Childhood Vaccination Programme

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Improving Your Health and Wellbeing

What we'll cover

The importance of childhood vaccination

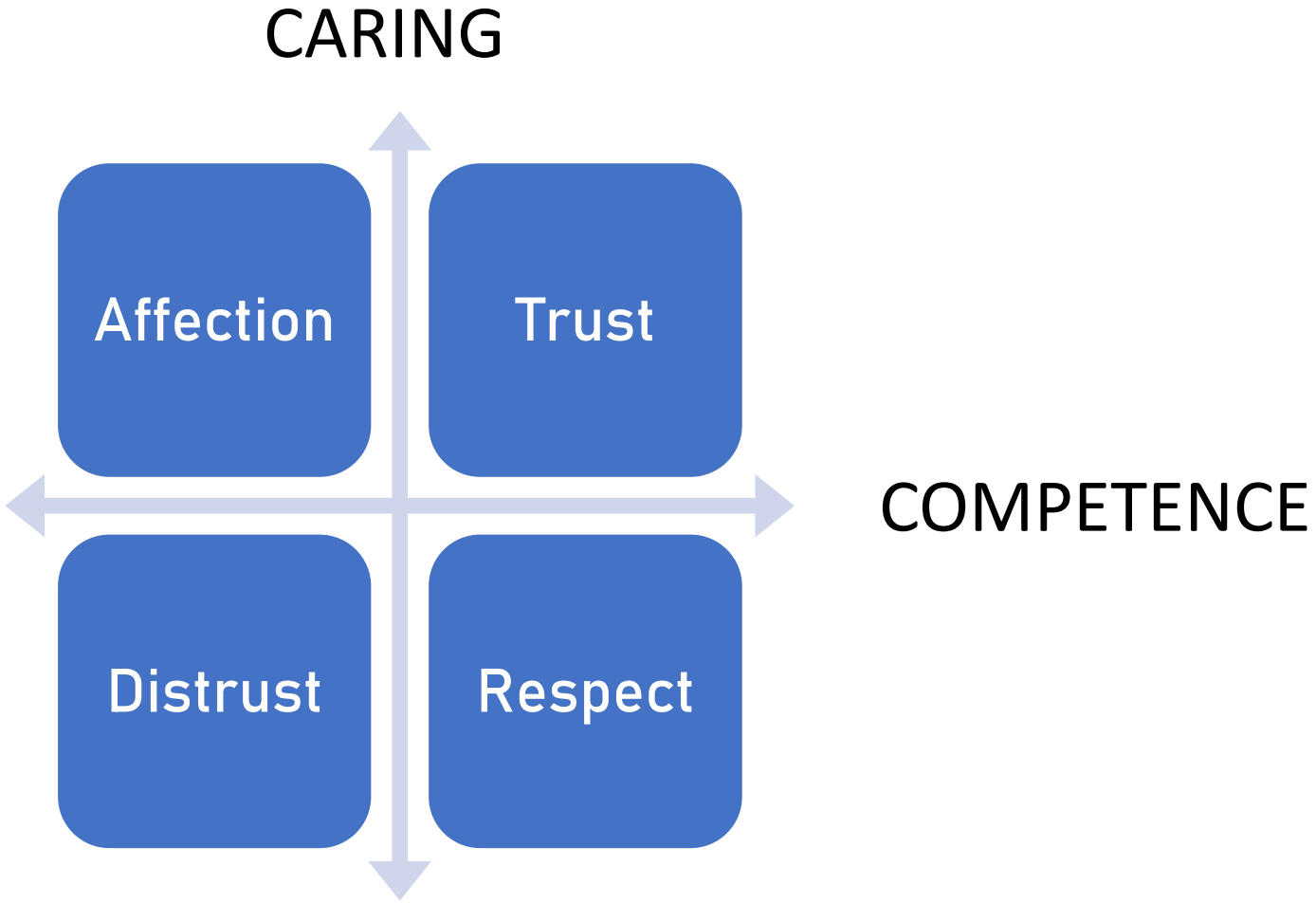
The childhood vaccination schedule in Northern Ireland

Changes to the schedule from January 2026

Commonly asked questions

Why you?

There is more information than ever but you are a **trusted source**



Trust = competence + caring

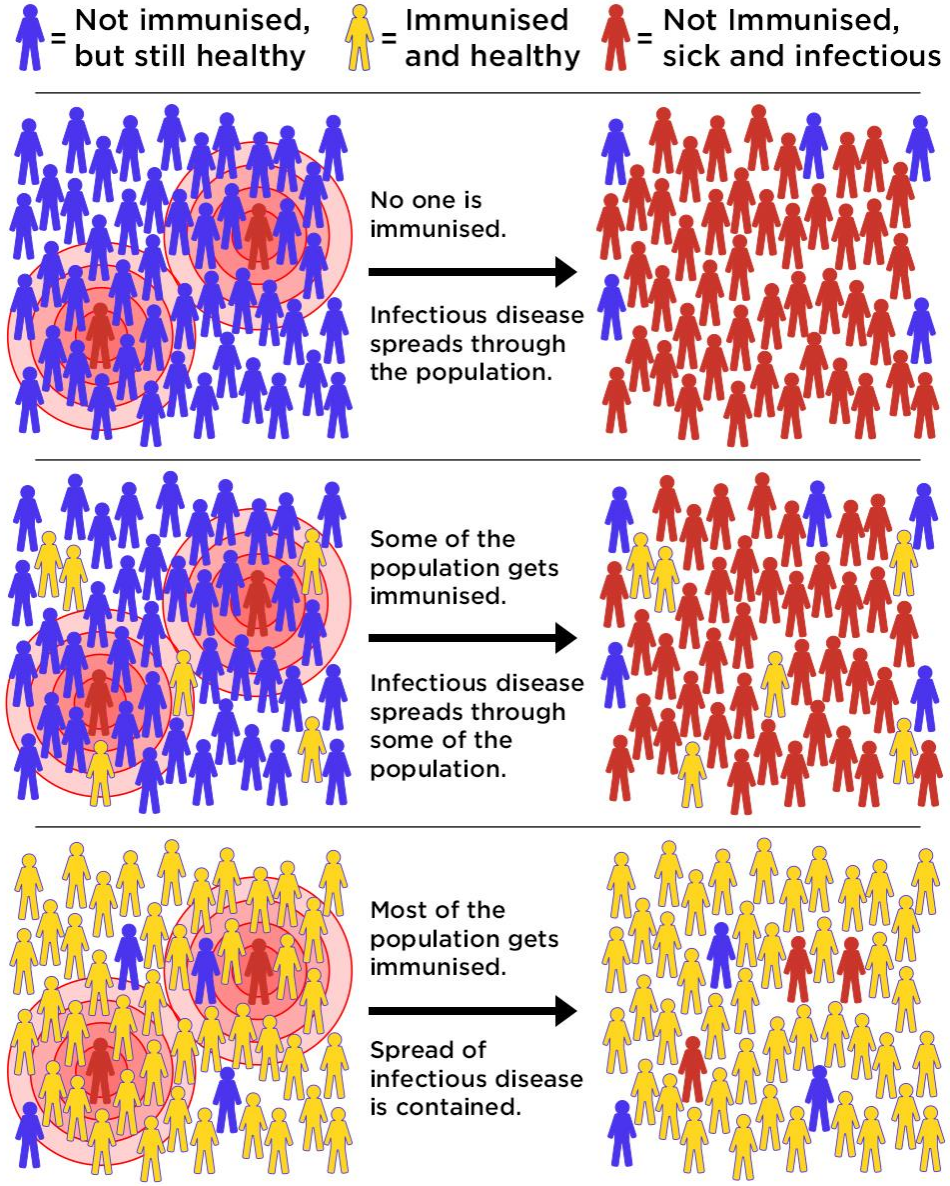
Why vaccinate?

Protect against serious illness

Prevent diseases spreading in the population

Protect people who can't be vaccinated

VACCINATION SAVES LIVES



When enough people in a community are vaccinated, the spread of disease is contained. *Image adapted from Tkarcher, CC BY-SA 4.0*

World Health Organization

95% of the population should be vaccinated for adequate protection

In Northern Ireland, vaccination rates have dropped since 2017 for all childhood programmes

Northern Ireland is in the grip of the '100 day cough' epidemic – here's what you should know about whooping cough

By Claire Cartmill

Comment

Published 18th Apr 2024, 13:16 GMT | Updated 18th Apr 2024, 13:30 GMT

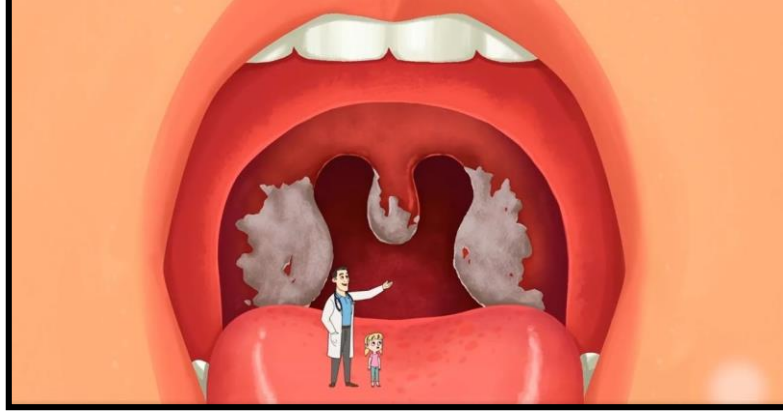
Measles: First case in seven years confirmed in Northern Ireland

