

# NHS MenB Vaccination Service

## Thursday 23<sup>rd</sup> July 2026

Delivered in partnership with Primary Healthcare Development

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# Announcements



- Be **respectful of others'** opinions when engaging in discussions 
- Be **present throughout** the session! 

**Enjoy the session!**



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# Welcome & Introductions

# Tonight's Agenda

**1. Welcome**

**2. Clinical Overview of the Service**

**3. Providing the Service**

**4. Support and Wrap-up**

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Helping the development of pharmacists at all stages



## Undergraduate

Work-based learning  
**Clinical Simulation**  
Tuition



## Foundation Year Pharmacist Support

Foundation Year Pharmacy Podcast  
Online revision course  
Mock Exam  
Calculations Masterclass  
Tuition



## Postgraduate

CPD events  
Networking Opportunities  
Service-based training



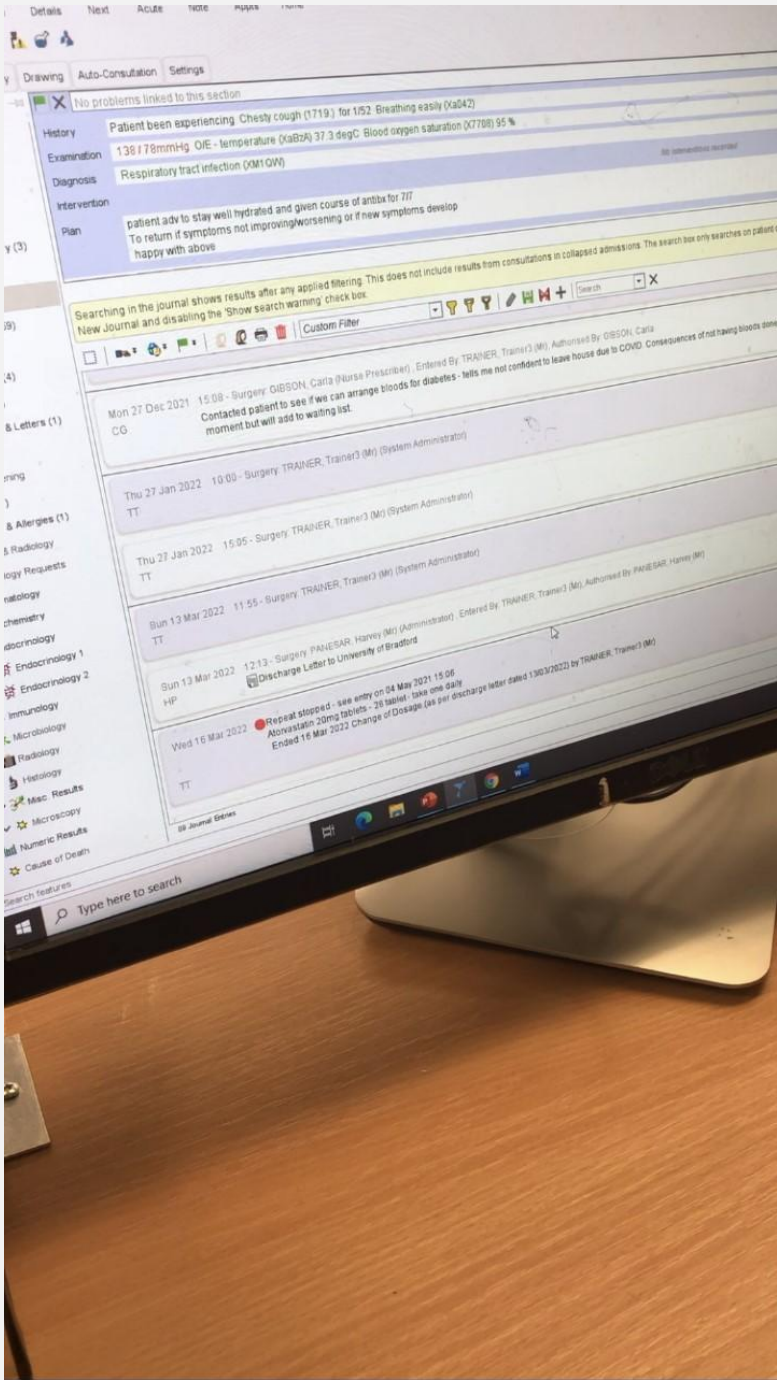
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# Projects over the years!



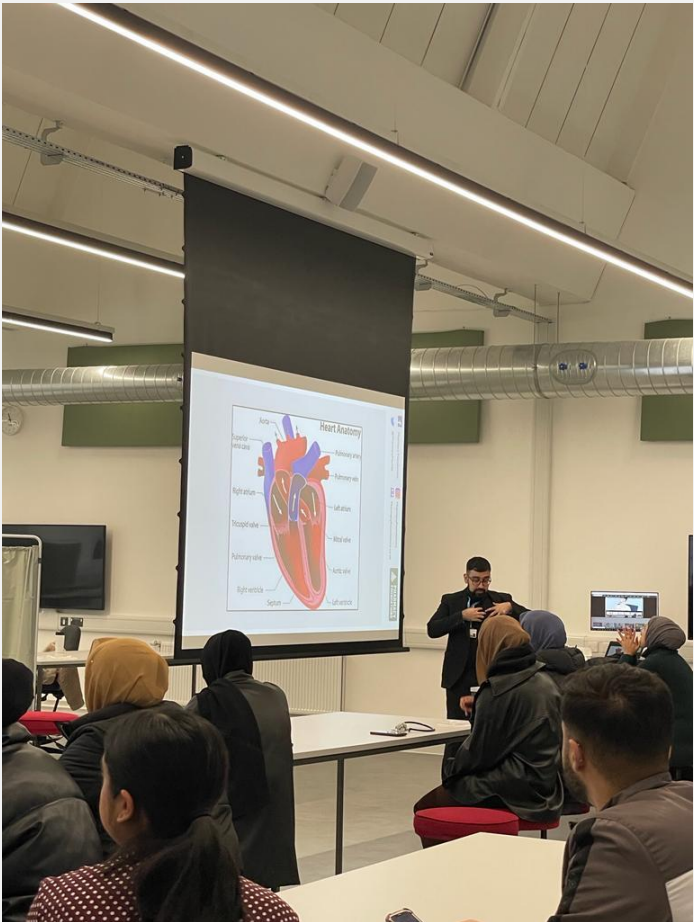
GP Clinical Simulation & Curriculum implementation



Hospital Simulation Through VR learning



Advanced Clinical Examination Skills with Service User Involvement (NHSE/HEE Funded)



## ROYAL PHARMACEUTICAL SOCIETY

NHS Community Pharmacist Consultation Service (CPCS) CPD Course

Your chosen sessions:  
Sunday 21 November, 9.30am - 12pm and Sunday 28 November, 9.30am - 11.30am

In collaboration with:

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Joint RPS CPCS delivery



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MEET OUR TEAM



Atif Saddiq



Mohammad Imran



Dr Nadeem Akhtar

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  - For all Allied Health Practitioners
- Career change series
  - Hospital, academia & General Practice
  - Face to face experience
  - Clinical Therapeutics course
- Foundation/pre-registration training employer support:
  - Oriel Support
  - Training Plan Provision
  - Study days
- Foundation Trainee Online Revision Course

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**BUILDING FUTURE PHARMACISTS**

Sign up to our foundation training programme to help with the recruitment and development of your trainees!

