

Reducing differences in the  
uptake of immunisations

## **Guide to resources**

Implementing NICE guidance

Revised 2010

This guide to resources accompanies the public health guidance: 'Reducing differences in the uptake of immunisations (including targeted vaccines) among children and young people aged under 19 years' (available online at [www.nice.org.uk/PH21](http://www.nice.org.uk/PH21)).

This document was revised in September 2010 to update website addresses after the closure of [www.immunisation.nhs.uk](http://www.immunisation.nhs.uk)

Issue date: revised 2010

This is a support tool to help guide people to resources that may support the implementation of NICE guidance.

**It is not NICE guidance.**

**Promoting equality**

Implementation of this guidance is the responsibility of local commissioners and/or providers. Commissioners and providers are reminded that it is their responsibility to implement the guidance, in their local context, in light of their duties to avoid unlawful discrimination and to have regard to promoting equality of opportunity. Nothing in this guidance should be interpreted in a way which would be inconsistent with compliance with those duties.

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# Contents

Contents.....	3
Introduction .....	4
Resources from other organisations .....	5
Government strategy and policy documents .....	5
Health Protection Agency training resources.....	8
Other useful resources – general .....	9
Other useful resources – infant hepatitis B.....	12
Case studies.....	13
NICE resources.....	16
The guidance.....	16
General implementation resources.....	16
Related NICE guidance (published).....	17
Related NICE guidance (under development).....	17
Acknowledgements .....	18

## Introduction

NICE has produced this guide to help people involved in putting the NICE guidance on reducing differences in the uptake of immunisations into practice.

It highlights a selection of resources available from NICE, government and other organisations which can be used alongside the NICE guide '[How to change practice](#)'.

The recommendations in the NICE guidance are aimed at a range of different audiences including NHS and other commissioners, managers and professionals who have a direct or indirect role in, and responsibility for, the immunisation of children and young people. This includes those working in: children's services, local authorities, education and the wider public, private, voluntary and community sectors. It may also be of interest to parents, others with parental responsibility, all those who look after the health and wellbeing of children and young people and members of the public.

NICE has developed this guide in consultation with key stakeholders and experts in the area and it has been tested by potential users (see acknowledgements). It has been designed to provide an overview of information directly related to the guidance, but it is not an exhaustive list.

NICE is not responsible for the quality or accuracy of, and does not endorse, any information or advice provided by other organisations.

The resources are listed in order of publication date, with the most recent first under each heading. Hyperlinks take you directly to each resource, where possible. These hyperlinks were correct at the time of publication. If they no longer work because changes have been made to external websites, you should visit the relevant home page to search for the document.

## Resources from other organisations

### Government strategy and policy documents

Document	Relevance
<p>Department of Health (2006) <a href="#">Immunisation against infectious disease [The green book]</a>. London: The Stationery Office.</p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p> <p>(N.B updated chapters are available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a>)</p>	<p>Provides information on vaccines and vaccination procedures for all vaccine-preventable infectious diseases that may occur in the UK. It includes comprehensive details of those immunisations that comprise the routine immunisation programme for all children from birth to adolescence. It is a comprehensive and invaluable source of information on the principles, practices and procedures, the diseases, vaccinations and vaccines.</p> <p>It is important to scroll down to “Download the complete updated chapters” on this large webpage.</p> <p>Updates to ‘<a href="#">The green book</a>’ can be downloaded from the DH website.</p> <p>Related letters from the <a href="#">Chief Medical Officer</a>, <a href="#">Chief Nursing Office</a> and <a href="#">Chief Pharmaceutical Officer</a> (as mentioned in the guidance) can be accessed via these links</p>
<p>Department of Health and Department for Children, Schools and Families (2009) <a href="#">Healthy lives, brighter futures. The strategy for children and young people’s health</a>. London: Department of Health.</p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>This strategy sets out government plans for universal, targeted and specialist support across three life stages: for pregnancy and early years; school-age children; and young people. It sets out how high quality services will improve health and well-being and minimise health inequalities. This includes the role of immunisation services in protecting children and young people against infectious diseases.</p>
<p>Department of Health and Department for Children, Schools and Families (2009) <a href="#">Securing better health for children and young people through world class commissioning</a>. London: Department of Health.</p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>This document supports commissioners to secure improved outcomes for children, young people and their families.</p> <p>It accompanies ‘Healthy lives, brighter futures’. It describes the process of world-class commissioning to improve the health of children, young people and their families. The aim is to ensure resources are used effectively to achieve the best health outcomes and reduce health inequalities.</p>