20 February 2024

YOU'RE NOT FULLY COVERED UNTIL YOU'VE FINISHED THE COURSE

The Diseases

Diphtheria



Cause: toxin

Illness: sore throat; can quickly cause breathing problems

Worst case: Can damage the heart and nervous system; can kill

Symptoms:

- thick grey white coating on throat and tongue
- Fever
- sore throat
- swollen glands
- difficulty breathing and swallowing

Before the diphtheria vaccine was introduced in the UK, there were up to **70,000 cases** of diphtheria a year, causing up to **5,000 deaths**

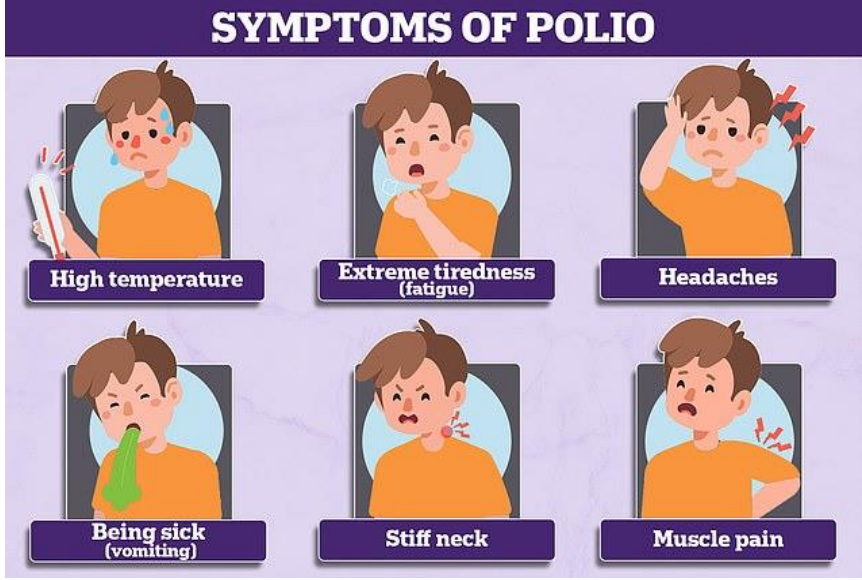
Polio

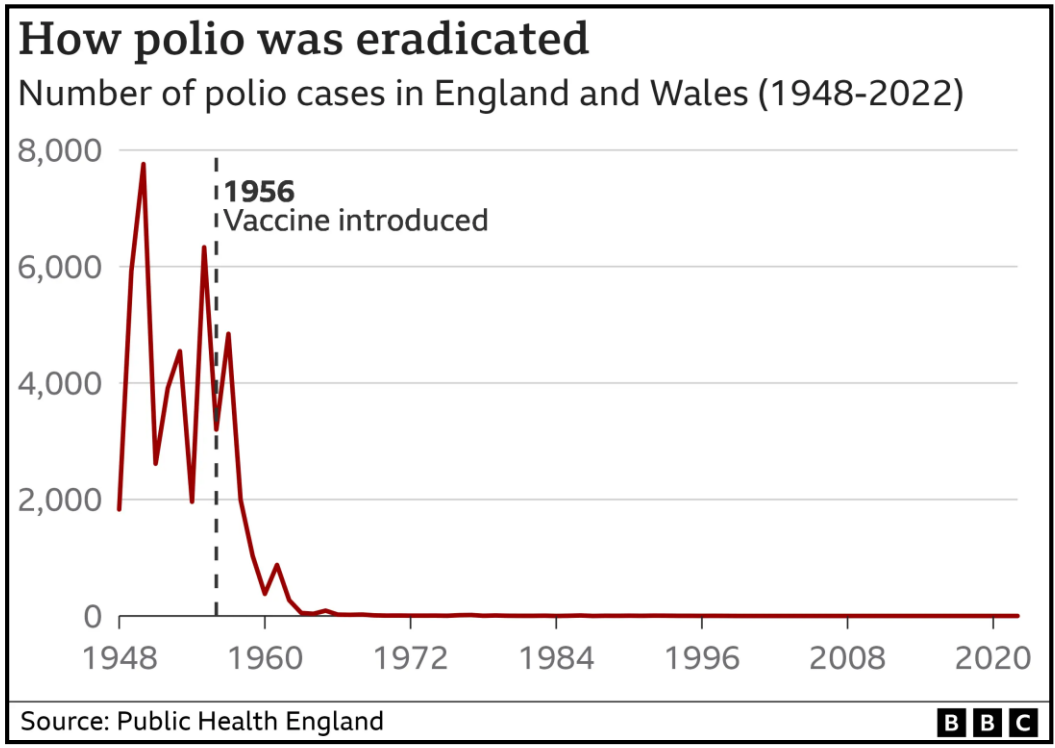
Cause: virus that attacks the nervous system

Illness: permanent paralysis of muscles

Worst case: If the paralysis spreads to the chest muscles it can affect breathing and can kill

Good news: vaccination works





Tetanus

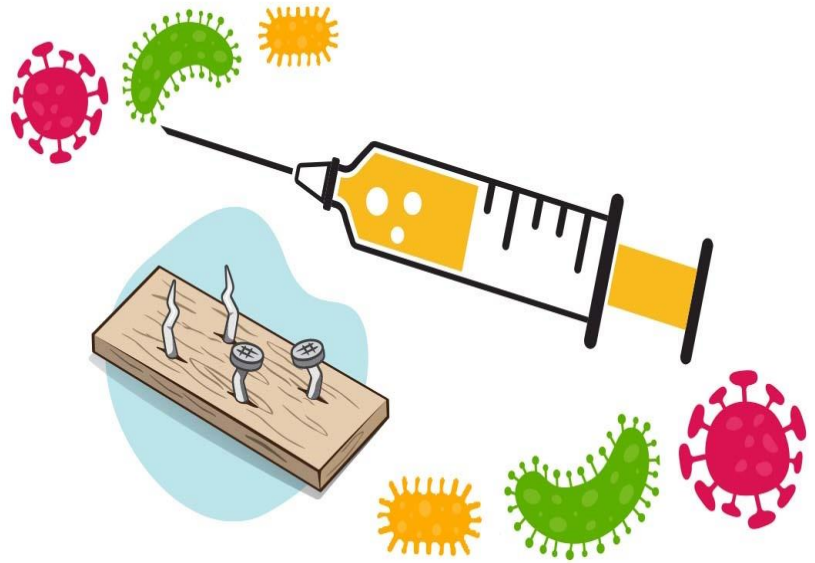
Cause: bacteria that affects the nervous system

Symptoms: Muscle spasms, breathing problems

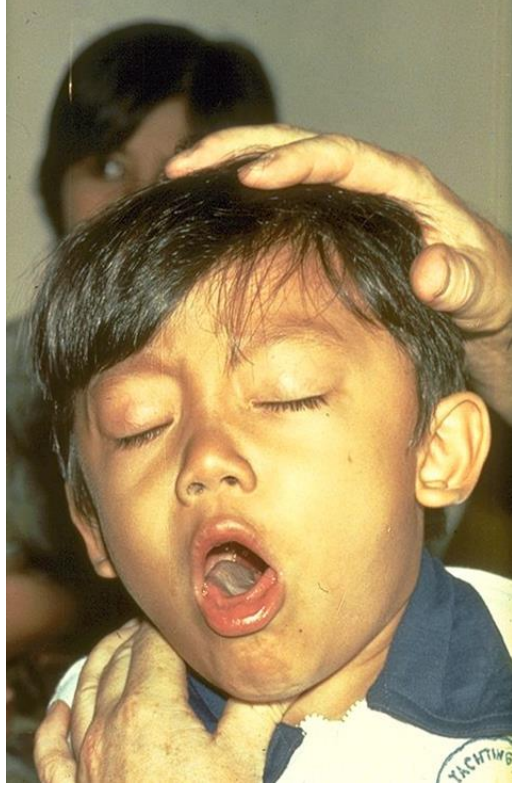
Spread: Germs in soil get into the body through open cuts or burns

Cannot be passed from person to person

Worst case: Fatal in around HALF of cases



Pertussis (whooping cough)



Causes long bouts of coughing and choking, making it hard to breathe.

