From the Manager

The Immunisation Program has finalised plans for the implementation of the 2020 influenza vaccination program. Distribution of this year’s influenza vaccine is scheduled to commence in late March/early April. Weekly orders for influenza vaccine can be placed following Easter and throughout May.

While the team has been busy preparing for this year’s influenza vaccination program, we have also been planning for the potential impact of COVID-19 on the Immunisation Program. We are aware that immunisation providers across the state are also dealing with the ever-changing COVID-19 situation, both in their workplaces and their personal lives. It is important though, that the Queensland community continues to be protected against vaccine-preventable diseases and therefore delivering the Immunisation Program remains a priority for Queensland Health. In order to maintain business continuity, the Immunisation Program has had to make changes to how we receive vaccine orders and enquiries. These arrangements are detailed on page 2.


We hope the information in this newsletter is useful in keeping you up-to-date on immunisation issues.

Please email your feedback directly to us at immunisation@health.qld.gov.au. We look forward to receiving your suggestions on topics to cover in future issues.

Kind regards

Scott Brown
Acting Manager
Immunisation Program
COVID-19: changes to the Immunisation Program

To maintain business continuity as a result of COVID-19, from **Monday 30 March 2020** the Immunisation Program will implement an **email-only vaccine ordering and enquiry arrangement**. While this requires a change in practice and may cause some initial inconvenience, it is important that we are able to continue to provide an efficient vaccine ordering system and can respond to your enquiries.

- Immunisation Program telephone number — 07 3328 9888 will contain a recorded message with information.
- All incoming emails will be monitored during business hours and actioned or responded to depending on the issue.
- All the forms listed below can be filled out electronically and emailed (see figure 1 below), or printed, scanned and attached to an email.


1. **Vaccine orders**
   - Complete the vaccine order form and email it to QHIP-ADMIN@health.qld.gov.au.
   - School Immunisation Program (SIP) vaccine orders — complete the ‘vaccine order form — SIP’ and email to QLD-Sbvp@health.qld.gov.au.
   - The Immunisation Program team will contact you if there is a query about your order.

2. **Cold chain breaches**
   - Please quarantine the affected vaccines, complete a ‘cold chain breach form’, and email to immunisation@health.qld.gov.au. Please mark ‘COLD CHAIN BREACH’ in the subject line and the Immunisation Program will respond to your email as soon as possible.

3. **Vaccine discard or transfer**
   - Complete a ‘vaccine discard and transfer form’ and email to QHIP-ADMIN@health.qld.gov.au.
   - A separate form is available for the discard or transfer of influenza vaccines only.

4. **Other enquiries**
   - For all other issues or questions, email QHIP-ADMIN@health.qld.gov.au.
   - If the matter is urgent, please write “URGENT” in the subject line and we will respond as soon as possible.

![Immunisation Program Vaccine Order Form](image)

**Figure 1**

Clicking on the email address, the ‘send email’ box opens. The completed form can then be submitted electronically.
2020 Influenza vaccination program

ATAGI clinical advice on influenza vaccines

The Australian Technical Advisory Group on Immunisation (ATAGI) has issued its annual 2020 statement on the administration of seasonal influenza vaccines. This advice should be read in conjunction with the Australian Immunisation Handbook available at: https://immunisationhandbook.health.gov.au

The key points from ATAGI’s statement are:

- Annual vaccination is the most important measure to prevent influenza and its complications
- Annual vaccination is recommended for all people ≥6 months of age
- All vaccines available in 2020 are quadrivalent influenza vaccines (QIVs)
- All children aged 6 months to less than 5 years are now eligible to receive free annual influenza vaccines under the NIP
- The dose of influenza vaccines for all ages is 0.5mL. (The 0.25mL dose for young children is no longer available.)
- For adults aged ≥65 years the adjuvanted QIV, Fludad® Quad, is preferentially recommended over standard QIVs
- It is important to give two doses, one month apart for children less than 9 years of age, if this is the first year of receiving influenza vaccine.