Why choose our programme?

- COMPREHENSIVE STUDY DAYS**  
Aligned with the GPhC framework, covering the SMC, M&P, OTC revision and calculations.
- HIGH QUALITY RESOURCES**  
Up-to-date study guides, GPhC-style mock paper and infographics are provided to support learning.
- PRACTICAL TRAINING**  
Trainees engage in real-world scenarios with our SystemOne simulation suite to apply clinical knowledge. Optional extras include Pharmacy First, BLS and flu vaccination training.

**EXPERT LED INSTRUCTION AND ONGOING SUPPORT**

Courses are developed and delivered by expert pharmacists across multiple sectors including general practice, hospital, community, prison, health education and training.

Trainees benefit from regular progress meetings and access to a dedicated online support forum throughout their journey.

We are also able to help you secure a designated prescribing practitioner (DPP) for your training programme.

**ORIEL SUPPORT**

Support on Oriel is also available including:

- Guidance on navigating the Oriel platform
- Account setup and registration
- Marketing your training programme
- Submitting employer data
- Crafting GPhC-approved training plans

By enrolling your trainee pharmacists in our programme, you are making a valuable investment in both their future and the success of your organisation.

www.pharmacyfoundations.co.uk | info@pharmacyfoundations.co.uk | Follow our socials @pharmacyfoundations

**PHARMACY FOUNDATIONS**

**Success in a pack**

Our courses are based on the GPhC specification to help you succeed in the pharmacy recruitment process.

**Online Pharmacy Calculations Masterclass**

To tackle the GPhC exam

**GPHC STYLE EXAM**

FULL PAPER

Our mock will be available to sit on several dates.

**FOUNDATION FOCUS**

FOR FURTHER INFO CHECK PHARMACYFOUNDATIONS.CO.UK

**PHARMACY FOUNDATIONS**

**for Roles in Hospital**

**Studies & Interview Tips**

Limited Places Available!

**Course tutors**

- Abbae Alidina  
Deputy Chief Pharmacist (Hospital)
- Devesh Patel  
Principal Pharmacist Digital (Hospital)



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# Community Pharmacy Support Group



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# Paving the Way for Future Services

A new NHS Vaccination Service demonstrating faith and confidence being placed in community pharmacy by the Government.

This is our chance to show how responsive we can be.



## Government Confidence

Demonstrates immense faith placed in community pharmacy by NHSE.



## Responsive Capability

Proves how efficiently and safely we can mobilise new clinical services.



## The Ultimate Goal

Success here directly paves the way for expanded future opportunities.

# Clinical Overview

# Aims and Objectives:

By the end of this session, you should feel more confident to:

- Explain **why MenB vaccination** matters
- Identify **eligible and non-eligible** patients
- Manage previous or uncertain MenB **vaccination history**
- Counsel patients clearly on vaccine **benefits and limitations**
- **Safety-net** for meningitis, septicaemia and sepsis symptoms
- Deliver a safe, well-documented **vaccination consultation**



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## Killer meningitis is spreading in Kent

Isle of Sheppey

Queen Elizabeth's Grammar School Faversham

University of Kent, Canterbury

KENT

Highworth Grammar School in Ashford

Simon Langton Grammar School for Boys, Canterbury

Norton Knatchbull School, Ashford

Escape Studios in London

LONDON

Two cases of meningitis. One has confirmed link to Kent outbreak



# Why now? Kent outbreak and recent clusters

**The public health trigger:** This one-off MenB programme was introduced following concern about recent outbreaks and clusters.

## Why was this programme introduced?

- The **University of Kent (Canterbury) outbreak** was described as the **fastest growing and largest MenB cluster seen in the UK to date**.
- Genomic analysis identified **genetic changes in the outbreak strain** compared with previously circulating MenB strains in England.
- Additional MenB clusters were identified in **Weymouth** and **Reading**.
- Some recent clusters occurred **outside the usual peak meningococcal season (September–January)**, raising concern about changing patterns of disease.

## Why act before autumn?

- MenB risk often rises during autumn and early winter
- New students mix closely at the start of term
- Two doses are needed for protection
- Dose 2 must be at least 28 days after dose 1
- Giving dose 1 early gives the best chance of protection before term starts

UK Health Security Agency and NHS England. (2026). *Annex A: detailed information, guidance and resources for healthcare professionals: Meningococcal B time-limited vaccination offer*. Published 16 June 2026.

NHS England *MenB Vaccination Service Specification*



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How much do you already know?



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# Eligibility: The core groups

## Eligible from 20 July 2026

Patients are eligible if they fall into one of these groups:

**1. Year 13 age group :-** Born between **1 September 2007 and 31 August 2008**. Eligible based on date of birth alone – evidence of university or further education is not required.

### **2. First-time undergraduate higher education entrants**

Students 25 year old and under (Born on or after 21/07/2001) and starting undergraduate higher education for the first time in autumn 2026

### **3. First-time residential further education entrants**

Students 25 year old and under and living in FE accommodation or halls of residence for the first time in autumn 2026

Includes eligible:

- International students
- Students from devolved administrations
- Students from Crown Dependencies attending these settings in England

[\\*List of eligible residential further education settings](#)



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# Why students are a higher-risk group <sup>(1,2)</sup>

## Why focus on Year 13 and first-time university/residential FE entrants?

Risk increases because students may experience:

- After infancy, invasive **meningococcal disease** occurs most commonly in young adults, particularly **18–19-year-olds**
- **First-year university students** have approximately a **7-fold higher risk of MenB** disease than similar-aged peers who do not attend university.
- Moving into **new social environments** and **shared accommodation** **increases exposure** to meningococcal bacteria.
- **Transmission** is promoted by close and **prolonged contact**, including **kissing, sharing drinks or vapes, and living in shared accommodation**.
- Meningococcal disease activity usually peaks during **autumn and early winter (September–January)** shortly after the start of the academic year.



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# Why this service matters: MenB is rare but serious