"the cough of 100 days"

Spread: Highly infectious

Cases remain infectious for up to 21 days after they start coughing

Worst case: pneumonia, seizures, brain haemorrhage

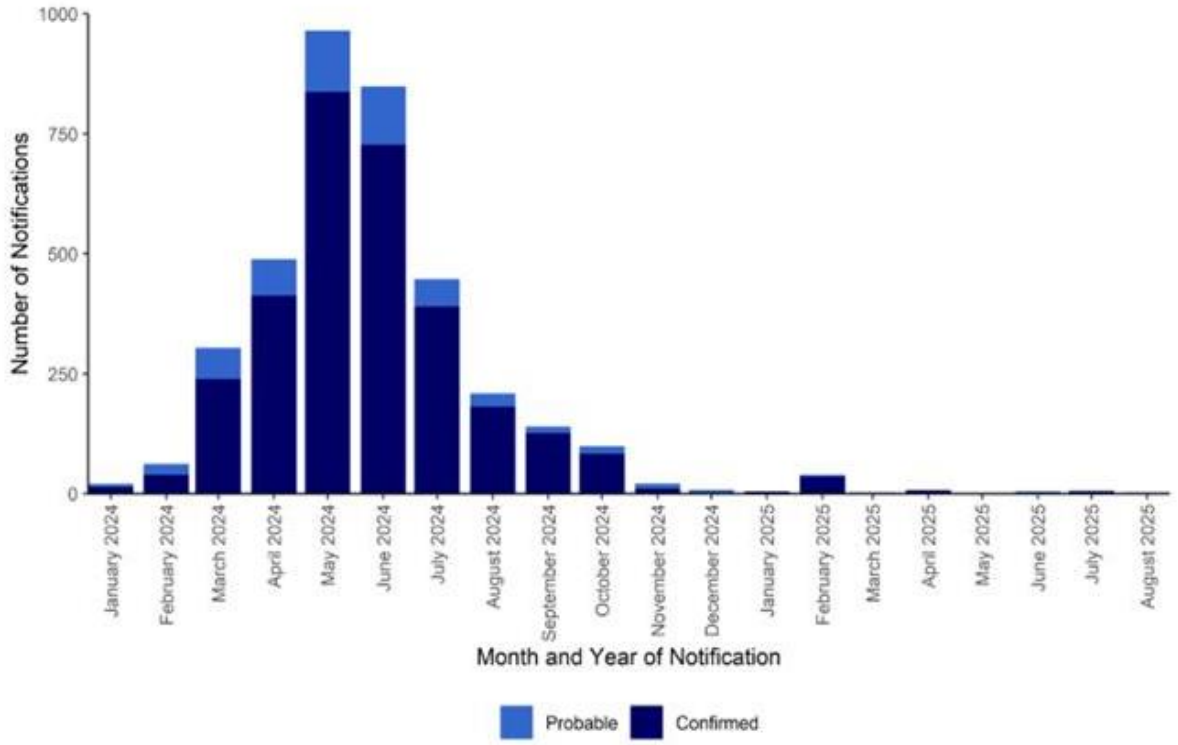
Babies under one year of age are most at risk. For them, whooping cough is very serious and can be fatal

Vaccination is offered in pregnancy to protect the baby

Whooping cough in Northern Ireland

3612 notifications in 2024

72 notifications in 2025



Haemophilus influenzae (Hib)

Cause: Bacteria - Haemophilus influenzae type b

Illness: blood poisoning (septicaemia), pneumonia and meningitis

Worst case: can be fatal if not treated quickly

Does vaccination work?

- Before the Hib vaccine was introduced, there were about 800 cases of Hib in young children every year
- Since the vaccine has been introduced, the number of children under 5 years of age with Hib has fallen by 99%

Need to know: The Hib vaccine only protects against meningitis caused by the Haemophilus influenzae type b bacteria – NOT against other causes of meningitis

Hepatitis B

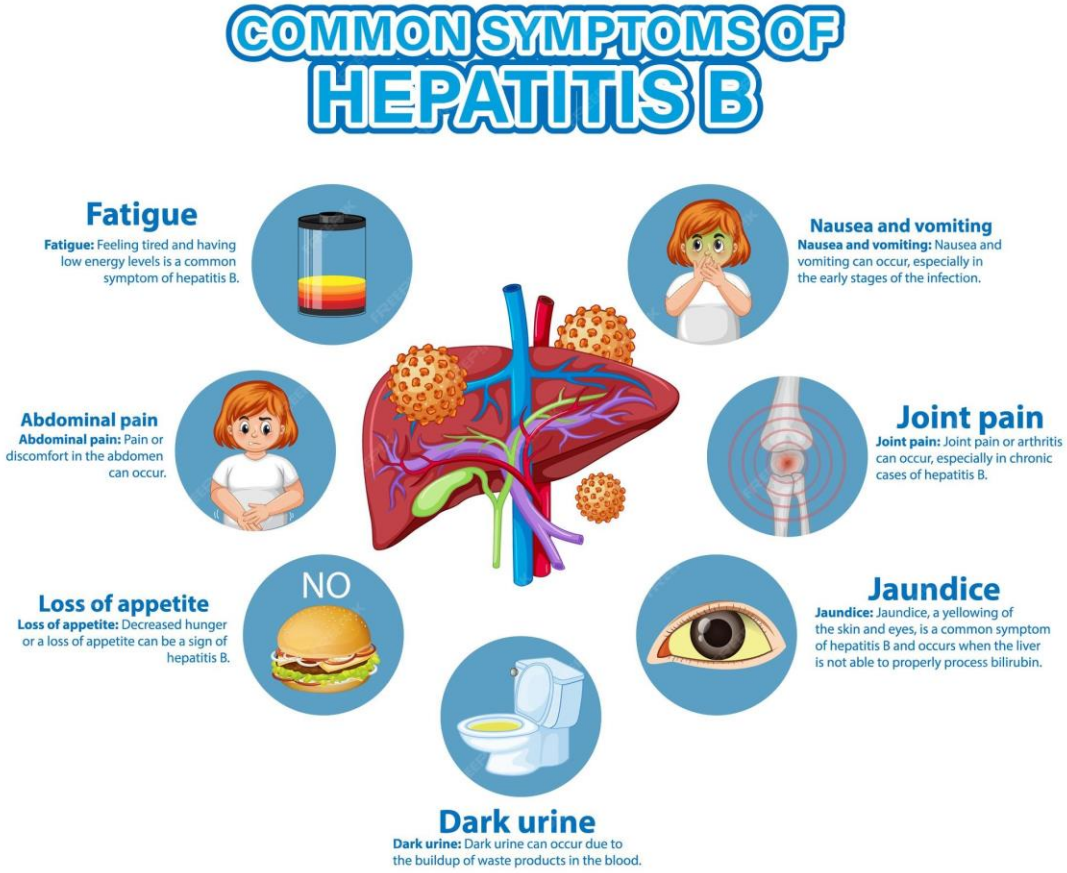
Cause: Virus

Illness:

- Now – Liver infection
- Later – In children, the infection can stay in the body for many years and sometimes leads to scarring of the liver (cirrhosis) and liver cancer

In the UK, the vaccine has been offered to children at higher risk since the 1980s.

In 2017, hepatitis B vaccine was added to the routine immunisation programme so that all children can benefit from protection.



Need to know: 3 doses of the 6 in 1 vaccine gives long lasting protection against infection with hepatitis B, but NOT other forms of hepatitis

Meningococcal B disease

Cause: Meningococcal bacteria

- Different strains – the most common one in this country is MenB

Illness:

- meningitis (inflammation of the lining of the brain)
- septicaemia (blood poisoning)

Worst case: Can progress very quickly, and can kill

Most common in babies and young children; then older teens

David's story –https://vimeo.com/1156427825

Need to know: Between 5% – 11% of adults and up to 1 in 4 adolescents carry the bacteria without any signs or symptoms of the disease

What's this?

Meningitis Research Foundation
http://www.meningitis.org/symptoms

Pneumococcal disease

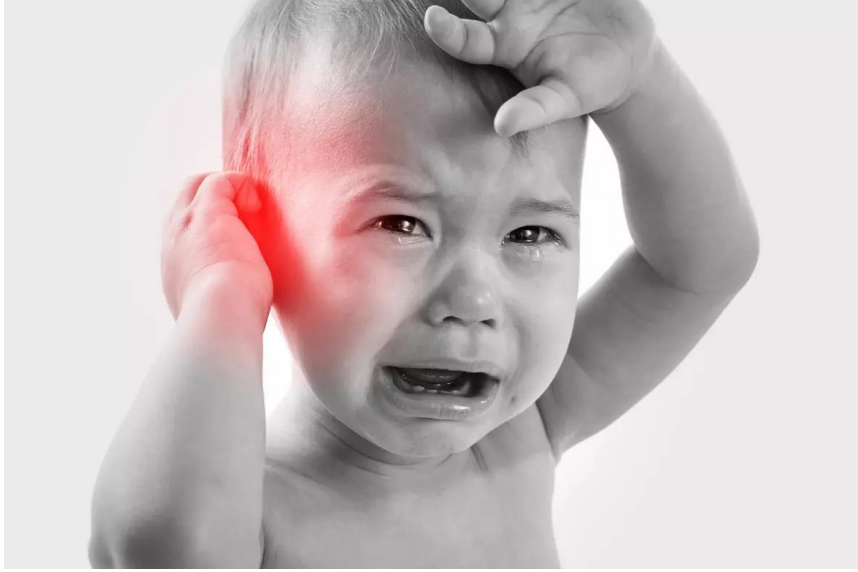
Cause: Streptococcus pneumoniae bacteria

Illness: meningitis, severe ear infections, pneumonia and other illnesses

Highest risk under-1s

More in winter

Other risk groups; elderly, no spleen, immunosuppression and certain underlying medical conditions



Invasive infections due to the strains covered by the vaccine have fallen dramatically since the vaccine was introduced