<p>Department for Children, Schools and Families <a href="#">Sure Start Children's Centres</a> [online].</p> <p>Available from <a href="http://www.education.gov.uk">www.education.gov.uk</a></p>	<p>Sure Start Children's Centres are for children under the age of 5 years and their families. By 2010, every community will have one. The services on offer vary, but where the following exist, they could be used to help implement this guidance:</p> <ul style="list-style-type: none"> <li>• services offering support for parents</li> <li>• child and family health services</li> </ul>
<p>Department of Health (2009)</p> <p><a href="#">Healthy Child Programme: pregnancy and the first five years of life</a></p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>This describes the role of the Healthy Child Programme (HCP) in improving the health and wellbeing of children. It is a universal preventive service focusing on vulnerable children and families. Regular health and development reviews, including immunisations are a key feature of the HCP.</p>
<p>Department of Health (2009)</p> <p><a href="#">Healthy Child Programme: from 5 to 19 yrs old</a></p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>This describes the Healthy Child Programme for 5 to 19 year olds, for a universal early intervention and prevention programme through the school years to the age of 19, recommending that immunisations should be offered to all children and young people according to the routine immunisation schedule.</p>
<p>Department of Health (2009)</p> <p><a href="#">Healthy Child Programme: the two year review</a></p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>The review at two years of age is one of the key health and development reviews recommended in the Healthy Child Programme (HCP). A key priority of the two year review is to maximise protection against communicable disease through high immunisation rates and reduced cases of vaccine-preventable diseases.</p>
<p>NHS Immunisation Information (2010) <a href="#">Routine immunisation schedule</a> [online].</p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>Provides details of the routine vaccination schedule (including a link to versions in different languages – see immunisation toolkit under 'other useful resources'). It also offers other related information such as a guide to childhood vaccinations for all children and young people. Updated in Spring 2010 to include Prevenar 13</p>
<p>Department of Health and Department for Children, Schools and Families (2007)</p> <p><a href="#">Family Nurse Partnership (FNP) programme</a> [online].</p> <p>Now available from the National Archive</p>	<p>The Family Nurse Partnership (FNP) is a joint Department of Health/Department for Children, Schools and Families project. FNP nurses visit vulnerable, first-time parents from early pregnancy until the child is aged two years. The aim is to build a close, supportive relationship with the whole family and encourage mothers to adopt healthier lifestyles, improve their parenting skills and become self-sufficient</p>

<p>Department of Health (2004) <a href="#">National service framework for children, young people and maternity services. Core standards</a>. London: Department of Health.</p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>Sets national standards for children’s health and social care, which promote high quality, women and child-centred services and personalised care that meets the needs of parents, children and their families</p> <p>Standards one (‘Promoting health and wellbeing, identifying needs and intervening early’) and four (‘Growing up into adulthood’) are relevant to this guidance.</p> <p>Delivering immunisations according to the recommended schedule to all children and young people is one of the markers of good practice for both standards</p>
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## Health Protection Agency training resources

Document	Relevance
<p>Health Protection Agency (2005) <a href="#">Core curriculum for immunisation training</a>. London: Health Protection Agency.</p> <p>Available from <a href="http://www.hpa.org.uk">www.hpa.org.uk</a></p>	<p>Outlines the core topics for all immunisation training. They include: the immune system and how it works, communicating with patients and documentation, record keeping and reporting. It also includes guidance for trainers on teaching, assessment and evaluation.</p> <p>This resource should be used as a minimum framework on which to build a training programme.</p>
<p>Health Protection Agency (2005) <a href="#">National minimum standards for immunisation training</a>. London: Health Protection Agency.</p> <p>Available from <a href="http://www.hpa.org.uk">www.hpa.org.uk</a></p>	<p>Aims to ensure immunisation training is consistent and high quality across the country.</p>
<p>Health Protection Agency (2005) <a href="#">Immunisation training resources</a>. London: Health Protection Agency.</p> <p>Available from <a href="http://www.hpa.org.uk">www.hpa.org.uk</a></p>	<p>This site provides training materials and resources for healthcare professionals, developed by an advisory group led by the Health Protection Agency's Centre for Infections. Resources which can be used to support the training of healthcare professionals in immunisation include:</p> <ul style="list-style-type: none"> <li>• multiple choice questions for immunisation training</li> <li>• slide sets for core curriculum training</li> <li>• topical and specialist slide sets e.g. measles susceptibility and immunisations in prisons</li> <li>• National immunisation courses and study days.</li> </ul>
<p>These resources will be useful when implementing recommendation 3</p>	