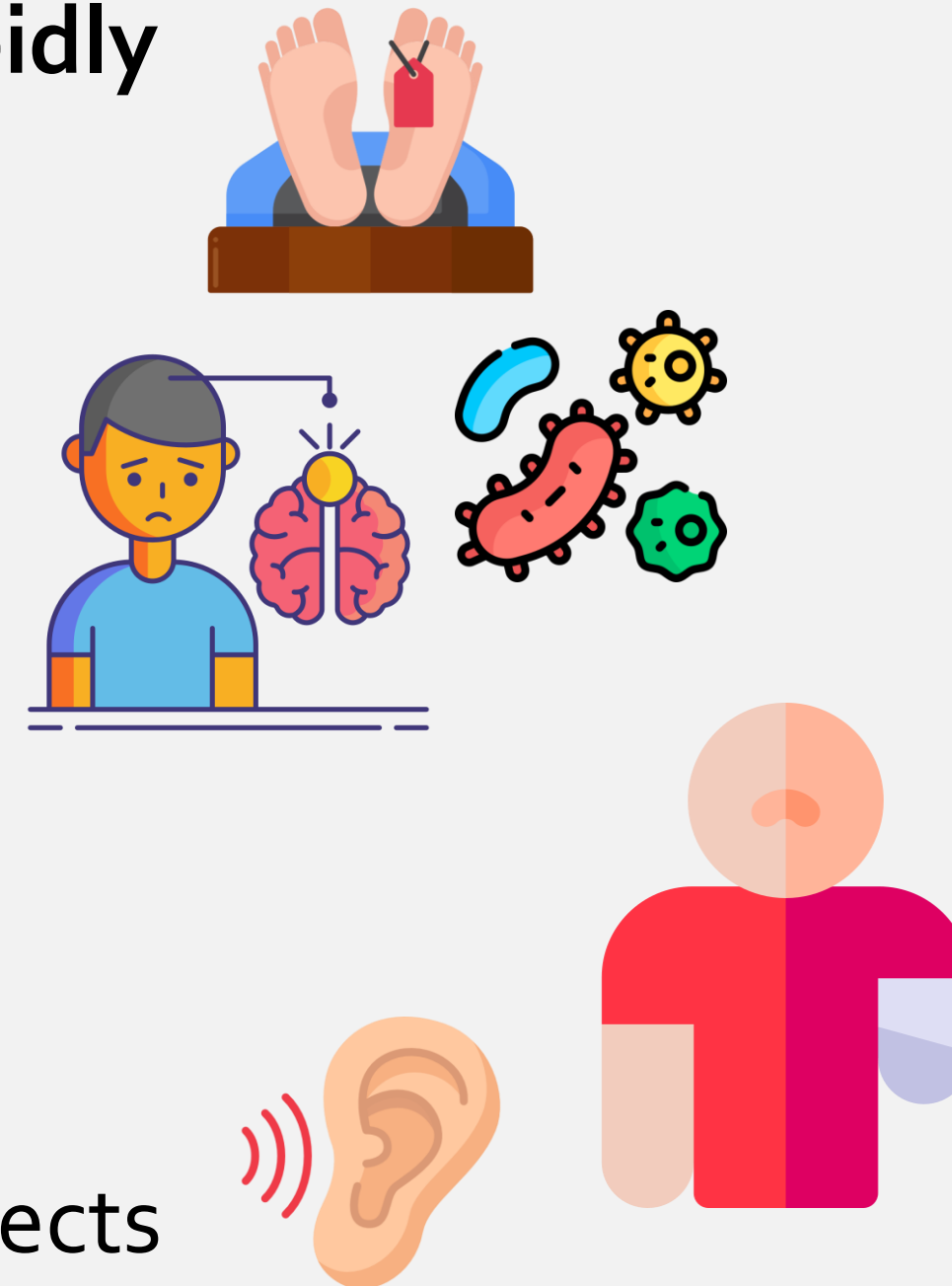
## Meningococcal B disease can progress rapidly

MenB can cause:

- Meningitis
- Sepsis
- Death or life-changing complications

## Complications may include:

- Hearing loss
- Neurological injury
- Limb loss or amputation
- Long-term physical and psychological effects



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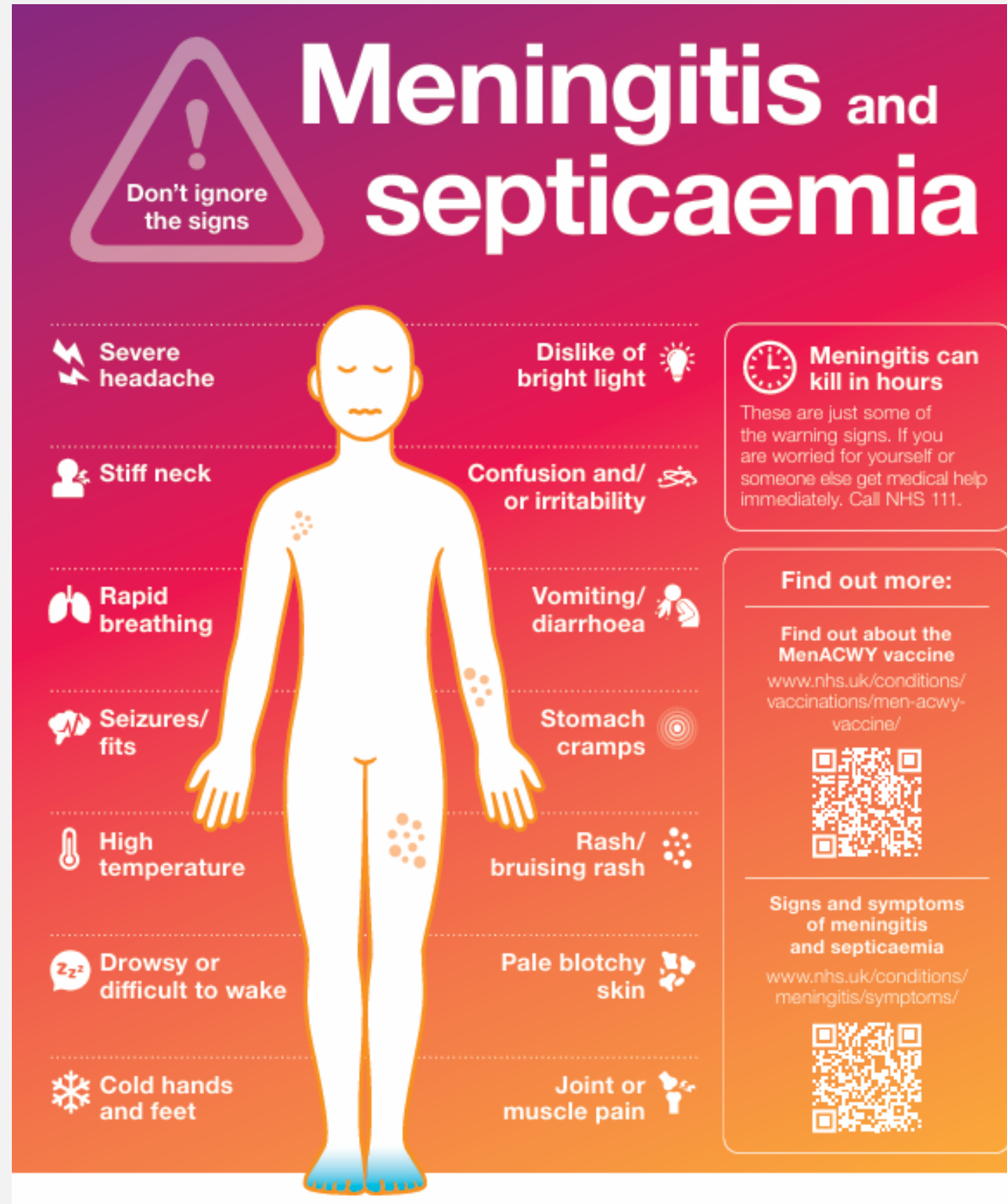


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# Non-blanching rash



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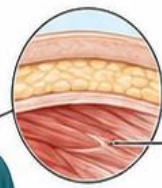
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# How the MenB Vaccine Works

From injection to immune protection

1

1) Injection into the deltoid

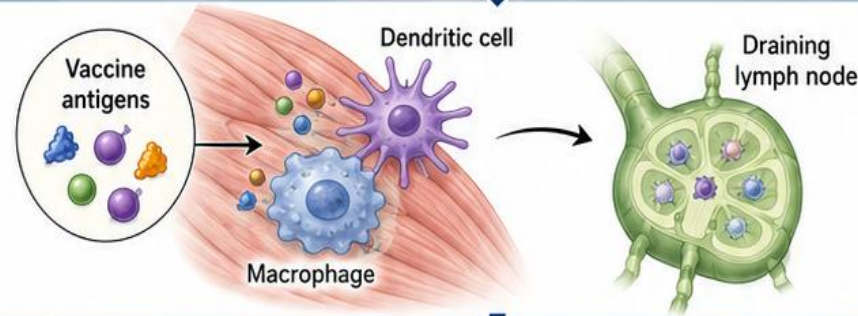


Deltoid muscle

MenB vaccine given as an intramuscular injection into the deltoid muscle.

