

Immunisations

0-5 years

By Faye Elphinstone IIU Nurse 02.12.24



Excellent care at the heart of the community



Learning Outcomes

- To be informed about the IIU Project Role
- To learn some Myths and Facts about immunisations
- Useful tips on how to start vaccine conversations with parents.
- To learn where to signpost parents for up-to-date information about vaccinations.

Improving Immunisation Uptake Initiative

- NHS England is funding a project to Improve Immunisation Uptake in West Sussex and Brighton and Hove (IIU Project), because data has shown uptake of immunisation programmes has fallen by around a fifth since the Covid-19 pandemic. This could result in increases in preventable disease and associated morbidity and mortality. The project started in February 2024 and the focus is on childhood immunisations for 0–5-year-olds.
- The project is being carried out by myself Faye Elphinstone IIU Nurse and a Data Analyst: Jacob Raven, we are employed by Sussex Community Foundation Trust (SCFT) working with the Community Child Health Information Service (CCHIS).
- I would like to provide Nursery and Preschool educators with information about Immunisations, so that you can feel confident having conversations with parents about immunisations.

Childhood Immunisations



UK Immunisation Schedule

Routine vaccinations for children



Babies

8 weeks

6 in 1*
Rotavirus*
Men B*

6 in 1 - diphtheria, tetanus, whooping cough, polio, Hib & hep B

12 weeks

6-in-1**
Pneumococcal*
Rotavirus**

16 weeks

6-in-1***
MenB**

12 months

Hib/MenC*
MMR*
Pneumococcal**
MenB***

Pre-school

3 years 4 months

MMR**
4-in-1 preschool
booster

4 in 1 - diphtheria, tetanus,
whooping cough & polio

2 - 16 years

Flu

School-aged

12 - 13 years

HPV

3 in 1 - tetanus, diphtheria and polio

14 years

3-in-1 teenage
booster
MenACWY

* 1st dose, ** 2nd dose, *** 3rd dose

If your child has missed a vaccine, contact your GP practice to catch up
www.nhs.uk/vaccinations



[Routine childhood immunisations
schedule from September 2024
\(publishing.service.gov.uk\)](#)



Advice..

- **Men B**

[Using paracetamol to prevent and treat fever after MenB vaccination \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)



Advice...

- **Rotavirus..**
- Protects against the virus that causes a sick/diarrhoea bug (gastroenteritis). Therefore, some baby's, may experience diarrhoea after the vaccine.
- Double bag soiled (Poo) nappies
- Hand Washing after changing their nappy is important.



Whooping Cough

- **Whooping cough cases continue to rise**
- **Sadly Between January and November 2024 there have been 10 infant Deaths.**

RSV Respiratory Syncytial Virus

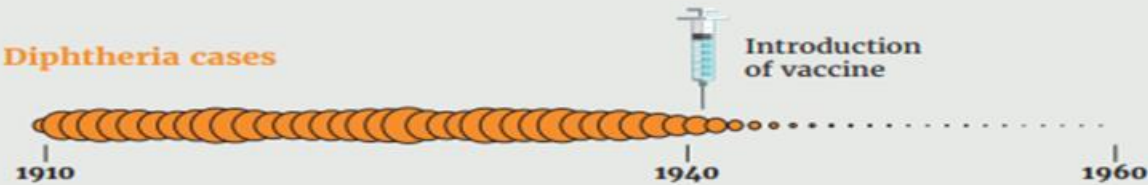
- If any parents are pregnant, they may ask you about this vaccine, offered in pregnancy.
- RSV accounts for approximately 33,500 hospitalisations annually in children aged under 5 years old,
- Results in 20 to 30 deaths per year.
- vaccinating a woman in pregnancy enables her to produce RSV antibodies which pass across the placenta to provide the baby with passive protection during the first six months.
- There is evidence to show that some immunity may also pass to baby through breastfeeding.

How effective is vaccination?