Rotavirus

Cause: virus

Illness: diarrhoea and vomiting in babies and very young children

Spread: highly infectious

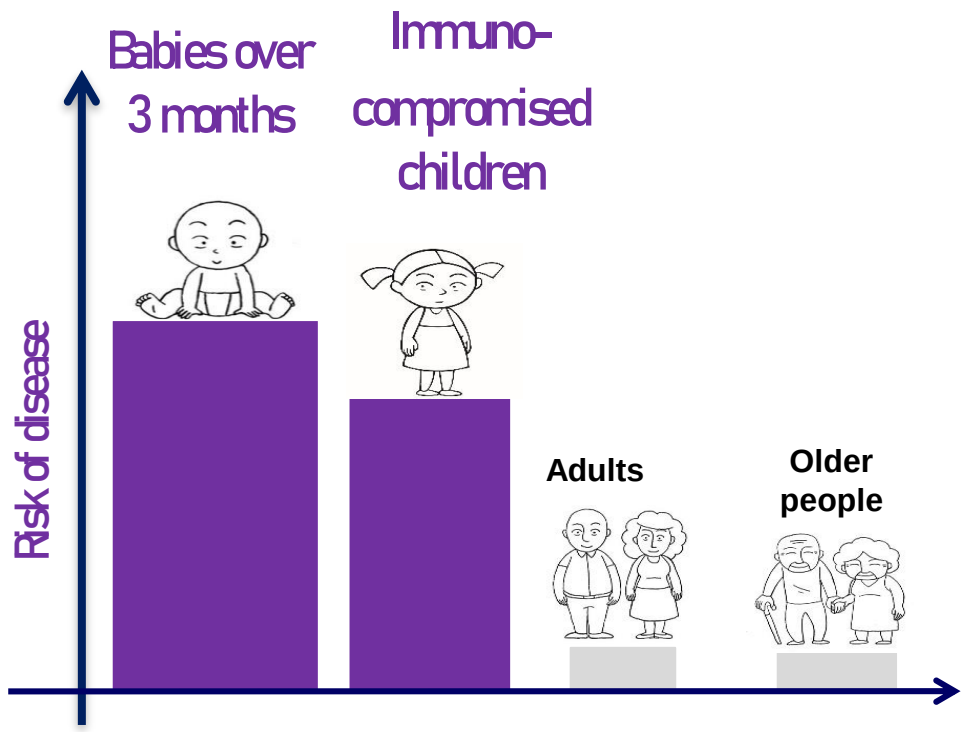
- hand to mouth contact
- surfaces such as toys, hands or dirty nappies
- sneezing and coughing

Young babies are at risk of dehydration and may need admitted to hospital

Before the vaccine was introduced, almost all babies got rotavirus before they turned 5.

About 1 in 5 needed medical attention.

About 1 in 10 of these were admitted to hospital because of rotavirus.



Measles

Highly infectious viral illness

High fever, rash, misery

Serious and potentially life- threatening complications in some people

Around 1 in 5 people with measles will go to hospital

Mumps

Contagious viral infection

Fever, headache and painful facial swellings

Can lead to permanent deafness, viral meningitis and encephalitis (swelling of the brain)

Can cause infertility in adult males

Rubella

Rare illness

Rash, swollen glands and sore throat

Usually mild

BUT can be serious if you get it when you're pregnant- causing serious damage to the unborn baby

Influenza (flu)

Highly infectious viral infection

Symptoms: fever, chills, headache, muscle pains, cough, sore throat...

Complications: bronchitis, pneumonia, meningitis, ear infection

Flu can kill

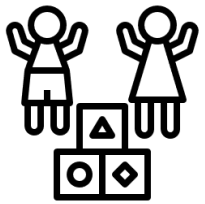
Did you know?
A different flu vaccine is developed every year to protect against strains for that winter

What vaccinations and when?

YOU'RE NOT FULLY COVERED UNTIL YOU'VE FINISHED THE COURSE

Created by Kael from Noun Project

Created by Muhamad Sukron from Noun Project



Created by Massupa Kaev

The complete routine immunisation schedule

From 1 January 2026

Age due	Diseases protected against		Vaccine given and trade name		Usual site[1]
Eight weeks old	Diphtheria, tetanus, pertussis (whooping cough), polio, *Haemophilus influenzae* type b (Hib) and hepatitis B		DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	Meningococcal group B (MenB)		MenB	Bexsero	Thigh
	Rotavirus		Rotavirus	Rotarix	By mouth
Twelve weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B		DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	MenB		MenB	Bexsero	Thigh
	Rotavirus		Rotavirus	Rotarix	By mouth
Sixteen weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B		DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	Pneumococcal (13 serotypes)		PCV	Prevenar 13	Thigh
One year old (Just after the child's first birthday)[2]	Measles, mumps, rubella, varicella (MMRV) MenB Pneumococcal		MMRV MenB PCV	ProQuad[3] or Priorix Tetra Prevenar 13 Bexsero	Upper arm or thigh
Eighteen months old	**Born on or after 1 July 2024**	MMRV Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	MMRV DTaP/IPV/Hib/HepB	ProQuad or Priorix Tetra Infanrix hexa or Vaxelis	Upper arm or thigh
	Born before the 1 July 2024	No appointment			
Eligible paediatric age groups (see letter on Department of Health website at gha.link/FluLetter)	Influenza each year from September		Live attenuated influenza vaccine (LAIV) * FLAIV is unsuitable, use inactivated flu vaccine (check the Green Book)	Fluenz[4]	Both nostrils
Three years four months old or soon after	**Born on or after 1 January 2025**	Diphtheria, tetanus, pertussis and polio	dTaP/IPV	REPEVAX	Upper arm
	Born on or before 31 December 2024	Diphtheria, tetanus, pertussis and polio MMRV	dTaP/IPV MMRV	REPEVAX ProQuad or Priorix Tetra	Upper arm
Boys and girls aged twelve to thirteen years (school Year 8)	Cancers and genital warts caused by specific human papillomavirus (HPV) types		HPV	Gardasil 9	Upper arm
Fourteen to eighteen years old (school Years 11-14)	Tetanus, diphtheria and polio		Td/IPV (check MMR status)	REVAXIS	Upper arm
	Meningococcal groups A, C, W and Y		MenACWY	MenQuadfi	Upper arm

Routine childhood vaccination schedule

This schedule will be slightly different for babies born before 31 December 2024. Scan the QR code or visit **nidirect.gov.uk/childhood-immunisation** for more information.

8 weeks old
- 6-in-1
- Rotavirus
- MenB

12 weeks old
- 6-in-1
- Rotavirus
- MenB

16 weeks old
- 6-in-1
- Pneumococcal

1 year old (just after their first birthday)
- MMRV
- MenB
- Pneumococcal

18 months
- 6-in-1
- MMRV

2+ years
- Children's flu vaccine (yearly)

3 years and 4 months
- 4-in-1

If your child has missed out on any of these vaccines, talk to your doctor, practice nurse or health visitor.
For further information on these vaccinations, visit pha.site/vaccinations

6-in-1
protects against diphtheria, tetanus, pertussis (whooping cough), polio, Hib and hepatitis B

4-in-1
protects against diphtheria, tetanus, pertussis (whooping cough) and polio

Why start at 8 weeks?

Earliest possible protection.

To work well, vaccines have to be given when the immune system can react and make its own memory.

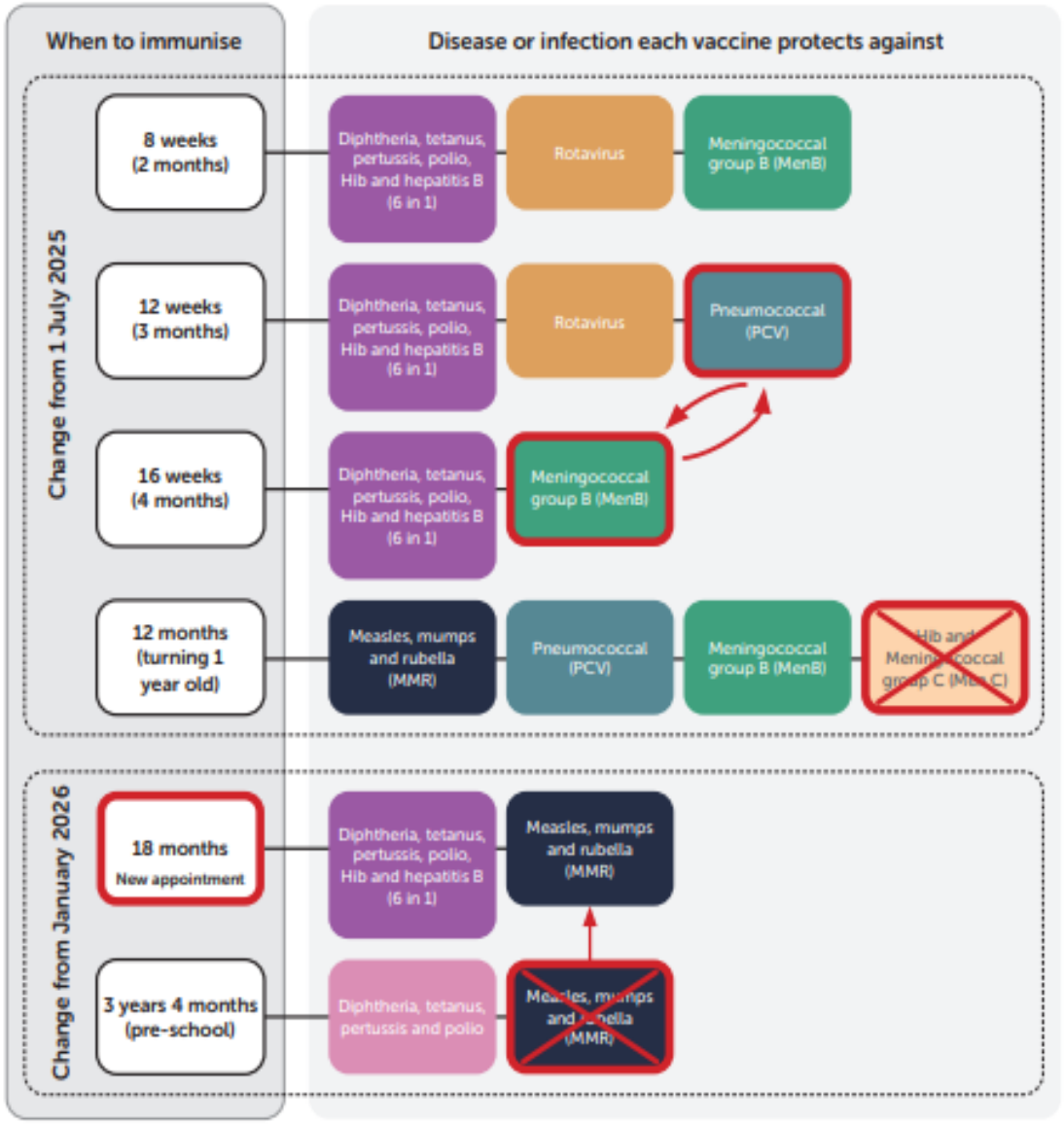
In the first few weeks, baby still has some protection from mum.

