

Updated guidance on Covid-19 vaccination: 12 to 15 year olds

On 13 September the Department of Health and Social Care announced that young people aged 12 to 15 are to be offered a Covid-19 vaccine. People aged 12 to 15 in England will be offered one dose of the Pfizer/BioNTech COVID-19 vaccine, following advice from the four UK Chief Medical Officers (CMOs).

14 September 2021

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The announcement confirms that the NHS is preparing to deliver a schools-based vaccination programme (as used for existing vaccinations including for HPV and Diphtheria, Tetanus and Polio), supported by GPs and community pharmacies. Invitations for vaccination will begin next week.

The Government has stated that parental, guardian or carer consent will be sought by vaccination healthcare staff prior to vaccination in line with existing school vaccination programmes.

Healthy school-aged children aged 12 to 15 will primarily receive their Covid-19 vaccination in their school, with alternative provision for those who are home schooled, in secure services or in specialist mental health settings.

A consent form is available on the Government website, along with a guidance leaflet on what to expect after having a Covid-19 vaccination in the case of children and young people:

- [Information for children and young people on what to expect after Covid-19 vaccination \(print version\)](#)

The guidance leaflet is based on guidance previously provided for children and young people, but there are some differences. For example, the new guidance refers to swollen glands in the armpit or neck on the same side as the arm where the vaccine was given as an uncommon side-effect, which is not mentioned in the previous guidance.

Easy-read guidance and consent forms are also available:

- [Covid-19 vaccination: an easy-read guide for at-risk children and young people aged 12 to 15 years](#)

In its advice letter to the Government, the Joint Committee on Vaccination and Immunisation (JCVI) has stated that it will advise on whether, and what, second doses are given to children and young people aged 12 to 15 once more data on second doses in this age group has accrued internationally. This will not be before the spring term.

The [JCVI has also advised](#) that it is of the opinion that the benefits from vaccination are “marginally greater than the potential known harms” but acknowledges that there is “considerable uncertainty regarding the magnitude of the potential harms”.

The JCVI has recommended a child-centred approach to communication and deployment of the vaccine, and that the risk-benefit decisions are presented in a way that is accessible to children and young people as well as their parents. The JCVI has further stated that it is essential that children and young people aged 12 to 15 and their parents are supported in their decisions, whatever decisions they take, and are not stigmatised either for accepting, or not accepting, the vaccination offer. Individual choice should be respected.

Changes from previous guidance for children and young people

The Government had previously only extended Covid-19 vaccination to a small number of children and young people considered likely to get poorly with Covid-19.

They include those with:

- severe neurodisabilities
- immunosuppression – those whose immune systems don't work as well and also those who live with someone who is immunosuppressed
- profound and multiple or severe learning disabilities
- being on the learning disability register
- those living with Down's syndrome
- those living with long-term serious conditions which affect the body. Their GP will know if they need to have the vaccine.

Previous guidance stated that all these children should have the Covid-19 vaccinations, and that two injections of the vaccine usually eight to 12 weeks apart would be needed.

Advice to school leaders arising from the guidance

In practical terms the Covid-19 vaccination programme is being rolled out through the tried and tested model used for existing vaccinations. Under this model, vaccinations are commissioned by seven regional NHS England teams and delivered through School Immunisation Teams.

Schools should check that the potential liabilities/risks of having a Covid-19 vaccination centre on the school site are covered by existing internal policies/insurance

A consent form has been provided along with guidance for children, young people and their parents on the potential benefits and potential side-effects of the vaccine and the balance between them. The Government has acknowledged that it is important that the risks and benefits of the vaccination are explained or made available to the pupils and their parents to ensure that they make informed decisions. Such information is available on the internet and is the subject of press releases as dictated by Government.

However, it is not for schools to provide advice or guidance on the decision to vaccinate or not. Schools are the vehicle by which the vaccination programme is to be delivered. As such, the school should ensure that the vaccination 'site' is safely managed but should remain neutral on the question of whether young people should be vaccinated or not.

Are there any liability risks?

The guidance does not state that vaccination is compulsory, and there are no legal penalties for young people, parents, teachers or schools where a young person or their parents refuse consent for vaccination.

No guidance has been provided specifically for schools, but it is likely that support from schools for young people and parents will be needed, irrespective of what decision is ultimately made by individuals.

Schools should continue to provide education services to its young people irrespective of their vaccination status.

Chris Whitty, the chief medical officer for England, told a press conference that the vaccines would not be a "silver bullet" in the pandemic, and so schools should continue to review their Covid-19 risk assessments and implement appropriate control measures.

What happens if the parent and the young person disagree on whether to have the vaccine?

Vaccines Minister, Mr Zahawi, has said: "In the rare event that there is a situation a parent does not consent but the child or the teenager wants to have the vaccine, then there is a process by which the school age vaccination clinician will bring initially the parent and the child to see whether they can reach consensus and if not, if the child is deemed to be competent, then the vaccination will take place."

This suggests that the clinicians will be responsible for dealing with any family disputes and it will be for the clinicians to follow a procedure to enable young people to receive the vaccine if they are deemed "competent". Currently there is no suggestion that the school will need to become involved in this process. However, it should be noted that there are no details available yet as to exactly what this procedure will involve, and schools may need to be ready to provide pastoral support to those caught up in family disagreements.

If you require any advice on the rollout of the vaccination programme in your school or trust please contact us.

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