Eligible groups for government funded vaccine

The National Immunisation Program (NIP) provides funded influenza vaccines for:

- children 6 months to less than 5 years of age
- pregnant women (during any stage of pregnancy)
- Aboriginal and Torres Strait Islander people 6 months of age and older
- people 65 years of age and older
- people 6 months of age and older with medical conditions which increase the risk of influenza disease complications (refer to Table 1)

Table 1. Medical conditions associated with an increased risk of influenza disease complications and for which individuals are eligible for free vaccination under the NIP*

<table>
<thead>
<tr>
<th>Category</th>
<th>Vaccination strongly recommended for individuals with the following conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiac disease</td>
<td>Cyanotic congenital heart disease, congestive heart failure, coronary artery disease</td>
</tr>
<tr>
<td>Chronic respiratory conditions</td>
<td>Severe asthma, cystic fibrosis, bronchiectasis, suppurative lung disease, chronic obstructive pulmonary disease, chronic emphysema</td>
</tr>
<tr>
<td>Chronic neurological conditions</td>
<td>Hereditary and degenerative CNS diseases, seizure disorders, spinal cord injuries, neuromuscular disorders</td>
</tr>
<tr>
<td>Immunocompromising conditions</td>
<td>Immunocompromised due to disease or treatment, asplenia or splenic dysfunction, HIV infection</td>
</tr>
<tr>
<td>Diabetes and other metabolic disorders</td>
<td>Type 1 or 2 diabetes, chronic metabolic disorders</td>
</tr>
<tr>
<td>Renal disease</td>
<td>Chronic renal failure</td>
</tr>
<tr>
<td>Haematological disorders</td>
<td>Haemoglobinopathies</td>
</tr>
<tr>
<td>Long-term aspirin therapy in children aged 6 months to 10 years</td>
<td>These children are at increased risk of Reye syndrome following influenza infection</td>
</tr>
</tbody>
</table>

Influenza vaccines for 2020

<table>
<thead>
<tr>
<th>Eligibility</th>
<th>Vaccine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children aged 6 months to &lt;5 years</td>
<td>Fluarix Tetra®</td>
</tr>
<tr>
<td></td>
<td>FluQuadri</td>
</tr>
<tr>
<td></td>
<td>Vaxigrip Tetra®</td>
</tr>
<tr>
<td><em>Funded only for Aboriginal and Torres Strait Islander children and children with certain medical conditions (as per Table 1 above)</em></td>
<td></td>
</tr>
<tr>
<td>Individuals aged 5 to 64 years</td>
<td>Afluria Quad®</td>
</tr>
<tr>
<td>• Aboriginal and Torres Strait Islanders</td>
<td>FluQuadri</td>
</tr>
<tr>
<td>• With medical conditions predisposing them to severe influenza</td>
<td>Vaxigrip Tetra®</td>
</tr>
<tr>
<td>• Women who are pregnant (in any trimester).</td>
<td></td>
</tr>
<tr>
<td>All people 65 years of age and older.</td>
<td>Fluad Quad®</td>
</tr>
<tr>
<td></td>
<td>Do not use this vaccine for other age groups.</td>
</tr>
</tbody>
</table>

Virus strains in 2020 vaccines

The influenza virus strains included in the 2020 southern hemisphere seasonal influenza vaccines are:

- A (H1N1): an A/Brisbane/02/2018 (H1N1)pdm09-like virus
- A (H3N2): an A/South Australia/34/2019 (H3N2)-like virus
- B: a B/Washington/02/2019-like (B/Victoria lineage) virus
- B: a B/Phuket/3073/2013-like (B/Yamagata lineage) virus.

Distribution of influenza vaccines

Distribution of influenza vaccines provided under the NIP this year will commence in late March/early April. We have planned for the potential increased demand on influenza vaccine due to COVID-19, therefore two deliveries will be automatically scheduled for the early part of the season. Following these two deliveries, weekly orders will commence from Tuesday 14 April 2020.

Please note:

- A vaccine order form will be included with your first influenza vaccine delivery.
- Remember to include your influenza vaccine requirements in your usual monthly order.

Details about the first two deliveries are outlined below:

<table>
<thead>
<tr>
<th>Delivery schedule</th>
<th>Which vaccines will be in the delivery?</th>
<th>Who is eligible for this vaccine?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Your <strong>FIRST delivery</strong> of influenza vaccines will be supplied late March/early April.</td>
<td>fluarix Tetra® only</td>
<td>65 years and over</td>
</tr>
<tr>
<td>2. A <strong>SECOND delivery</strong> of influenza vaccines will be automatically provided within 2 weeks of the first delivery.</td>
<td>Fluad Quad®</td>
<td>6 months to 64 years</td>
</tr>
<tr>
<td></td>
<td>Afluria Quad®</td>
<td>5 years to 64 years</td>
</tr>
<tr>
<td></td>
<td>Fluad Quad®</td>
<td>65 years and over</td>
</tr>
</tbody>
</table>

**Weekly orders can be placed from Tuesday 14 April 2020**

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Injection sites for influenza vaccination

How to locate the correct site

It is important to use the correct injection site when administering any vaccine to reduce the risk of an adverse event following immunisation.