Very premature babies don't get the same protection from mum so it is especially important for them to get their vaccines at 8 weeks.

Created by Kael
from Noun Project

Changes

Changes to the schedule



July 2024

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

www.free-printable-calendar.com

It depends on date of birth

Chickenpox vaccine

Chickenpox added to routine MMR to become MMRV (measles, mumps, rubella and varicella)

MMRV vaccine available to eligible children from 1st January 2026

Based on expert scientific advice

Research showed significant impact of severe cases of chickenpox on children's health, hospital admissions and associated costs

Department of Health | An Roinn Sláinte / Männystrie O Pouste

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Chickenpox vaccination to be offered to children in Northern Ireland from 2026

Date published: 29 August 2025

Children in Northern Ireland will be offered a free vaccination against chickenpox for the first time from 2026.

From January, eligible children will be offered a combined vaccine for measles, mumps, rubella and varicella (MMRV) – the clinical term for chickenpox - as part of the routine infant vaccination schedule.

The rollout of the MMRV vaccine is based on expert scientific advice from the Joint Committee on Vaccination and Immunisation (JCVI), following research showing the significant impact

Did you know?

Chickenpox in childhood costs around £24 million a year in lost income and productivity in the UK

Varicella (chickenpox)

Cause: virus

Most children get it but you can catch it for the first time at any age

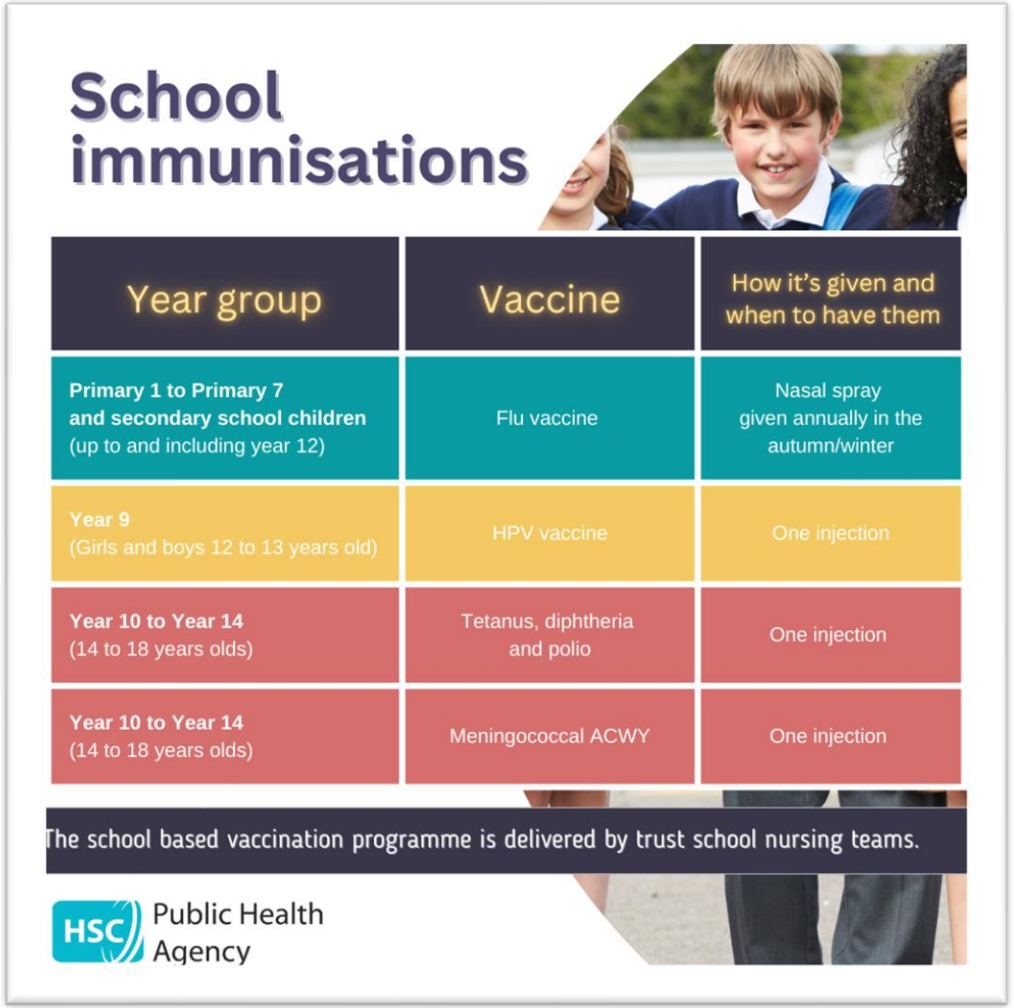
Spread: direct contact between people, indirectly through airborne droplets

Complications:

- bacterial infection of spots
- Rarely encephalitis (brain swelling), pneumonitis (lung inflammation) and stroke

Most children get better without any treatment BUT most children are unwell for several days and will miss at least 5 days of school or nursery

Vaccination isn't only for babies



Schools programme:

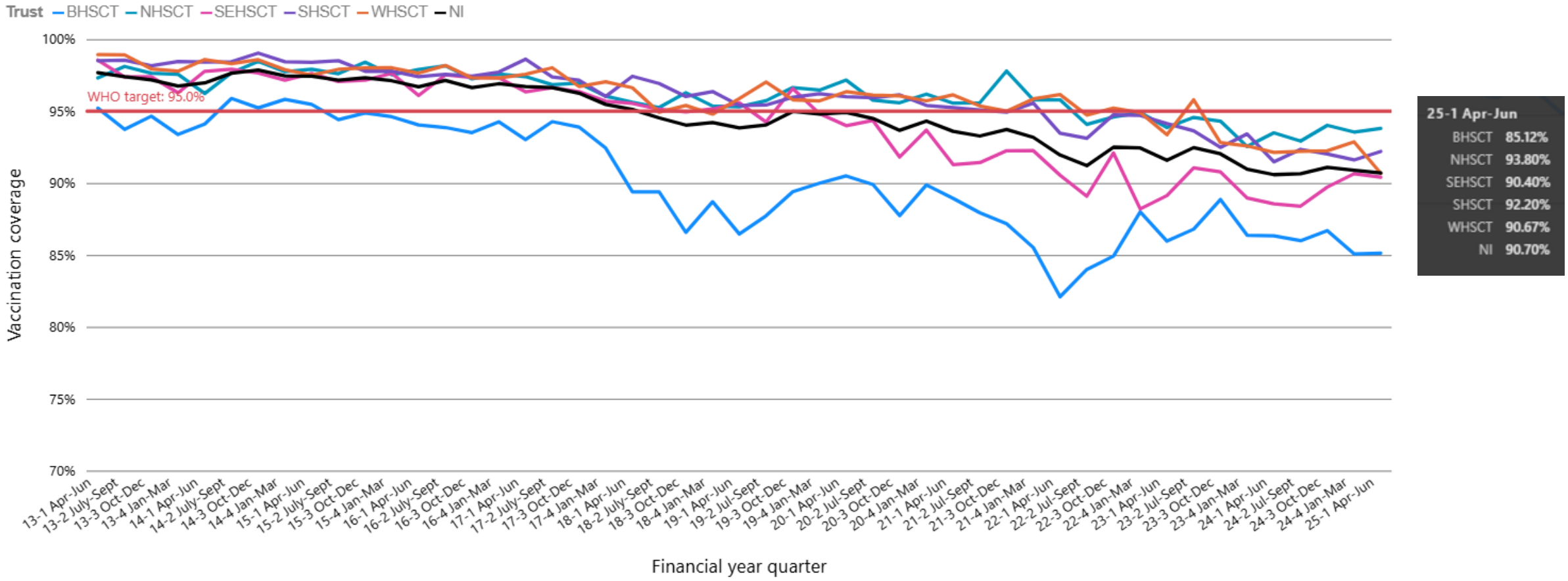
- Influenza
- HPV
- MenACWY*
- School Leaver Booster (DTaP)