2

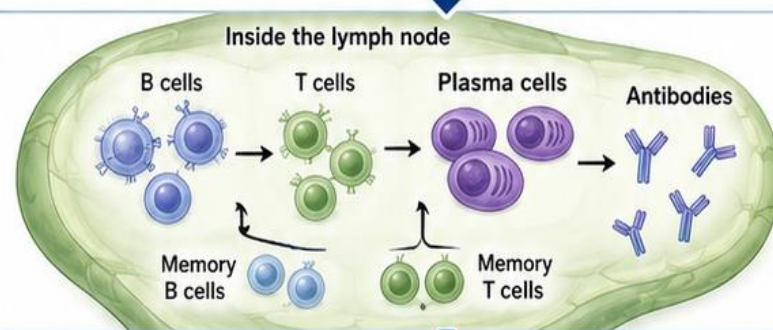
2) Early immune activation



Immune cells recognize the vaccine antigens and begin the response.

3

3) Building immunity



B cells and T cells are activated. The body makes protective antibodies and immune memory.



4

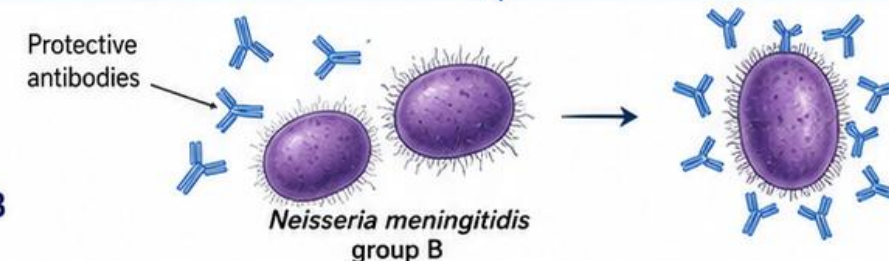
4) Short-term post-vaccination symptoms



Common short-term symptoms are a sign the immune system is responding. They are usually mild and temporary.

5

5) Protection against meningococcal B



If exposed later, the immune system responds faster and helps protect against MenB disease.



MenB vaccine helps protect against invasive meningococcal group B disease, including meningitis and septicaemia.



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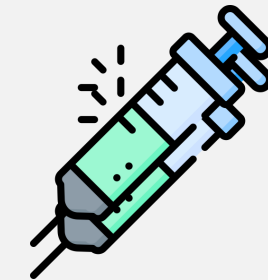
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# How effective is the vaccine?<sup>(1)</sup>

**Bexsero<sup>®</sup> provides strong individual protection against MenB disease**

- Protects against **most, but not all**, MenB strains circulating in the UK. (1)
- Protection develops **approximately 2 weeks after the second dose**. (1)
- Protection is expected to last **at least 5 years**. (1)
- The vaccine has been part of the **UK routine infant immunisation programme since 2015**, with an excellent safety record. (1)
- A UK study demonstrated a **75% reduction in MenB disease** among vaccinated infants. (1)



(1) UKHSA (2026). *Who is eligible for the new one-off MenB vaccine programme?* (12 June 2026).



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# What Bexsero does and does not do

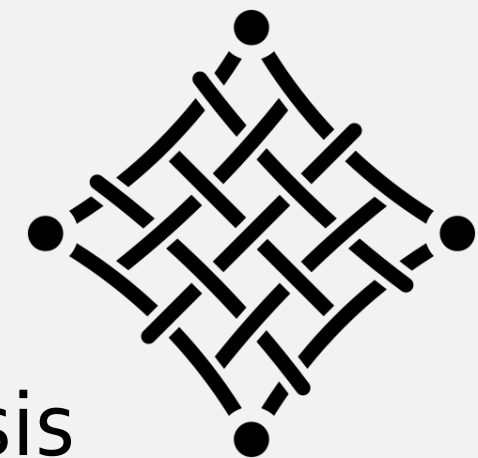
## Bexsero®

The vaccine provides individual protection against **most, but not all MenB strains.**



It does **not**:

- Protect against every MenB strain
- Protect against all causes of meningitis
- Protect against all causes of septicaemia or sepsis
- Remove the need for symptom awareness



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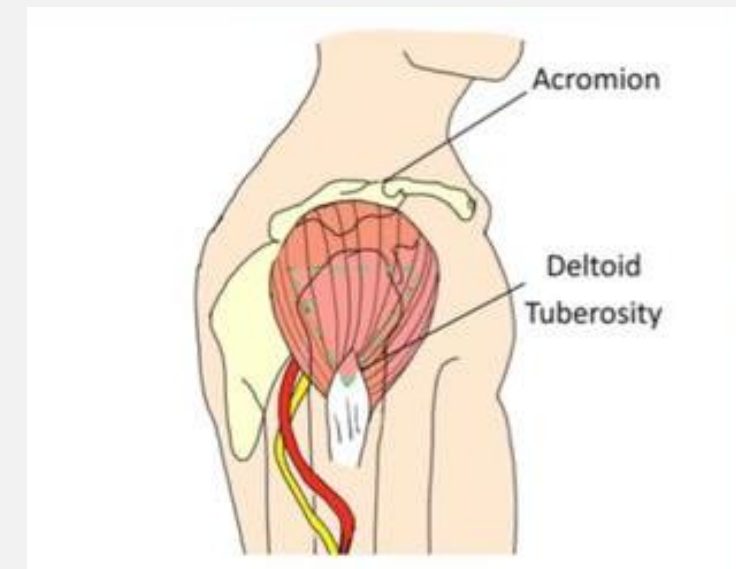


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# How to store & administer the vaccine:

- **Bexsero®** store in fridge (original container) at **2–8°C**
- **Bexsero®** is given as a **0.5ml dose by intramuscular injection** in the **deltoid muscle** of the **upper arm** (or anterolateral aspect of the thigh where the deltoid cannot be used).
- If **another vaccine** needs to be administered in **the same limb**, they should be given at **least 2.5cm apart**.
- The **vaccine is a white opalescent liquid** suspension. Upon **storage** a fine **off-white deposit** may be observed in the **pre-filled syringe** containing the suspension. Before use, the pre-filled syringe should be **shaken well** to form a **homogeneous suspension**.
- The vaccine should be **visually inspected for particulate matter** and **discoloration** prior to administration. In the event of any **foreign particulate matter** and/or variation of physical aspect being observed, **do not administer the vaccine**.



