

WG24-43

**THE NATIONAL HEALTH SERVICE (WALES) ACT
2006**

**Directions to Local Health Boards as to the Statement of
Financial Entitlements (Amendment) (No. 3) Directions 2024**

Made

09 October 2024

Coming into force

10 October 2024

The Welsh Ministers, in exercise of the powers conferred on them by sections, 12, 45, 203(9) and (10) and 204(1) of the National Health Service (Wales) Act 2006^(a) and after consulting in accordance with section 45(4) of that Act with the bodies appearing to them to be representative of persons to whose remuneration these Directions relate, give the following Directions.

Title, application and commencement

1.—(1) The title of these Directions is the Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2024.

(2) These Directions are given to Local Health Boards. They relate to the payments to be made by Local Health Boards to a GMS contractor under a GMS contract and for those payments to be made by reference to standards, levels of performance

(3) These Directions

- (a) are made on 9 October 2024,
- (b) come into force on 10 October 2024, and
- (c) have effect in accordance with Schedule 1.

Amendment to the Statement of Financial Entitlements

2. The Directions to Local Health Boards as to the Statement of Financial Entitlements Directions 2013^(b) which came into force on 11 June 2013, as amended by the Directions listed in Annex J of that direction, are further amended as follows.

Amendment of Section 7: Childhood Immunisations

- 3.** In paragraph 7.3(b)(i), after “hepatitis B;”, insert, “and”.
- 4.** In paragraph 7.3(b)(ii) after “rubella”, for “; and” substitute”.”.
- 5.** Omit paragraph 7.3(b)(iii).
- 6.** Paragraph 7.15(b) is amended as follows:

(a) 2006 c. 42.
(b) 2013 No. 8.

- (1) after, “against”, insert, “—”,
- (2) omit, “diphtheria, tetanus, pertussis and poliomyelitis.”,
- (3) after, “against—”, insert on a separate line, “(i) diphtheria, tetanus, pertussis and poliomyelitis; and”, and
- (4) after “(i) diphtheria, tetanus, pertussis and poliomyelitis; and”, insert on a separate line, “(ii) measles/mumps/rubella.”.

Amendment of Section 9: PNEUMOCOCCAL VACCINE AND HIB/MENC VACCINE FOR CHILDREN BORN BEFORE 1 JANUARY 2020

7. Omit the whole of section 9.

Amendment of Section 9ZA: PNEUMOCOCCAL VACCINE AND HIB/MENC VACCINE FOR CHILDREN BORN AFTER 31 DECEMBER 2019

8. Omit all references to, “Section 9ZA”, and substitute with, “Section 9”.
9. Omit all references to, “9ZA”, and substitute with, “9”.
10. In paragraph 9.1, omit, “applies to children born after 31 December 2019. It”.
11. In paragraph 9.2, omit, “Public Health England”, and substitute with, “UK Health Security Agency”.
12. In the heading above paragraph 9.3, which reads, “Payment for the administration of PCV and Hib/MenC vaccine as part of the routine childhood immunisation schedule for children born after 31 December 2019”, omit, “born after 31 December 2019”.
13. In paragraph 9.3, omit, “born after 31 December 2019”.
14. In paragraph 9.5, omit, “born after 31 December 2019”.
15. In the heading above paragraph 9.6, which reads, “Payment for administration of PCV and Hib/MenC vaccine other than as part of the routine childhood immunisation schedule for children after 31 December 2019”, omit, “after 31 December 2019”.
16. In the heading above paragraph 9.7., which reads, “Children born after 31 December 2019 who are severely immunocompromised or have complement deficiency, asplenia or splenic dysfunction”, omit, “born after 31 December 2019”.
17. In paragraph 9.7, omit, “born after 31 December 2019”.
18. In paragraph 9.8, omit, “born after 31 December 2019”.
19. In the heading above paragraph 9.9, which reads, “Payment for children born after 31 December 2019 with an unknown or incomplete immunisation status”, omit, “born after 31 December 2019”.
20. In paragraph 9.9, omit, “born after 31 December 2019”.
21. In paragraph 9.10, omit, “born after 31 December 2019”.
22. Omit paragraph 9.11(a).
23. Omit paragraph 9.11(b), and substitute with, “9.11(a) the child in respect of whom the payment is claimed was on the contractor’s list of registered patients at the time the final completing course of the vaccine was administered.”.
24. Sequence paragraphs 9.11 (c) to (g), to, 9.11 (b) to (f), so they run in chronological order.
25. In paragraph 9.14(c), omit, “the contractor must record in the child’s records, kept in accordance with paragraph 72 (patient records) of Schedule 6 to the 2004 Regulations, any refusal

