

18 April 2018

**TO ALL PRACTICES IN SURREY AND SUSSEX LMCs**

Dear Colleague

You will be aware of the recent measles outbreaks across Surrey and Sussex, and the LMC has written to all practices earlier this month to explain the issues.

Having now met with Public Health England (PHE), and given that practices will be receiving further information from PHE and commissioners about the outbreaks, the LMC thought it would be useful to clarify the following points:-

* There are currently measles outbreaks in Surrey and Sussex, and in at least one case, the disease was transmitted between patients from a healthcare worker.
* Some children and adults in Surrey and Sussex remain unimmunised or partially immunised against measles. The measles vaccine was introduced in 1968 and was replaced by the MMR vaccine in 1988. The required level of immunity is two doses of the vaccine.
* Patients: the contractual status for GPs:
	+ The immunisation of children under 16 is funded through the usual mechanisms for childhood immunisations.
	+ There is a nationally funded [catch-up programme](https://digital.nhs.uk/GP-Collections/service-information/MMR-aged-16-and-over-vaccination-programme) for MMR immunisation for adults. If a practice vaccinates a patient aged 16 and over who was previously unvaccinated, or where vaccination status is uncertain, reimbursement should be claimed manually via CQRS.
	+ NHSE and PHE are considering asking practices to re-invite unvaccinated children between 5 and 11, with reimbursement for any vaccines given. This is likely to be

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in the areas with the lowest MMR uptake historically. In the current outbreak situation, we would encourage practices to respond positively to such a request.

* Practice staff
* PHE have asked that practice staff are appropriately immunised against measles to protect themselves and patients in the case of an outbreak.
	+ There is a [CQC requirement](http://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-37-immunisation-healthcare-staff) that practice staff involved in direct patient care, including receptionists, are up to date with their routine immunisations, including MMR.
	+ The LMC believes it is **not** appropriate for practices to be providing occupational health services for their own staff, as this represents a professional conflict between the doctor-patient and the employer-employee relationship. GP practice employees can receive their occupational health services from external providers such as Heales Medical Group, but thus cost is borne to the practice except for salaried GPs, and the LMC does not recommend this service being provided ‘in-house’.
	+ Therefore, the LMC advises practices to inform their staff who are unsure whether they have had 2 MMRs, to contact their own registered General Practice to find out their vaccination history. Practices should then follow the appropriate guidance in the [Green Book](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/147968/Green-Book-Chapter-21-v2_0.pdf) for measles immunity and immunisation; there is no risk in giving additional doses to patients with an unknown immunisation status.
	+ We ask practices to be sympathetic to this and process these requests promptly; this will be quid pro quo, as all practices in an area will be affected. If practice staff are unimmunised and are exposed to suspected measles, they may be required to take time off work which could of course impact significantly on the delivery of primary medical services.

**Patients can be advised t is safe to have an MMR if you have already been immunised – but are unaware of this.**

**Practices can use supplies of the MMR vaccine from Immform to vaccinate adults and children as part of these programmes. We are not aware of any supply issues from the manufacturer.**

Yours sincerely

 

**Dr Julius Parker Dr Clare Sieber**

Chief Executive Medical Director