

# Travel health update



As I write this, we await news of the lifting of all restrictions due to the COVID-19 pandemic and we move into a new way of living, although continued news of the increasing number of cases of the Delta variant puts a large question mark over the announcement

In general practice, the demand to see travellers for advice has been understandably low, but I'm aware that such care has not been deemed essential during the most challenging experiences in primary care. But as we try to get back to some form of normality, juggling catching up on the backlog along with continued regular work, where does the surgery stand in relation to seeing travellers?

The new GP contract in England (see <https://www.bma.org.uk/pay-and-contracts/contracts/gp-contract/gp-contract-england-202021>) says (at 5.4) 'Vaccinations and immunisation becomes an essential service which should be available to the whole practice population, rather than an additional service. All practices will be expected to offer all routine, pre- and post-exposure vaccinations and NHS travel vaccinations to their registered eligible population, as the overwhelming majority do'. The webpage includes a video in lieu of the planned series of roadshow events, which had to be cancelled due to COVID-19, helping to explain the radical changes. Watch from 34 minutes onwards to understand the new general immunisation changes, although unfortunately there is no mention of the inclusion of travel health vaccinations. However, there is no doubt the NHS travel vaccines must now be provided by every general practice. In recent years, some surgeries had ceased to do anything but administer these vaccines, requesting their travellers to seek advice from private travel clinics or to identify their needs online. The RCN Competency document, found at <https://www.rcn.org.uk/professional-development/publications/pdf-006506>, clearly states (on page 19) that this practice

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is considered unsafe. Those healthcare practitioners who 'just give vaccines' according to information the traveller has obtained or identified, put themselves at significant risk. Nurses practising in the UK are reminded of their personal accountability and compliance with The Code when advising travellers. In Scotland, travel advice and vaccinations should still be delivered in primary care, but from April 2022, this service is planned in alternative ways, according to the Vaccination Transformation Programme. Plans for this were initiated in 2018 (although the delivery was delayed due to the pandemic), as a result of GPs agreeing to take vaccinations and immunisations out of their contract in Scotland. See <http://www.healthscotland.scot/health-topics/immunisation/vaccination-transformation-programme>

Many nurses, even those very experienced in travel, are reporting a lack of confidence in travel health care, especially knowledge of vaccine schedules, although I do feel this will be quick to pick up when we get back into the swing of things. The advice required for COVID adds to the complexity in the consultation, and perhaps adds to that pressure. How far should we be responsible for providing all

this advice? I personally consider the practice nurse does need to know the principles and where to find out the relevant advice, but the traveller needs to take responsibility for the specific arrangements they must organise for their particular destination if they choose to travel. The traffic light system employed for whether people should travel, what testing is required and where quarantine is needed is important. I found this explanation of the detail helpful <https://www.which.co.uk/news/2021/05/travel-traffic-light-green-list-countries-where-holiday-abroad/> and it includes a link to further details on testing. The legally-required testing will be a private provision, and NHS tests cannot be used for the purpose of travel. So my understanding is that a GP surgery will not provide such a service to their NHS patients – you should direct them to a private travel clinic for this provision. However, travel risk assessment for health risks will be important and any recommended vaccines given bearing in mind that no vaccines should be administered within 7 days either side of receiving a COVID-19 vaccine according to current guidance. A useful app called KnowAsYouGo has been updated with all the traffic light details and is kept regularly up to date. Written by a GP trained in travel medicine, I've written an article about it - see [https://rise.articulate.com/share/p7gVOcXnqwVja9AzJahD2095\\_SH5qE-N#/lessons/YDuBpqpyFFsTazXxS2-Tv1H36XzN\\_opZ](https://rise.articulate.com/share/p7gVOcXnqwVja9AzJahD2095_SH5qE-N#/lessons/YDuBpqpyFFsTazXxS2-Tv1H36XzN_opZ). NaTHNaC and Fitfortravel have great resources to help as well: see <https://travelhealthpro.org.uk/factsheet/92/covid-19-resources> and <https://www.fitfortravel.nhs.uk/advice/disease-prevention-advice/covid-19-health-considerations-for-travel>