

Immunisation Program Update

Issue No. 1
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From the Manager:

Welcome to the first edition of the Immunisation Program Update. The Immunisation Program, Communicable Diseases Branch, Queensland Department of Health intends to produce and distribute timely program updates for services working in the immunisation sector. It is hoped this will further enhance communication and dissemination of information and support our current communication processes.

I hope these updates are useful and informative for you. Feedback and suggestions are welcomed and should be emailed to:

immunisation@health.qld.gov.au

Karen Peterson

Manager, Immunisation Program

Alerts

'No Jab, No Pay'

Free catch-up vaccines are now also provided for children (10 to 19 years) whose families are currently receiving family assistance payments (Child Care Benefit, Child Care Rebate and Family Tax Benefit Part A end of year supplement). The Human Papillomavirus (HPV) vaccine is not included in the catch-up.

Vaccine storage issues

You need to consider your vaccine storage capacity! With the introduction of DTPa in the National Immunisation Program in March 2016 and the annual seasonal influenza vaccination program starting at about the same time, there will be increased demand on your vaccine storage. Plan now and consider whether you need to increase your storage capacity.

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Purpose

The role of the Immunisation Program is to protect the health of Queenslanders by promoting vaccination and improving immunisation rates through a range of strategies which include (but not limited to):

- providing state wide leadership for the immunisation sector across Queensland;
- implementing the National Immunisation Program (See: National Immunisation Program Schedule Queensland <https://www.health.qld.gov.au/publications/clinical-practice/guidelines-procedures/immunisation-schedule.pdf>) and other state funded vaccine programs;
- working in partnership with the Commonwealth, States and Territories, other external stakeholders and internal stakeholders on National Immunisation Program (NIP) related matters;
- implementing, monitoring and evaluating the Queensland Immunisation Strategy (<https://publications.qld.gov.au/dataset/immunisation-strategy-2014-17>);
- participating in the development of national policies and guidelines;
- monitoring Queensland's achievement against performance benchmarks under the National Partnership Agreement on Essential Vaccines; and
- distributing approximately 2.2 million doses of 21 different vaccines to more than 1,800 providers across Queensland.

The National Immunisation Program is implemented by the Queensland Department of Health in collaboration with Public Health Units within Hospital and Health Services (<https://www.health.qld.gov.au/system-governance/health-system/hhs/default.asp>) and vaccine service providers. In Queensland, vaccination services are delivered by a range of providers, including general practitioners, hospitals, correctional facilities, some local government authorities, Royal Flying Doctor Service, community health services and Aboriginal and Torres Strait Islander community controlled health organisations.

Program Staff

The Queensland Department of Health Immunisation Program is planned, developed and coordinated through a multidisciplinary team comprising of a Medical Director and Immunisation Program Manager supported by a clinical nurse consultant, health practitioners, policy officers and administrative officers.

National News



'No Jab No Pay'

The Commonwealth Government's 'No Jab No Pay' policy came into effect on 1 January 2016. It affects eligibility for Child Care Benefit, Child Care Rebate and Family Tax Benefit Part A. Details about the changes and their implications for families are available on the Department of Human Services website:

<http://www.humanservices.gov.au/customer/news/immunisation-requirements-are-changing>

Those who require further information should contact the Department of Human Services. Contact details are available on the departmental website:

<http://www.humanservices.gov.au>

New ACIR forms

Immunisation History Form (IM013)

An updated form is available at:
<http://www.humanservices.gov.au/health-professionals/forms/imo13>

Immunisation Medical Exemption (IM011)

An updated form is available at:
<http://www.humanservices.gov.au/health-professionals/forms/imo11>

Immunisation registers expanded

Australian Childhood Immunisation Register (ACIR)

As part of the Federal Budget 2015-2016, the Commonwealth Government approved the expansion of the Australian Childhood Immunisation Register (<http://www.humanservices.gov.au/health-professionals/services/australian-childhood-immunisation-register/>) to become the Australian Immunisation Register (AIR). This expansion will allow ACIR to capture vaccine records for anyone less than 20 years of age as part of the Commonwealth Government's 'No Jab, No Pay' policy. The change is necessary to link family assistance payments to the immunisation status of children in this older age group.

It is anticipated the National Shingles Vaccination Program for older Australians will commence in November 2016 and the AIR will be able to collect these vaccination records. Herpes zoster vaccine will be funded for persons aged 70 years, with a 5 year catchup program offered for persons aged 71 to 79 years.

