

Vaccine uptake in the general population

Consultation on draft scope – deadline for comments by 5pm on 5th August 2019

email: VaccineUptake@nice.org.uk

	<p>Please read the checklist for submitting comments at the end of this form. We cannot accept forms that are not filled in correctly or arrive after the deadline.</p> <p>In addition to your comments below, we would like to hear your views on this question:</p> <ol style="list-style-type: none">1. Are there any cost saving interventions or examples of innovative approaches that should be considered for inclusion in this guideline? <p>Developing NICE guidance: how to get involved has a list of possible areas for comment on the draft scope.</p>
<p>Organisation name – Stakeholder or respondent (if you are responding as an individual rather than a registered stakeholder please leave blank):</p>	<p>British HIV Association (BHIVA)</p>
<p>Disclosure Please disclose any past or current, direct or indirect links to, or funding from, the tobacco industry.</p>	<p>None</p>
<p>Name of person completing form:</p>	<p>Dr Clare van Halsema</p>
<p>Type</p>	<p>[for office use only]</p>

Comment No.	Page number or ' general ' for comments on the whole document	Line number or ' general ' for comments on the whole document	<p style="text-align: center;">Comments</p> <p style="text-align: center;">Insert each comment in a new row.</p> <p style="text-align: center;">Do not paste other tables into this table, as your comments could get lost – type directly into this table.</p>
Example	3	55	The draft scope currently excludes people who have already been diagnosed. We feel this group should be included because....
1	General		HIV testing can be recommended for adults having a live vaccine that may be contraindicated in the immunosuppressed. GPs are encouraged to contact HIV physicians to check, rather than omit vaccinations in HIV-positive patients.
2	General		People living with HIV are at risk of reduced immunity to common infections We draw attention to the 2015 BHIVA guidelines on vaccines in HIV-positive adults, available at: https://www.bhiva.org/vaccination-guidelines .
3	General		We note the inclusion of immigration detention centres as a setting to be covered. HIV-positive people in immigration detention may require tailored care and working with HIV physicians is key.
4	General		Increased uptake may be related to documentation and availability of information on vaccine history, particularly for those who change GPs or change location. A patient-held record may contribute.

Add extra rows if needed

Please add extra rows as needed

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NICE reserves the right to summarise and edit comments received during consultations, or not to publish them at all, where in the reasonable opinion of NICE, the comments are voluminous, publication would be unlawful or publication would be otherwise inappropriate.

Checklist for submitting comments

- Use this form and submit it as a Word document (not a PDF).
- Complete the disclosure about links with, or funding from, the tobacco industry.
- Include page and line number (not section number) of the text each comment is about.
- Combine all comments from your organisation into 1 response. We cannot accept more than 1 response from each organisation.
- Do not paste other tables into this table – type directly into the table.
- **Mark any confidential information or other material that you do not wish to be made public. Also, ensure that you state in your email to NICE that you have confidential comments included in your submission.**
- Do not include medical information about yourself or another person from which you or the person could be identified.
- Spell out any abbreviations you use
- For copyright reasons, do not include attachments such as research articles, letters or leaflets. We return comments forms that have attachments without reading them. The stakeholder may resubmit the form without attachments.
- **We do not accept comments submitted after the deadline stated for close of consultation.**

Note: We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by NICE, its officers or advisory Committees.

Please add extra rows as needed

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