

Our Ref.: (1) in DH/ERPMB/PMVD/VS/SIVOP/P1-4/8

Tel.: (852) 2125 2128

Fax: (852) 2320 8505

4 June 2025

Dear Supervisors/ Principals:

**2025/26 Seasonal Influenza Vaccination School Outreach Programme (SIVSOP)**  
**& Hong Kong Childhood Immunisation Programme (HKCIP)**

The Department of Health (DH) continues to organise the Seasonal Influenza Vaccination (SIV) School Outreach Programme (SIVSOP) in 2025/26 while the School Immunisation Teams (SIT) will also continue to visit Hong Kong Primary Schools for the two immunisation campaigns. This letter serves to inform primary schools of the arrangement of the SIVSOP and the immunization campaigns in 2025/26 school year.

**Seasonal Influenza Vaccination School Outreach Programme (SIVSOP)**

SIV is one of the most effective ways to prevent seasonal influenza and its complications. According to local study, vaccination reduces the risk of influenza-like illness (ILI) in school children by half. Scientific data and research showed that the majority of paediatric cases of influenza-associated severe complication/ death did not receive influenza vaccination. School outreach could offer a convenient option for parents and allow students to receive outreach vaccination service in a familiar and relaxed environment at school. According to local experience, school outreach can double vaccination coverage rates, which effectively strengthen the immunity barrier of school children. SIV can reduce school absenteeism, and also lower influenza transmission in the community.



衛生防護中心乃衛生署  
轄下執行疾病預防  
及控制的專業架構  
The Centre for Health  
Protection is a  
professional arm of the  
Department of Health for  
disease prevention  
and control

We would like to express our gratitude for the tremendous support you have provided in the previous academic year for the SIV School Outreach Programme. With your keen support, approximately 1,020 kindergartens/ child-care centres (97%), 640 primary schools (98%), and 490 secondary schools (98%) have conducted outreach in 2024/25, with 506,000 doses of SIV delivered.

2025/26 SIVSOP has been revamped. Live-attenuated influenza vaccine (LAIV) (i.e., nasal spray vaccines) will be provided to all schools. Schools are allowed to choose both injectable inactivated influenza vaccines (IIV) and LAIV for the same or different outreach vaccination activities (Hybrid mode). Besides, an ‘opt-out’ approach will be adopted. Schools are required to indicate their preferred arrangement on the SIVSOP in 2025/26. For details, please refer to the **Annex I**.

To encourage students to receive SIV, DH launched the “SIV School Outreach Commendation Scheme” in 2024/25. Schools participated in the 2024/25 SIVSOP with outstanding vaccination rate will be awarded a certificate of commendation. Approximately 800 schools are qualified for the award in 2024/25. The certificate will be delivered to all awardees in due course, and the list of awardees will be uploaded onto the Center for Health Protection (CHP) website as an encouragement. The Commendation Scheme will continue in 2025/26 school year.

Moreover, the DH will continue to upload “List of schools/child care centres not arranging SIV school outreach” on the Center for Health Protection Website, so as to remind parents to bring their children to receive SIV as soon as possible.

#### Hong Kong Childhood Immunisation Programme (HKCIP)

Each year, SIT visits Hong Kong Primary Schools for two immunisation campaigns, namely "Combined Diphtheria, Tetanus, acellular Pertussis and Inactivated Poliovirus Vaccination Campaign" and "Measles, Mumps, Rubella and Varicella/ Human Papillomavirus (HPV Vaccine also known as cervical cancer vaccine, only for female students) Vaccination Campaign". During the two campaigns, Hepatitis B Vaccine mop-up will be also provided to Primary Six students who have not received 3 doses of Hepatitis B Vaccine on schedule. For details, please refer to **Annex II**.

#### Online briefing session

To provide more details on the arrangement for the 2025/26 SIVSOP and to address different concerns, we will hold an online briefing session:

Date: 10 June 2025 (Tuesday)

Time: 15:30

Mode: Via ZOOM Webinar

ZOOM Link:

<https://us02web.zoom.us/j/82184932543?pwd=16GB9X46FU5Zn12b6imI3jUJG9HhBW.1>

Meeting ID: 821 8493 2543

Passcode: 378485

We would be most grateful if you would kindly indicate the following and return to us by email [sivop@dh.gov.hk](mailto:sivop@dh.gov.hk) on or before 6 June 2025.

Name of School	
No. of representative(s)	
Contact person	
Contact number	
Email address	

#### Arrangement of the SIVSOP and HKCIP

To simplify administrative work of schools, the applications for SIVSOP and HKCIP will be combined into a single procedure in 2025/26 school year. Please fill in the attached **Reply Form**. If schools decided not to participate in the SIVSOP, we request for your serious reconsideration and **state the reason of not participating in the Reply Form**. Please kindly return the filled form(s) to Programme Management and Vaccination Division by fax (Fax Number: 2320 8505) or email ([sivop@dh.gov.hk](mailto:sivop@dh.gov.hk)) **on or before 30 June 2025**.

We hereby remind schools to stay clear of associating with any improper financial (or advantage) transactions with the doctor/ medical organisation and participants of the activity when choosing doctor/ medical organization under School Self-selection of Doctors.

Thank you again for your support to the SIVSOP and the HKCIP. For enquiries, please contact us at 2125 2128.

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Fung King-lun'.

(Dr. FUNG King-lun, Sheldon)  
for Controller, Centre for Health Protection  
Department of Health

**Information Sheet**  
**2025/26 Seasonal Influenza Vaccination (SIV) School Outreach**  
**Programme (SIVSOP)**

**OBJECTIVE**

The Programme aims to facilitate all secondary schools, primary schools, kindergartens/child care centres (including special school) in arranging outreach vaccination, so as to increase the seasonal influenza vaccination coverage for school children, to reduce school absenteeism, influenza related complications, hospitalisations and deaths, and to reduce influenza transmission in the community.