## Other useful resources – general

Resource	Relevance
<p>Department of Health (2008)  <a href="#">Operational plans 2008/9 – 2010/11</a>            London: Department of Health.            Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>This document explains how organisations can use measures on progress '<a href="#">Vital Signs</a>' to develop local operational plans to deliver against national priorities.</p> <p>Childhood immunisation is included in Tier 2 of Vital Signs. All PCTs should include, in their three year operational plans for sign-off by their strategic health authority, their plans to:</p> <ul style="list-style-type: none"> <li>• improve childhood immunisation uptake by the recommended ages</li> </ul>
<p>Cheshire and Merseyside Public Health Network Inequalities Group (2006) <a href="#">Vaccinations and immunisations health equity audit toolkit for Cheshire and Merseyside primary care trusts</a>. Wirral: ChaMPs.            Available from <a href="http://www.nwph.net/nwpho">http://www.nwph.net/nwpho</a></p>	<p>A toolkit to help primary care trusts conduct a health equity audit on vaccinations and immunisations. It provides information on the health equity audit cycle with a focus on vaccination and immunisation issues and can be used to highlight the needs of groups who don't engage with health services.</p> <p>The toolkit includes background information on vaccination and immunisation issues and an example of good practice of working with people who have learning difficulties. It also includes training scenarios that illustrate the difficulties of providing certain groups with appropriate vaccination services</p>
<p>Department of Health (2005)  <a href="#">Vaccination services: reducing inequalities in uptake</a>            London: Department of Health.            Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>Provides advice on how to improve the uptake of vaccinations generally and, in particular, among groups that are disadvantaged or difficult to reach</p>
<p>Health Protection Agency (2008)  <a href="#">Schedule for vaccination of prisoners and young offenders</a>.            Available from <a href="http://www.hpa.org.uk">www.hpa.org.uk</a></p>	<p>An example from West Midlands North Health Protection Unit of a vaccination schedule for prisoners and young offenders. Both groups are 'at risk' of not being fully immunised</p>

<p>Health Protection Agency (2009)</p> <p><a href="#">Local health protection units</a></p> <p>Available from <a href="http://www.hpa.org.uk">www.hpa.org.uk</a></p>	<p>Includes links to local health protection units. These can support immunisation services by:</p> <ul style="list-style-type: none"> <li>• advocating and leading disease surveillance to guide control strategies (e.g. collecting data on vaccine coverage - including inequalities, and on age and sex-specific prevalence of key infections, including rubella and measles)</li> <li>• working with the NHS and others to improve delivery of the routine immunisation programme, including reaching groups that usually have no contact with NHS services</li> <li>• helping implement new vaccine programmes locally</li> <li>• providing specialist advice to both commissioners and providers</li> </ul>
<p>Health Protection Agency (2009)</p> <p><a href="#">Vaccine coverage and COVER (Cover of Vaccination Evaluated Rapidly)</a></p> <p>London: Health Protection Agency.</p> <p>Available from <a href="http://www.hpa.org.uk">www.hpa.org.uk</a></p>	<p>The COVER programme monitors immunisation coverage among children in the UK when they reach their 1st, 2nd or 5th birthday, in line with the national schedule. This information is fed back to local services to improve coverage and detect any changes in uptake.</p> <p>Data is broken down by PCT.</p> <p>This <a href="#">tool</a> (PCT ready reckoner for MMR catch up) helps estimate the number of children in each PCT area who have not been vaccinated at all for MMR and the number who have received a single dose.</p>
<p>Information centre (2009)</p> <p><a href="#">Immisation statistics and data collections</a></p> <p>Available from <a href="http://www.ic.nhs.uk">www.ic.nhs.uk</a></p>	<p>The Information Centre is England's central, authoritative source of health and social care information. It acts as a hub for high quality, national, comparative data for secondary uses and delivers information for local decision makers to improve the quality and efficiency of frontline care.</p> <p>They publish annual statistics showing the number of children and young people who are immunised against vaccine-preventable diseases by their first, second and fifth birthday.</p>
<p>Language Line Services.</p> <p>Available from <a href="http://www.languageline.co.uk">www.languageline.co.uk</a></p>	<p>Provides the NHS with interpreting and translation services. Local arrangements may vary. Please check with your NHS Trust before contacting Language Line.</p> <p>These services could be used to give people who do not speak English an opportunity to discuss any concerns they might have about immunisation. It could also be used to promote immunisation to them and to check their immunisation status during healthcare appointments. (For example, this could take place when they have a hospital appointment or stay, or attend an accident and emergency department, walk-in centre or minor injuries unit)</p>