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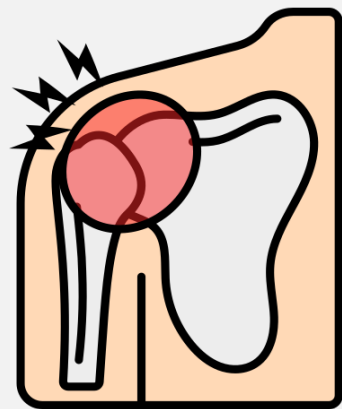
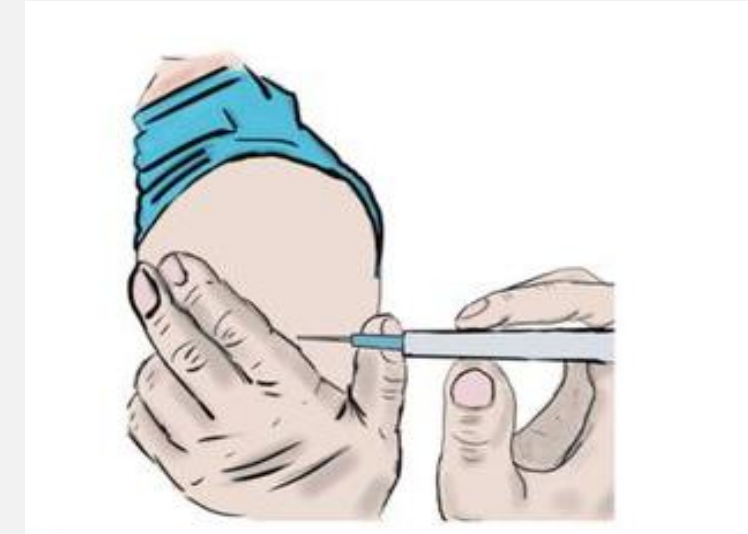


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# Bexsero clinical essentials



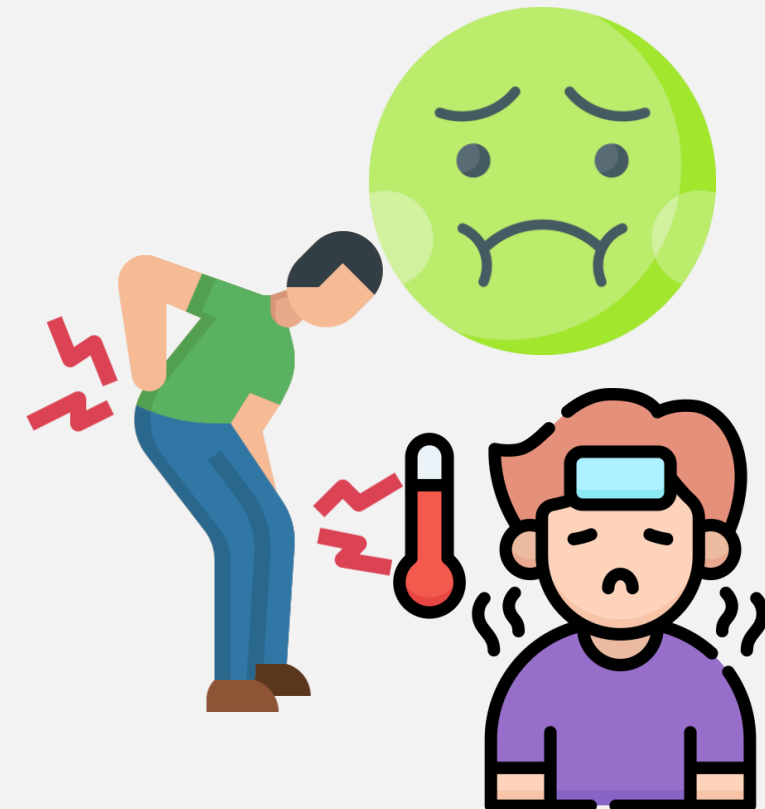
**Vaccine:** Bexsero® / 4CMenB  
**Dose:** 0.5 mL  
**Route:** Intramuscular injection  
**Site:** Deltoid muscle of upper arm  
**Schedule:** 2 doses  
**Minimum interval:** 28 days



## Common side effects:

Injection site pain  
Redness or swelling  
Headache  
Malaise  
Muscle aches  
Fever  
Nausea

**Most side effects are mild and settle within 1–2 days.**



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## NHS Meningococcal B (MenB) Vaccination Service - pre-consultation questionnaire

To safely provide the MenB vaccine to you, we first need to ask a few questions.

Please complete this form before your consultation.

|                                                                                                                                        |  |                |                              |                                                                  |  |
|----------------------------------------------------------------------------------------------------------------------------------------|--|----------------|------------------------------|------------------------------------------------------------------|--|
| Name:                                                                                                                                  |  | Date of birth: | / /                          | Age:                                                             |  |
| Address:<br>(including postcode)                                                                                                       |  |                |                              |                                                                  |  |
| Telephone number:                                                                                                                      |  | NHS number:    |                              |                                                                  |  |
| GP practice:                                                                                                                           |  |                |                              |                                                                  |  |
| 1. Have you received a course of MenB vaccinations in the last 5 years? The vaccinations would have been called Bexsero® or Trumenba®. |  |                | <input type="checkbox"/> Yes | <input type="checkbox"/> No<br><input type="checkbox"/> Not sure |  |
| 2. Have you ever had an anaphylactic reaction to any vaccine?<br>If yes, please provide details below:                                 |  |                | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                      |  |
|                                                                                                                                        |  |                |                              |                                                                  |  |
| 3. Are you currently suffering from a high temperature?                                                                                |  |                | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                      |  |
| 4. Do you have any long-standing medical conditions?<br>If yes, please provide details below:                                          |  |                | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                      |  |
|                                                                                                                                        |  |                |                              |                                                                  |  |



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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                   |                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------|
| 5. Are you taking any medication?<br>If yes, please provide details below:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Yes      | <input type="checkbox"/> No       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                   |                                   |
| 6. Do you have any issues with the sight of needles or blood?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Yes      | <input type="checkbox"/> No       |
| 7. Do you have any allergies?<br>If yes, please provide details below:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes      | <input type="checkbox"/> No       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                   |                                   |
| 8. Are you pregnant, or might you be pregnant?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Yes      | <input type="checkbox"/> No       |
| 9. The course of MenB vaccinations is <u>two doses</u> (at least 28 days apart). This is my:                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> 1st dose | <input type="checkbox"/> 2nd dose |
| 10. If this is your second dose, when was your first dose administered?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | / /                               |                                   |
| Thank you for completing this form. Please return it to a member of staff.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |                                   |
| For the pharmacy team:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Consultation date:                | / /                               |
| Check the patient's eligibility for the service by confirming:<br><input type="checkbox"/> Their date of birth is between 1st September 2007 to 31st August 2008; or<br><input type="checkbox"/> Their date of birth is on or after 21st July 2001 and they have evidence of an offer for higher education (issued either by the Universities and Colleges Admission Service or the university or college itself) or residential further education entry (issued by one of the organisations listed on the GOV.UK website) for the 2026/27 academic year. |                                   |                                   |



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# Previous MenB vaccination history

## Ask every patient:

"Have you ever had a MenB vaccine before, either through the NHS, privately, abroad, or as part of an outbreak response?"

## Evidence may include:

- GP shared care record
- Vaccination card
- Private provider record
- NHS app record
- International vaccine record

## Why it matters:

Some patients may already have received Bexsero® or Trumenba®.