**OVERALL ARRANGEMENT**

An “opt-out” approach will be adopted for the SIVSOP in 2025/26. Schools are required to indicate their preferred arrangement for the SIV school outreach activities. All school children of the participating schools can receive free or subsidized seasonal influenza vaccination, through Public-Private-Partnership (PPP) vaccination teams. There are two modes under SIVSOP, namely the “Government Supply Vaccine Mode” (*formerly called the “SIV School Outreach (Free of Charge) Programme”*) and “Doctor Supply Vaccine Mode” (*formerly called the “Vaccination Subsidy Scheme (VSS) School Outreach (Extra Charge Allowed)”*). Participating schools are required to indicate their preferred mode in the Reply Form. Further elaborations on these two modes are mentioned in this document.

If schools provide SIV for their schoolchildren by other outreach mode (e.g. Residential Care Home Vaccination Programme (RVP), self-organised outreach activity which is not under DH by cooperating with doctors / medical organisation), please provide details in the Reply Form. Schools joining other outreach programme are also required to submit the students’ vaccination rate to the Department of Health (DH) near the end of season.

If schools decided not to participate in any SIV school outreach activity, please state the reason of not participating in the Reply Form, and pay attention to the following:

1. The DH will continue to upload “List of schools/child care centres not arranging SIV school outreach” on the Center for Health Protection Website, so as to remind parents to bring their children to receive SIV as soon as possible.
2. Schools are required to issue a parent letter to appeal parents for the self-arrangement of SIV for their children. Nevertheless, issuing the parent letter

cannot replace conducting the school outreach activity.

3. Schools are required to complete a survey on collecting their students' vaccination rate near the end of the season.

To encourage students to receive SIV, the DH will continue to launch the "SIV School Outreach Commendation Scheme" in 2025/26. Participating schools with outstanding student vaccination rate will be awarded a certificate of commendation. The list of awardees will be uploaded to the CHP' website as an encouragement.

## **FEATURES OF "GOVERNMENT SUPPLY VACCINE MODE"**

*(Formerly called the "'SIV School Outreach (Free of Charge) Programme")*

**Introduction:** DH will arrange Public-Private-Partnership vaccination teams or DH Vaccination Team to provide free SIV for participating school children.

- ✧ DH will provide vaccines for school outreach, and the Government subsidy for doctors per each dose of SIV given to school children would be HKD\$105;
- ✧ Doctors are not allowed to charge the children extra service fees
- ✧ On the date of school outreach, doctors can provide their own vaccines for school staff and students' family members, on self-payment basis.

**Selecting a doctor:** School Self-selection of Doctors OR DH-matching of Doctors

- ✧ School Self-selection of Doctors
  - i. Schools can choose a private doctor/ medical organisation from the list posted on the Centre for Health Protection website: <https://www.chp.gov.hk/en/features/101413.html> .
  - ii. Schools with prior outreach vaccination activities may continue the partnership with the previous doctors/ medical organisations.
- ✧ DH-matching
  - i. For schools which have not selected a private doctor/ medical organisation, DH would match a service doctor\* with the school.

\*For schools in remote areas (e.g. outlying islands) or areas requiring Closed Road Permit or Closed Area Permit (e.g. Lantau Island, Sha Tau Kok), DH may arrange DH Vaccination Team to provide the outreach vaccination service.

**Schedule of the vaccination activities:** The school should fix the dates of vaccination activities for the 1st and 2nd dose with the service doctor. The outreach vaccination activity should be conducted from 9AM to 3PM on Monday to Friday, or 9AM to 11AM

on Saturday.

- ✧ The 1st dose should be administered between October and December 2025
- ✧ The 1<sup>st</sup> dose should be administered within one day.
- ✧ The 2nd dose should be completed in another day, with at least 4 weeks apart from 1st dose. To ensure adequate immunity against seasonal influenza, children under 9 years of age who have never received any seasonal influenza vaccination before are recommended to receive 2 doses of SIV.

If schools choose to join through DH-matching, please provide 3 available dates for the 1<sup>st</sup> dose vaccination activity to facilitate DH matching procedure.

**Type of Vaccine:** Two types of the seasonal influenza vaccines, injectable type (inactivated seasonal influenza vaccines, IIV) and nasal spray type (live attenuated seasonal influenza vaccines, LAIV) will be available, depending on the availability of the stock and the preference of the school. Schools are allowed to choose both IIV and LAIV for the same or different outreach vaccination activities (hybrid mode).

- ✧ For schools participating in *School Self-selection of Doctors*, they should discuss with service doctor and **mutually agree** on **the type of vaccine** being used, and inform the DH about the choice of the type of vaccine in **Supplementary Form**.
- ✧ For schools which have not self-selected their doctor, please indicate your preference of type of vaccine in **Reply Form**.
- ✧ If primary schools opt for LAIV, MMR vaccine under Hong Kong Childhood Immunisation Programme arranged by School Immunisation Teams should be administered at least 28 days apart. For details, please refer to the thematic webpage at: <https://www.chp.gov.hk/en/features/100764.html#FAQ37>
- ✧ For Frequently Asked Questions about the type of seasonal influenza vaccines, please refer to the following website: <https://www.chp.gov.hk/en/features/100764.html#FAQ18>

**Vaccine delivery:** For the 1<sup>st</sup> dose activity, DH will arrange the delivery of the vaccines; while for the 2<sup>nd</sup> dose, DH will deliver the vaccines directly or via the service doctors to the schools.

**School obligations:** Since schools are provided with vaccination services free of charge, they do not need to conduct tendering or quotation exercise when choosing a doctor. Schools are reminded to stay clear of associating with any improper financial (or advantage) transactions when choosing your service doctor through School Self-selection of Doctor.

Schools need to:

- 1) Distributing and collecting consent forms;
- 2) Verifying the particulars of the students provided in the consent forms;
- 3) Arranging vaccination venue;
- 4) Preparing the flow for vaccination day(s) (complete the 1<sup>st</sup> dose within 1 day; and completing 2nd dose on another day, with at least 4 weeks apart from 1<sup>st</sup> dose);
- 5) Assisting in the operation of the vaccination team during the vaccination activities; and
- 6) Providing locked cabinet(s) for temporary storage of clinical waste in case same day collection of clinical waste cannot be arranged.