*MenACWY is really important because babies will no longer get a MenC vaccine

Vaccine uptake

6-in-1 vaccination coverage at 12 months is below target

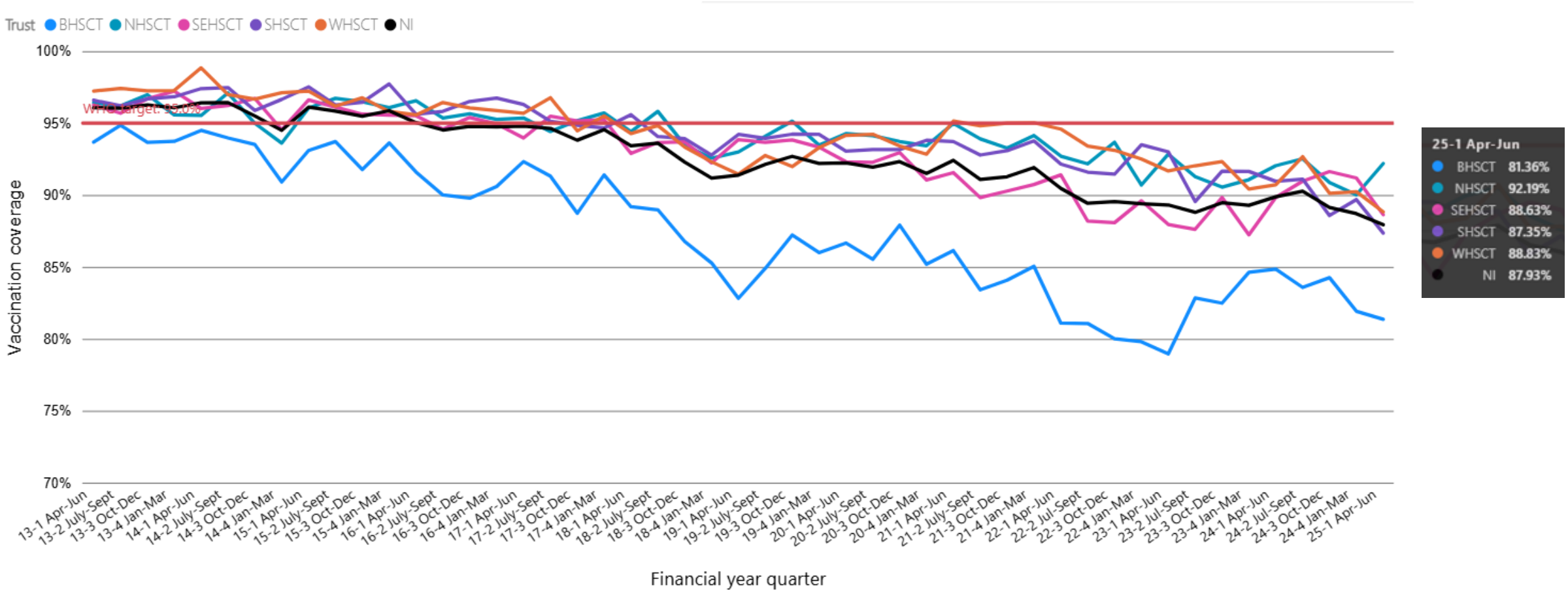
April-June 2013 – April-June 2025, Northern Ireland



6-in-1 vaccination coverage at 12 months of age, by trust, Northern Ireland

MMR1 coverage at 24 months has fallen in most areas

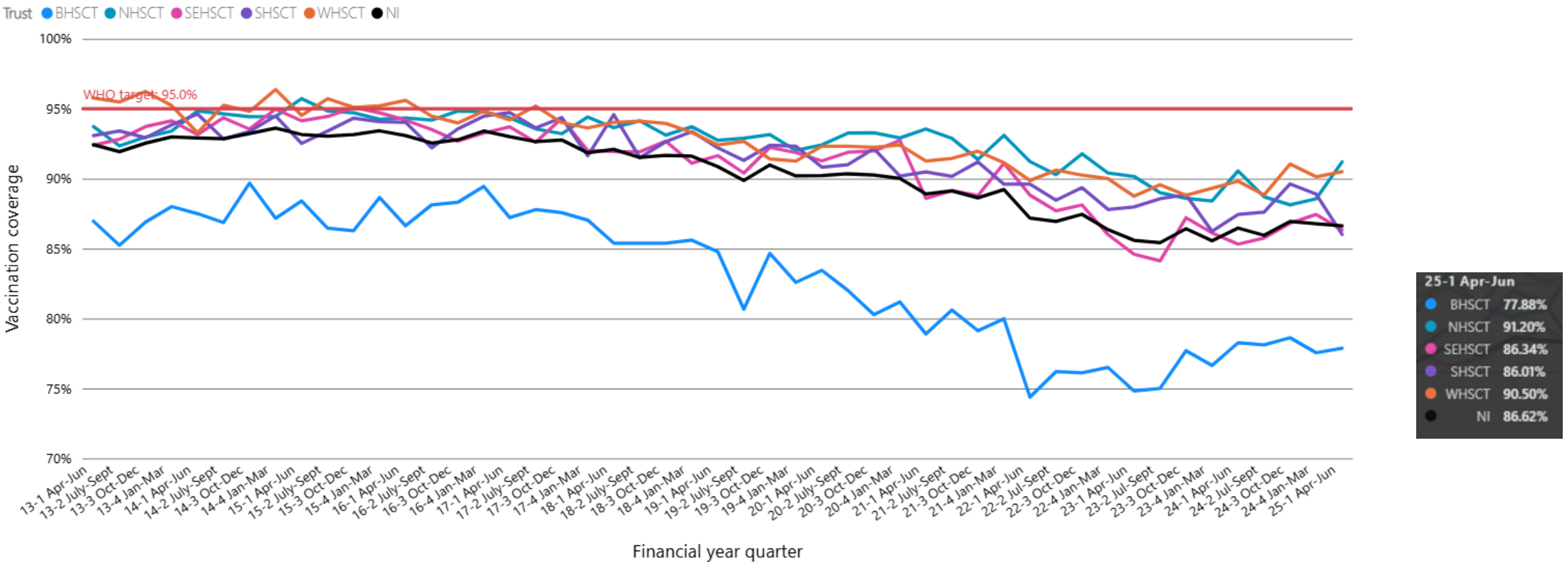
April-June 2013 – April-June 2025, Northern Ireland



MMR1 vaccination coverage at 24 months of age, by trust, Northern Ireland

MMR2 coverage at 5 years has risen slightly but is well below target

April-June 2013 – April-June 2025, Northern Ireland



MMR2 vaccination coverage at 5 years of age, by trust, Northern Ireland

What does this mean?

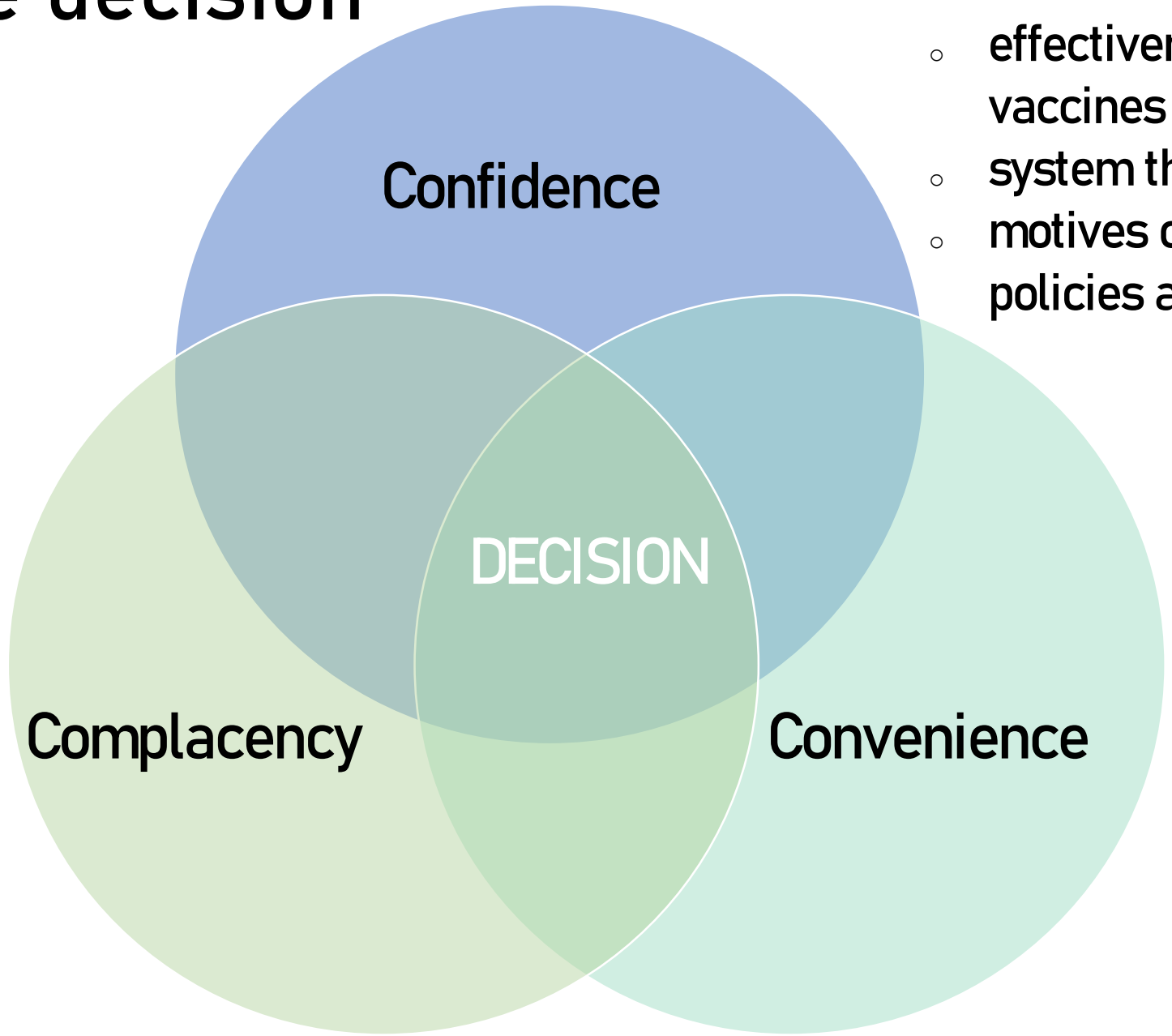
Why has uptake dropped?