of an offer of a pneumococcal vaccine or a Hib/MenC vaccine,” and substitute with, “the contractor must record in the child’s records, kept in accordance with paragraph 78 (patient records) of Schedule 3 to the 2023 Regulations, any refusal of an offer of a pneumococcal vaccine or a Hib/MenC vaccine.”.

26. In paragraph 9.14(d), omit, “where a pneumococcal vaccine or a Hib/MenC vaccine is administered, the contractor must record in the child’s records, kept in accordance with paragraph 72 of Schedule 6 to the 2004 Regulations, those matters set out in paragraph 5(2)(d) of Schedule 2 to the 2004 Regulations,” and substitute with, “where a pneumococcal vaccine or a Hib/MenC vaccine is administered, the contractor must record in the child’s records, kept in accordance with paragraph 78 of Schedule 3 to the 2023 Regulations, those matters set out in paragraph 3(2)(d) of Schedule 2 to the 2023 Regulations.”.

Amendment of Section 10A: Shingles Immunisation Programme Immunocompetent

27. After paragraph 10A.12 insert –

“Payment for administration of the Shingles vaccine

10A.12A. A contractor may claim a payment of £10.03 in respect of each dose of the Shingrix® or Zostavax® vaccine given to immunocompetent registered patients in the circumstances set out in this section.”.

28. In paragraph 10A.13(iii) after “administered;” insert “(LHBs have discretion to make a payment under paragraph 10A.2 should a patient be vaccinated with their first dose within the 12 weeks immediately preceding their 65th or 70th birthday, or under paragraph 10A.7 should the patient be vaccinated with their first dose within the 12 weeks immediately preceding their 60th or 65th birthday).”.

Amendment of Annex B (Global Sum)

29. After Annex B (Global Sum) Part 1 (The Global Sum Allocation Formula) insert (including footnotes)—

“PART 2

Vaccines and Immunisations

CHAPTER 1

Introduction

B.26 Part 2 of Annex B sets out types of vaccines and immunisations and the circumstances in which Contractors are to offer and give such vaccines and immunisations under the terms of their GMS contract.

B.27 The vaccines and immunisations set out in this Annex are paid under the Global Sum Payment provisions (Part 1 of the SFE) and are not eligible for an item of service (“IoS”) fee.

CHAPTER 2

VACCINES AND IMMUNISATIONS WHICH ARE NOT REQUIRED FOR THE PURPOSE OF FOREIGN TRAVEL

General

B.28 Contractors are to offer vaccines and immunisations in respect of the diseases listed in column 1 of Table 1 (whether or not there is any localised outbreak of any of the diseases mentioned in Chapter 4) to persons who do not intend to travel abroad and provide such immunisations in the circumstances set out in column 2 of that Table.

B.29 Contractors who offer and provide the vaccines and immunisations referred to in Table 1 must have regard to the guidance and information on vaccinations and immunisations procedures set out in “Immunisation against infectious diseases – The Green Book” which is published by the Department of Health and available on <https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book>.