**Matching result:** DH will announce the matching result in July 2025.

### **FEATURES OF “DOCTOR SUPPLY VACCINE MODE”**

*(Formerly called the “Vaccination Subsidy Scheme (VSS) School Outreach (Extra Charge Allowed)”)*

**Introduction:** Upon self-selection of doctors, schools should discuss the arrangement of school outreach, including the type of vaccine.

- ✧ Private doctors will provide vaccines for outreach vaccination. The Government subsidy per each dose of SIV given to school children would be HKD\$260. Subsidy will be given to doctors directly.
- ✧ Some doctors may impose extra fee, while some doctors may not charge extra fee
- ✧ On the date of school outreach, doctors can provide their own vaccines for school staffs and students’ family members, on self-payment basis.

**Selecting a doctor:** School Self-selection of private doctors / medical organisations

- ✧ School Self-selection of Doctors
  1. Schools can choose a private doctor/ medical organisation from the list posted on the Centre for Health Protection website: <https://www.chp.gov.hk/en/features/101413.html> .
  2. Schools with prior outreach vaccination activities may continue the partnership with the previous doctors/ medical organisations.

**Vaccination Schedule:** Schools need to decide the date for the 1<sup>st</sup> and 2<sup>nd</sup> dose with their collaborating doctors.

- ✧ The 1st dose should be administered between October and December 2025



- ✧ The 1<sup>st</sup> dose should be administered within one day.
- ✧ The 2<sup>nd</sup> dose should be completed in another day, with at least 4 weeks apart from 1<sup>st</sup> dose. To ensure adequate immunity against seasonal influenza, children under 9 years of age who have never received any seasonal influenza vaccination before are recommended to receive 2 doses of SIV.

**Type of Vaccine:** Upon self-selection of doctors, schools should discuss the arrangement of school outreach, including the types of vaccine: Injectable Influenza Vaccines (IIV) and/or Live Attenuated Influenza Vaccines (LAIV). Schools are allowed to choose both IIV and LAIV for the same or different outreach vaccination activities (hybrid mode).

- ✧ For schools participating in *School Self-selection of Doctors*, they should discuss with service doctor and **mutually agree** on **the type of vaccine** being used, and inform the DH about the choice of the type of vaccine in **Supplementary Form**.
- ✧ If primary schools opt for LAIV, MMR vaccine under Hong Kong Childhood Immunisation Programme arranged by School Immunisation Teams should be administered at least 28 days apart. For details, please refer to the thematic webpage at: <https://www.chp.gov.hk/en/features/100764.html#FAQ37>
- ✧ For Frequently Asked Questions about the type of seasonal influenza vaccines, please refer to the following website: <https://www.chp.gov.hk/en/features/100764.html#FAQ18>

**Vaccine delivery:** Delivered by the service doctors to schools.

**School obligations:** Schools should note that vaccination is a medical procedure. Schools and the doctor in-charge of the arrangement must give due consideration to safety and liability issues. Schools are reminded to stay clear of associating with any improper financial (or advantage) transactions with the doctor/ medical organisation and participants of the activity.

Schools need to:

- 1) Distributing and collecting consent forms;
- 2) Verifying the particulars of the students provided in the consent forms;
- 3) Arranging vaccination venue;
- 4) Preparing the flow for vaccination day(s) (complete the 1<sup>st</sup> dose within 1 day; and completing 2<sup>nd</sup> dose on another day, with at least 4 weeks apart from 1<sup>st</sup> dose);
- 5) Assisting in the operation of the vaccination team during the vaccination activities; and
- 6) Providing locked cabinet(s) for temporary storage of clinical waste in case same

day collection of clinical waste cannot be arranged.

**Details will be discussed in the online briefing session for participating schools in August. Please also refer to the “School’s Guide for 2025/26 SIVSOP” (Website: [https://www.chp.gov.hk/files/pdf/schoolguide\\_eng.pdf](https://www.chp.gov.hk/files/pdf/schoolguide_eng.pdf)) (Will be updated in due course)**

**Comparison between “Government Supply Vaccine Mode” and  
“Doctor Supply Vaccine Mode”**

	<b>Government Supply Vaccine Mode</b> <i>(Formerly called the “SIV School Outreach (Free of Charge) Programme”)</i>	<b>Doctor Supply Vaccine Mode</b> <i>(Formerly called the “Vaccination Subsidy Scheme (VSS) School Outreach (Extra Charge Allowed)”)</i>
<b>Eligible Schools</b>	All SSs, PSs, KGs/CCCs (including special school)	
<b>Vaccine available</b>	IIV, LAIV or hybrid mode ( by Gov )	IIV, LAIV or hybrid mode ( by doctor )
<b>Fee</b>	Free	May impose extra service charge
<b>Selecting a doctor by schools</b>	<ul style="list-style-type: none"> <li>DH-matching</li> <li>Self- selection of doctors (according to doctor list)</li> </ul>	<ul style="list-style-type: none"> <li>Self- selection of doctors (according to doctor list)</li> </ul>
<b>Vaccination schedule (date, time)</b>	<ul style="list-style-type: none"> <li>Facilitated during DH matching</li> <li>or discuss with doctors</li> </ul>	<ul style="list-style-type: none"> <li>Discuss with doctors</li> </ul>
<b>Vaccine recipients</b>	<ul style="list-style-type: none"> <li>School children (free)</li> <li>School staff and students’ family members (self-payment)</li> </ul>	<ul style="list-style-type: none"> <li>School children (subsidised)</li> <li>School staff and students’ family members (self-payment)</li> </ul>

