Introduction of MMRV vaccine & the new 18-month appointment

Primary Care Communications Toolkit

January 2026

Contents

Summary

The introduction of MMRV into the routine childhood vaccination schedule

- The NHS **is introducing MMRV vaccination** into the routine childhood vaccination schedule from 1 January 2026 to **replace MMR vaccination**.
- A joint NHS England and UKHSA letter was published on 31st October 2025 outlining the introduction of varicella (in the combined MMRV vaccine) and the eligibility cohorts. This letter can be seen here. The new routine MMRV vaccine schedule will offer 2 doses with the first dose recommended at the 12-month appointment. The second dose will be offered at the new 18-month appointment. Older children will receive a second dose at 3 years 4 months.
- A catch-up appointment to offer varicella protection will be offered to children aged 3 years 4 months to under the age of 6 years on 31 December 2025 who have not had either chickenpox infection or two prior doses of varicella vaccine.
- The vaccine change and the move of the second dose of a measles containing vaccine from 3 years 4 months to 18 months has been introduced following the recommendation of the introduction of a varicella vaccine by the JCVI.
- A combined vaccine was recommended by JCVI, adding varicella protection into the schedule without the need for an additional vaccination. Read the full statement here
- Previous childhood vaccine schedule changes launched in July 2025, including the new hexavalent 18-month appointment, and the change in timing of the second MenB and first PCV vaccines, have been formally communicated through a published NHSE and UKHSA letter here on 30 April 2025.
- This pack provides information and materials to support the implementation of the MMRV vaccine.

MMRV background

The introduction of varicella

What is MMRV?

Routine childhood vaccine for measles, mumps, rubella and varicella

- The MMRV vaccine is a 2 dose combined vaccine that includes protection against measles, mumps, rubella and varicella (chickenpox).
- There are two versions of MMRV vaccine available for order on Immform. ProQuad ® contains porcine gelatine and Priorix Tetra ® does not contain porcine gelatine. The vaccines are considered clinically equivalent and interchangeable.
- The MMRV vaccine has been successfully used in children in other countries for decades, including Germany and Canada, Australia and the United States
- ProQuad® and Priorix-Tetra® are both live attenuated vaccines which means they contain weakened forms of the viruses that cause measles, mumps, rubella, and varicella.
- A combined MMRV vaccine will be offered from 1st January 2026, instead of MMR, as part of the childhood routine vaccination schedule. Eligibility for MMRV will be based on date of birth.

Why do we need a varicella vaccine?

Protecting young children from the serious complications of chickenpox

- Whilst most cases of chicken pox are relatively mild, but in some children, complications can occur including
    - Bacterial infection of skin lesions, which accounts for 11% of complications among children admitted to hospital for varicella (source).
    - Invasive group A Streptococcal infection (IGAS).
    - Neurological complications, for example acute cerebellar ataxia (1 in 4,000 cases in children) (source)
    - In rare cases, encephalitis (1 in 33,000 to 55,000 cases), pneumonitis and stroke (source).

- Since the varicella vaccination programme was introduced in the USA, it is estimated that, in 25 years, more than 91 million varicella cases, 238,000 hospitalisations, and almost 2,000 deaths have been averted (source)
- The introduction of a varicella vaccine will help to prevent severe cases of chickenpox and other serious complications. The introduction of a varicella vaccine is expected to reduce the number of chickenpox cases dramatically and rapidly.
- Most children who contract chickenpox are unwell for several days and will miss 5 or more days of school or nursery, with some parents needing to take time of work to care for them.
- Recent sero-epidemiology data (UKHSA) indicates that 50% of children have had chickenpox by the time they are 4 years old.

For more information on varicella, see the Green Book: Varicella: the green book, chapter 34 - GOV.UK

Why combine varicella with MMR?

Greater protection against 4 diseases

- The MMRV vaccine has been shown to create long lasting protection against all four diseases.
- After 2 doses of MMRV in children aged 11 – 22 months vaccine efficacy was 95% in a 10 year follow up, and a 25-year surveillance in the USA has shown no decrease in vaccination effectiveness over time when using a 2-dose schedule (source).
- Using a combined vaccine for both the first and second dose would mean fewer injections are needed in a single immunisation visit.
- Previous attitudinal work has suggested that having fewer injections is preferred among parents, and a recent study (Sherman and others) among UK parents indicated that a combined varicella vaccine was preferred to separate vaccines.
- In countries introducing am MMRV 2-dose schedule, younger cohorts not eligible for vaccination have also seen reduced incidence because of reduced community transmission (source).

MMRV routine schedule

Eligible cohorts

Why is the vaccination schedule changing?

Overview

MMR / MMRV

- Following recommendation from JCVI, an announcement was made to bring forward the second dose of MMR in the routine schedule to 18 months from 1 January 2026. This is to help improve uptake and provide earlier protection from measles, mumps and rubella.
- The decision announced that children turning 18 months on or after 1 January 2026 (DOB on or after 1 July 2024) will be offered their 2nd MMR dose when they attend for the new 18-month appointment.
- Further announcements from DHSC accepted the JCVI decision to include varicella in the MMR vaccine to create MMRV.
- Children who miss out on MMR or MMRV continue to remain eligible for life.

Other childhood routine vaccination changes that took effect from 1 July 2025

- MenB brought forward to 12 weeks from 16 weeks
- PCV moved to 16 weeks from 12 weeks
- Menitorix (Hib / MenC) no longer in the schedule for those born on or after 1 July 2024
- Further information on these changes from 1 July 2025 is available here

MMRV cohort eligibility

Eligibility of the MMRV vaccine, as part of the routine schedule, is dependent upon date of birth

Date of birth	Age on 31 December 2025	New programme from 1 January 2026	Child's full MMR / MMRV schedule
01/01/2025 or later	Under 1 year	2 doses of MMRV at 12 and 18 months	12 months: MMRV 18 months: MMRV
01/07/2024 to 31/12/2024	1 year to under 18 months	2 doses of MMRV at 18 months and 3 years 4 months	12 months: MMR 18 months: MMRV 3 years 4 months: MMRV
01/09/2022 to 30/06/2024	18 months to under 3 years 4 months	1 dose of MMRV at 3 years 4 months	12 months: MMR 3 years 4 months: MMRV
01/01/2020 to 31/08/2022	3 years 4 months to under 6 years	Selective catch-up from 1 Nov 2026 to 31 Mar 2028	12 months: MMR dose 1 3 years 4 months: MMR dose 2 + MMRV catch up offer
31/12/2019 or before	6 years old and older	Not eligible	12 months: MMR dose 1 3 years 4 months: MMR dose 2