<p>NHS Immunisation Information <a href="#">Immunisation tool kit</a> [online]. Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>This toolkit is for healthcare professionals who coordinate local delivery of the national immunisation programme. It signposts and describes key resources outlined below.-</p> <p><b><a href="#">Communication resources:</a></b> A range of leaflets, factsheets, posters and other materials to support the national immunisation programme. The main leaflets are translated into a wide range of languages.</p> <ul style="list-style-type: none"> <li>• <a href="#">current publications</a></li> <li>• <a href="#">translated leaflets</a>.</li> </ul> <p><b><a href="#">Groups and networks:</a></b> Discussions of immunisation services in a variety of local and regional settings. There may be a local immunisation committee, sometimes covering several PCTs. There may also be a regional forum for immunisation coordinators/leads. The local health protection unit immunisation lead should be able to advise what arrangements are available locally.</p> <p><b><a href="#">Obtaining expert advice on immunisation locally:</a></b> Sources of local advice on difficult immunisation questions – whether it's related to policy, clinical or practice issues.</p> <p><b><a href="#">Recent immunisation programmes:</a></b> Provides links to information about recent immunisation programmes on, for example:</p> <ul style="list-style-type: none"> <li>• human papillomavirus (HPV)</li> <li>• MMR catch-up</li> <li>• Hib catch-up campaign</li> </ul>
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## Other useful resources – infant hepatitis B

Resource	Relevance
<p>Department of Health (2009) <a href="#">Improving the coverage of HBV vaccination in babies born to hepatitis B positive mothers: Characteristics of a robust programme</a> [online].</p> <p>Available from <a href="http://www.dh.gov.uk">www.dh.gov.uk</a></p>	<p>A draft framework for local commissioners and providers of universal hepatitis B antenatal screening and the targeted vaccination programme.</p> <p>It provides an example of a care pathway for babies born to hepatitis B-positive mothers</p>
<p>Harlow Healthcare (2009)</p> <p><a href="#">Personal child health record</a></p> <p>Available from <a href="http://www.healthforallchildren.co.uk">www.healthforallchildren.co.uk</a></p>	<p>Includes information and documentation for immunisation, screening and routine reviews. Relevant to all the recommendation, in particular, recommendation 6</p> <p>It includes the special Hepatitis B vaccination page, (page 13a) which should be inserted into the personal child health record. This is given to the mother before her discharge from hospital.</p>
<p>Health Protection Agency (2008)</p> <p><a href="#">Policy on the use of passive immunisation with hepatitis B immunoglobulin (HBIG) for infants born to hepatitis B infected mothers</a></p> <p>London: Health Protection Agency.</p> <p>Available from <a href="http://www.hpa.org.uk">www.hpa.org.uk</a></p>	<p>This is relevant when implementing recommendation 6</p>
<p>See case study section for an example of how to follow up on hepatitis B-positive antenatal screening results</p>	