**Timeline for 2025/26 SIVSOP**

<b>Date</b>	<b>Event</b>
<b>MAY – JUN 2025</b>	<ul style="list-style-type: none"> <li>Invitation to Schools and Doctors/HMO for SIVSOP enrollment</li> </ul>
	<ul style="list-style-type: none"> <li>Stakeholder engagement (introduction for the coming season) with schools, SSBs, major school councils, PTAs, etc.</li> </ul>
<b>JUL 2025</b>	<ul style="list-style-type: none"> <li>Announcement of doctor matching result</li> </ul>
	<ul style="list-style-type: none"> <li>Follow up enrollment status of non-participating / non-responsive schools with EDB</li> </ul>
<b>AUG 2025</b>	<ul style="list-style-type: none"> <li>Upload the list of schools that do not participate in SIV school outreach activities to the CHP’s website</li> </ul>
	<ul style="list-style-type: none"> <li>Online briefing sessions for participating schools (details of preparation work, on/after vaccination days, related guideline)</li> </ul>
<b>OCT 2025– FEB 2026</b>	<ul style="list-style-type: none"> <li>Conducting SIV school outreach activity by schools</li> </ul>
<b>APR – JUN 2026</b>	<ul style="list-style-type: none"> <li>Vaccination coverage survey for non-participating schools / schools that join other vaccination programme*</li> </ul>
	<ul style="list-style-type: none"> <li>Send out Certificate of Commendation for awardees in the “SIV School Outreach Commendation Scheme”</li> </ul>

\*e.g. Residential Care Home Vaccination Programme (RVP), self-organised outreach activity which is not under DH by cooperating with doctors / medical organisation

School Name: \_\_\_\_\_ (School Code: **SIT/School code**)  
School Address: \_\_\_\_\_

### **Vaccination arrangement by School Immunisation Teams in 2025/2026**

Each year, School Immunisation Teams (SIT) visit Hong Kong Primary Schools for two immunisation campaigns, namely "Combined Diphtheria, Tetanus, acellular Pertussis and Inactivated Poliovirus Vaccination Campaign" and "Measles, Mumps, Rubella and Varicella/ Human Papillomavirus (HPV Vaccine also known as cervical cancer vaccine, only for female students) Vaccination Campaign". Please reserve these dates for vaccination when preparing the school calendar.

	1 <sup>st</sup> Semester		2 <sup>nd</sup> Semester	
Vaccination campaign	Combined Diphtheria, Tetanus, acellular Pertussis and Inactivated Poliovirus Vaccine		Measles, Mumps, Rubella and Varicella / Human Papillomavirus / Hepatitis B Vaccine	
Date of Visit	<b><u>Scheduled date</u></b>		<b><u>Scheduled date</u></b>	
Eligible students	Primary 1	Combined Diphtheria, Tetanus, acellular Pertussis & Inactivated Poliovirus Vaccine (DTaP-IPV)	Primary 1 (if applicable)	Measles, Mumps, Rubella & Varicella (MMRV)
	Primary 6	Combined Diphtheria (reduced dose), Tetanus, acellular Pertussis (reduced dose) & Inactivated Poliovirus Vaccine (dTAp-IPV)	P.5 and P.6 female students	Human Papillomavirus (HPV)
			Primary 6 (if applicable)	Measles, Mumps, Rubella & Varicella (MMRV) / Hepatitis B (HBV)
	Our staff would also check the immunisation records of the students for history of BCG vaccination. Students aged under 15 years without history of BCG vaccination would be referred to Chest Clinic of the Department of Health for management.			
Period for collecting consent / refusal forms	<b><u>Date</u></b> (Please note the opening hours of each sub-office)		<b><u>Date</u></b> (Please note the opening hours of each sub-office)	
	<b><u>For enquiry, please contact us at 2615 8574 from Date and state the school code</u></b>			

Point to note for school:

1. Assign a responsible school personnel to coordinate the vaccination programme
2. Arrange staff to collect consent / refusal forms with reply slip
3. Upload student information (Important reminder: Students' personal data input on the "electronic Immunisation Record System"
4. Distribute the consent/refusal forms to the relevant parents/guardians
5. Collect all signed consent/refusal forms
6. Collect ALL ORIGINAL COPIES of students' immunisation records or immunisation records reissued by Maternal and Child Health Centres.

Since immunisation records are important documents, please ensure they are kept safe. Enclosed, please find the "Note for Responsible School Personnel"

## Note for Responsible School Personnel

The School Immunisation Teams will visit your school as scheduled. Please arrange the following to facilitate the smooth running of the immunisation campaign at your school.

### Before the Date of Immunisation

#### I. Arrange staff to collect consent /refusal form in one of SIT's sub-offices with reply slip

#### II. Use the electronic Immunisation Record System to input students' data

Before our school visits in both semesters (not less than 10 working days), please login the School Portal of Immunisation Record System (IRS) of Department of Health (<https://www.dhsisp.gov.hk/IRS/>) and upload the students' information, including English and Chinese names, gender, date of birth and the Hong Kong Identity Card (HKIC) / Hong Kong Birth Certificate (HKBC) / other identification document number. For technical support, please contact School Immunisation Teams, Department of Health at 2615 8563 or via e-mail to: [sit@dh.gov.hk](mailto:sit@dh.gov.hk).

#### III. Before the date of immunisation, all immunisation records (original copies) or copies re-issued by Maternal and Child Health Centres (As immunisation records are important documents, please keep them properly) should be collected. The signed consent / refusal forms (please remind the parents to sign either one of them, but not both).

#### IV. Unless parents have signed refusal form, they should indicate the immunisation records availability on the consent form (please refer to the arrow shown in Picture A). If neither box is filled, please return the consent form to parents for updating and collect it again upon completion.

(Picture A) Consent Form of Combined Diphtheria, Tetanus, acellular Pertussis & Inactivated Poliovirus Vaccine

#### **【Consent Form】** ☒

#### **Combined Diphtheria, Tetanus, acellular Pertussis & Inactivated Poliovirus Vaccine (DTaP-IPV)**

● I have read and understood the attached **Information on DTaP-IPV**.

● I ☒ **agree** to the student receiving the **DTaP-IPV** as arranged by the Department of Health.

● Please put a '✓' against the appropriate ☐.

☐ I submit immunisation records of the student for checking.

☐ I cannot submit any immunisation records of the student but still agree to the student receiving the vaccine.

\*I agree to let the school provide my own and my child's personal data to the Department of Health and use in accordance with the Statement of Purposes.

