Reported Vaccine Errors

A recent analysis of all enquiries (4301) received by VACCSline from January 2009 to December 2011 showed that 158 (3.7%) related to vaccine errors. The most common concern was administration of the wrong vaccine which was reported 62 times. In a proportion of these incidences, the name of the incorrectly administered vaccine shared the same first letter as that of the intended vaccine. Giving too much vaccine was reported 36 times, involving either the administration of extra doses or adult formulations being given to children. Giving too little vaccine was reported 11 times, for example paediatric doses having been given to adults. Nine enquiries followed administration of an expired vaccine. Most errors occurred during vaccine selection and preparation or as a result of failure to check the patient’s previous vaccination history. In seven of the reported errors, two siblings were present at the same consultation which appeared to have contributed to the mistake. Being aware of the nature of vaccine errors can help highlight for practitioners areas in which to take extra care to try to avoid reoccurrence of these mistakes.

The HPA Vaccine Incident Guidance, which outlines actions to be taken in response to vaccine errors can be accessed online at: http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1267551139589

Frequently asked questions to VACCSline

Influenza vaccination programme end. Question: Should we continue to offer influenza vaccine to pregnant women throughout the spring?

Answer: As explained within the CMO letter re the 2012/13 programme: “Flu vaccination is usually carried out between October and January and it would be unusual to carry on vaccinating after that date. However, clinicians should apply clinical judgement to assess the needs of an individual patient, taking into account the level of flu-like illness in their community.” This advice applies to all who are within an intended target group. Practices are not expected to reorder stock if running out after the 31st of January. The incidence of flu in most years peaks in January and February which is why the vaccination programme is commenced in the Autumn to protect individuals before the virus starts to circulate. The January edition of Vaccine Update from the Department of Health highlights high levels of flu in North America and the potential for the flu season to extend in the UK. Unused vaccine should not be returned until it is clear that the flu season is over and may be offered to those in risk groups even after the end of January.


The January Vaccine Update can be accessed at: http://immunisation.dh.gov.uk/vu-198-jan-13/

Weekly reports of influenza activity can be accessed on the HPA website at: http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/SeasonalInfluenza/EpidemiologicalData/

Typical Q&As received on influenza vaccination and use of antivirals can be accessed at: http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1287147885006

Interrupted HPV schedule. Question: It is 14 months since a teenager received their first and only dose of Cervarix. What vaccine schedule should be given to ensure they are fully immunised? Answer: If a course of HPV vaccination is interrupted it should be resumed, but not repeated. Where possible the same vaccine brand should be given leaving the appropriate interval between the remaining doses. The standard schedule is 0,1,4-6 months. If Cervarix is not available, or in instances where the make of the previous doses are unknown, then the vaccination course can be completed with Gardasil to three HPV doses in total. The advice to complete with a mix of vaccine brands is based on expert judgement of the data from partial courses of each vaccine as explained in the HPV chapter in the Green Book on line accessed at: http://immunisation.dh.gov.uk/category/the-green-book/
Patient Group Directions (PGDs) from April 2013

The Department of Health have posted an update on the plans for the continued use of PGDs under the new NHS infrastructures. The update can be found at the following link: [http://www.nelm.nhs.uk/en/Communities/NeLM/PGDs/News/PGD-authorisation-in-new-organisational-structures--DH-update/](http://www.nelm.nhs.uk/en/Communities/NeLM/PGDs/News/PGD-authorisation-in-new-organisational-structures--DH-update/)

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**Oxford Vaccine Group (OVG) Immunisation Seminar, Thursday 14th March 2013**

This popular seminar is aimed at all healthcare professionals involved in immunisations and provides an ideal opportunity for practitioners to both update their current immunisation knowledge and to hear the latest news on the topic of vaccination. It is to be held at the Richard Doll building, Old Road Campus, Oxford, OX3 7LF. Alongside local immunisation experts speakers also include experts from the Department of Health and Health Protection Agency. Attendees will receive a certificate which can be used as evidence of attending an immunisation update. To view details of the programme and to register go to: [http://www.ovg.ox.ac.uk/OVG/immunisation-seminar](http://www.ovg.ox.ac.uk/OVG/immunisation-seminar)

If you have any enquiries please email: events@ovg.ox.ac.uk

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**OVG Update: A new vaccine against meningitis group B: A second follow-on study**

Since the introduction of the meningococcal C vaccine, 90% of all meningococcal infection in children in the UK is caused by the group B strain. Children are vulnerable to this group of bacteria which can cause severe infection such as meningitis, septicaemia or lead to long term disability or death.