Australian School Vaccination Register (ASVR)

The existing National HPV Vaccination Program Register (<http://www.hpvregister.org.au/>) will become the Australian Schools Vaccination Register (ASVR) in 2017. The ASVR will capture all adolescent vaccinations given through school immunisation programs and will be able to send recalls and reminders to improve adolescent vaccination rates.

Reporting natural immunity

ACIR can record natural immunity against hepatitis B, varicella, measles, mumps and rubella. Use the immunisation medical exemption form (IM011: www.humanservices.gov.au/health-professionals/forms/imo11) for reporting natural immunity. **ACIR will no longer accept this notification on practice letterhead.**

It is important to report natural immunity status to ACIR otherwise the child will be flagged as overdue for a vaccination.

How can you identify children who are overdue for an immunisation?

Providers can use the ACIR secure site to request reports that list all children overdue for an immunisation. GP vaccine service providers are automatically registered with ACIR however they will need to request access to the secure site at: <http://www.humanservices.gov.au/health-professionals/services/hpos/accessing-acir-using-hpos>.

Reports listing children overdue for immunisation can be produced by practice (report ACIR 010A) or by provider (report ACIR011B). For assistance with requesting reports, contact the ACIR helpdesk on 1300 650 039.

To request a report, once you are in the ACIR secure site Main Menu, click on:

1. Reports Menu
2. Request a Report
3. Select the report (i.e. ACIR011A)
4. Click the 'Request Report' button
5. Key in the required report parameters
6. Click on Send Report Request.

The report will be produced overnight and can be accessed by clicking on 'View Reports' from the Reports Menu on the ACIR secure site.

Use the ACIR secure site to check a child's immunisation history

All GPs can access the ACIR secure site using HPOS (Health Professional Online Services) - <http://www.humanservices.gov.au/health-professionals/services/hpos/accessing-acir-using-hpos>. Other immunisation providers can also request access to the secure site by completing the 'application to register as a vaccination provider' form (IM004).

By viewing a child's history on ACIR you can check:

- vaccines for which the child may be overdue;
- any errors on the child's history; **Call ACIR on 1800 653 809 and ask them to amend any errors.**
- the child's personal details. **If they are incorrect, ask the child's parent(s) to notify Medicare on 132 011.**

It is important to make sure each child's history on ACIR is up to date otherwise family assistance payments that are linked to immunisation status will be affected.

2016 Influenza Program

This year a quadrivalent (four strain) vaccine will be distributed for the National Program.

For more information about the vaccine go to:

www.isg.org.au/index.php/vaccination/vaccine-composition-/

Immunisation providers will be notified when distribution of the vaccine will commence.

What to do now:

- Discard all your 2015 influenza vaccine
- Check your vaccine fridge. Does it have enough storage space to safely store additional vaccines?
- Do your staff know who is eligible for free vaccine?
- Remind staff that Fluvax® (made by Seqirus, previously known as bioCSL) should not be given to children aged under 5 years

The following groups are eligible for free influenza vaccine:

- People aged 65 years and over
- Pregnant women
- Aboriginal and Torres Strait Islander children who are six months to less than five years old
- Aboriginal and Torres Strait Islander people aged 15 years and over
- Anyone aged six months and over who has a chronic condition placing them at increased risk of complications from influenza

Incentive payments for GPs to identify and catch up children overdue for immunisation

From 1 January 2016, a \$6 incentive payment will be paid to GPs and immunisation providers who follow up and vaccinate children who are more than two months overdue for their childhood vaccinations.

GPs and immunisation providers will be eligible to receive this incentive payment if:

- they administer catch up vaccine(s) to a child under seven years of age who is more than two months overdue for a National Immunisation Program scheduled vaccination; and
- the child has received all the relevant vaccines due at each age related schedule point; and
- they report the information to the ACIR.

The catch up payment will apply to vaccinations given after 1 January 2016. The first payments will be made to providers in March 2016.

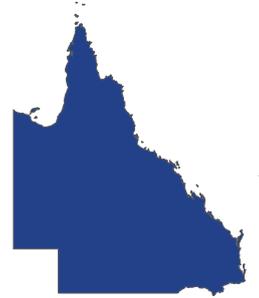
This incentive is on top of the existing \$3 information payment providers already receive for reporting vaccinations to the ACIR.



Changes to the National Immunisation Program Schedule

DTPa for 18 month old children

In 2015 the Australian Government Department of Health announced that the 18-month schedule point on the National Immunisation Program (<https://www.health.qld.gov.au/publications/clinical-practice/guidelines-procedures/immunisation-schedule.pdf>) will in the future include a dose of diphtheria-tetanus-acellular pertussis (DTPa) vaccine. The program will start in March 2016. Further information will be provided when available. This additional vaccination is aimed at reducing pertussis notifications in young children.