Relationship: ☐ Father ☐ Mother ☐ Guardian

Signature of Parent/ Guardian : \_\_\_\_\_

Name of Parent / Guardian : \_\_\_\_\_

(Please complete in block letter)

Date :  /  /  (DD/MM/YYYY)

Please return this reply slip to school together with all the immunisation records (original copy) of the student.

Class : \_\_\_\_\_ Class no :

School : \_\_\_\_\_

Name of student : (Please complete the name as printed on Identity Card / Birth Certificate)

In English—Surname first, then Other Names

Surname (Chinese) Other Name (Chinese)

Gender : ☐ Male ☐ Female

Type of document:

☐ Hong Kong Identity Card ☐ HK Birth Certificate ☐ Passport

☐ Other identity document, please specify \_\_\_\_\_

Document No.:

Date of Birth :  /  /  (DD/MM/YYYY)

Day-time contact phone no. of parent/ guardian:

Home or other cell phone no:

(Picture B) Consent Form of Human Papillomavirus Vaccine

**《Consent Form》** ☒

**Human Papillomavirus (HPV) Vaccine**

(Please put a '✓' in the appropriate ☐)

- I have read and understood the attached **Information on Human Papillomavirus (HPV) vaccine**.
- I **agree** to let the student to receive HPV vaccine offered by the Department of Health.

- ☐ I submit immunisation records of the student for checking.
- ☐ I **cannot submit** any immunisation records of the student but **still agree** to the student receiving the vaccine. (Please arrange reissue of immunisation record if lost.)

Class: \_\_\_\_\_ Class No.:

School: \_\_\_\_\_

Name of student: \_\_\_\_\_  
(Please complete the name as printed on Identity Card / Birth Certificate)

In English – Surname first, then Other Names

\_\_\_\_\_

\_\_\_\_\_

Surname (Chinese) (if applicable)	Other Name (Chinese) (if applicable)
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Gender: ☐ Male ☐ Female

(Picture C) Consent Form of Measles, Mumps, Rubella & Varicella Immunisation

**【Consent Form】** ☒

(Please put a '✓' against the appropriate ☐)

- I **agree** the student receiving MMRV/ MMR.
- I have read and understood the attached **Information on MMRV/MMR vaccine**.
- Student's **influenza** vaccination history **within the past 4 weeks**:
  - ☐ did not receive any influenza vaccine
  - ☐ received live attenuated influenza vaccine (nasal spray)
  - ☐ received inactivated influenza vaccine (injection)

Last influenza vaccination date:  /  /   
(DD /MM/YYYY)

- Immunisation records of the student:
  - ☐ I submit immunisation records of the student for checking.
  - ☐ I **cannot submit** any immunisation records of the student but **still agree** to the student receiving the vaccine. (Please arrange reissue of immunisation record if lost.)

***Please return this reply slip to the school together with all original copies of immunisation records (including influenza vaccine records).***

Class: \_\_\_\_\_ Class no.:

School: \_\_\_\_\_

Name of student : \_\_\_\_\_  
(Please complete the name as printed on Identity Card / Birth Certificate)

In English – Surname first, then Other Names

\_\_\_\_\_

\_\_\_\_\_

Surname (Chinese)	Other Name (Chinese)
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V. Please arrange students to wear loose sleeve clothing (such as sportswear) to facilitate immunisation.