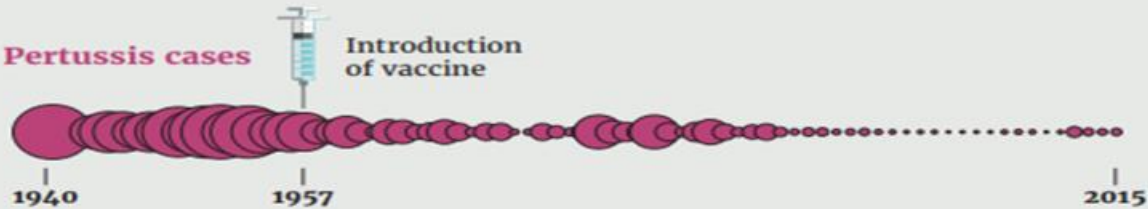
Vaccines are considered one of our greatest global health achievements and are estimated to save **2-3 million lives a year**.

Thanks to vaccines, life-threatening diseases that used to be common in young children in the UK are now relatively rare.

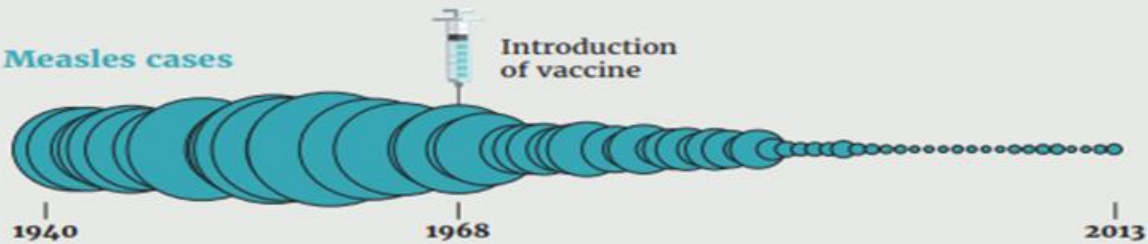
Diphtheria cases



Pertussis cases



Measles cases




Vaccine Myths and Facts



Myths and Facts to support conversations around Immunisation

On the following slides I have focused on the MMR vaccination. The Reason for this is there has been a recent Measles outbreak in some parts of the country, so people may start to ask about the vaccine. You may remember a link being made to MMR vaccination and Autism. This is not true however It still seems to impact on parents' decision making around vaccination in general.



Myths and Facts to support conversations around Immunisation

Myths

- There was an article written that made a connection between the MMR vaccine and Autism.
- This was written In 2001 and has now been discredited and the person who wrote it has been struck off no longer aloud to practice anymore. (The article was published in the Lancet medical journal. Written By Wakefield et al).

Facts

- Autism and Autism spectrum disorders are not acquired through harms to the brain. Vaccines cannot cause autism because autism is a developmental disorder and not a physical disorder.
- The incidence of autism continued to rise after 1993 in Japan despite withdrawal of MMR (Honda et al., 2005).
- If you get unwell by catching measles, mumps, and Rubella you would be very ill with lots of symptoms, maybe needing to be admitted to hospital, with complications. Much worse than if you have the vaccine.

Immunisation Myth and Fact

Myth

- It has been suggested that combined MMR vaccine could potentially overload the immune system.

Fact

- Babies' immune systems cope very well with several vaccinations at once. If a baby had 11 vaccines all at the same time, they would only use 0.1% of their immune system to respond to them! Remember, your baby is exposed to lots of germs every day.
- The three viruses in MMR work at different rates from each other and would be expected to reach high levels at different times.

Immunisation Facts

- MMR vaccine does not contain thiomersal or any other preservatives. The vaccine contains live organisms that have been made safe (attenuated, modified).
- One make of MMR vaccine may have traces of gelatine in it. There is another vaccine available that can be offered for people that may not want it, for ethical or religious beliefs. (Jewish law accepts the use of porcine products in injections). Further information is available in the UKHSA publication Vaccines and porcine gelatine.