For more details on eligibility please see the Bipartite Letter

MMRV catch up campaign

A one off selective catch-up for those under 6 years

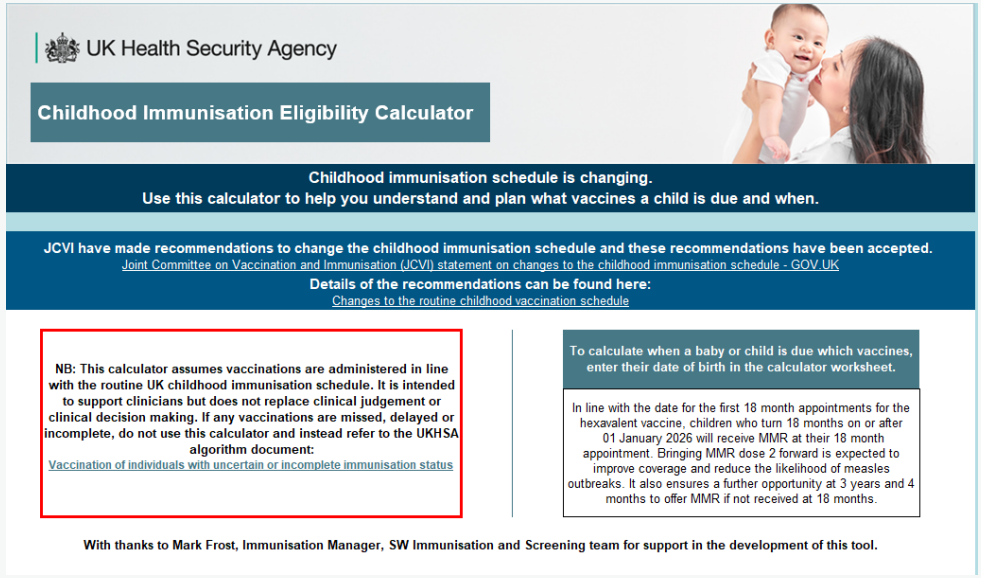
- A one-dose MMRV selective catch-up programme will be delivered between 1st November 2026 and 31st March 2028 at GP practices for eligible children
- Children eligible for the catch up are those who
    - were born between 1 January 2020 and 31st August 2022
    - have no history of chickenpox or have not had two doses of a varicella vaccination

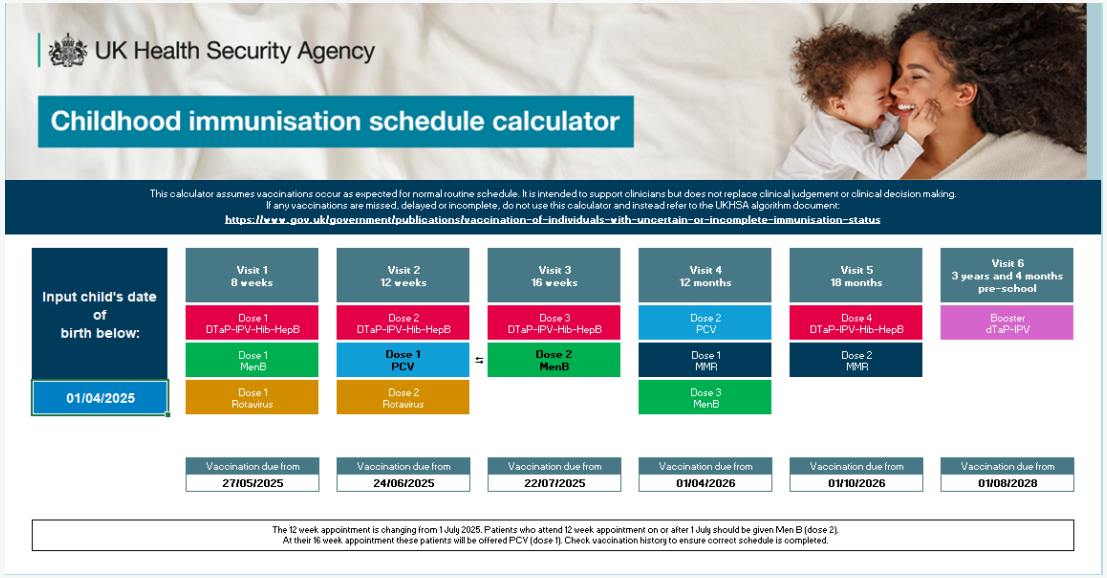
- There are no safety concerns with giving the vaccine to those who have had chickenpox or private varicella vaccination.
- There is no requirement for GP practices to check chickenpox history of those who respond for the catch-up offer.
- More information on the selective catch-up will be communicated after the January launch of the MMRV vaccine.

Calculating which vaccine to give

Online calculator to work out eligibility

Here is an easy-to-use Childhood Immunisation Schedule calculator to help health care practitioners populate the correct routine schedule for each child. This should not be used for children who attend late for their scheduled appointment when the algorithm for uncertain or incomplete vaccination schedule or clinical judgement should be used.





[Click here to access and download the calculator tool]

[Click to access the uncertain or incomplete vaccination algorithm]

Health Care Practitioner guidance

Published guides for the MMRV vaccine and new routine schedule

The following guides have been published for health care practitioners to advise and support the delivery of the new schedule and the MMRV vaccine introduction.

MMRV Training slide set

MMRV and febrile convulsions (FC)

A visual guide to vaccines

Complete routine immunisation schedule

MMRV programme: information for healthcare practitioners

MMRV Patient Group Direction

MMR Patient Direction Group

Vaccine E learning sessions

Childhood routine vaccinations

Trends and key messages

Vaccine uptake data

0-5 Childhood vaccines have been in decline for over a decade

- The WHO advises the need for vaccine uptake / coverage to be at 95% to stop transmission of infectious diseases.
- Over the past decade most of the childhood vaccination uptake rates in England have declined and none of the routine vaccinations are at 95%.
- The latest MMR vaccine uptake is below the recommended 95%, with some areas of the country below 70%.
- The latest coverage figures for MMR (July – September 2025) showed

	MMR1	MMR2
By age 2 years	88.1%	Not applicable
By age 5 years	92%	83.5%

- In some areas of London that already vaccinate for MMR at 18 months rather than 3 years 4 months, the uptake has improved compared to other areas. It is hoped that moving the appointment for the second dose forward to 18 months will improve uptake across the country.
- The latest published quarterly data for childhood immunisations (0-5 years) England and your area is here

Key messages

Vaccine schedule changes 2025 -2026

- From 1 July 2025, the NHS made changes to the childhood vaccination schedule to better protect children against serious diseases. Some vaccines will be given earlier, providing protection when children need it most.
- Changes to the childhood vaccination schedule will see children receive some vaccinations earlier, protecting them at a younger age and increasing their protection against vaccine preventable illnesses.
- While uptake is still high, vaccination uptake has been declining across England for over ten years.
- The new schedule changes have been recommended to optimise the overall protection of children in England.