The recommended site for influenza vaccination for **adults and children over 12 months of age** is the deltoid muscle. Figure 2 opposite shows the anatomical markers used to identify the deltoid injection site.

The deltoid is a large rounded triangular shape on the outside of the upper arm, on top of the humerus, the clavicle and the scapula. The brachial artery and the radial nerve sit behind the deltoid and come down from the muscle. The injection site is a smaller triangle-shaped area, in the middle of the deltoid, above the deltoid tuberosity.

The recommended site for influenza vaccination in **children 6 to 12 months of age** is the anterolateral muscle. Figure 3 shows the anatomical markers used to identify the vastus lateralis injection site on the anterolateral thigh.

The injection site is halfway down the vastus lateralis, which is the muscle on the outside of the thigh. Markers include the greater trochanter, and the lateral femoral condyle — the injections site is about halfway between these two levels.

Source: *Australian Immunisation Handbook*

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Using automated SmartVax or Vaxtracker software, AusVaxSafety conducts active, participant-based surveillance via automated SMS for the early detection, analysis and investigation of potential vaccine safety signals. The surveillance is undertaken through a network of sentinel immunisation provider sites across Australia.

The report is based on SMS responses from parents and carers about their child’s health a few days after their vaccination, and includes infographics providing a visual representation of the results at each schedule point in the National Immunisation Program (NIP) in Australia in 2018.

New-look safety data

In December 2019, AusVaxSafety launched their improved visualisation of active vaccine safety surveillance data. This aligns with the launch of the AusVaxSafety website. The new-look safety data can be viewed online at: www.ausvaxsafety.org.au/safety-data. The data has improved readability and accessibility and supports the purpose of AusVaxSafety in optimising community and healthcare provider confidence regarding the safety of National Immunisation Program vaccines.

AusVaxSafety reports on de-identified data directly from people receiving the vaccines, monitoring adverse events following immunisation, and facilitates early signal detection of potential vaccine safety issues. Currently, AusVaxSafety completes active vaccine safety surveillance for HPV, MenACWY, maternal pertussis and seasonal influenza. In 2020, AusVaxSafety active vaccine safety surveillance will expand to monitor the safety of all vaccines on the NIP. The data for specific vaccines and age groups are updated weekly and can be viewed on the AusVaxSafety website.
**Combatting measles**

**Free MMR vaccine for adults born during or since 1966**

You may be aware that a global outbreak of measles occurred in late 2018, which affected countries in South East Asia, New Zealand and surrounding Pacific Island nations. These overseas outbreaks resulted in transmission of measles in some areas of Queensland.

Most of the Queensland cases were people 20 to 50 years of age, suggesting a considerable proportion of people in this age group might not be adequately protected against measles. Lower immunity in this age group is partially because a second dose of measles-mumps-rubella (MMR) vaccine was only introduced in 1992, with a school vaccination program introduced in 1998. Consequently, people born from 1966 to 1998 might have only received one dose of a measles-containing vaccine and therefore might not be fully immune to measles.

Queensland Health provides **free MMR vaccine to people born during or since 1966**, who do not have documented evidence of receiving two doses of measles-containing vaccine. Queensland Health urges all vaccine service providers to encourage any patients who meet this eligibility criteria to be vaccinated.

**MMRV decision aid**


**School Immunisation Program**

**Videos about vaccination for high school students**

The Australian Government Department of Health released a series of videos for students about the vaccinations given in high school. The videos have information about vaccine-preventable diseases, why immunisation is important, and what students can expect when they are vaccinated at school. The videos can be used by schools and shown prior to school-based vaccination clinics. The videos can be accessed through the Australian Government Department of Health website: [www.health.gov.au/news/vaccination-videos-for-high-school-students](http://www.health.gov.au/news/vaccination-videos-for-high-school-students).