Table 1

VACCINES AND IMMUNISATION IN RESPECT OF DISEASES	CIRCUMSTANCES IN WHICH VACCINE OR IMMUNISATION IS TO BE OFFERED AND GIVEN
1. Anthrax	Four doses of the vaccine (plus an annual reinforcing dose) are to be offered to persons who are exposed to an identifiable risk of contracting anthrax. Those who are exposed to an identifiable risk will mainly be those persons who come into contact with imported animal products that could be contaminated with anthrax.
2. Hepatitis A	(a) A course of immunisation is to be offered to persons who are resident— (i) in residential care; or (ii) in an educational establishment, who risk exposure to infection and for whom immunisation is recommended by the local Director of Public Health. (b) The number of doses of vaccine required will be dependent upon the chosen vaccine and should be sufficient to provide satisfactory long-term protection against the disease.
3. Paratyphoid(a)	No vaccine currently exists for the

(a) No vaccine is currently available for paratyphoid. Should a vaccine subsequently become available a review of this Table would be considered and consultation on any proposed amendments to this Table would be required in accordance with section 45 of the National Health Service (Wales) Act 2006.

	immunisation of paratyphoid.
4. Rabies (pre-exposure)	<p>(a) Three doses of Rabies vaccine are to be offered to the following persons—</p> <p>(i) laboratory workers handling rabies virus;</p> <p>(ii) bat-handlers;</p> <p>(iii) persons who regularly handle imported animals, for example, those—</p> <p>(aa) at animal quarantine stations;</p> <p>(bb) at zoos;</p> <p>(cc) at animal research centres and acclimatization centres;</p> <p>(dd) at ports where contact with imported animals occurs and this may include certain HM Revenue and Custom Officers;</p> <p>(ee) persons carrying agents of imported animals; and</p> <p>(ff) who are veterinary or technical staff in animal health.</p> <p>(iv) animal control and wildlife workers who regularly travel in rabies enzootic areas; and</p> <p>(v) health workers who are at risk of direct exposure to body fluids or tissue from a patient with confirmed or probable rabies.</p> <p>(b) Reinforcing doses are to be provided at recommended intervals to those at continuing risk^(a).</p>
5. Typhoid	<p>a) a course of typhoid vaccine is to be offered to the following persons—</p> <p>(i) hospital doctors, nurses and other staff likely to come into contact with cases of typhoid; and</p> <p>(ii) laboratory staff likely to handle material contaminated with typhoid organisms.</p> <p>The number of doses (including reinforcing doses) required will be dependent on the chosen vaccine and is to be offered so as to provide satisfactory protection against the</p>

(a) See 'Immunisation against infectious diseases – The Green Book'.

	disease.
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CHAPTER 3

VACCINES AND IMMUNISATIONS REQUIRED FOR THE PURPOSES OF FOREIGN TRAVEL

B.33 Vaccines and immunisations in respect of the diseases listed in column 1 of Table 2 must only be offered in the case of a person who intends to travel abroad, and if the offer is accepted, given in the circumstances set out in column 2 of the Table.

B.34 Contractors who offer and provide the vaccines and immunisations referred to in Table 2 must have regard to—

(a) the guidance and information on vaccines and immunisations procedures set out in “Immunisation against infectious diseases – The Green Book”; and

(b) the information on travel medicine and travel health issues provided and published by the National Travel Health Network and Centre^(a).

Table 2

VACCINES AND IMMUNISATIONS IN RESPECT OF DISEASES	CIRCUMSTANCES IN WHICH VACCINE OR IMMUNISATION IS TO BE OFFERED AND GIVEN
1. Cholera	<p>(a) A course of immunisation is to be offered to persons travelling—</p> <p>(i) to an area where they may risk exposure to infections as a consequence of being in that area; or</p> <p>(ii) to the country where it is a condition of entry to that country that persons have been immunised.</p> <p>(b) The appropriate course of immunisation is dependent on age and will consist of an initial course and a subsequent reinforcing course of immunisation. If more than two years have elapsed since the last course of immunisation, a new course of immunisation should be commenced.</p>

(a) Routine vaccination is not appropriate and no vaccine is available for use in general practice. Should it become appropriate to vaccinate, a review of the Table would be considered and consultation on any proposed amendments to this Table would be required.

