



E: [vaccinationsdelivery@gov.scot](mailto:vaccinationsdelivery@gov.scot)

Dear Directors of Education and Secondary School Head Teachers

## Universal vaccination of children and young people aged 12-15 years against COVID-19

On 14 September Scottish Ministers accepted advice from the four UK Chief Medical Officers (CMOs) to offer a dose of the Pfizer-BioNTech COVID-19 vaccine (Comirnaty) to children and young people aged 12-15 years old.

Scotland's vaccination programme has been one of the fastest in the world with 91% of those over 18 years having received their first vaccine dose and 84% their second dose. Vaccination, along with testing, remains our best protection against the impacts of the pandemic and it is crucial that people continue to come forward. On 3 September 2021, the Joint Committee on Vaccination and Immunisation (JCVI) announced that it did not recommend universal COVID-19 vaccination for 12 to 15 year olds without underlying health conditions at this time. The JCVI stated that although the health benefits from COVID-19 vaccinations are marginally greater than the potential known harms, the margin of benefit was too small to recommend vaccination for this age group currently. However, as there were considerations which went beyond its remit, the JCVI suggested that the Government may wish to seek further advice on the wider societal and educational impacts from the UK CMOs, with representation from the JCVI in these discussions.

### UK CMOs' Recommendation

On 14 September the [Scottish Government confirmed](#) that children and young people aged 12-15 years old in Scotland will be offered a dose of the coronavirus (COVID-19) vaccination, following advice provided by the UK's four Chief Medical Officers. As with all decisions during this pandemic, the balance of risk and benefit has been carefully considered. The view of the UK CMOs is that the additional likely benefits of reducing educational disruption, and the consequent reduction in public health harm from educational disruption, on balance provide sufficient extra advantage in addition to the marginal advantage at an individual level

**From the Chief Medical Officer  
Deputy Chief Nursing Officer  
Chief Pharmaceutical Officer**

Dr Gregor Smith  
Anne Armstrong  
Professor Alison Strath

---

21 September 2021

---

### Addresses

#### For information

Chief Executives, NHS Boards  
Medical Directors, NHS Boards  
Primary Care Leads, NHS Boards  
Directors of Nursing & Midwifery, NHS Boards  
Chief Officers of Integration Authorities  
Chief Executives, Local Authorities  
Directors of Pharmacy  
Directors of Public Health  
General Practitioners  
Practice Nurses  
Chairs, NHS Boards  
Infectious Disease Consultants  
Consultant Physicians  
Chief Executive, Public Health Scotland  
NHS 24  
Health Board Planning  
Health Board Planning Operational Leads  
Immunisation Co-ordinators

---

### Further Enquiries

#### Policy Issues

COVID Vaccination Policy  
[TeamVaccinationsDelivery@gov.scot](mailto:TeamVaccinationsDelivery@gov.scot)

#### Medical Issues

Dr Syed Ahmed  
[Syed.ahmed@gov.scot](mailto:Syed.ahmed@gov.scot)

#### Pharmaceutical and Vaccine Supply Issues

NHS NSS National Procurement:  
[NSS.fluvaccineenquiries@nhs.scot](mailto:NSS.fluvaccineenquiries@nhs.scot)

identified by the JCVI to recommend in favour of vaccinating this group. In formulating this view, the CMOs have been informed by the independent expertise of leaders from the clinical and public health professions across the UK. In addition, they have examined data from the Office for National Statistics as well as published data on the impact of COVID-19 on education, and other relevant published sources and have also benefited from having data available from the USA, Canada and Israel, which have already offered vaccines universally to children and young people aged 12-15 years. The UK CMOs judge that it is likely vaccination will help reduce transmission of COVID-19 in schools which are attended by children and young people aged 12-15 years. COVID-19 is a disease which can be very effectively transmitted by mass spreading events, especially with Delta variant. Therefore, having a significant proportion of pupils vaccinated is likely to reduce the probability of such events which are likely to cause local outbreaks in, or associated with, schools. They will also reduce the chance that an individual child gets COVID-19. This means vaccination is likely to reduce (but not eliminate) disruption to education.