Wider world	Individual and group influences	Vaccination issues
Media and public communication	Beliefs and attitudes about health and disease	Mode of administration
Local politics	Knowledge and awareness	Source of the vaccine
Religion, culture	Poor health service experience	Vaccination schedule
Accessibility of services		Associated costs
Trust in authorities		Knowledge and attitudes of healthcare professionals

Making the decision

Trust in:

- effectiveness and safety of vaccines
- system that delivers them
- motives of people who decide policies and schedules



Perception that:

- risks of vaccine preventable disease are low
- vaccines aren't necessary

- Availability
- Ease of access
- Cost

Confidence

Fear of vaccination

Fear of side effects

Health professional recommendation

Attitudes and beliefs of healthcare staff

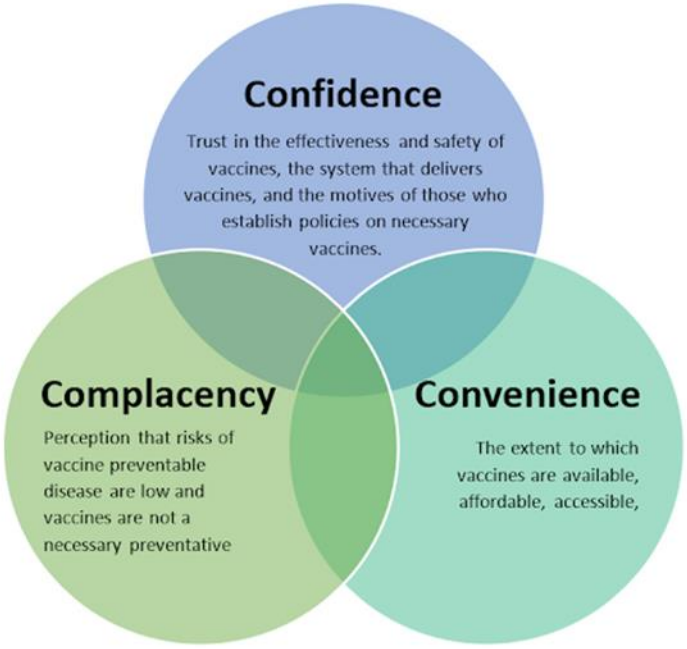
Lack of trust in HSC services

Political / health scandals

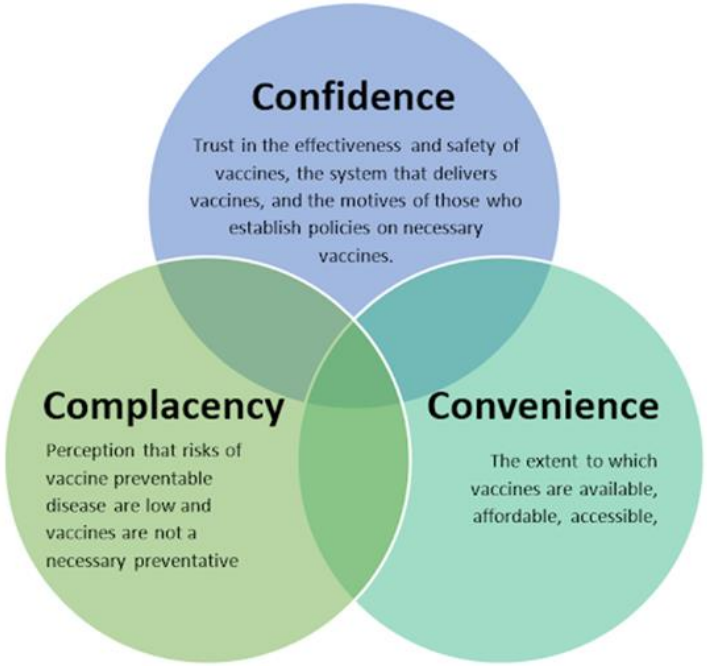
Personal beliefs and values

Cultural and spiritual beliefs

Sense of autonomy



Complacency



Believe risk is low

People don't think the illnesses are common/serious

Doubt about whether vaccines prevent illness

Convenience

Available appointments

Having time

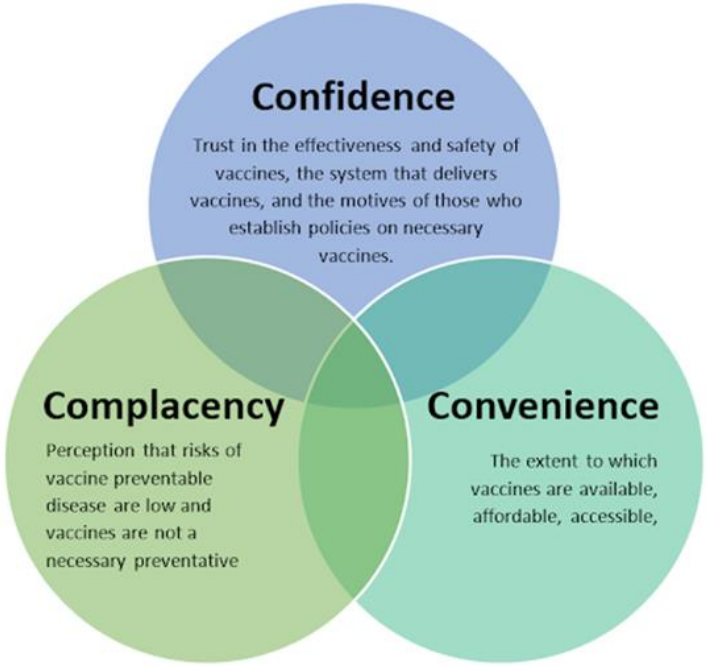
Language

Transport

Other children

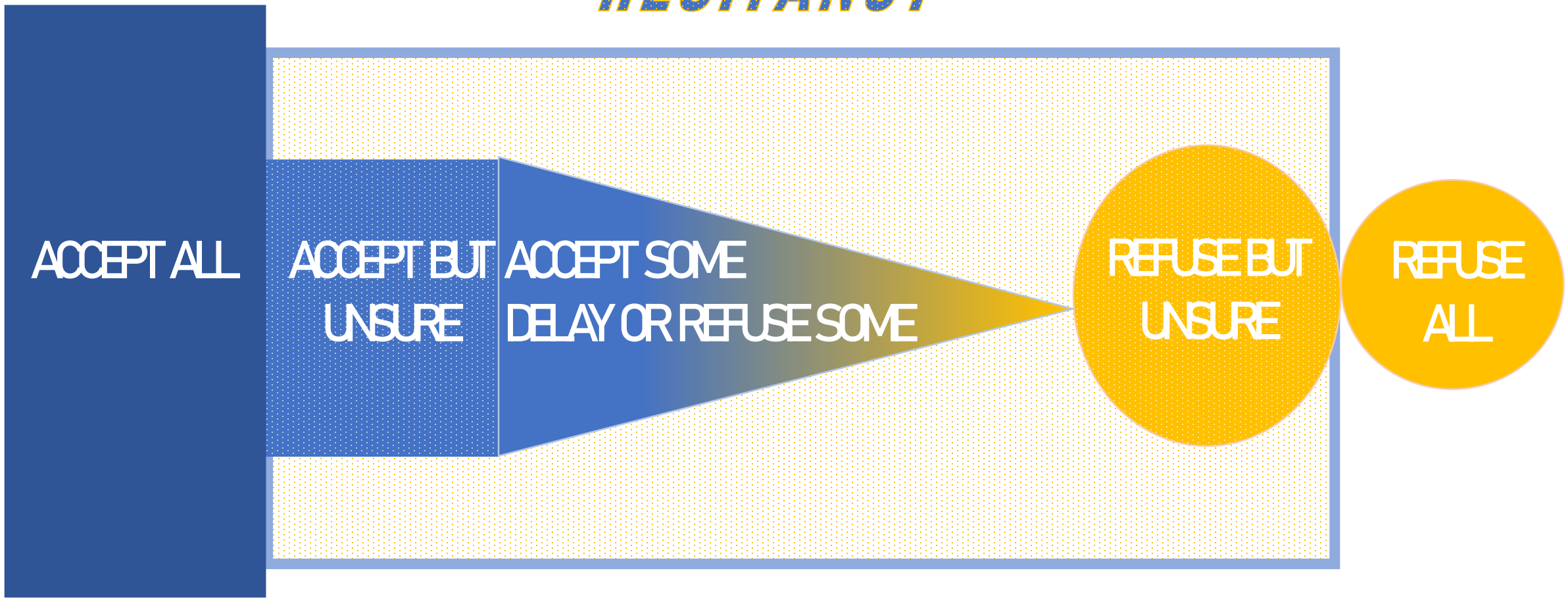
Costs

Parental disagreement – who gives consent?