## Case studies

Resource	Relevance
<p>Heart of Birmingham Teaching Primary Care Trust (2008) <a href="#">Working smarter – improving performance</a>. Birmingham: Heart of Birmingham Teaching Primary Care Trust</p> <p>Available from <a href="http://www.hobtpct.nhs.uk">www.hobtpct.nhs.uk</a></p>	<p>In 2004, Heart of Birmingham Teaching Primary Care Trust had the lowest coverage for childhood immunisation, flu vaccination and cervical cytology. Since then there has been a considerable improvement.</p> <p>This manual provides an insight into the underlying problems pre-2005, as well as an explanation of the activities and systems that have lead to a long-term, sustained improvement. It has received ‘Good practice’ recognition from the DH and will be particularly helpful when implementing NICE’s guidance.</p> <p>The manual is targeted at those whose focus is improvement of performance in delivery within the NHS. It highlights how to address the common barriers to immunisation, including the use of:</p> <ul style="list-style-type: none"> <li>• Data reconciliation – for example, addressing problems such as inaccurate records, multiple addresses and the failure to transfer or remove records, as necessary.</li> <li>• ‘Tail gunning’ – for example, tracking and following up on children who have not had their MMR vaccination to ensure data is accurate (that is, it includes information on when immunisations are offered and refused).</li> <li>• An effective contact strategy – for example, using mail-outs, call centres, letters and texts.</li> <li>• Mega clinics – targeted, flexible immunisation services that include, for example, outreach and home visits.</li> <li>• ‘On the road’ – where health specialists visit patients in their own homes.</li> </ul> <p>The document also includes examples of GP success stories.</p>

Kent and Medway Antenatal and Newborn Screening Committee and Kent Health Protection Unit (2009)

[Antenatal](#) screening hepatitis B issues in Kent and Medway – development of a revised protocol [online].

Available from [www.dh.gov.uk](http://www.dh.gov.uk)

This protocol was the result of a joint venture between the Kent and Medway Public Health Screening Team and the Health Protection Agency.

Several factors alerted the team that there may be a problem with the hepatitis B programme:

- information on hepatitis B immunisation was not routinely available for the local screening committee
- reports of antenatal infectious disease testing showed the screening data as suspect
- a Child Health Record Department (CHRD) audit showed a lack of information on hepatitis B immunisation in the CHRD data collection
- poor and slow notification of when a baby receives their first vaccine to CHRD by midwifery. CHRD did not always receive this information in a timely manner
- no field in the system to generate reminders for GPs – the CHRD was unable to raise awareness to GPs that a baby requires more hepatitis B vaccines. If the CHRD are not informed that the baby has had a Hepatitis B vaccine in a timely manner then they cannot generate a schedule in time to inform the GP that the baby needs to have a 2<sup>nd</sup> vaccine. The 2<sup>nd</sup> vaccine is due 1 month after the first. If CHRD are not informed within a couple of days the GPs miss the alert that a vaccine is due that month which delayed the 2<sup>nd</sup> vaccine
- difficulty passing complete results to another area
- a GP might tell CHRD of an immunisation – would be recorded in a free text 'ad-hoc' field

In parallel, an informal study performed by Paediatricians within Darent Valley hospital in Dartford showed major problems. They undertook a review to see if babies born in 2006 had received the full schedule. From patient records, laboratory and HPA records, only 11 babies were identified:

- all had received the initial immunisation
- only 4 had received the full course to 1 year
- only 2 had received the Hepatitis B surface antigen (HBsAg) test
- the HPA were only aware of 5/11 of the babies in the informal study.

A joint meeting was called between the Public Health Screening Team and the HPA. It was agreed to review the system, revise the protocol and have a 'look-back' exercise to identify babies who had not received a full course of vaccines.

The new protocol was agreed between all stakeholders:

- Public health and HPA to keep out of the line of clinical responsibility and to 'hand over' relevant clinical information.
- Clinician and the antenatal screening coordinator responsibilities were made clear.
- HPA responsibilities are:
  - clinical only, for obtaining hepatitis B immunoglobulin
  - reminding as a supplementary activity
  - monitoring.
- CHRD to generate reminders to GPs as per other childhood

	immunisations. • Public health to coordinate and monitor the system.
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## NICE resources

Resource	Relevance
<p><b><i>The guidance</i></b></p> <p>Reducing differences in the uptake of immunisations (including targeted vaccines) among children and young people aged under 19 years. NICE public health guidance 21 (2009). Available from <a href="http://www.nice.org.uk/PH21">www.nice.org.uk/PH21</a></p>	
The guidance	Includes the recommendations, considerations and information regarding the evidence that informed the guidance
The quick reference guide	The recommendations
Implementation tools	<ul style="list-style-type: none"> <li>• Audit support for monitoring local practice.</li> <li>• Costing statement – discusses the local costs of implementing NICE’s recommendations</li> <li>• Costing template to estimate the local costs and savings involved in implementing NICE guidance</li> <li>• Slide set – highlights key messages from NICE guidance for local discussion</li> <li>• Frequently asked questions for staff in Sure Start Children’s Centres</li> </ul>
<p><b><i>General implementation resources</i></b></p>	
<a href="#">How to put guidance into practice: a guide to implementation for organisations</a>	A guide to help organisations implement NICE guidance
<a href="#">How to put NICE guidance into practice and improve the health and wellbeing of communities: practical steps for local authorities</a>	A guide to help local authorities tackle health inequalities and promote health and wellbeing
<a href="#">How to change practice: understand, identify and overcome barriers to change</a>	A guide to help managers and clinicians influence changes in practice. It provides practical suggestions, based on evidence and experience, to help put NICE guidance into practice
<a href="#">Shared learning database</a>	Examples of good practice of implementing NICE guidance. If you would like to learn from others – or share your own experience of implementing this guidance, please visit the shared learning database on our website. All submissions will be entered for the annual NICE ‘Shared learning award’