MMRV / MMR vaccine

- The MMRV vaccine protects against four highly infectious diseases, measles, mumps, rubella and varicella (chickenpox)
- The first MMRV vaccine is now offered at the 12 month routine childhood vaccine appointment, with a second offered at the 18 month appointment
- The MMRV vaccine is not a new vaccine, it has been safely used for decades in other countries including Australia, Germany, Canada and the USA.
- The MMR vaccine has been given at 18 months in some London boroughs with results showing that MMR2 coverage was higher in those boroughs compared to those given at 3 years 4 months (source).

Key messages

Chickenpox

- Chicken pox (varicella) is a highly infectious disease that can be unpleasant for children. Whilst most children experience mild symptoms, some can go on to have serious complications such as pneumonia, skin infections and hospitalisation.

Overall vaccine messages

- Childhood vaccines alone prevent between 3.5 and 5 million deaths every year across the globe (source).
- Vaccination saves lives and protects people's health. It ranks second only to clean water as the most effective public health intervention to prevent disease (source).
- Vaccination has transformed public health, helping people live longer, healthier lives by protecting against diseases that can cause death or serious harm.
- Children remain eligible for both doses of their eligible measles containing vaccine for life (MMR / MMRV).
- If you or your child has missed routine vaccines, contact your GP practice to make an appointment to catch up on any missed doses.
- The childhood vaccine schedule offers protection against serious illnesses. There are now three routine vaccination appointments before the age of one year old and three after they turn one year old.
- It is important that your child receives their vaccines when they are invited to offer the best timely protection against serious diseases.

MMR and MMRV

Ordering the vaccine and payment

Vaccine ordering

MMR and MMRV should be stocked

- Orders for both MMR and MMRV can be made on ImmForm here
- Both MMR and MMRV should now be stocked as part of the childhood routine vaccination schedule from 1 January 2026.
- MMRV is to be offered to children born after 1st January 2020 who will be eligible for MMRV either as part of the routine schedule or the catch-up campaign.
- Those eligible on the routine vaccine schedule to receive MMRV continue to be eligible for MMRV for life.
- Adults and children who have missed their MMR vaccinations continue to be eligible for life

Vaccine ordering

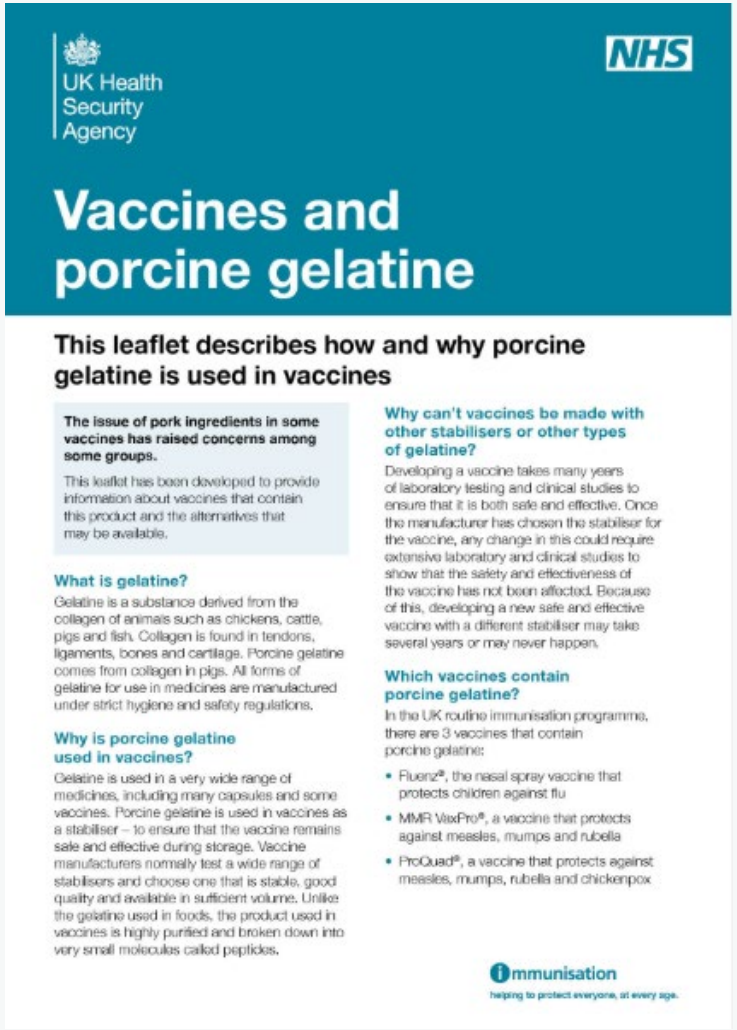
Porcine gelatine

There are 2 MMRV vaccines, **ProQuad** and **Priorix-Tetra** which are considered clinically equivalent and interchangeable.

- ProQuad contains porcine gelatine (gelatine from pigs)
- Priorix Tetra does not contain porcine gelatine

The following quote has been provided by BIMA (British Islamic Medical Association)

“An MMRV vaccine that does not contain porcine gelatine called Priorix-Tetra is available. If you want your child to have this vaccine or to find out more information speak to your nurse or GP.” Dr Sahira Dar, *President BIMA*



UK Health Security Agency

NHS

Vaccines and porcine gelatine

This leaflet describes how and why porcine gelatine is used in vaccines

The issue of pork ingredients in some vaccines has raised concerns among some groups.

This leaflet has been developed to provide information about vaccines that contain this product and the alternatives that may be available.

What is gelatine?

Gelatine is a substance derived from the collagen of animals such as chickens, cattle, pigs and fish. Collagen is found in tendons, ligaments, bones and cartilage. Porcine gelatine comes from collagen in pigs. All forms of gelatine for use in medicines are manufactured under strict hygiene and safety regulations.

Why is porcine gelatine used in vaccines?

Gelatine is used in a very wide range of medicines, including many capsules and some vaccines. Porcine gelatine is used in vaccines as a stabiliser – to ensure that the vaccine remains safe and effective during storage. Vaccine manufacturers normally test a wide range of stabilisers and choose one that is stable, good quality and available in sufficient volume. Unlike the gelatine used in foods, the product used in vaccines is highly purified and broken down into very small molecules called peptides.

Why can't vaccines be made with other stabilisers or other types of gelatine?