### On the Day of Immunisation

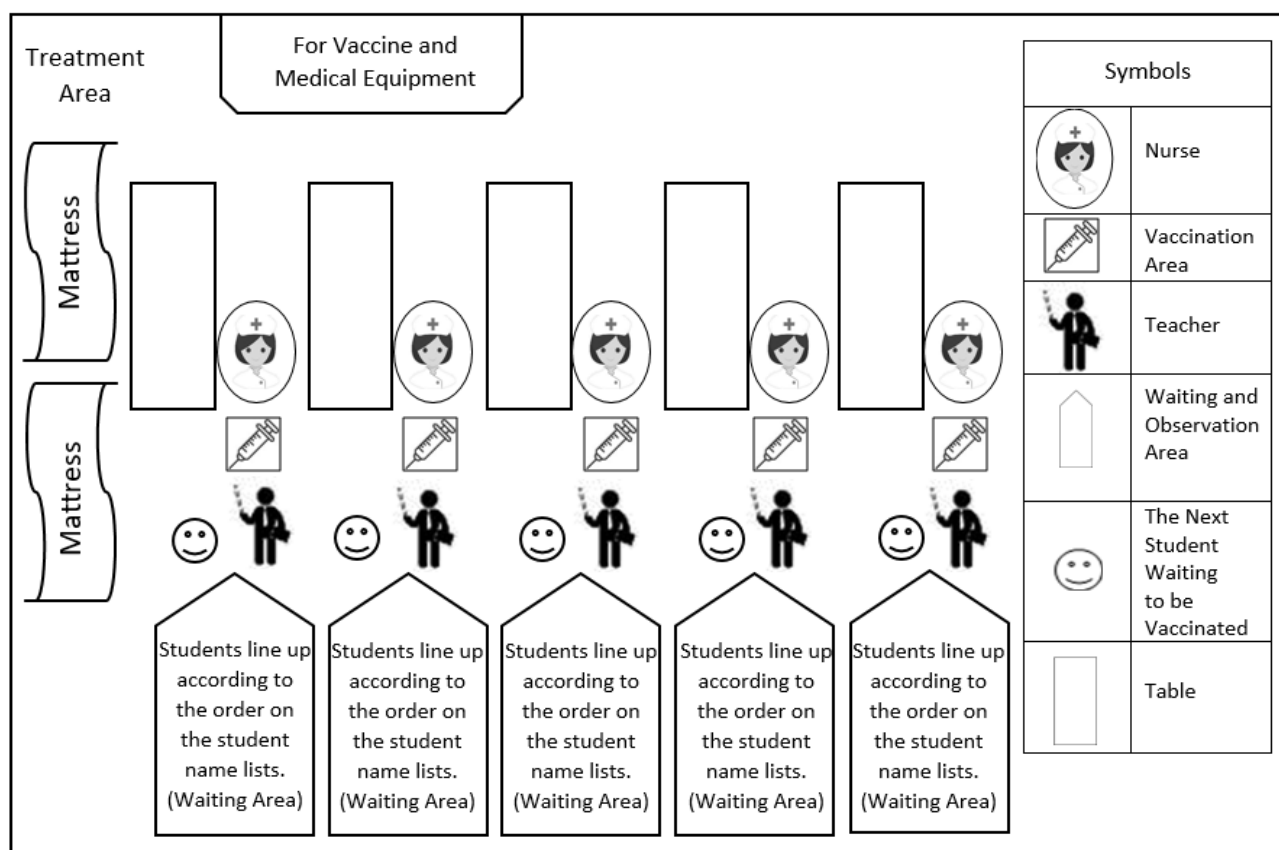
#### I. Preparation of documents

1. Please put the consent / refusal form of each student inside his / her immunisation record, and arrange all the students' documents according to the sequence in the student name list, then secure the documents of each class with rubber bands.
2. If students have the following conditions, please fill in "Appendix" and provide it to our staff **before immunisation**:
  - i. those who have parental consent for immunisation but withhold immunisation on the day of school visit because they are sick, absent or have changed to refusal
  - ii. twins
  - iii. repeaters

## II. Preparation of venue

1. Please provide a spacious, well-ventilated and well-lit venue with adequate tables, chairs, dust bins and stationery, e.g., staplers, adhesive tapes, rubber bands (Regarding the venue setting, please refer to Picture B). Please also provide a stamp of school name to stamp on the referral letters.
2. Except for human papillomavirus (HPV) vaccine, School Immunisation Teams would bring required vaccines to school. Vaccine providers would deliver HPV vaccines to school on the day of immunisation. Staff of School Immunisation Teams would receive the delivery.
3. To comply with the environmental legislation, our staff will arrange the licensed contractor to collect clinical waste directly at the school after completion of immunisation. Our staff will stay behind until the collection procedure is completed.

(Picture C) Reference Floor Plan for School Vaccination



## III. Immunisation arrangement for students

1. Staff of the School Immunisation Teams will check the immunisation records and consent forms of the students. After checking, please only bring eligible students to the immunisation venue according to the order on the student name lists. Students who do not need the vaccination should not be brought to the venue in order to avoid confusion.
2. Please arrange students to **bring along their identity documents such as student handbooks or student cards with photo** to the immunisation venue for identification.
3. Please arrange class teachers or staff who are familiar with the students at the immunisation venue to accompany and identify students
4. Please stay in the immunisation venue to facilitate smooth running of the process. Staff assistance is required for proper positioning of P.1 students during injection.
5. Please reserve enough time (depending on the class size, it may take around 30-45 minutes for each class) for staff to provide immunisation. If there is a large number of students, the duration of immunisation procedure may be extended to the afternoon if necessary.

### **After Immunisation**

We have encountered students who experienced discomfort after immunisation. These included fainting and falls which required hospital treatment. In order to prevent such incidents, we would like to seek your assistance in arranging adequate staff to accompany the students, and to provide adequate space for students to sit down for our observation for 20 minutes before returning to their classrooms. Please also provide gymnasium mats in the venue for students who feel unwell to lie down.

Your kind assistance is much appreciated for the smooth running of the immunisation campaign. For enquiries, please contact our staff at 2615 8585. Please specify school code.

### **Important reminder:** **Students' personal data input on the "electronic Immunisation Record System"**

To ensure the completeness and accuracy of students' immunisation records, the School Immunisation Teams have been relying on your school to provide accurate students' information for record.

The Hong Kong Government has launched the Electronic Health Record Sharing System (eHealth) since 2016 to provide members of the public with electronic accounts that can store personal health records (including immunisation records), with an aim to build up free and lifelong electronic health records for all members of the public, which is now commonly used by the public and parents.

To facilitate parents' access to their children's immunisation records in eHealth following the immunisation visit by SIT, please make sure that your school uploads the English name, Chinese name, gender, date of birth for each student, and most importantly, the accurate **identity document type and number** to allow the smooth transfer of immunisation records to the eHealth. **If the uploaded student information is incomplete or inaccurate, the scheduling of the date of school visit for immunisation could be affected.**

Thank you for your assistance.



## Reply Slip - 1<sup>st</sup> Semester

**Please complete and bring along the completed reply slip below to collect the required documents at one of sub-offices listed during office hour between 13 November 2025 - 29 December 2025.**

For enquiries, please contact our staff at 2615 8574 and state the school code.

School Name : \_\_\_\_\_ (Code : SIT/School code)

School Tel. : \_\_\_\_\_ Fax No. : \_\_\_\_\_ E-mail : \_\_\_\_\_

Date of Immunisation : \_\_\_\_\_ (1<sup>st</sup> Semester Campaign)

Name of Responsible Staff (School Immunisation) : \_\_\_\_\_

Contact Tel. : \_\_\_\_\_

**Please provide the accurate number of classes and students:**

P.1 (Total no. of students) : \_\_\_\_\_ P.6 (Total no. of students) : \_\_\_\_\_

P.1 (No. of classes) : \_\_\_\_\_ P.6 (No. of classes) : \_\_\_\_\_

**Please provide the accurate number of female students for HPV vaccination in the next semester (not vaccinate in this semester):**

P.5 (Total no. of female students) : \_\_\_\_\_ P.6 (Total no. of female students) : \_\_\_\_\_

P.5 (No. of classes) : \_\_\_\_\_ P.6 (No. of classes) : \_\_\_\_\_

### ***Hong Kong Region***

School Immunisation Teams  
Room 12, 5/F  
Sai Ying Pun Jockey Club Polyclinic  
134 Queen's Road West, Sai Ying Pun  
Hong Kong  
Tel : 2859 8236  
**Wed** : 9:00am – 12:45pm  
2:00pm – 5:15pm