<p>2. Hepatitis A</p>	<p>(a) A course of immunisation is to be offered to persons travelling to areas where the degree of exposure to infections is believed to be high^(a).</p> <p>(b) Persons who may be at a higher risk of infection include those who—</p> <p>(i) intend to reside in an area for at least three months and may be exposed to Hepatitis A during that period; or (ii) if exposed to Hepatitis A, may be less resistant to infection because of a pre-existing disease or condition or who are at risk of developing medical complications from exposure.</p> <p>(c) The number of doses (either two or three) of the vaccine required will be dependent upon the chosen vaccine and should be sufficient to provide satisfactory long-term protection against the disease.</p>
<p>3. Poliomyelitis (or Polio)</p>	<p>(a) A course of immunisation (using an age-appropriate combine vaccine) is to be offered to persons travelling—</p> <p>(i) to an area where they may risk exposure to infection as a consequence of being in that area;</p> <p>or</p> <p>(ii) to a country where it is a condition of entry to that country that persons have been immunised.</p> <p>(b) Children under the age of 6 years are to be offered immunisation, in accordance with the routine childhood immunisation schedule in Annex I.</p> <p>(c) Persons aged 6 years and over who have not had the full course of immunisation or whose immunisations history is incomplete or unknown are to be offered, either—</p> <p>(i) a primary course of three doses plus two reinforcing doses at suitable time intervals; or</p>

(a) See up to date details of travel information on <http://www.nathnac.org/>.

	(ii) as many doses as required to ensure that a full schedule has been administered at the appropriate intervals as clinically appropriate.
4. Typhoid	<p>a) A course of typhoid vaccine is to be offered to persons travelling—</p> <p>(i) to an area where they may risk exposure to infection as a consequence of being in that area;</p> <p>or</p> <p>(ii) to a country where it is a condition of entry to that country that persons have been immunised.</p> <p>(b) The number of doses (including reinforcing doses) required will be dependent on the chosen vaccine and is to be offered so as to provide satisfactory protection against the disease.</p>

CHAPTER 4

VACCINES AND IMMUNISATIONS WHICH ARE REQUIRED IN THE CASE OF A LOCALISED OUTBREAK

B.30 In the event of a localised outbreak of any of the diseases listed in paragraph B.31, the Local Health Board must consider its response to that localised outbreak and contractors must offer and provide vaccines and immunisations in accordance with any guidance or Local Supplementary Service given by the Local Health Board in response to the outbreak, and that guidance or Local Supplementary Service may make recommendations as to additional categories of persons who should be offered immunisation.

B.31 The diseases referred to in paragraph B.30 are—

- (a) Anthrax;
- (b) Diphtheria;
- (c) Meningococcal Group C or MenACWY as appropriate;
- (d) Poliomyelitis;
- (e) Rabies;
- (f) Tetanus; and
- (g) Typhoid.

B.32 Contractors who offer and provide vaccines and immunisations in respect of the diseases mentioned in paragraph B.31 must have regard to the guidance and information on vaccines and immunisations procedures set out in “Immunisation against infectious diseases – “The Green Book” which is published by the Department of Health.

B.34 Contractors who offer immunisation in the circumstances set out in paragraph B.30, are not required, by virtue of this Annex, to carry out a contact tracing or trace back exercise.”

Amendment of Annex I (Routine Childhood vaccines and immunisations)

30. In paragraph I.1, omit, “Public Health England”, and substitute with, “UK Health Security Agency”.

31. In paragraph I.2, omit paragraph I.2 and substitute with, “Children starting the immunisation programme at two months of age will follow the schedule (also known as the “Childhood Immunisation Schedule”) as set out in the table below. The vaccinations listed in the table are either part of the targeted childhood immunisations programme eligible for payment or an Item of Service payment under the GMS contract.”.

32. In paragraph I.3, for the table, substitute—

Table

<i>Age</i>	<i>Vaccine</i>	<i>Dosage</i>
8 weeks old	Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b, hepatitis B (DTaP/IPV/Hib/HepB)	One injection
	Rotavirus (Rota)	One oral dose
	Meningococcal B	One injection
12 weeks old	Pneumococcal (PCV)	One injection
	Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b, hepatitis B (DTaP/IPV/Hib/HepB)	One injection
	Rotavirus (Rota)	One oral dose
16 weeks old	Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b, hepatitis B (DTaP/IPV/Hib, HepB)	One injection
	Meningococcal B	One injection
12 - 13 months old	Haemophilus influenzae type b, Meningococcal C (Hib/MenC)	One injection
	Pneumococcal (PCV)	One injection
	Meningococcal B	One injection
	Measles, mumps and rubella (MMR)	One injection
Three years four months to five years old	Diphtheria, tetanus, pertussis (whooping cough) and polio (DTaP/IPV or DTaP/IPV)	One injection