Developing a vaccine takes many years of laboratory testing and clinical studies to ensure that it is both safe and effective. Once the manufacturer has chosen the stabiliser for the vaccine, any change in this could require extensive laboratory and clinical studies to show that the safety and effectiveness of the vaccine has not been affected. Because of this, developing a new safe and effective vaccine with a different stabiliser may take several years or may never happen.

Which vaccines contain porcine gelatine?

In the UK routine immunisation programme, there are 3 vaccines that contain porcine gelatine:

- Fluenz®, the nasal spray vaccine that protects children against flu
- MMR VaxPro®, a vaccine that protects against measles, mumps and rubella
- ProQuad®, a vaccine that protects against measles, mumps, rubella and chickenpox

Immunisation

helping to protect everyone, at every age.

Poster available in

Arabic
Bengali
Dari
Farsi
Gujarati
Pashto
Punjabi
Urdu
Yoruba

Porcine gelatine information

Vaccination payments

Administering Vaccination in the National Routine Vaccination Schedule (NHS programme)

- GP practices are commissioned to deliver vaccinations that fall under the National Routine Vaccination Schedule alongside some selective vaccination programmes for patients in clinical risk groups as per the Green Book recommendation.
- Under the GP contract, Paragraphs 19(4) and 19(5) in Part 5 of the Statement of Financial Entitlements (SFE) set out the circumstances in which a practice is eligible for an item of Service (IoS) payment for delivering a vaccination. These circumstances would have due regard to the requirements set out in tables 1-3 (see pages 12-14 of the 2025 SFE amendment (No. 5), including where this may be for medical reasons.

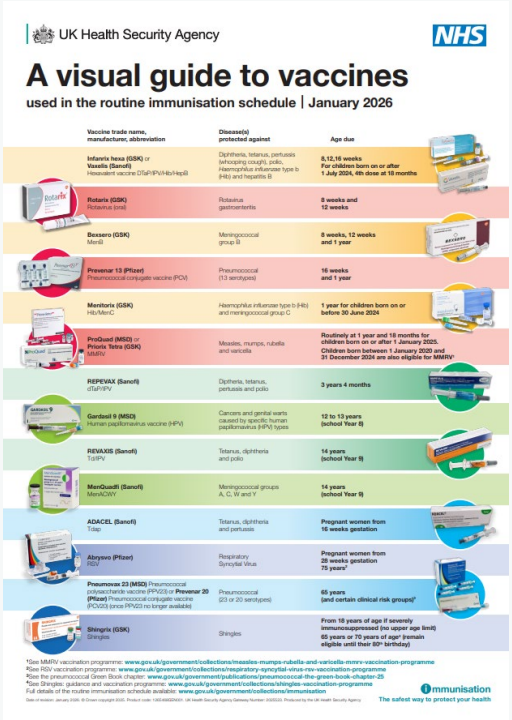
Publications assets

For childhood vaccinations

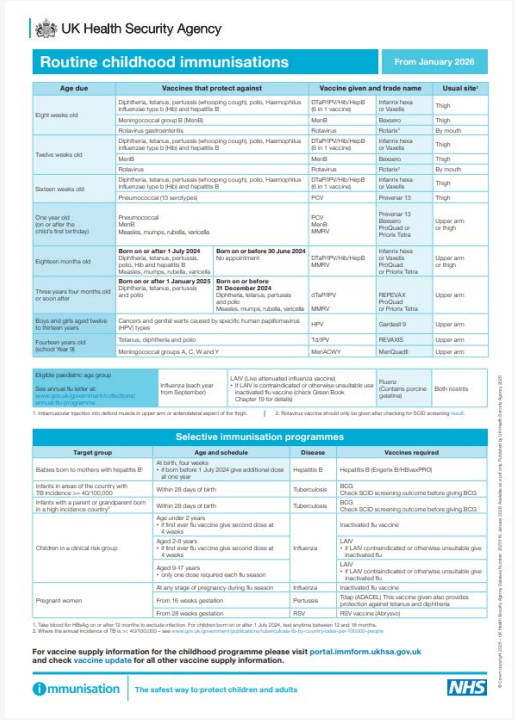
Published assets

Complete Routine Childhood Schedules – for health care practitioners

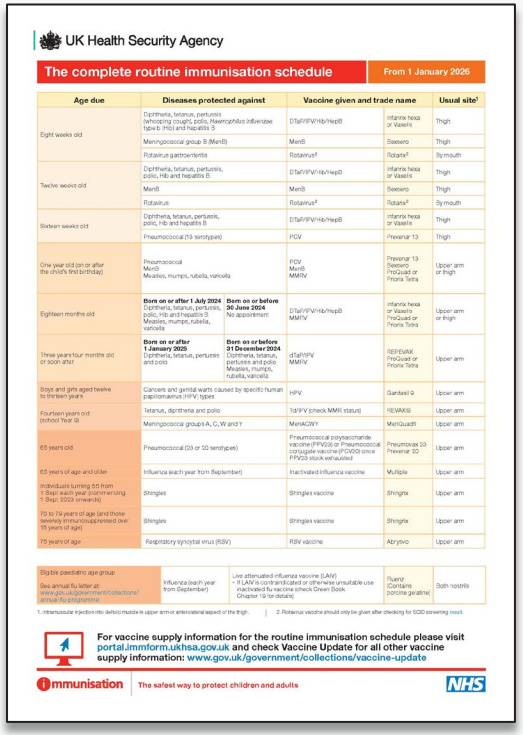
The overview of vaccinations and when they are offered has now been updated to include the changes to the childhood schedule, the complete schedule through into adulthood and a visual guide showing the different vaccine products. These can be displayed in health care settings for health care providers to refer to. They are not for public use. These are available at the links below