## Related NICE guidance (published)

Document	Relevance
Antenatal care: routine care for the healthy pregnant woman. NICE clinical guideline 62 (2008). Available from <a href="http://www.nice.org.uk/CG62">www.nice.org.uk/CG62</a>	Highlights the routine care that healthy women can expect to receive during pregnancy. This includes screening for hepatitis B to decrease the risk of mother-to-child transmission
Behaviour change. NICE public health guidance 6 (2007). Available from <a href="http://www.nice.org.uk/PH6">www.nice.org.uk/PH6</a>	Provides a set of generic principles that can be used for planning, delivering and evaluating public health activities (such as immunisation programmes). The principles followed within the guidance may be useful when implementing this guidance on immunisation
Postnatal care. NICE clinical guideline 37 (2006). Available from <a href="http://www.nice.org.uk/CG37">www.nice.org.uk/CG37</a>	Outlines the care that every healthy woman and healthy baby should be offered during the first 6–8 weeks after the birth. It refers to the 'Green book' on immunisation and the general importance of childhood immunisation

## Related NICE guidance (under development)

Document	Relevance
Looked after children. NICE public health guidance (publication expected September 2010)	'Looked after' children are one of the groups at risk of not being immunised. This guidance will make recommendations on how to improve these children and young people's physical and emotional health and wellbeing

## Acknowledgements

NICE would like to thank everyone who has contributed to the development of this guide to resources:

- **Amanda Grant**, Primary Care Service Development Manager, Heart of Birmingham PCT
- **Sasha Henriques**, Information Officer (Rare Disorders), Contact A Family
- **The Immunisation Branch**, Department of Health
- **Meghna Joshi**, Senior Professional Support Pharmacist, Royal Pharmaceutical Society of GB
- **Philippa Kemsley**, Programme Manager, NHS Immunisation Information, Department of Health
- **Dr Gabrielle Laing**, Community Paediatrician and Clinical Director, Royal College of Paediatrics and Child Health
- **Samantha Mason**, Research Lead, Family Nurse Partnership Programme
- **Dr Rosemary McCann**, Immunisation Lead, Health Protection Agency
- **Paula McLachlan**, Screening Programmes Manager for Kent and Medway, NHS Eastern and Coastal Kent
- **Stella Pendleton**, Website Manager/Education Advisor, Hepatitis B Foundation UK
- **Maxine Roberts**, Strategy and Partnerships Director, Sure Start Children Centre
- **Ray Smith**, NHS Immunisation Information, Department of Health

Thank you also to the following expert co-optees of the Public Health Interventions Advisory Committee who contributed to the development of this guide to resource:

- **Dr Helen Bedford** Senior Lecturer in Children's Health, UCL Institute of Child Health, London
- **Dr David Elliman** Consultant Community Paediatrician, Great Ormond Street Hospital NHS Trust and Haringey Teaching PCT

Thank you to the following who submitted the case studies:

**Heart of Birmingham Teaching PCT**

- **Amanda Grant**, Primary Care Service Development Manager, Heart of Birmingham Teaching PCT

**Kent and Medway Public Health Screening team and Health Protection Agency:**

- **Dr John Rodriguez**, Assistant Director of Public health for NHS Eastern and Coastal Kent and screening lead for Kent and Medway
- **Dr James Sedgwick**, Consultant in Communicable Disease Control Kent Health Protection Unit
- **Sheena Fenn**, Health Protection Specialist Nurse Kent Health Protection Unit
- **Paula McLachlan**, Screening Programmes Manager for Kent and Medway