# NHS



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# Previous vaccination decision table

## How to manage previous MenB vaccination

| Previous history                                                     | What to do now                                                                                       |
|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| 1 previous Bexsero® dose (irrespective of timing of that prior dose) | Give 1 Bexsero® dose now, at least 28 days after first dose                                          |
| 2 Bexsero® doses less than 5 years ago                               | No further dose needed                                                                               |
| 2 Bexsero® doses 5 or more years ago                                 | Give 1 Bexsero® dose now                                                                             |
| Completed Trumenba® course less than 5 years ago                     | No further dose needed                                                                               |
| Completed Trumenba® course 5 or more years ago                       | Start full 2-dose Bexsero® course                                                                    |
| Partial Trumenba® course                                             | Start 2-dose Bexsero® course, or patient may complete Trumenba® privately/outside national programme |
| Unknown history and no evidence                                      | Start 2-dose Bexsero® course                                                                         |



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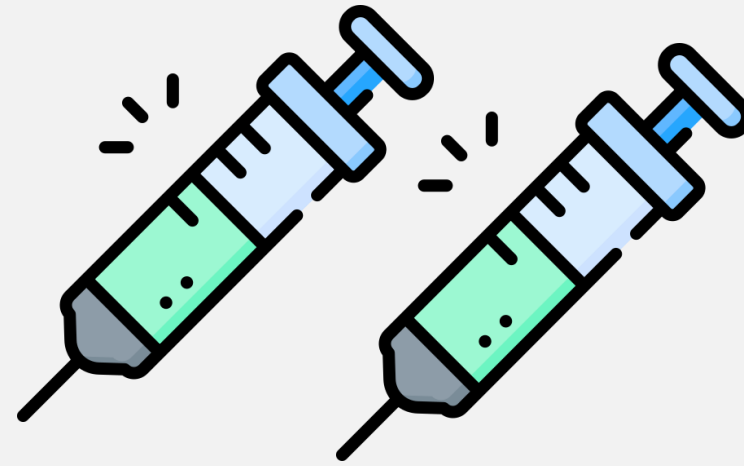


# Dosing Regime : preventing missed protection

## Two doses are essential for protection

### Dose 2 should be:

- Given at least **28 days** after dose 1
- Ideally completed before the **autumn term**
- Offered **even if dose 1 was given elsewhere**
- **Not necessarily given at the same pharmacy**



### After dose 1, always say:

“Your protection needs two doses. Please book your second dose now or as soon as possible. It can be given at any participating pharmacy, but it must be at least 28 days after today.”

### Time limits:

- **First doses** can be given until **31 December 2026**
- **Second doses** can be given **until 31 March 2027**



The service specification states that the second dose should be administered at least 28 days after the first dose, and that patients should be encouraged to make an appointment for dose 2 as soon as possible after dose 1.



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## What if dose 2 is given too early?

**Recommended interval:**  
At least 28 days after dose 1



**If dose 2 is accidentally given from day 21 onwards:**  
It can count as valid, although this is off-label.

**If dose 2 is given before day 21:**  
It should not be counted. Repeat the dose, ensuring at least 28 days after the early invalid dose.



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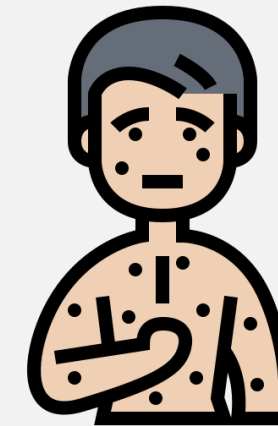
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# Contraindications and clinical cautions



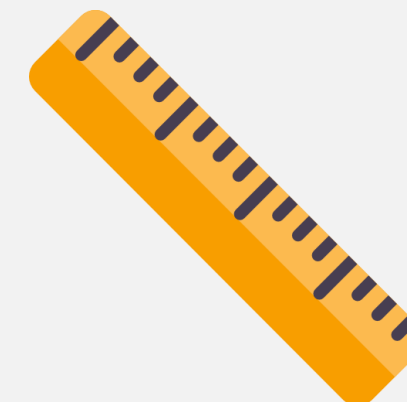
**Do not give MenB vaccine if there is:**  
Confirmed anaphylaxis to a previous dose  
Confirmed anaphylaxis to a component or manufacturing residue



**Pregnancy and breastfeeding**  
MenB vaccines may be given in pregnancy when clinically indicated  
No evidence of risk from vaccinating those who are pregnant or breastfeeding



**Co-administration**  
Meningococcal vaccines can be given at the same time as other vaccines  
Use a different site, preferably a different limb



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# Consultation flow: a safe MenB appointment

## Suggested consultation structure

1. Confirm **identity**
2. Confirm **DOB** and **eligibility route**
3. Check **HERFE evidence** if needed
4. Ask about **previous MenB vaccination**
5. Screen **contraindications** and clinical concerns
6. Explain vaccine **benefits and limitations**
7. Gain and record **informed consent**
8. **Administer** vaccine safely
9. **Record** vaccination on the point-of-care system & give record card
10. Give **PIL** or direct to online PIL
11. Safety-net for **meningitis and sepsis** symptoms
12. **Book** or strongly prompt dose 2



UK Health Security Agency **NHS**

Don't forget your second dose of MenB vaccine to protect against meningitis and septicaemia

**Meningococcal B (Bexsero) vaccination** record card

Name:

**1st dose**  
Vaccine given: ..... Date: .....

**2nd dose**  
Vaccine due: ..... Date: .....

**i mmunisation**  
the safest way to protect your health

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# Consent, data sharing and safeguarding

## Consent before vaccination explain:

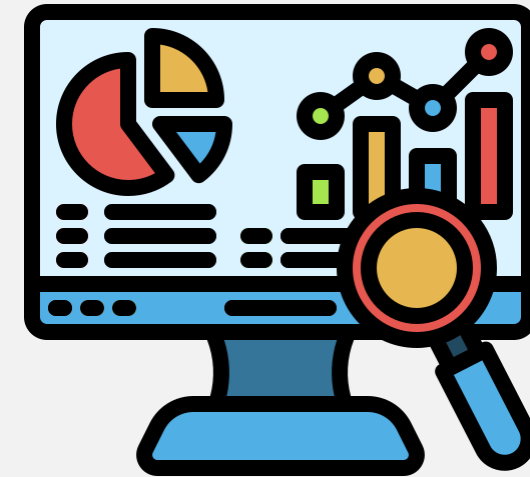
- What the vaccine is for
- Common side effects
- That two doses are needed
- That protection is not absolute
- Give opportunity for questions
- Record informed consent



## Data sharing

Patients must be told vaccination information will be shared with:

- Their GP practice, where known
- NHSBSA for payment and post-payment verification
- NHS England and UKHSA for programme monitoring and evaluation



## Safeguarding

If there are safeguarding concerns, follow local safeguarding procedures. The service specification requires informed consent to be sought and recorded and requires patients to be informed how vaccination information will be shared.



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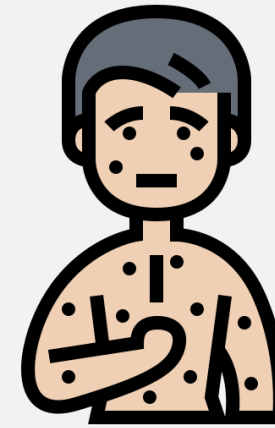
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# Clinical safety: fainting, anaphylaxis and incidents

## Before vaccinating, check:

- Anaphylaxis pack available and in date
- Adrenaline available and in date
- Staff know how to call for help
- Patient can be placed in recovery position if needed
- There is enough space to manage fainting or collapse
- Sharps and clinical waste processes are in place



## After vaccination:

- Manage adverse reactions appropriately
- Report clinically significant suspected adverse reactions via Yellow Card
- Inform GP if clinically appropriate

The NHS service specification requires staff to have training in recognition and initial management of anaphylaxis, and requires Yellow Card reporting for clinically significant suspected adverse reactions.

