**TEMPLATE – HEALTH MANAGEMENT PROTOCOL (HMP) FOR IMMUNISATION PROGRAM**

*Notes:*

* An HMP must meet the requirements of the*Extended Practice Authority ‘Registered Nurses’* (**EPARN**), made under the *Medicines and Poisons Act 2019* (Qld) and the *Medicines and Poisons (Medicines) Regulation 2021 (Qld)*, in particular the requirements in Appendix 1 of the EPARN.
* This HMP template is not mandatory to use, however it satisfies the requirements expressed in Appendix 1 of the EPARN.

[Organisation]

[Document Title]

[Version]

Current until: [Expiry Date]

**HMP approval**

This HMP is approved by (i.e. commencement date of HMP):

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Qualification/Position** | **Signature** | **Date** |
|  | CE HHS / CEO |  |  |

**HMP review and endorsement**

This HMP was reviewed and endorsed by:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Qualification/Position** | **Signature** | **Date** |
|  | Medical practitioner |  |  |
|  | Registered Nurse (preferably with immunisation qualifications) |  |  |
|  | Pharmacist |  |  |
|  | Other identified professional (provide details) |  |  |
|  |  |  |  |

This Health Management Protocol was Choose an item.

1. **Details of program**

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| *Provide details of the immunisation program to be conducted, including locations where the program will be conducted, the target population, estimated number of patients, time frames for conducting the program.* |

1. **Clinical assessment of patients**

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| *Specify the procedures for clinical assessment of patients and actions to be taken for patients that are unsuitable for vaccination.* |

1. **Informed consent**

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| *Specify the procedures for obtaining informed consent from patients.* |

1. **Vaccines to be used**

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| *Specify which vaccines are to be used, including the name, form and strength of the vaccines, and the condition/situation for which it is intended.* *Include information on the recommended dosage and route of administration for each vaccine.* |

1. **Management and follow-up of patients**

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| *Specify the procedures for preparing for vaccination, administration of the vaccine, and management and follow-up of patients.* |

1. **Adverse reactions**

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| *Specify the procedures for management of adverse reactions to vaccines.**Specify the types of equipment and management procedures in place for management of an emergency associated with a vaccine.**Specify the procedure for reporting adverse reactions.* |

1. **Disposal of sharps and waste**

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| *Specify the procedures for sharps management and disposal of clinical waste.* |

1. **Documentation**

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| *Specify what records will be maintained.* *Specify how these records will be maintained including the use of the Australian Immunisation Register (AIR).* |

1. **Cold chain management**

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| *Explain how cold chain will be maintained and monitored, from delivery/receipt of the vaccines, transport of the vaccines, to use of the vaccines.* *Include details of the refrigeration and equipment to be used, information on how temperatures will be checked, and the processes for identifying and dealing with unfit vaccines.* |