A breakthrough meningococcal B vaccine has been developed and shown to be effective and safe in three previous infant research studies. This vaccine has recently been recommended for licensure by the European Medicines Agency and is expected to be licensed early this year.

A follow on study is being conducted at the OVG looking at persistence of protection from the Men B vaccine at 4 years of age in children who took part in the previous vaccine studies as infants as well as the effect of a booster vaccine dose in some of these children. 190 healthy children of similar age who have neither had the Men B disease nor previously received a Men B vaccine will be eligible to take part in this research study. These will act as a comparison group and will receive two doses of the Men B vaccine. If the participants have not already received their preschool booster of DTaP/IPV and MMR, these will also be given within the study. Further information will be available on the OVG website at [www.ovg.ox.ac.uk](http://www.ovg.ox.ac.uk)

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**Upcoming Introduction to Immunisation Training**

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<tr>
<th>Location</th>
<th>Introduction to Immunisation Study Day</th>
<th>Contact:</th>
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<tbody>
<tr>
<td>Berkshire (E &amp; W)</td>
<td><strong>Introduction to Immunisation Study Day</strong> 23rd April &amp; 16th October 2013</td>
<td>BHFT staff book through intranet <a href="mailto:learningdevelopment@berkshire.nhs.uk">learningdevelopment@berkshire.nhs.uk</a></td>
</tr>
<tr>
<td>Buckinghamshire</td>
<td><strong>Introduction to Immunisation Study Day</strong> To be confirmed</td>
<td>01494 734681 <a href="mailto:training.department@buckshealthcare.nhs.uk">training.department@buckshealthcare.nhs.uk</a></td>
</tr>
<tr>
<td>Milton Keynes</td>
<td><strong>Introduction to Immunisation Study Day</strong> To be confirmed</td>
<td>Fiona Anaman 01908 254203 <a href="mailto:fiona.anaman@miltonkeynes.nhs.uk">fiona.anaman@miltonkeynes.nhs.uk</a></td>
</tr>
<tr>
<td>Oxford</td>
<td><strong>Introduction to Immunisation Study Day</strong> 6th March &amp; 17th September 2013</td>
<td>Kaye Hewer 01865 325496 <a href="mailto:kaye.hewer@oxfordhealth.nhs.uk">kaye.hewer@oxfordhealth.nhs.uk</a></td>
</tr>
<tr>
<td>Other providers</td>
<td><strong>Introduction to Immunisation Study Day</strong> 7th February 2013, High Wycombe, Bucks</td>
<td>Clinical training limited <a href="http://www.clinicaltrainingltd.co.uk">www.clinicaltrainingltd.co.uk</a></td>
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To receive future VACCSline newsletters by direct email, send your request to Richard.galuszka@hpa.org.uk

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**VACCSline** provides advice on childhood and adult immunisations to health professionals in Buckinghamshire, Milton Keynes, Oxfordshire and West Berkshire. In East Berkshire immunisation enquiries should continue to be directed to the PCT Immunisation Coordinator, Dr. Marilyn Lansley; either on her office number 01344 458109 or mobile 0771 247 1375. Her office number may be given to patients. For advice about adult travel immunisations, practitioners are directed to [www.nathnac.org](http://www.nathnac.org).

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**Vaccine Advice for Clinicians Service**

Part of Oxford Vaccine Group, CCVTM, Churchill Hospital, Old Road, Headington, Oxford OX3 7LE, and Thames Valley Health Protection Unit, Centre for Radiation, Chemical & Environmental Hazards, HPA, Chilton, OX11 0RQ.