A photograph of a Yellow Card scheme form. The form is yellow and contains fields for patient details, suspected drug(s), and suspected reaction(s). It includes instructions on how to report an adverse reaction and a section for the outcome of the reaction.

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# Providing the Service

# Who is eligible?

**Confirm eligibility before every vaccination - even when the patient booked through NBS**

## Year 13 age cohort

Born 1st September 2007–31st August 2008. If using the age route, registered with a GP surgery in England.

## First-time undergraduate

Born on or after 21st July 2001 and starting undergraduate higher education for the first time in autumn 2026.

## Residential FE entrant

Born on or after 21st July 2001, starting further education for the first time in autumn 2026 and living in eligible FE accommodation.

**Please note - Individuals without an NHS number or GP registration can still receive the vaccine if they are otherwise eligible under the HERFE programme**

# Who is not eligible?

- those aged less than 25 years, who are not entering HERFE for the first in the Autumn term 2026, and fall outside the current Year 13 age group specified above
- postgraduates and other students who are not entering HERFE for the first time in the Autumn term of 2026
- those who have completed a 2-dose course of Bexsero<sup>®</sup> within the last 5 years
- those who have completed a 2-dose (provided those doses were given at least 6 months apart) or 3-dose course of Trumenba<sup>®</sup> within the last 5 years

# Confirmation of Eligibility

Young people eligible by age are identified by date of birth as documented in their clinical records (i.e. born between 01/09/2007-31/08/2008).

**To be eligible as HERFE entrants, they will need to:**

1. Fall within the relevant age group by date of birth (i.e. those born on or after 21/07/2001) **AND**
2. Present acceptable evidence at their vaccination appointment that they are due to attend HERFE for the first time in the academic year 2026-27, as follows:
  - Official email confirmation of their offer of a place at their chosen university or college from either the HE institution (usually a @ac.uk email address) or the Universities and Colleges Admissions Service (UCAS).
  - A letter (hard copy or email) confirming they have received an offer of a place for the 2026/27 academic year at their chosen university or college.
  - Screenshot of their offer of a place at their chosen university or college from the UCAS Hub.

The relevant evidence should include the name of the university or college that they are due to attend, the course code and/or title of the course of study, and confirmation of the offer of a place (either conditional or unconditional).

# Confirmation of eligibility

## Residential Further Education (RFE)

For students entering **residential further education**, pharmacy owners must:

- Check the [current UKHSA list of eligible residential further education settings](#)
- Use the **latest online version**, as the list is regularly updated

Eligible military personnel attending eligible military further education settings should have evidence in the form of a hard copy or email official joining letter, or similar correspondence from the Armed Forces Careers Office. Some recruits may have a temporary or permanent MOD ID card.

# Critical Dates



**6th July 2026**

Registration target to ensure  
NBS appointment availability  
by launch.

**20th July 2026**

Service commencement  
date & final registration  
deadline  
(closes 11:59 pm)

**31st December 2026**

Deadline for administering  
first doses

**31st March 2027**

Deadline for administering  
second doses (minimum 28  
days post-first dose)

# Compliance Checklist

- ✓ Register via the CPE website electronic form (Separate registration required per site; check with head office).
- ✓ Ensure all vaccinators hold a valid Enhanced DBS Check against the children's barred list.
- ✓ Implement the Standard Operating Procedure (SOP).
- ✓ Sign and authorise the Patient Group Direction (PGD).

## SITE REGULATIONS

Distance Selling Pharmacies (DSPs) can provide the service, but strictly off-premises.

Off-Site Delivery: All pharmacies can provide the service off-site, but only with prior permission from the regional NHS England Vaccination Team.

# Ordering Vaccines

- 1 Follow the set-up procedures in the NHS MenB vaccine allocation and ordering guidance.
- 2 Initial allocation of 10 vaccines - need to order these, they will not be sent automatically.
- 3 Cannot order extra stock for walk-ins. Pharmacies must use surplus doses for these.
- 4 Stock allocation will be adjusted according to usage.
- 5 Fixed delivery day each week.
- 6 Keep a close eye on order deadlines!

# Resources

## Physical Orders (Order for Delivery)

**MenB Vaccination  
Record Cards**



**Sharps Bins**

**Patient Leaflets  
(Paper copies optional)**

## Digital Downloads (CPE Service Page)

**Pharmacy Owner Checklist**

**Vaccinator Checklist**

**Pharmacy Team Briefing**

**Signs and Symptoms of Meningitis Poster**

**Patient Leaflets (PDF version)**

# IT Requirements

## RAVS (Record a Vaccination Service)

Patient Records. The designated Point of Care system.

## NHS Profiles

Visibility. Automatically updated; use to post walk-in clinic details.

## YOUR PHARMACY

## FDP (Federated Data Platform)

Stock Orders. Submit valid stock take within 7 days of request.

## NBS (National Booking System)

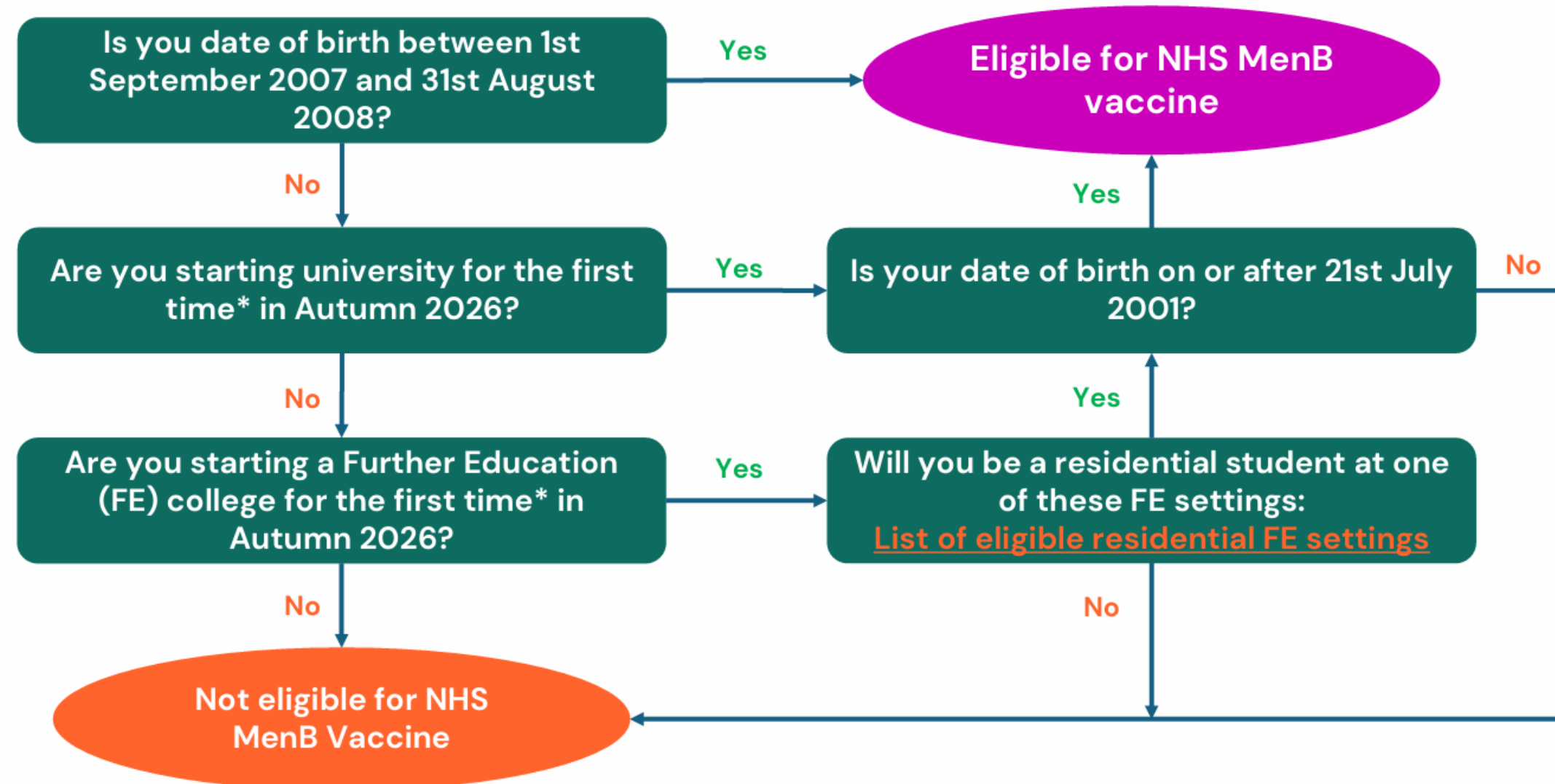
Scheduling. Mandatory use for all clinics.