Commencing Monday 20 September, Scotland will offer children and young people aged 12-15 years old a dose of Pfizer-BioNTech (Comirnaty) COVID-19 vaccine. The UK CMOs will revert to the JCVI to give a view on whether, and what, second doses to give to children and young people aged 12-15 once more data on second doses in this age group has accrued internationally. We do not expect this will be before the Spring term. This offer will be made to all children and young people aged 12-15 who are not already covered by existing advice from the JCVI. We have already offered vaccination to children and young people with Neuro-disabilities, Down's syndrome, Learning Disabilities and those with conditions that lead to Immunosuppression – these vaccinations took place over August. In addition, we will be offering a 2 dose vaccine schedule (8 weeks apart) to additional children with certain medical conditions. These are conditions such as:

- Haematological malignancy; Sickle cell disease; Type 1 diabetes; Congenital heart disease; Poorly controlled asthma; Other health conditions identified as clinical risk groups for children aged 12 to 15 years.

### **Informed consent**

We recognise that the overwhelming benefits of vaccination for adults, where risk-benefit is very strongly in favour of vaccination for almost all groups, are not as clear-cut for children and young people aged 12-15 years. Children, young people and their parents will therefore need to understand potential benefits, potential side effects and the balance between them. In all instances, the offer of vaccination to children and young people must be accompanied by appropriate information to enable them, and those with parental responsibility, to be adequately appraised of the potential harms and benefits of vaccination as part of the informed consent process prior to vaccination. In Scotland, the legal age of capacity is 16 years. However, children under the age of 16 can consent to medical treatment if they understand what is being proposed - a clinician can determine whether the child has reached sufficient maturity to understand the nature and possible consequences of the procedure or treatment. More information on young people's right to consent is available at [www.nhsinform.scot/consentunder16](http://www.nhsinform.scot/consentunder16). We already have a suite of resources relating to COVID-19 vaccines available that enable young people and those with parental

responsibility to give informed consent and dedicated leaflets and easy-read versions of these resources are being developed. Further information is available at [www.nhsinform.scot/12to15](http://www.nhsinform.scot/12to15). It is essential that children and young people aged 12-15 years 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.

## **Vaccination Planning**

Health Boards are now preparing to offer vaccination to as many children as possible.

- From Monday 20 September 2021, 12-15 year olds and their parents/carers can opt to come to a drop-in vaccination clinics (they should ensure they have read the online information before attending, and check the location of the drop-in clinics).
- From Monday 27 September 2021, eligible children and young people will be offered to attend an appointment – at school or at a community clinic. All young people in this age group will receive a blue envelope with a scheduled appointment time and the national information leaflet. This will be for a community clinic in their Health Board area. They can reschedule the date and time if this does not suit them, but we encourage them to keep this time if at all possible. This may require them taking some short time out of school for a medical appointment. We appreciate your support with this.
- The only regions of Scotland that are not undertaking the blue envelope/community clinic model are – NHS Borders, NHS Dumfries and Galloway; some parts of NHS Highland, and some Island Boards. In these cases, they have been working with you locally and have agreed a school delivery model starting in the week of the 27 September onwards. The leaflet, letter and consent form will all go home in school bags and returned swiftly. They will appreciate your help to prompt parents by group text and email systems to do this within the timeframe leading up to the school session. We have also asked those Boards to put out an offer to parents/carers so that they can attend a drop-in clinic beforehand should they wish to directly discuss this with a vaccinator and ask questions prior to giving consent.

Once all children and young people have had the initial opportunity to come to drop-in clinics or scheduled appointments, Health Boards will offer catch up sessions in schools or communities to allow those who still wish to be vaccinated to receive their dose.

We hope you find this information helpful.

Yours sincerely

*Dr Gregor Smith*  
**Chief Medical Officer**

*Anne Armstrong*  
**Deputy Chief Nursing  
Officer**

*Professor Alison Strath*  
**Chief Pharmaceutical  
Officer**