A visual guide to vaccines



Routine childhood immunisations

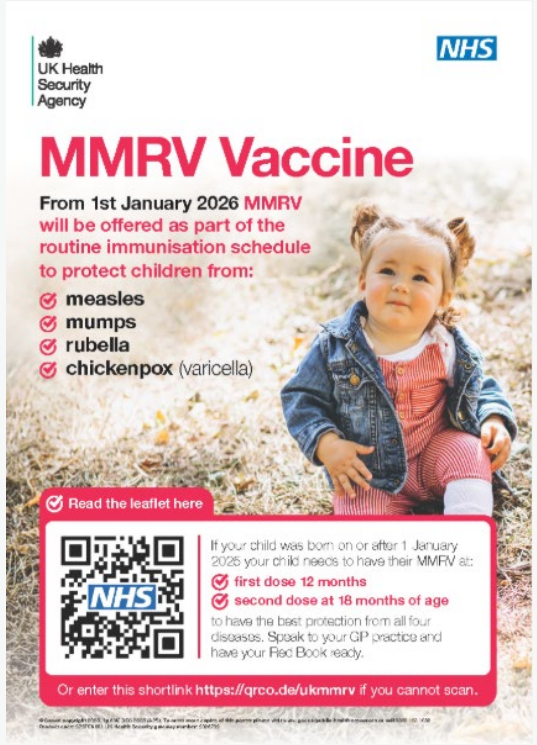


The complete routine immunisation schedule

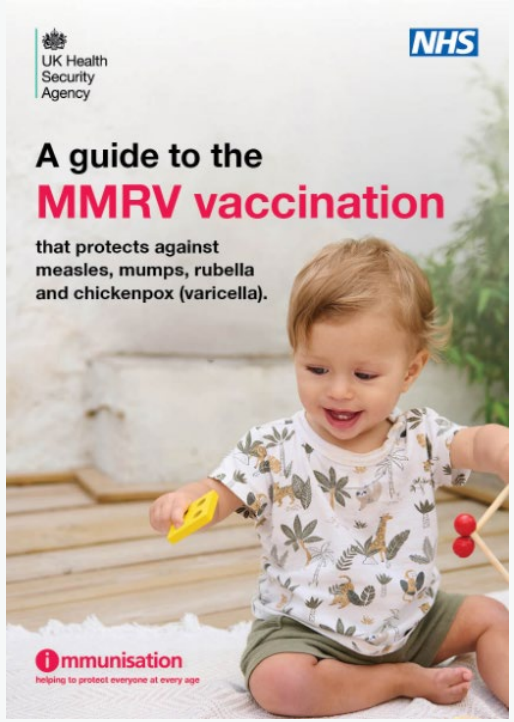
Published assets

MMRV vaccine poster & guides for parents

This is to be displayed in high traffic areas in health care settings, pre-schools, nurseries and other childcare settings to increase awareness of the MMRV vaccine amongst parents and carers



MMRV vaccine poster



A guide to MMRV vaccination

Published assets

MMRV vaccine guide and poster for parents

This poster is for display in high traffic areas and this leaflet is intended for use in postal invites to give to parents and carers further information about the new 18 month appointment.

Is your child 18 months of age poster

A guide to vaccinations for children aged 18 months

Leaflet to be sent with the 18 month appointment invitation. A link is available for text and email invitations.

Published assets

Childhood vaccines at one year

This leaflet is available to download, print, order and a link for use in texts and emails. It can be used to give to parents at their appointments and to include in invitations.

A guide to immunisations at one year

The site also includes a range of languages and formats for this leaflet including

Audio
Easy Read

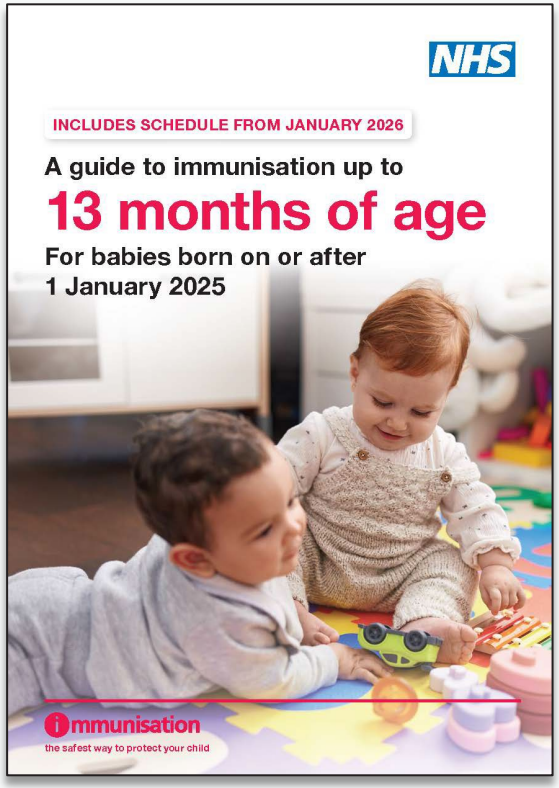
Albanian
Arabic
Bengali
Bulgarian
Chinese
Dari
Estonian
Farsi
French
Greek
Gujarati
Hindi
Italian

Latvian
Lithuanian
Portuguese
Polish
Pashto
Punjabi
Romanian
Romany
Russian
Somali
Spanish
Tagalog

Published assets

A guide for up to 13 months of age

This leaflet is available to download, print, order and a link is available for use in texts and emails.



[A guide to immunisations up to 13 months of age]

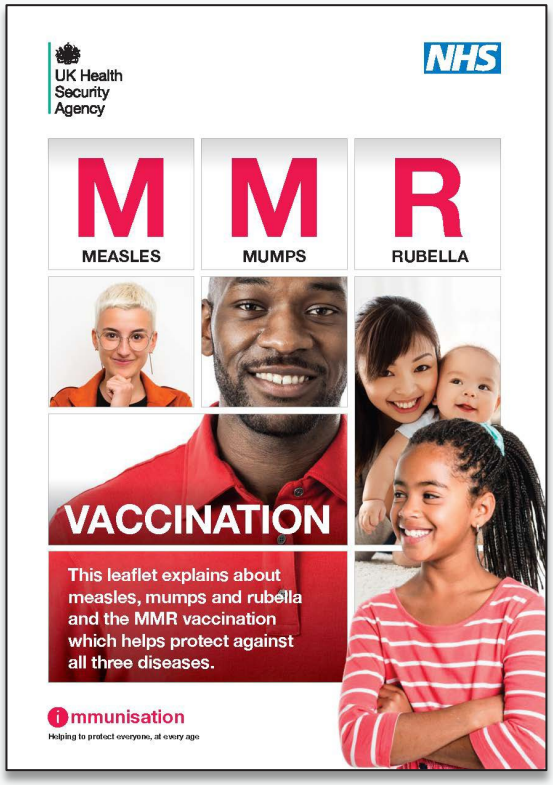
This is for parents of newborns or shortly after birth to raise awareness of the baby appointments, up to the age of 13 months, including the information about the first MMRV appointment.

This can be given at an early baby appointment or in the first vaccine invitation.

Published assets

MMR leaflet

This MMR leaflet is available to download, print, order and a link for use in texts and emails. This is for use in those older children and adults who have not yet had their MMR and are not eligible for MMRV.



MMR for all

This is also available in a range of languages and formats including

Audio
Easy Read

Albanian
Arabic
Bengali
Brazilian Portuguese
Bulgarian
Chinese
Dari
Farsi
French
Greek
Gujarati
Hindi
Kurdish

Latvian
Lithuanian
Nepali
Panjabi
Pashto
Polish
Romanian
Romany
Russian
Somali
Sorani
Spanish
Tagalog
Tigrinya

Turkish
Twi
Ukrainian
Urdu
Vietnamese
Yiddish
Yoruba.