Adapted from WHO

HESITANCY



"Go ahead"

"OK, I suppose I'll vaccinate"

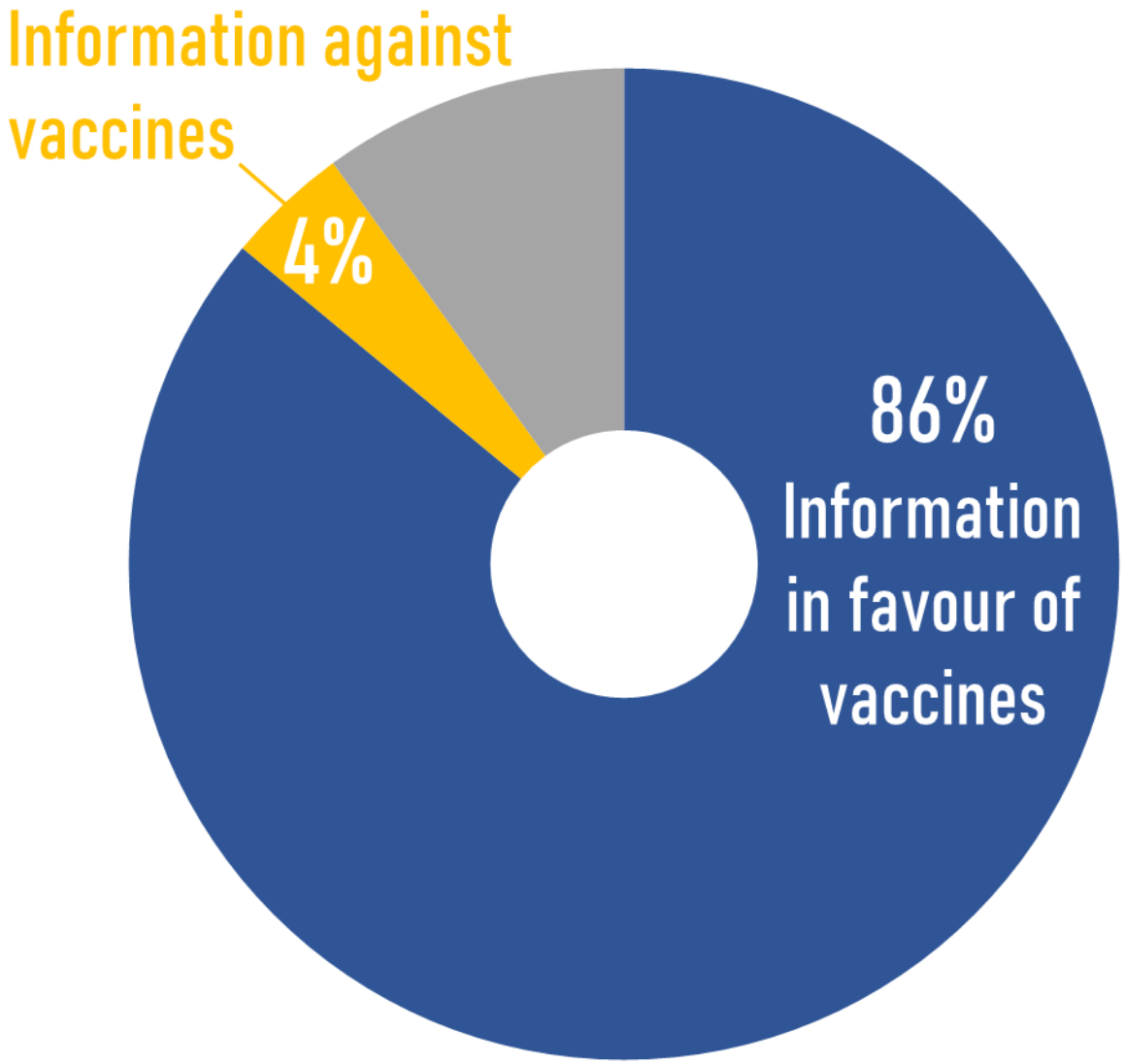
"I don't know"
"I have doubts"

"No, I'm not sure this is right for my child"

"I don't trust vaccines"

Moving people to the left increases uptake

Most people who had seen information about vaccination said it was in favour



Fewer than 1 in 10 (9%) have seen, read or heard something that would make them unsure about vaccinating their child.

Fewer than 1 in 20 said what they had seen was against vaccination.

Information on side effects was the main reason parents thought they might not go ahead.

What do people think about vaccines?

Parents are confident

Only 4% refused one or more

If one was missed, most had put off rather than refused

Health professionals are the most trusted source of advice

Social media and the internet are the least trusted

Questions about vaccination

Vaccine side effects

Any medicine, including vaccines, can cause an unwanted side effect.

Vaccination symptoms are normally mild and last less than a week.

Vaccines are regularly assessed to make sure the benefits of the vaccine in preventing disease are much greater than the risks of known side effects in patients who receive them.

Common side effects:

- Pain, swelling or redness where the injection was given which could last for 2 to 3 days
- general aches, or mild flu-like symptoms
- headaches
- feeling tired

Vaccines are safe.

Vaccines don't lead to an increase in asthma, autism or auto-immune disorders.

Vaccines don't overload or weaken the immune system.

Vaccines don't cause allergies.

Side effects are usually mild.

https://www.vaccinesafetynet.org/

Common concerns	Reassurance
Safety	Lots of testing before vaccines are introduced There is a system to report all possible side effects Vaccine programme regularly reviewed Safe for egg allergy Vaccinators are trained to treat allergic reactions
Additives	Help with storage Prevent infection Help vaccine work better
MMR and autism	No link; scientific studies on 1.5 million children show that MMR doesn't cause, trigger or increase autism risk 3 in 1 is the only vaccine on the NHS – not so many injections, protected quickly
Lots given at once	We come into contact with lots of bacteria and viruses every day from birth Our immune system is always building, learning and reacting to germs Vaccines use a tiny portion of the immune system and help train it
Pain	Might be sore for a little bit; can help by feeding/dummy/distraction/blowing bubbles

Vaccine information

nidirect government services | tédíreach seirbhísí náisiúnta

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Vaccines

Vaccines are the most effective way to prevent infectious diseases. This page explains why vaccines are safe to use and how they help protect against potentially serious illness.

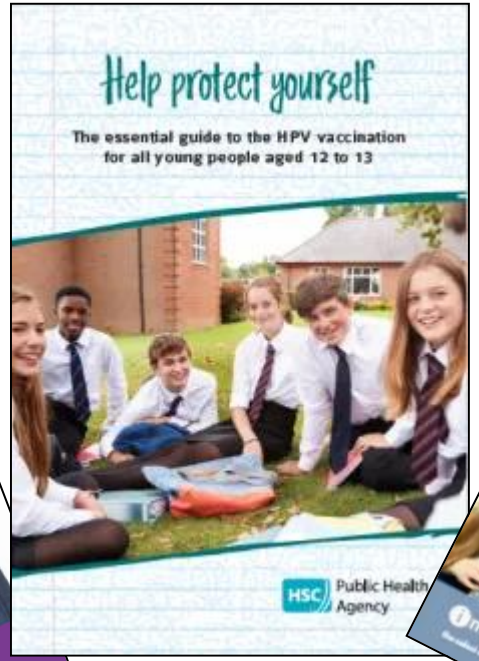
Contents

Immunisation and vaccinations

- BCG vaccination for babies
- Childhood immunisation
- Flu vaccine

HSC Public Health Agency

Meningitis Research Foundation



vaccine safety net

ABOUT VSN

The Vaccine Safety Net is a global network of websites, established by the World Health Organization, that provides reliable information on vaccine safety. More...

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Public resources

Immunisation protects against serious diseases, reducing riss for individuals and communities. Find detailed guidance and resources on NI Direct.

Childhood immunisations

Protecting children from an early age is vital to their health.

- **For infants and children under 2 years:** Vaccines in this age provide protection against diseass such as diphtheria, tetanus, polio, and whooping cough.
- **For preschool children (aged 2- 4 years):** Children in this age group should receive booster vaccines to strengthen their immunity against serious illnesses.

MMR vaccine:

- Protects your child against measles, mumps and rubella (German measles).
- Given as a single injection containing three vaccines.
- Schedule: 1st dose: just after your child's first birthday, 2nd dose: at three years and four months old.
- Why it's important: Measles, mumps and rubella can cause severe complications. Early vaccination is critical to keep your child safe. Click for more information and advice on MMR.

Immunisations for 11-18 year olds

- HPV vaccine: protects against the human papillomavirus, which can lead to certain cancers.
- Teenage vaccinations 14-18 years old: these include boosters and additional vaccines to maintain long-term immunity.
- Those attending University for the first time: First-time university attendees are encouraged to ensure they are fully vaccinated, including protection against meningitis.

Public resources

Professional resources

Public resources

Vaccine Management System (VMS)

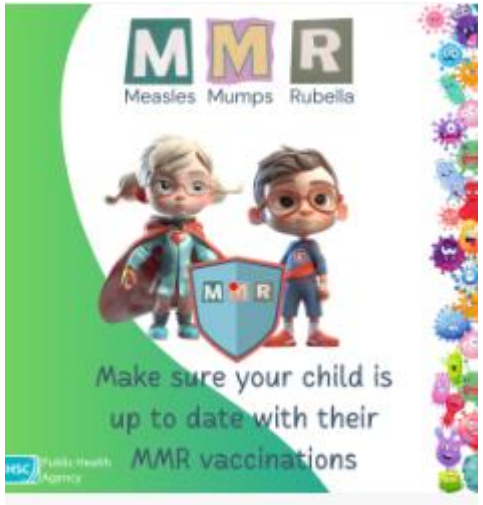
Publications

BBCNI_1A1F0B7ECA
F75CEA600E93B552

Useful resources

- Social media resources for vaccination programmes | HSC Public Health Agency
- Immunisation - elearning for healthcare
- Information for healthcare and other professionals | HSC Public Health Agency
- The complete routine immunisation schedule from 1 July 2025 for healthcare professionals | HSC Public Health Agency
- Immunisation against infectious disease - GOV.UK
- Vaccination of individuals with uncertain or incomplete immunisation - GOV.UK
- David's story -https://vimeo.com/1156427825

Social Media



Questions?