Specific vaccines are delivered through the School Immunisation Program (SIP) to students in Year 7 and Year 10. Students who miss their vaccinations at school can be vaccinated by their local immunisation provider. The vaccines are:

<table>
<thead>
<tr>
<th>Year</th>
<th>Vaccines (disease/s protected against)</th>
<th>Number of doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Boostrix (<em>diphtheria</em>/<em>tetanus</em>/pertussis)</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Gardasil 9 (<em>human papillomavirus</em>)</td>
<td>2</td>
</tr>
<tr>
<td>10</td>
<td>Menactra (<em>meningococcal ACWY</em>)</td>
<td>1</td>
</tr>
</tbody>
</table>
Delegated authority

Health professionals with a Medicare provider number can now delegate their AIR access to another person, for example, a practice manager or practice nurse. This delegation is set up using the delegation function in Health Professionals Online Service (HPOS) and mirrors the process for Medicare access. To become a delegate, a person must register an individual PRODA account. Once set up, they can perform the same actions as the health professional:

- view and update individual immunisation records
- print immunisation history statements
- request, view or modify AIR site reports (including the AIR10A Due/Overdue report — by Immunisation Practice)
- view claims submitted to the AIR
- view payment statements and reconciliation reports.

You can find more information about AIR HPOS delegations by visiting the Services Australia (formerly Australian Government Department of Human Services) website.

‘Catch-up’ now shown on AIR immunisation history statements

If a provider records on AIR that a child is on a planned catch-up (figure 4), this will now appear on the child’s AIR immunisation history statement (figure 5).

Recording this information on a child’s AIR record is important as it allows payments of the Child Care Subsidy and the Family Tax Benefit to continue even if the child requires vaccinations to be considered up-to-date. However, please note that the ‘catch-up’ period only remains active for six months and can only be applied once to a child’s record.
Vaccines for Aboriginal and Torres Strait Islander children

Hepatitis A vaccine and pneumococcal vaccine

The NIP schedule in Queensland recommends that Aboriginal and Torres Strait Islander children receive additional vaccines:
- two doses of hepatitis A vaccine (Vaqta®) — dose 1 at 12 months and dose 2 at 18 months
- an extra dose of pneumococcal vaccine (Prevenar 13®) given at 6 months (dose 3).

A recent review of Australian Immunisation Register (AIR) data by the Immunisation Program for two-year-old Aboriginal and Torres Strait Islander children in Queensland over a one-year period (the cohort) revealed that only 49.1 percent had received all recommended additional vaccines. Further analysis also showed that 68.2 percent of the cohort had two doses of hepatitis A vaccine recorded and 60.5 percent of the cohort had four doses of pneumococcal vaccine recorded.

Immunisation providers are encouraged to discuss these vaccines with Aboriginal and Torres Strait Islander families and to check AIR to see if eligible children have been immunised appropriately.

To make sure everyone receives the best protection from vaccine-preventable diseases, it is important that opportunities to identify as Aboriginal and/or Torres Strait Islander are always available. A person’s Indigenous status on AIR is taken from their Medicare registration.

World Immunisation Week

24–30 April 2019

The theme for World Immunisation Week in 2020 is #VaccinesWorkforAll. The designated week provides opportunity to focus discussions and conversations about the importance of vaccines and to promote the use of vaccines to protect people of all ages against diseases.

Immunisation saves millions of lives every year and is recognised as one of the world’s most successful and cost-effective health interventions. The World Health Organization (WHO) estimates that each year nearly 20 million children worldwide do not get the vaccines they need.

The WHO website provides information about World Immunisation Week as well as links to immunisation news and factsheets on global perspectives.
## Looking for resources?

<table>
<thead>
<tr>
<th>Resource</th>
<th>Target group</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get the Facts</td>
<td>Australian parents and carers</td>
<td>This Australian Government Childhood Immunisation Education Campaign is designed to encourage Australian parents and carers to have their children vaccinated. The 8-week campaign will be run nationally on television in early 2020 is supported by online channels. You can download posters, brochures and videos from the Childhood Immunisation Education Campaign website. To find out more, visit the campaign website: <a href="https://campaigns.health.gov.au/immunisationfacts">https://campaigns.health.gov.au/immunisationfacts</a></td>
</tr>
<tr>
<td>Keeping our kids healthy and strong — animated video and supporting posters.</td>
<td>Aboriginal and Torres Strait Islander families</td>
<td>Queensland Aboriginal and Islander Health Council (QAIHC) developed the &quot;Keeping our kids healthy and strong&quot; resources in 2018 to promote the importance of timely vaccinations for Aboriginal and Torres Strait Islander children. Resources are available online at: <a href="http://www.qaihc.com.au/resources/keeping-our-kids-healthy-and-strong">www.qaihc.com.au/resources/keeping-our-kids-healthy-and-strong</a></td>
</tr>
</tbody>
</table>