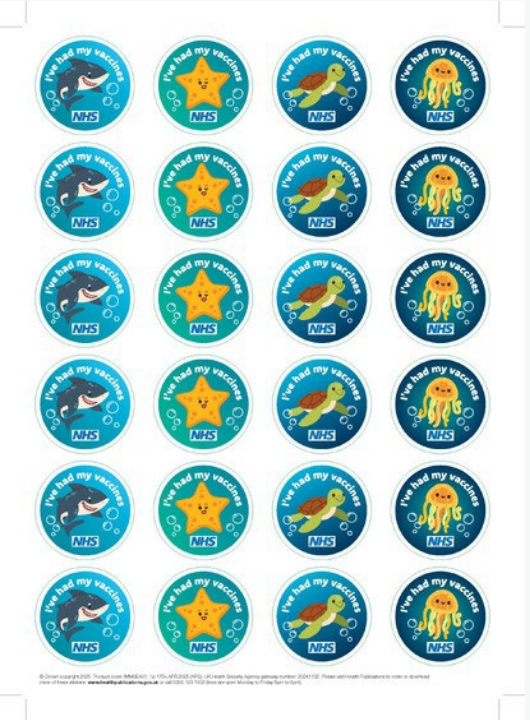
Published assets

Stickers

A range of stickers are available to order to give to children after their vaccination

Butterfly stickers

Bear stickers



Sea creatures stickers

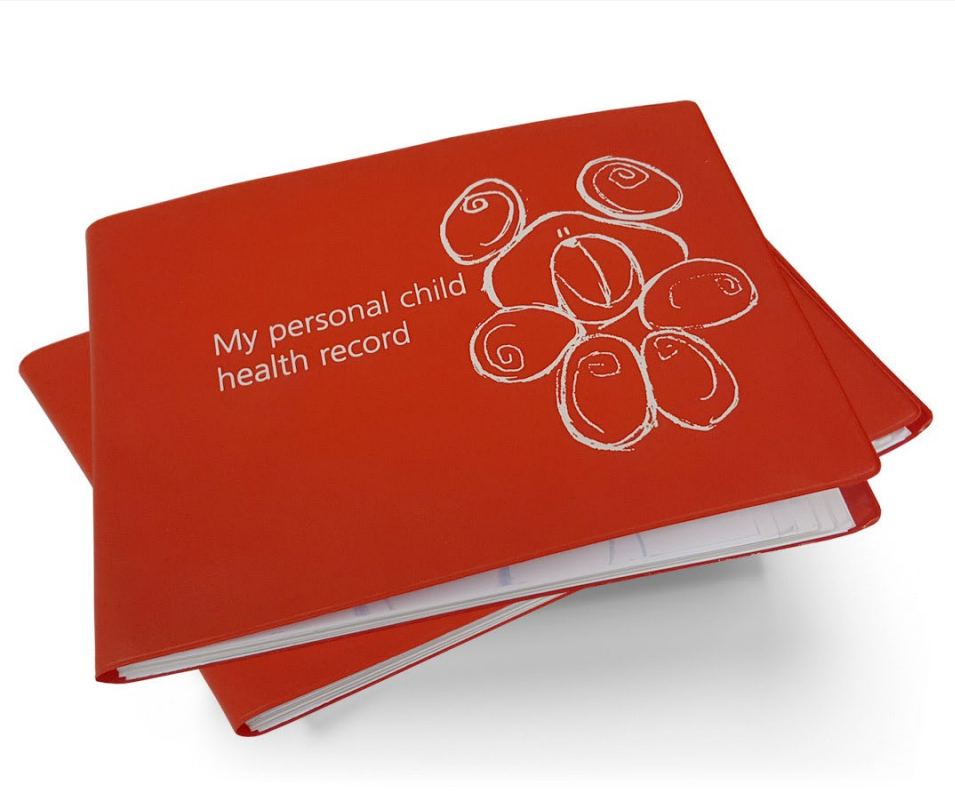
Space stickers

Children’s Health Records

Keeping the red book up to date

The Children’s Health Record book, more commonly known as the Red Book, is where childhood vaccinations are recorded, amongst other health measures.

- The Red Book is currently being updated to reflect the new schedule.
- Until the new books are released, and parents have the new versions, please order and use the newly created vaccine record inserts to replace the pages in the existing books.
- The link to order books, inserts and further material with the new schedule for the Red Book is here.



Communications Assets

Social Media Assets

MMRV launch

The following assets can be used from 2 January 2026 to support the launch of the MMRV vaccine

Suggested social media copy

Chickenpox is usually mild — but it can occasionally lead to more serious illness.

That's why, from January, chickenpox protection is now included in the routine vaccines given to babies and children.
Your GP / we will contact you when your child is due for their appointment.

Social Media Assets

MMRV launch

The following assets can be used from 2 January 2026 to support the launch of the MMRV vaccine

Suggested social media copy

From January, the current MMR vaccine will be replaced by the MMRV vaccine, which also protects against chickenpox.

This updated vaccine will be offered at the new 18-month appointment. You don't need to do anything now — your GP will contact you when your child is due.

Social Media Assets

MMRV explainer video – Chief Nurse, Alder Hey

A video has been recorded for use across social media channels and can be used from 2 January 2026, to support the launch of MMRV vaccine. Please download the video from the Campaign Resource Centre here

Suggested social media copy

Protection against chickenpox has now included in the childhood routine vaccines. Listen to hear Nathan Askew, Chief Nurse at Alder Hey discuss the MMRV vaccine, who will be offered it and when they will be invited.

Social Media Assets

Childhood 0-5 years vaccine focused – Overall vaccine offer

The following assets can be used to support overall vaccine uptake in children

These assets, suggested lines and previous vaccine social media assets can be found on Futures here

Suggested social media copy

Childhood vaccinations help protect against serious illnesses like measles, meningitis and whooping cough.