Queensland Immunisation Strategy 2014-2017

The Queensland Immunisation Strategy 2014-2017 has been revised to reflect current priorities for the immunisation program in Queensland. Since implementation in July 2014, there has been significant achievement against the five key goals and a number of the activities have been completed or are ongoing. The revised Queensland Immunisation Strategy 2014-2017 is available at <https://publications.qld.gov.au/dataset/immunisation-strategy-2014-17>

Early Childhood Education and Care Legislation

On 29 October 2015, the Queensland Legislative Assembly passed amendments to the Public Health Act 2005 (<https://www.legislation.qld.gov.au/LEGISLTN/CURRENT/P/PubHealA05.pdf>) which will allow approved education and care providers the discretion to refuse enrolment and attendance of children not up to date with their vaccinations. The changes came into effect from 1 January 2016. Parents may now be asked to prove that their child's immunisation status is up-to-date before the child can be enrolled in or attend an approved early childhood service.

Services can ask parents to provide:

- an immunisation history statement when first enrolling a child; and
- an updated immunisation history statement when the child passes the 2, 4, 6, 12, 18 months and 4 years vaccination milestones.

If a child is not up-to-date, a service can choose to:

- refuse enrolment
- cancel enrolment or refuse attendance
- conditionally accept enrolment or attendance.

Under the new legislation, immunisation providers can give parents a letter which will be recognised as an immunisation history statement by early childhood education and care services. The letter will need to clearly indicate whether the child's immunisation status is 'up-to-date' or 'not up-to-date'.

It is important that children who are overdue for their immunisations are followed up on a regular basis to ensure they commence on a catch-up schedule as soon as possible. Consistent with the Australian Immunisation Handbook (<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>) guidelines, children are considered to have an up-to-date immunisation status if they:

- have a medical contraindication to one or more vaccines on the immunisation schedule; or
- are on a recognised vaccination catch-up schedule.

Immunisation providers can use a template letter when preparing an immunisation history statement for parents/guardians to give to Early Childhood Education and Care (ECEC) services. For further information and links to resources including the template letter go to: <http://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation/service-providers/statements/default.asp>

New Vaccine Order Form

A new Vaccine Order Form has been developed to ensure all possible vaccines required for both national and state programs can be included in vaccine orders. Vaccine service providers requesting vaccine for the School Immunisation Program catch-up, the 'No Jab, No Pay' program and catch up for under 10 year olds can complete the required patient details for additional catch-up vaccine located with the order form at <https://www.health.qld.gov.au/publications/clinical-practice/guidelines-procedures/vaccine-request-form.pdf>

Vaccines orders will be provided monthly and can be placed with the Immunisation Program by facsimile (3328 9720) or telephone (3328 9888). Vaccine orders following a cold chain breach where advice was given by a Public Health Unit that the vaccines should be discarded and vaccines required for refugee vaccination should be placed by telephone.

Childhood Immunisation Campaign

The Queensland Department of Health has developed a range of immunisation campaign materials focussing on the immunisation needs of children and adults.

An updated childhood immunisation campaign includes information for parents about the new early childhood education and care vaccination legislation and the *Immunise to 95* project <http://professionals.ourphn.org.au/sites/default/files/pdf/page/09%20HW-IS%20Quick%20Facts.pdf>. The campaign includes television, radio, cinema, print and digital advertising channels.

**VACCINATION
FACTS MATTER.**

- 1) Vaccination does not cause SIDS, autism, allergies or asthma
- 2) Vaccination does not weaken a child's immune system
- 3) Most reactions to vaccines are mild and temporary
- 4) On-time vaccination offers the best protection

Be careful who you listen to. Check your facts with your doctor or vaccine service provider.

See qld.gov.au/vaccinate or call 13 HEALTH (13 43 25 84) for more information.

What's your date to vaccinate?

Download VacciDate FREE from your app store.

Available on the App Store. GET IT ON Google play.

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KNOW THEIR DATES TO VACCINATE.

To provide the best protection, every vaccination should happen on its due date. Don't take the risk.

Download the free VacciDate app to get reminders and to keep an immunisation record for every child in your family. Visit qld.gov.au/vaccinate or call 13 HEALTH (13 43 25 84) for more information.

What's your date to vaccinate?

Download VacciDate FREE from your app store.

Available on the App Store. GET IT ON Google play.