### ***Kowloon Region***

School Immunisation Teams  
Room 215, 2/F  
Centre for Health Protection  
147C Argyle Street  
Kowloon  
Tel : 2753 8095  
**Tue, Thur** : 9:00am – 12:45pm  
2:00pm – 5:15pm

### ***New Territories East Region***

School Immunisation Teams  
Room 120, 1/F Lek Yuen Health Centre  
9 Lek Yuen Street  
Shatin, N.T.  
Tel : 3583 2945  
**Tue** : 9:00am – 12:45pm  
2:00pm – 5:15pm

School Immunisation Teams  
9/F North District Community Health  
Centre Building, No.3 Wai Wo Street,  
Sheung Shui  
Tel : 2675 1682  
**Fri** : 9:00am – 12:45pm  
2:00pm – 5:15pm

### ***New Territories West Region***

School Immunisation Teams  
2/F, 115 Castle Peak Road, Tsuen Wan N.T.  
Tel : 2615 8585 / 2615 8563  
**Mon** : 9:00am – 12:45pm  
2:00pm – 5:30pm  
**Tue to Fri** : 9:00am – 12:45pm  
2:00pm – 5:15pm

School Immunisation Teams  
Room 316, 3/F  
Yuen Long District Office Building  
269 Castle Peak Road, Yuen Long, N.T.  
Tel : 2475 2630  
**Thur** : 9:00am – 12:45pm  
2:00pm – 5:15pm

## Reply Slip – 2<sup>nd</sup> Semester

**Please complete and bring along the completed reply slip below to collect the required documents at one of the offices listed during office hour between 16 February 2026 - 3 April 2026.**

For enquiries, please contact our staff at 2615 8574.

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School Name : \_\_\_\_\_ ( Code : SIT/School code )

School Tel. : \_\_\_\_\_ Fax No. : \_\_\_\_\_ E-mail : \_\_\_\_\_

Date of Immunisation : \_\_\_\_\_ (2<sup>nd</sup> Semester Campaign)

Name of Responsible Staff (School Immunisation) : \_\_\_\_\_

Contact Tel. : \_\_\_\_\_

Please provide the **accurate** number of classes and students:

P.1 (total no. of students) : \_\_\_\_\_ P.6 (total no. of students) : \_\_\_\_\_

No. of P.1 classes : \_\_\_\_\_ No. of P.6 classes : \_\_\_\_\_

P.5 (total no. of female students) : \_\_\_\_\_ P.6 (total no. of female students) : \_\_\_\_\_

No. of P.5 classes : \_\_\_\_\_

<i><b>Hong Kong Region</b></i>	<i><b>Kowloon Region</b></i>	<i><b>New Territories East Region</b></i>	<i><b>New Territories West Region</b></i>
School Immunisation Teams Room 12, 5/F Sai Ying Pun Jockey Club Polyclinic 134 Queen's Road West, Sai Ying Pun Hong Kong Tel : 2859 8236 <b>Wed</b> : 9:00am – 12:45pm 2:00pm – 5:15pm	School Immunisation Teams Room 215, 2/F Centre for Health Protection 147C Argyle Street Kowloon Tel : 2753 8095 <b>Tue, Thur</b> : 9:00am – 12:45pm 2:00pm – 5:15pm	School Immunisation Teams Room 120, 1/F Lek Yuen Health Centre 9 Lek Yuen Street Shatin, N.T. Tel : 3583 2945 <b>Tue</b> : 9:00am – 12:45pm 2:00pm – 5:15pm  School Immunisation Teams 9/F North District Community Health Centre Building, No.3 Wai Wo Street, Sheung Shui Tel : 2675 1682 <b>Fri</b> : 9:00am – 12:45pm 2:00pm – 5:15pm	School Immunisation Teams 2/F, 115 Castle Peak Road, Tsuen Wan N.T. Tel : 2615 8585 / 2615 8563 <b>Mon</b> : 9:00am – 12:45pm 2:00pm – 5:30pm <b>Tue to Fri</b> : 9:00am – 12:45pm 2:00pm – 5:15pm  School Immunisation Teams Room 316, 3/F Yuen Long District Office Building 269 Castle Peak Road, Yuen Long, N.T. Tel : 2475 2630 <b>Thur</b> : 9:00am – 12:45pm 2:00pm – 5:15pm

如小一、小六學童及小五/小六女童屬以下情況，請 貴校填寫此表格，並在接種當日 (於未進行接種前) 交給本署職員查閱。  
 If the P.1, P.6 students and P.5/P.6 female students have the following conditions, please fill in this form and provide it to our staff for checking before immunisation on the day of school visit.

	班別 Class	學生姓名 Name of Students	性別 Sex	雙生 Twins	重讀生 Repeaters	家長同意接種疫苗的學童但 Students with consent for immunisation <u>but</u>				備註 Remarks
						今天暫不注，因為 withhold immunisation today because of			改為 不同意 change to refusal	
						生病 sickness	缺席 absence	其他原因 other reasons		
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										

註：請在適當的空格內加上「✓」號  
 Note: Please "✓" the appropriate boxes

# **REPLY FORM**

## **2025/26 Seasonal Influenza Vaccination School Outreach Programme**

### **(SIVSOP, applicable to All School) &**

### **Hong Kong Childhood Immunisation Programme (HKCIP, applicable to Primary School)**

Please kindly return this **Reply Form** to Programme Management and Vaccination Division, Emergency Response and Programme Management Branch of the Centre for Health Protection **by fax or email (Fax Number: 2320 8505/ Email Address: [sivop@dh.gov.hk](mailto:sivop@dh.gov.hk)) on or before 30 June 2025.**

Put “√” into the appropriate box(es). \*Delete if inappropriate.