Immunisation Facts

- The Intranasal seasonal Flu vaccination may have traces of Porcine Gelatine content.
- Therefore, maybe considered by some people to be unsuitable, due to religious or ethical beliefs.
- Alternative inactivated Flu vaccine can be given in these cases.

Immunisation Facts

- Small pox was eradicated in 1979
- If a mother is infected with Rubella in the first ten weeks of pregnancy 90% of surviving babies will have a birth defect.
- 60% of Hib disease cases can result in meningitis
- Vaccination in pregnant women is 97% effective at preventing death in young infants from whooping cough.

How Vaccines Work

What is 'herd immunity'?

If only a few people are vaccinated ...



...then one person is infected ...the disease spreads very fast

But if lots of people are vaccinated ...



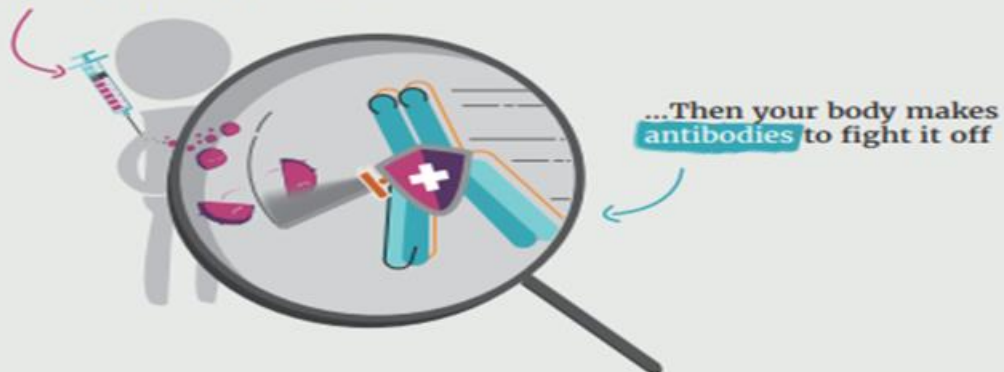
...then the disease can't spread very far, so the whole community stays safe.

This is 'herd immunity'

How do vaccines work?

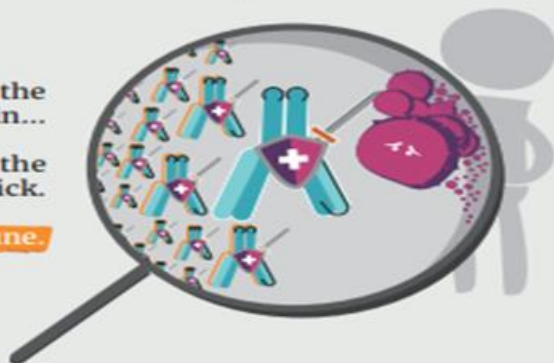
Vaccination is the safest way to protect your child against an infectious disease.
Once your child has been vaccinated, they should have **immunity** to the disease.

You are given a small amount of a harmless form of a disease...



Then if you encounter the disease again...
...your body already has the antibodies, so you don't get sick.

You are **immune**.



How Vaccines Work

- <https://youtu.be/-muloWofsCE>

Vaccine Conversation Tips



Immunisation conversation Tips

- People who are unsure about vaccinations need the opportunity to ask their questions. They need to be listened to and for their concerns to be acknowledged. Try to be empathetic and reassuring.
- Use examples in history about vaccines preventing disease such as Smallpox.
- Use trusted resources, support people to access clear and correct information and let them make their choice.

Taken from www.immunology.org

[Home — Oxford Vaccine Group](#) is a trusted site

Immunisation Conversation Tips

- Saying what we do and don't know, develops trust. So don't be afraid of saying what you don't know. Point them in the direction of some appropriate resources.
- Try not to lecture, or overload with facts. Focus on bitesize take home message.
- If comfortable and appropriate, share your own experience
- Unless you are clinically trained don't answer clinical questions, it is ok to direct them to the GP.

Taken from www.immunology.org



Immunisation Conversation tips

- If you find yourself in a conversation of Anti-Vax sentiment, ask them why they think 'x'? Where did they hear this? You might not feel comfortable doing this, remember you can tell them where they can get more information, GP, Health visitors, School Immunisation Service.
- Acknowledge what they have told you and acknowledge how hard it is to make decisions with so much information around. Tell them what you know and direct to trusted resources.
- Don't take anything personally and avoid being confrontational. It is ok to end the conversation if you feel uncomfortable. Try to remain polite.

Taken from www.immunology.org

How to Open Conversation around Immunisation when they are outstanding

Opening suggestions:

- 'I have noticed when looking at 'name of ...child's registration paperwork ' They do not appear to have had their vaccinations yet'.
- Would you mind me asking what your thoughts are on this?
- Have you had the opportunity to ask any questions you may have on immunisations?
- "As part of your child's health review we routinely look at immunisations, your Childs record shows they have not had, can I just check if we have the correct information...."

Resources Trusted Website

Follow Up Questions:

- 'Can I provide you with any information that may help you with your decision making?' you can give and leave with them some resources if appropriate.
 - <http://vk.ovg.ox.ac.uk>
- [Health for Under 5s | For healthy, happy early years](#)
- <https://youtu.be/-muloWofsCE>
- [Childhood Immunisations - West Sussex County Council](#)

Immunisation website Resource



- [Childhood Immunisations - West Sussex County Council](#)

Supportive Information:

- 'Something that is concerning for those working with children, is that there has been a recent increase in children contracting some diseases that can be very serious such as measles and whooping cough.' (If you have examples to use of nursing children with these illness's and they are receptive, you can use these).
- 'The famous Author Roald Dhal's daughter died of measles encephalitis in 1988.'
- Measles encephalitis is a rare complication of measles, it can occur in children and unimmunised adults either during or after a measles infection. This can happen because of the brain becoming infected with the virus during the rash phase of the illness or by an immune-mediated brain inflammation after measles infection.
- [Measles - NHS \(www.nhs.uk\)](http://www.nhs.uk) [Measles | Vaccine Knowledge Project \(ox.ac.uk\)](http://VaccineKnowledgeProject.ox.ac.uk)

Informed Declined Consent

- If they are not very receptive, you may be able to say, 'can I help by giving you some websites to look at and we can discuss any questions you have at a later date?'
- You can give HV email address, Immunisation 0-19 Service email address
- or if they are making decision to decline consent: 'can I help by completing a declined immunisation form for you? That you can sign, so that SCFT staff and your GP will know your decision and respect it.'

Services that can offer Immunisation Advice

Health Visitors

Sc-tr.wsxhcpduty@nhs.net

Immunisation 0-19yr Service

Sc-tr.imms-team@nhs.net



End of session

Any Questions



References

- British Society of Immunology: www.immunology.org accessed 05.12.24
- Moving past the vaccine/autism controversy - to examine potential vaccine neurological harms Peter R. Breggina,b,*
aPrivate Practice of Psychiatry, Clinical Psychopharmacology and Forensics, Ithaca, New York, USA bCenter for the Study of Empathic Therapy, USA Received 20 June 2020 Accepted 31 July 2020 Abstract.
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- (Walboomers et al., 1999; Bouvard et al., 2009; WHO IARC, 2007) HPV and Cancer.
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- [RSV vaccine - NHS \(www.nhs.uk\)](http://www.nhs.uk)
- [Respiratory syncytial virus \(RSV\) vaccination programme - GOV.UK \(www.gov.uk\)](http://www.gov.uk)
- [Green Book on Immunisation chapter 27a Respiratory syncytial virus \(RSV\) \(publishing.service.gov.uk\)](http://publishing.service.gov.uk)