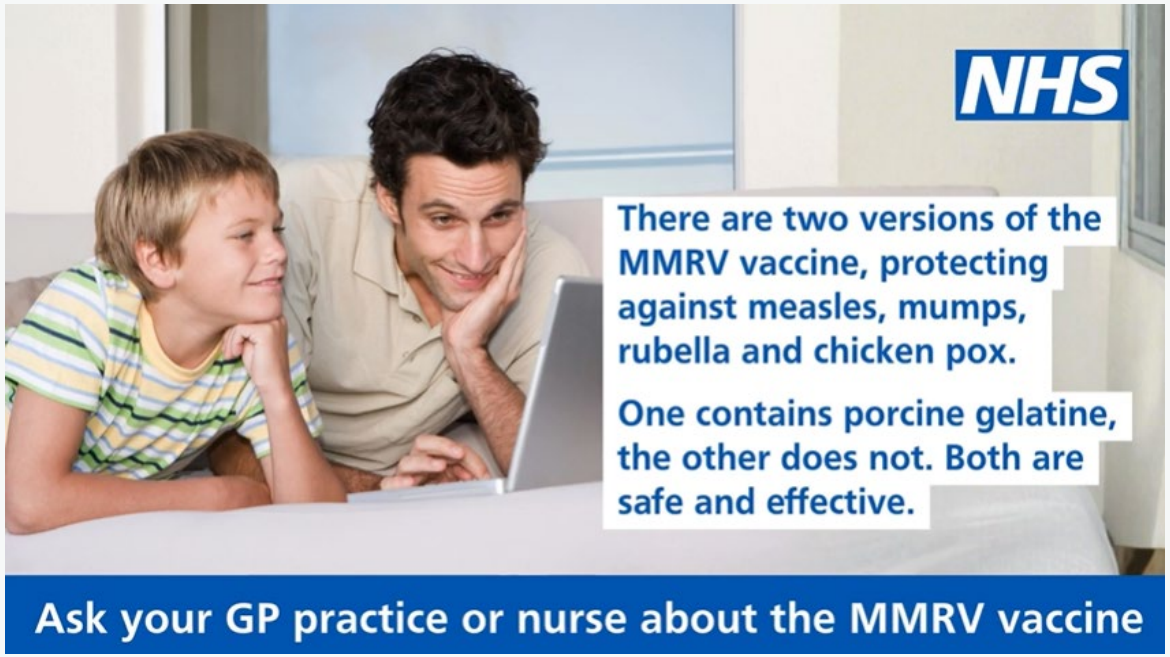
It's important your child has their vaccines when invited — this gives them the best protection at the right time.

More advice https://www.nhs.uk/vaccinations/nhs-vaccinations-and-when-to-have-them/'

Primary Care Screens

For further information about the MMRV vaccine

These short video screens have been created to explain more about the MMRV vaccine, including the non porcine gelatine alternative. Please display on screen in high traffic areas and receptions.

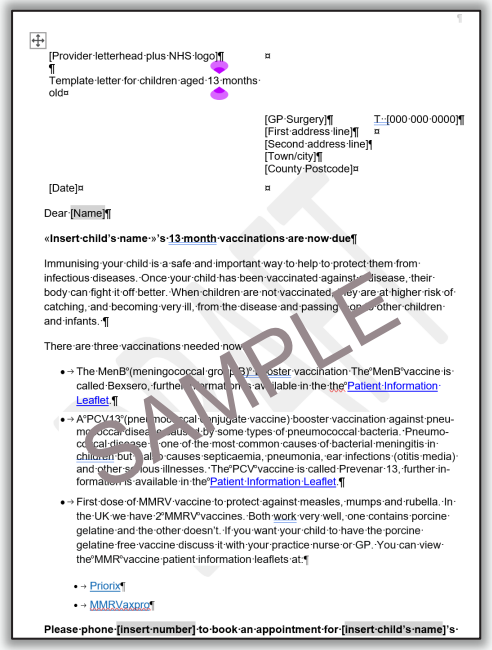


Different versions of these screens can be downloaded here

Invitation letters

Inviting parents to book on the new schedule

Template letters have been created that explain the changes to the new schedule and introduction of MMRV. These will be available shortly on the Publishing site here



[Provider letterhead plus NHS logo]

Template letter for children aged 13 months old

[GP Surgery]
[First address line]
[Second address line]
[Town/city]
[County Postcode]

[Date]

Dear [Name]

«Insert child's name»'s 13 month vaccinations are now due

Immunising your child is a safe and important way to help to protect them from infectious diseases. Once your child has been vaccinated against a disease, their body can fight it off better. When children are not vaccinated, they are at higher risk of catching, and becoming very ill, from the disease and passing it on to other children and infants.

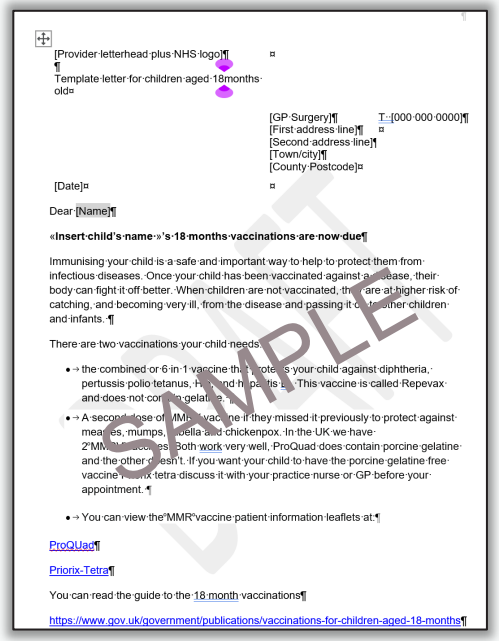
There are three vaccinations needed now

- The MenB (meningococcal group B) booster vaccination The MenB vaccine is called Bexsero, further information available in the Patient Information Leaflet
- A PCV13 (pneumococcal conjugate vaccine) booster vaccination against pneumococcal disease caused by some types of pneumococcal bacteria. Pneumococcal disease is one of the most common causes of bacterial meningitis in children but also causes septicaemia, pneumonia, ear infections (otitis media) and other serious illnesses. The PCV vaccine is called Prevenar 13, further information is available in the Patient Information Leaflet
- First dose of MMRV vaccine to protect against measles, mumps and rubella. In the UK we have 2 MMRV vaccines. Both work very well, one contains porcine gelatine and the other doesn't. If you want your child to have the porcine gelatine free vaccine discuss it with your practice nurse or GP. You can view the MMR vaccine patient information leaflets at:
  - Priorix
  - MMRVaxpro

Please phone [insert number] to book an appointment for [insert child's name]'s

SAMPLE

13 months of age



[Provider letterhead plus NHS logo]

Template letter for children aged 18months old

[GP Surgery]
[First address line]
[Second address line]
[Town/city]
[County Postcode]

[Date]

Dear [Name]

«Insert child's name»'s 18 months vaccinations are now due

Immunising your child is a safe and important way to help to protect them from infectious diseases. Once your child has been vaccinated against a disease, their body can fight it off better. When children are not vaccinated, they are at higher risk of catching, and becoming very ill, from the disease and passing it on to other children and infants.