## MYA (Manage Your Appointments)

Capacity. Ensure 100+ appointments per month, plus walk-ins.

# Patient Eligibility Flowchart

## Meningococcal B (MenB) vaccine eligibility criteria



\* Including international students, those from Scotland, Wales, Northern Ireland, Channel Islands and Isle of Man

# Patient Information

## MENINGITIS & SEPTICAEMIA

Severe headache  
Stiff neck  
Dislike of bright light  
Confusion or irritability  
Rapid breathing  
Vomiting / diarrhoea  
Seizures / fits  
High temperature  
Rash / bruising rash  
Drowsy or difficult to wake  
Pale blotchy skin  
Cold hands and feet  
Joint or muscle pain

### Recognise & Instruct

It is a clinical requirement to educate the patient on the signs of meningitis and sepsis during the first dose appointment.

### Utilise the Visual

Walk the patient through the severe headache, stiff neck, and rash indicators using this poster in the consultation room.

### Establish Urgency

Emphasise that meningitis can kill in hours and to call NHS 111 immediately if symptoms appear.

# Compliance & Record Keeping Workflow

## 1 Same-Day Entry

Vaccinations **MUST** be recorded on the exact day of administration in RAVS.

## 2 Patient Match

Search via NHS Number OR Name & DOB. (Records can be created without an NHS number).

## 3 Data Transmission

Saving the RAVS record automatically shares the vaccination data with the patient's GP surgery.

## Homeless Patients

If a patient is homeless and requires a postcode for the system, input: **ZZ99 3VZ**

# Top Tips

## TIP

**Pharmacies must submit a valid stocktake on FDP within 7 days of any requests for additional vaccine.**

## TIP

**Liaise with your local GP practices to let them know when you're offering the service - they will be receiving lots of patient queries.**

## TIP

**A GP Briefing and a downloadable GP letter are available on the CPE website.**

# Questions and Discussion

## References

- (1) UKHSA (2026) *Who is eligible for the new one-off MenB vaccine programme?* (Blog, 12 June 2026). UKHSA & NHS England (2026)
- (2) *Annex A: Meningococcal B Time-Limited Vaccination Offer.* (2026)
- (3) NHS UK(2023). *Meningitis and septicaemia.* Available from:  
[https://assets.publishing.service.gov.uk/media/64fb167e5727800014251807/UKHSA\\_12744\\_Meningitis\\_\\_\\_Don\\_t\\_ignore\\_the\\_signs\\_A3\\_poster\\_02\\_WE\\_B.pdf](https://assets.publishing.service.gov.uk/media/64fb167e5727800014251807/UKHSA_12744_Meningitis___Don_t_ignore_the_signs_A3_poster_02_WE_B.pdf)



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## Community Pharmacy Drop-In Sessions

Are you a pharmacy owner or team member with questions about the Community Pharmacy Contractual Framework (CPCF) or delivering national and local pharmacy services?

At Community Pharmacy South Yorkshire (CPSY), we understand how important it is to stay connected with our contractors and support you in navigating the challenges and opportunities within community pharmacy.

That's why our Chief Executive Officer, Joanne Lane, is hosting a series of informal drop-in sessions, open to all South Yorkshire pharmacy contractors, pharmacists, and team members.

**These sessions are a great opportunity to:**

- Discuss CPCF requirements and service delivery
- Raise regional or national issues affecting your pharmacy
- Access contractual and operational support
- Share feedback on services
- Ask about what we do and how we can help your pharmacy

Upcoming  
sessions and links  
to join can be  
found here.



### Upcoming sessions

- Tuesday 11th August – 10:00 – 11:00 – [Click here to join](#)
- Wednesday 9th September – 19:00 – 20:00 – [Click here to join](#)
- Thursday 15th October – 10:00 – 11:00 – [Click here to join](#)
- Wednesday 11th November – 19:00 – 20:00 – [Click here to join](#)

# Join the SY Pharmacy Connect WhatsApp Group!

Stay Connected with Community Pharmacy South Yorkshire

Stay up to date.  
Stay connected.  
Stay informed.

Join our WhatsApp group for:



Important updates  
& announcements



Service information  
& deadlines



Key resources  
& guidance



A safe space to ask questions, share  
insights & exchange experiences



Designed for Pharmacy Contractors, staff  
& locums across South Yorkshire



**JOIN TODAY!**



Scan the QR code  
to join the group



Or Visit:

<https://southyorkshire.communitypharmacy.org.uk/cpsy-whatsapp-group/>



## Book a 1-2-1 with our CEO

At Community Pharmacy South Yorkshire, we recognise how important it is to keep in touch with our contractors and pharmacy teams.



That's why our Chief Executive Officer, Joanne Lane, is offering **FREE 15-minute virtual appointments** to all South Yorkshire pharmacy contractors, pharmacists, and team members.

**These sessions are a great opportunity to:**

- Discuss sector-specific matters
- Raise regional or national issues
- Access contractual support
- Share feedback on our services
- Learn more about what we do and how we can help

**We're here to listen, support, and work with you to strengthen community pharmacy across South Yorkshire.**

[Book a 1-2-1 with our CEO](#)



Supporting Pharmacies. Building Healthier Communities.

**Contact us at [info@cpsy.org.uk](mailto:info@cpsy.org.uk)**

Visit: [www.PrimaryHD.co.uk](http://www.PrimaryHD.co.uk) for further info!

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Mohammad Imran



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# Feedback form

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# Community Pharmacy Support Group



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