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Key messages of the campaign will include:

- On time vaccination provides the best protection for your child against vaccine-preventable diseases.
- From 1 January 2016, new legislation will mean that your childcare options may be affected if you can't show that your child's vaccinations are up to date.
- If you vaccinate your child on time according to the National Immunisation Program Schedule Qld then you do not have to worry about the impact of the childcare vaccination legislation.
- If your child is behind schedule help is available from your GP, 13 HEALTH or the website: www.qld.gov.au/vaccinate
- The free VacciDate phone app can help keep track of your child's vaccination dates.

School Immunisation Program

The Queensland Department of Health in collaboration with the Commonwealth Government and School Immunisation Program vaccine service providers will transition the Queensland School Immunisation Program from Year 8 to Year 7 in 2016 to align with the new structure of secondary schooling in Queensland. In 2015, Year 7 became the first year of secondary school in Queensland. Transitioning the program to Year 7 in 2016 will ensure adolescents continue to receive their vaccinations within the recommended age range (11-13 years) and align Queensland's School Immunisation Program with other Australian adolescent programs which are delivered in the first year of secondary school.

In 2016, all Year 7 and Year 8 students will be offered free HPV and dTpa vaccinations as recommended through the National Immunisation Program. From 2017 onwards, only Year 7 students will be offered vaccinations under the program.

The Commonwealth Government has agreed to fund the additional vaccine needed for the transition. This represents over \$7 million of funded vaccine for Queensland. The Queensland Department of Health will invest \$3.5 million to fund the associated service delivery costs in 2016.

4th Quarter 2015 Immunisation data

As at December 2015, data from the Australian Childhood Immunisation Register showed immunisation rates for the following age groups:

Age cohort	Queensland	Australia
	% Fully immunised	% Fully immunised
1 year	93	93
2 year	91.1	90.3
5 year	93	93.2

dTpa vaccination program for pregnant women

The Queensland Government is providing dTpa vaccine for women in the third trimester of each pregnancy. Vaccination during pregnancy can protect newborns until they are old enough to be vaccinated against pertussis. The Australian Immunisation Handbook (<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>) recommends vaccination of pregnant women early in the third trimester but it can be given any time during the last three months of pregnancy. The vaccine is available free of charge for all pregnant women and should be offered in each pregnancy.

The dTpa vaccination program for pregnant women in Queensland commenced in July 2014. Since the beginning of the program, over 21,500 pregnant women have been vaccinated against pertussis with no adverse events of note reported. The majority of women have been vaccinated at GP clinics.

More information and a link to a factsheet is available on the Queensland Government website at: <http://www.qld.gov.au/health/conditions/immunisation/increased-risk/pregnant-breastfeed/>

13HEALTH calling about children overdue for an immunisation

Immunise to 95 is a Queensland Government initiative which aims to achieve 95% immunisation coverage for Queensland children. Children aged under five years who are assessed as overdue on the ACIR will be followed up by 13HEALTH by telephoning the last immunisation provider that vaccinated the child. Up until the end of March 2016 you may be contacted by 13HEALTH who will enquire about the immunisation status of any children assessed as overdue and who are linked to immunisation providers at your clinic. Any assistance you can provide to 13HEALTH to help follow up these children will be useful. This might be: giving updated immunisation details; notifying if the child has moved overseas or interstate or; if you have been unable to contact the family about their child's overdue immunisations.



Vaccine fridge capacity issues

Vaccines are delicate biological substances that can become less effective or be destroyed if they are frozen, overheated or exposed to direct sunlight or fluorescent light.

Purpose-built vaccine refrigerators designed specifically for vaccine storage are recommended for the storage of vaccines. With the increase in vaccines required for both national and state programs, it is important to make sure all funded vaccines provided to your clinic/practice can be stored safely.

Air must circulate around the vaccines and the vaccines must not touch the back or side internal walls. Consider having two fridges rather than one large fridge to provide a backup in the event of a mechanical failure in one of the fridges. A purpose-built vaccine fridge is designed to maintain temperatures between +2°C and +8°C on all shelves.

Always keep vaccines in their original packaging. A fridge with a solid door is preferred if the clinic is prone to power outages.

Points to consider:

- Some manufacturers will not guarantee vaccine storage conditions between +2°C and +8°C when the room temperature goes below +5°C or above +30°C or when the humidity is above 60 per cent. If your heaters or air conditioners are turned off after hours, this can lead to temperature fluctuations.
- Position the fridge out of direct sunlight, with space around it to promote air circulation. An internal room that does not have wide temperature fluctuations is best.
- Fridges should preferably have a backup data logger, since it also shows the duration of a temperature breach.
- After-sales service is important as vaccine fridges should be serviced annually.