There are two vaccinations your child needs

- the combined 6 in 1 vaccine that protects your child against diphtheria, pertussis polio tetanus, Hib and hepatitis B. This vaccine is called Repevax and does not contain gelatine
- A second dose of MMRV vaccine if they missed it previously to protect against measles, mumps, rubella and chickenpox. In the UK we have 2 MMRV vaccines. Both work very well, ProQuad does contain porcine gelatine and the other doesn't. If you want your child to have the porcine gelatine free vaccine Priorix tetra discuss it with your practice nurse or GP before your appointment.

- You can view the MMR vaccine patient information leaflets at:

ProQuad

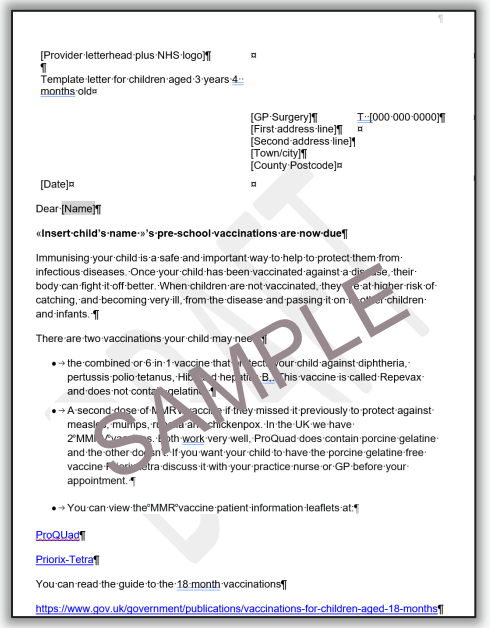
Priorix-Tetra

You can read the guide to the 18 month vaccinations

https://www.gov.uk/government/publications/vaccinations-for-children-aged-18-months

SAMPLE

18 months of age



[Provider letterhead plus NHS logo]

Template letter for children aged 3 years 4 months old

[GP Surgery]
[First address line]
[Second address line]
[Town/city]
[County Postcode]

[Date]

Dear [Name]

«Insert child's name»'s pre-school vaccinations are now due

Immunising your child is a safe and important way to help to protect them from infectious diseases. Once your child has been vaccinated against a disease, their body can fight it off better. When children are not vaccinated, they are at higher risk of catching, and becoming very ill, from the disease and passing it on to other children and infants.

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SAMPLE

Pre-school

Bulletin / website copy

Suggested content for websites, bulletins and newsletters

Children are now offered protection against chickenpox, with the launch of the MMRV vaccine

For most children chickenpox can be mild, but for others it can be serious and lead to complications and hospitalisation. So, from 1st January 2026 children will now be offered protection against chickenpox in the NHS routine childhood vaccine schedule from 12 months old.

The chickenpox protection will be given in an MMRV vaccine, which also protects against measles, mumps and rubella, giving protection against 4 diseases in one. The first dose of the vaccine will be given children's routine 12 month appointment and replaces the MMR vaccine. The second dose will be routinely given at a new 18 month appointment for children born on or before 31st July 2024, with those born before this date getting their scheduled dose at their 3 years 4 month scheduled appointment.

Children who were born between 1st January 2020 and 31st August 2022 will be offered a single dose of MMRV from November 2026 as part of a catch up. For children over the age of 6 years, it is likely they have already had chickenpox and remain eligible for their MMR vaccine.

These changes are taking place in line with clinical advice on the best way to protect children and babies from infectious diseases.

Please continue to book your child's vaccination appointments when you receive your invite from your child's GP practice. If you would like any further information, please speak to your GP Practice.

Frequently asked questions

A selection of MMRV FAQs

Frequently asked questions

Can parents ask for MMR instead of MMRV or MMRV instead of MMR?

- Children eligible for MMRV in their routine vaccine schedule are not eligible for MMR and vice versa.
- Vaccines should be administered as per the routine schedule as these have been recommended for efficacy for the child's age.
- Ask the parent why they want MMR or MMRV and explore the benefits of the vaccine offered for their age.
- A child who has had chickenpox can still safely have MMRV.
- Should a child have had any of the diseases their preexisting immunity will inhibit replication of the vaccine viruses.
- Those born on or after 01.09.2022 will have likely already been exposed to chicken pox, so may already be immune.
- A varicella only vaccine is also not available by request on the NHS routine schedule.

Frequently asked questions

What if a child has no vaccination history, or has come from abroad with incomplete or unknown vaccine history?

- Health care professional must check if the child has had any MMR or MMRV vaccines with parents where possible.
- If they have, check if they align with the NHS routine vaccine schedule and if they have received the vaccines for their age.
- If they have not, vaccinate according to the routine schedule for their age.
- If a child presents with no known vaccination history, vaccinate as per the NHS routine schedule.
- For more information check the Incomplete or Unknown Status Vaccine Document here

Frequently asked questions

Why are some children given 3 doses of MMRV?

Children born between 1 July 2024 and 31 December 2024 should have received an MMR at 12 months, prior to the introduction of the MMRV programme. They will be offered 2 MMRV vaccines at 18 months and 3 years 4 months.

The rationale for this is twofold. Children in this age cohort are less likely than older children to have been exposed to chickenpox already and will have more peers who are susceptible to chickenpox. They also have 2 further scheduled appointments which present the opportunity to give them 2 MMRV doses. There are no safety concerns with giving 3 MMR-containing vaccines.

As both MMR and MMRV vaccines are live, there is no additional risk of adverse events from giving additional doses.

For more Frequently asked questions please take a look at the MMRV programme information for healthcare providers

Frequently asked questions

SAIS providers - What to do if SAIS IT system doesn’t record MMRV

The majority of MMRV vaccines are expected to be delivered in GP Practices. However, some 0-19 services and SAIS delivering catch up in schools will need to record the vaccine administration. Providers should aim to be ready to do this from 1st January 2026 and no later than the end of August 2026.

If the systems are not ready and you are unable to document MMRV in the relevant GP or CHIS data system they should follow the below guidance

- Children born between 1 January 2020 and 31 August 2022 who present late for either their first or second MMR dose should receive an MMR. These children will be invited for an MMRV as part of the selective catch-up programme from November 2026
- Children born on or after 1 September 2022 who have never had an MMR-containing vaccine should be given their first dose of MMR. This is very important to ensure that children receive a measles-containing vaccine at the earliest opportunity. These children remain eligible for MMRV and their parents or carers should be strongly advised to attend their GP for an MMRV vaccine so that their child can also be protected against chickenpox
- Children born on or after 1 September 2022 with a history of one MMR dose but who are late for their second dose should be referred to their GP for an MMRV. However, if the provider thinks the child is not likely to be taken to the GP at a later date, they should give a second MMR then. These children remain eligible for MMRV and their parents should still be encouraged to take them to their GP so they can be offered protection against chickenpox

Thank You

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england.nhs.uk