#### **PART I – School Information**

School Name: \_\_\_\_\_

6-digits School No. \_\_\_\_\_

School Address: \_\_\_\_\_  
\_\_\_\_\_

Region of the School: \_\_\_\_\_

\*Hong Kong/ Kowloon/  
New Territories East/ New Territories West

Total number of students: \_\_\_\_\_

Contact number: \_\_\_\_\_

Email address: \_\_\_\_\_

Fax number: \_\_\_\_\_

#### **PART II – Arrangement of SIVSOP (applicable to All School) & HKCIP (applicable to Primary School)**

##### **1. Arrangement of HKCIP (applicable to Primary Schools)**

☐ I have read **Annex II** and **AGREE** to join HKCIP

##### **2. Please indicate which mode of SIV School Outreach Programme your school will arrange. (applicable to All School)**

☐ 2025/26 SIVSOP “GOVERNMENT SUPPLY VACCINE MODE” (Formerly called the “SIV School Outreach (Free of Charge) Programme”) (Please refer to **Annex I**, and proceed to **PART III to VII**)

☐ 2025/26 SIVSOP “DOCTOR SUPPLY VACCINE MODE” (Formerly called the “Vaccination Subsidy Scheme (VSS) School Outreach (Extra Charge Allowed)”) (Please refer to **Annex I**, and proceed to **PART IV to VII, and complete the SUPPLEMENTARY FORM**)

☐ Adopt other outreach mode to provide SIV (i.e. Residential Care Home Vaccination Programme (RVP), self-organised outreach activity not under DH by cooperating with doctors / medical organisations) (Please provide details of activity, and proceed to **PART VI to VII**)

Details of outreach / vaccination programme: \_\_\_\_\_

Healthcare facilities/doctors providing service: \_\_\_\_\_

Outreach date: \_\_\_\_\_

☐ Not joining any of the above programmes (***Please provide the reason(s), read the following details and proceed to PART VI to VII***)

- The DH will continue to upload “List of schools/child care centres not arranging SIV school outreach” on the Centre for Health Protection for Health Protection Website, so as to remind parents to bring their children to receive SIV as soon as possible.
- Schools are required to issue a parent letter to appeal parents for the self-arrangement of SIV for their children. Nevertheless, issuing the parent letter cannot replace conducting the school outreach activity.
- Schools are required to complete a survey on collecting their students’ vaccination rate near the end of the season.

Reason(s) of not participating in SIVSOP (*can select more than 1 options*):

- ☐ Insufficient resources (e.g. manpower, venue) to support the vaccination outreach activities
- ☐ Tight term schedule and is unable to arrange vaccination outreach activities
- ☐ Will encourage parents to arrange students to receive SIV in private doctors’ clinic
- ☐ Already arranged all students to receive SIV, mode of arrangement: \_\_\_\_\_
- ☐ Others: \_\_\_\_\_

### **PART III – Selecting a Doctor**

**3. Please confirm the mode to select a doctor under the “GOVERNMENT SUPPLY VACCINE MODE”**

- ☐ School Self-selection of Doctors (Please **also** fill in the **SUPPLEMENTARY FORM**)
- ☐ DH-matching of doctors

### **PART IV – Type of Vaccine**

**4. Please indicate your preferred type of vaccine to be used in the vaccination outreach service**

- ☐ Injectable vaccine (Inactivated influenza vaccines IIV)
- ☐ Nasal vaccine (Live-attenuated influenza vaccine LAIV)
- ☐ Hybrid mode (to choose both IIV and LAIV for the same or different outreach vaccination activities)

### **PART V – Outreach Schedule Arrangement** (*The 1<sup>st</sup> dose should be given between Oct and Dec 2025*)

**5. Please choose one of the following choices :**

- ☐ To opt for “School Self-selection of Doctors”, with the outreach date on: \_\_\_\_\_
- ☐ To opt for “DH-matching of Doctors”, the following 3 available dates are provided for DH to facilitate matching

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

If primary schools opt for LAIV, MMR vaccine under HKCIP arranged by School Immunisation Teams should be administered at least 28 days apart. For details, please refer to the thematic webpage at: <https://www.chp.gov.hk/en/features/100764.html#FAQ37>

### **PART VI – Collection of information – Statement of Purpose**

The information furnished in this form will be used by the Government to process your application and for implementing and monitoring of the School Vaccination Programmes. The information are mainly for use within the Government for statistical and research purposes; and any other legitimate purposes as may be required, authorised or permitted by law. The information may also be disclosed by the Government to other organisations and third parties for the purposes mentioned above, if required.

**PART VII – Declaration**

I declare that the information contained in the Reply Form to the Department of health is true and accurate.

Signature of School Representative:

Name of School Representative:

Post of School Representative

Contact number:

Date:

School chop:

# **SUPPLEMENTARY FORM**

## **Seasonal Influenza Vaccination (SIV) School Outreach Programme in 2025/26**

### **Information of the Selected Service Doctors / Medical Organisations**

*Please kindly return this **Supplementary Form** to Programme Management and Vaccination Division, Emergency Response and Programme Management Branch of the Centre for Health Protection **by fax or email (Fax Number: 2320 8505/ Email Address: [sivop@dh.gov.hk](mailto:sivop@dh.gov.hk)) on or before 30 June 2025.***

**Name of School:** \_\_\_\_\_

### **PART I – To be Filled by School**

Our school **AGREE** to participate in SIVSOP in 2025/26 school year, and we have contacted the following doctor and the corresponding medical organisation for provision of vaccination outreach services.

**Name of Doctor:** \_\_\_\_\_

**Name of Medical Organisation:** \_\_\_\_\_

Our school and the service doctor agree to use the following type of vaccine:

- ☐ Injectable vaccine (Inactivated influenza vaccines IIV)
- ☐ Nasal vaccine (Live-attenuated influenza vaccine LAIV)
- ☐ Hybrid mode (to choose both IIV and LAIV for the same or different outreach vaccination activities)

### **PART II – To be Filled by the Service Doctor**

I / my affiliated medical organisation **agree** to provide outreach vaccination services to the above school under School Self-selection of Doctors

Signature of Enrolled Doctor:

Contact Person:

Rank of Contact Person:

Contact number of Doctor /  
Medical Organisation:

Clinic / Medical  
Organisation Chop:

### **To be submitted by school representative** after completing Part I and Part II

Signature of School Representative:

Name of School Representative:

Rank of School Representative:

Contact number:

Date:

School Chop: