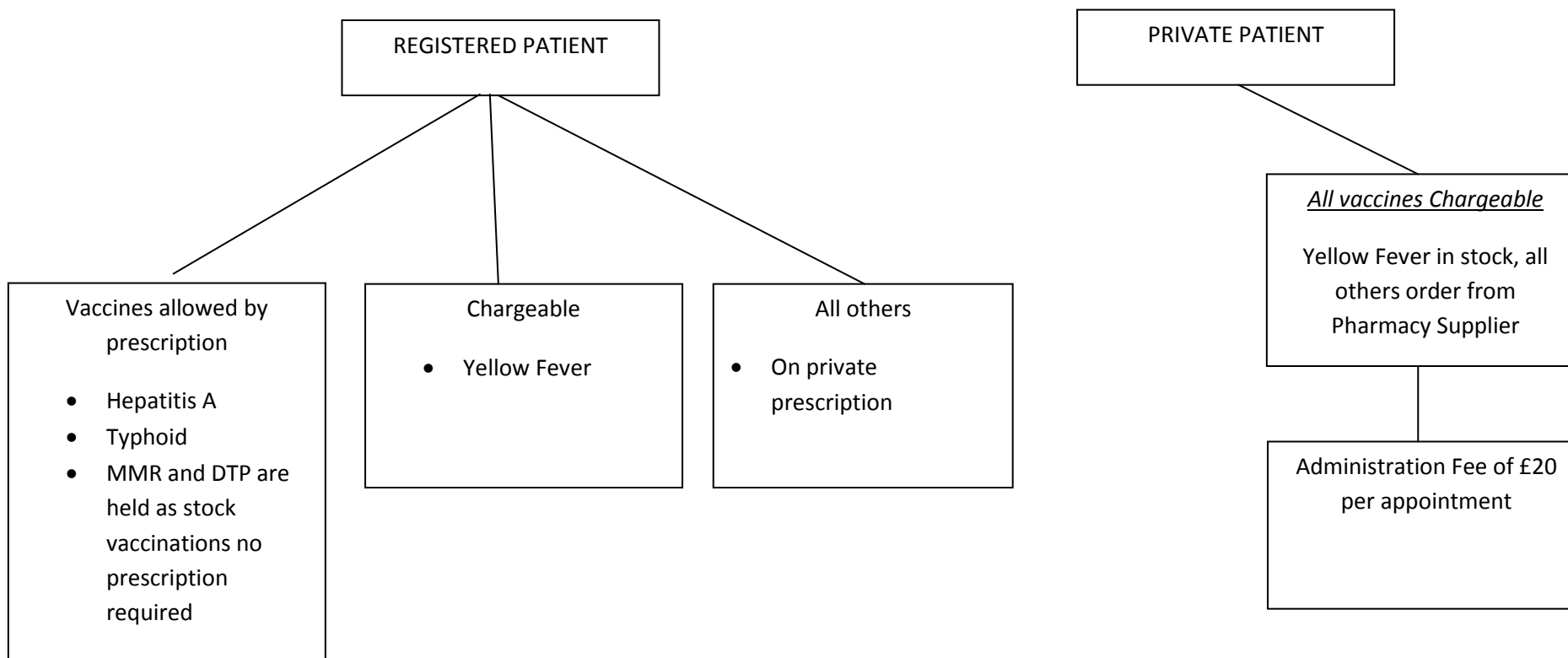
Certificates – Health Protection Scotland

Travel Health Questionnaire

All patients registered with the Practice or otherwise, will be asked to complete Travel Health Questionnaire online where possible.

- The Travel Health Questionnaire will be scanned into the patients’ computer records.

Travel Vaccinations Guidance



Private Vaccinations Fees

Cost of Vaccine + Administration Fee of £20 per appointment

<u>Vaccine</u>	<u>Type</u>	<u>Price</u>	<u>Dosage</u>	<u>Cover</u>
Cholera		£ 57.00	Two doses - 6 weeks apart	Single booster 2 years after primary course
Diphtheria/Tetanus/Pertussis/Polio	Revaxis	£ 12.00	Only required if not had 5 doses in a lifetime	
Hepatitis A	Havrix/Junior Havrix	£ 40.00	Two doses - 0 and 6 months	25 years
Hepatitis A/B	Twinrix	£ 47.00	3 doses - 0, 1 and 6 months Rapid 0, 7 and 21 days	If rapid - booster 12 months
Hepatitis A + Typhoid	Viatim	£ 58.00	Single dose	Hepatitis A - 1 year
				Typhoid - 3 years
Hepatitis B	Energix B	£ 23.00	Three doses - 0, 1 and 6 months	Booster depending on titres
	Titres	£ 25.00		
Influenza		£ 12.00	One dose	1 year
Japanese B Encephalitis	Ixiaro	£ 130.00	Two doses - 0 and 28 days	Booster dose 1-2 years after primary course
Meningitis A C W Y		£ 41.00	One dose	Booster at 5 years for those at continuing risk
Meningitis B	Bexsero	£ 133.00	2 doses for over 24m	Lifetime
MMR		£ 25.00	2 doses 1m apart	Lifetime
Rabies	Rabipur	£ 52.00	Three doses - 0, 7 and 28 days	Booster dose at 2 or 5 years for those at intermittent risk
			or 21 days if time restricted	
Shingles	Zostavax	£ 140.00	One dose	Lifetime

Tick borne encephalitis	Ticovac	£ 78.00	3 doses - 0, 1-3 months, 5-12m after 2nd dose	3 years after 3rd dose, then every 3-5y
Typhoid	Typhim	£ 17.00	One dose	3 years
Yellow Fever		£ 60.00	One dose	Lifetime

Staff involved and training required

Trained clinicians, including Nurse Practitioners and Practice Nurses

Advertising of service to patients

Practice Website: Barns Medical Practice