Measles, mumps and rubella One injection
(MMR)

Amendment of Annex J

33. For ANNEX J – AMENDMENTS substitute Annex J in Schedule 2 to these Directions.

A handwritten signature in black ink that reads "Paul Casey". The signature is written in a cursive style with a long horizontal stroke underneath.

**Signed by Paul Casey, Deputy Director of Primary Care under the authority of the
Cabinet Secretary for Health and Social Care, one of the Welsh Ministers**

Date: 09 October 2024

SCHEDULE 1

Direction 1

In force dates

<i>Direction</i>	<i>Date in force</i>
3 to 26, 29 to 32	1 October 2023
27	1 September 2023
28	1 August 2024
1,2 and 33	Date on which direction is made

“ANNEX J – AMENDMENTS

Amendments to the Directions to the Local Health Boards as to the Statement of Financial Entitlements Directions 2013, which came into force on 11 June 2013

- (a) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2013 (2013 No.60), which were made on 30 September 2013;
- (b) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2014 (2014 No.3), which were made on 16 June 2014;
- (c) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2014 (2014 No.17), which were made on 27 June 2014;
- (d) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2014 (2014 No.24), which were made on 30 September 2014;
- (e) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2015 (2015 No.7), which were made on 31 March 2015;
- (f) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment No 2) Directions 2015 (2015 No.14), which were made on 01 April 2015;
- (g) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment No 3) Directions 2015 (2015 No.15), which were made on 20 April 2015;
- (h) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment No 4) Directions 2015 (2015 No.19), which were made on 25 June 2015;
- (i) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.5) Directions 2015, which were made on 30 September 2015;
- (j) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2016, which were made on 30 March 2016;
- (k) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2016, which were made on 11 April 2016;
- (l) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2016, which were made on 13 July 2016;
- (m) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2016 (2016 No.19), which were made on 16 August 2016;
- (n) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.5) Directions 2016 which were made on 15 December 2016;
- (o) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 6) Directions 2017 which were made on 31 January 2017;

- (p) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2017 which were made on 27 April 2017;
- (q) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.2) Directions 2017 which were made on 9 August 2017;
- (r) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.3) Directions 2017 which were made on the 28 September 2017;
- (s) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2018 which were made on the 14 June 2018;
- (t) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2018 which were made on 19 November 2018;
- (u) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2019 which were made on 29 March 2019;
- (v) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2019 which were made on 28 June 2019;
- (w) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2019 which were made on 29 August 2019;
- (x) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2019 which were made on 30 September 2019;
- (y) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 5) Directions 2019 which were made on 14 October 2019;
- (z) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2020 which were made on 24 March 2020;
- (aa) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2020 which were made on 22 June 2020;
- (bb) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2020 which were made on 15 July 2020;
- (cc) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2020 which were made on 16 September 2020;
- (dd) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 5) Directions 2020 which were made on 2 November 2020;
- (ee) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2021 which were made on 19 April 2021;
- (ff) The Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2021 which were made on 31 August 2021;
- (gg) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No.3) Directions 2021 which were made on 1 December 2021;
- (hh) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2022 which were made on 29 March 2022;
- (ii) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2022 which were made on 8 June 2022;

- (jj) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2022 which were made on 4 November 2022;
- (kk) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 4) Directions 2022 which were made on 29 November 2022;
- (ll) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2023 which were made on 20 February 2023;
- (mm) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2023 which were made on 29 March 2023;
- (nn) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2023 which were made on 3 August 2023;
- (oo) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2024 which were made on 8 February 2024; and
- (pp) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 2) Directions 2024 which were made on 18 April 2024; and
- (qq) Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) (No. 3) Directions 2024 which were made on 9 October 2024.”