

Introduction to immunisation for general practice nurses

October 2019

We acknowledge the Aboriginal and Torres Strait Islander Peoples as the Traditional owners of the lands. We wish to pay our respects to their Elders – past, present and emerging – and acknowledge the important role Aboriginal and Torres Strait Islander people continue to play within our community.



This webinar has been developed by Eastern Melbourne PHN on behalf of the Victorian and Tasmanian PHN Alliance, which is a collective platform for the seven PHNs in Victoria and Tasmania.

The webinar was made possible with funding support from the Australian Government Department of Health.



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Learning objectives

- Outline the Victorian DHHS Immunisation Program and how it is administered in general practice
- Discuss the role of the nurse in administering prescribed immunisations
- Describe the difference between government and privately funded vaccines
- Outline the resources available to support general practice with immunisation



What is immunisation and how does it work?

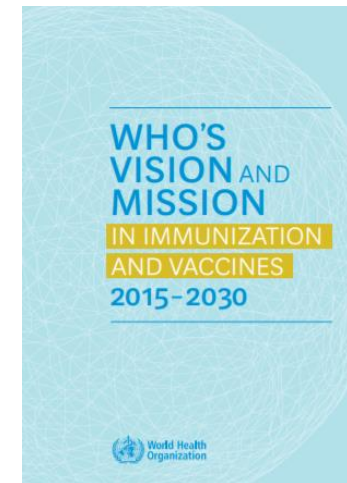
- Prevents the spread of diseases and the associated adverse health effects
- Uses the body's immune system
- The active components are dead or weak antigens, inactivated toxins from antigens, molecules from the surface of antigens
- Vaccines also contain components such as adjuvants and stabilisers
- Safe and effective

<https://www.betterhealth.vic.gov.au/health/healthyliving/Why-immunisation-is-important>



Why immunise?

- ‘Prevent disease. Avert deaths. Promote health’
- ‘Between 2010 and 2015 more than 5 million deaths were averted annually thanks to vaccinations delivered around the world.’



https://www.who.int/immunization/documents/general/WHO_mission_vision_immunization_vaccines_2015_2030/en/



National Immunisation Program (NIP)

- What is the National Immunisation Program?
- State Funded Programs- to suit the needs of the state's population
- Each state is a legal jurisdiction and a different Poisons and Controlled Substances Act
- Victorian Immunisation Program delivered in general practice and local councils



NIP vs State-based program

National Immunisation Program

12 months	<ul style="list-style-type: none">• Meningococcal ACWY• Measles, mumps, rubella• Pneumococcal	Nimenrix® M-M-R® II or Priorix® Prevenar 13®
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA)	<ul style="list-style-type: none">• Hepatitis A	Vaqta® Paediatric

<https://www.health.gov.au/health-topics/immunisation/immunisation-throughout-life/national-immunisation-program-schedule#what-is-the-nip-schedule>



NIP vs State-based program

Immunisation schedule Victoria. Infants and children – July 2019 (continued)

*Live attenuated vaccine

Medical risk factors

Age	Disease	Vaccine brand*	Reconstitute	Site given	Route given	Notes
12 months	Measles-mumps-rubella	Priorix* or M-M-R-II*	✓	Anterolateral thigh/Deltoid	IM/SC	Measles-mumps-rubella vaccines are the least reactogenic in this schedule point
	Meningococcal ACWY	Nimenrix	✓	Deltoid	IM	
	Pneumococcal	Prevenar 13	✗	Deltoid	IM	
12 months of age premature baby < 32 weeks gestation or < 2000g birthweight	Hepatitis B	H-B-Vax-II Paediatric or Engerix-B Paediatric	✗	Deltoid	IM	single booster dose

<https://www2.health.vic.gov.au/public-health/immunisation/immunisation-schedule-vaccine-eligibility-criteria/immunisation-schedule-victoria>

Australian Immunisation Handbook



Australian Government
Department of Health

Australian
Immunisation
Handbook

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The Australian Immunisation Handbook provides clinical advice for health professionals on the safest and most effective use of vaccines in their practice.

These recommendations are developed by the [Australian Technical Advisory Group on Immunisation](#) (ATAGI) and approved by the [National Health and Medical Research Council](#) (NHMRC).

[About the Handbook](#) →

immunisationhandbook.health.gov.au




Australian Immunisation Handbook


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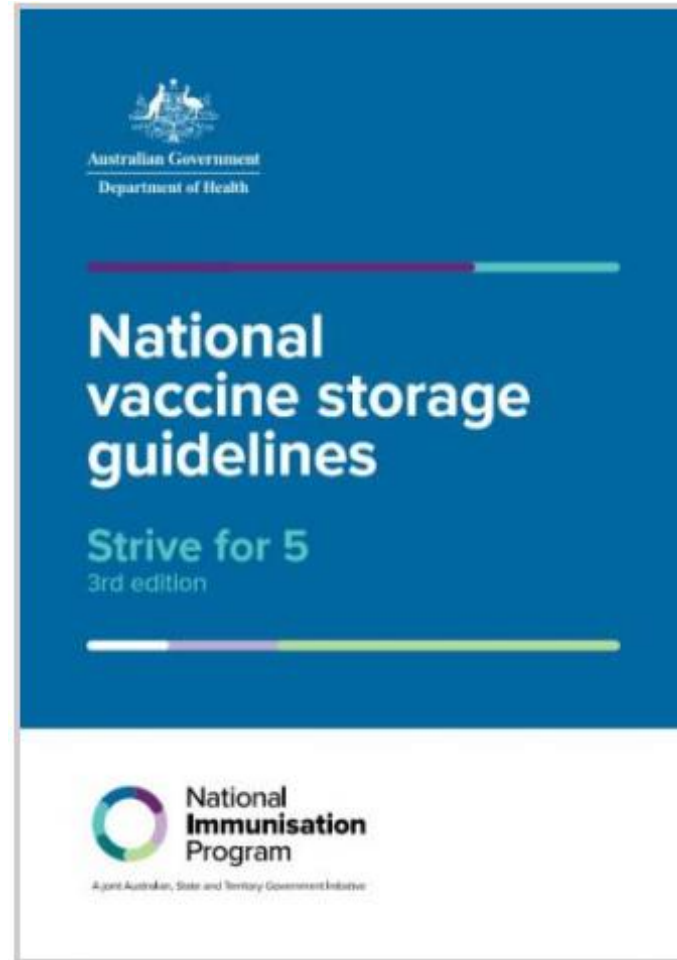
[Vaccination for special risk groups](#)

[Vaccine preventable diseases](#)

immunisationhandbook.health.gov.au



Strive for 5



<https://www.health.gov.au/resources/publications/national-vaccine-storage-guidelines-strive-for-5>

Victorian DHHS Immunisation website

**health.vic**
Victoria's hub for health services & business

Search site or services





Hospitals & health services ▾ Primary & community health ▾ **Public health ▾** Mental health ▾ Alcohol & drugs ▾ Ageing & aged care ▾

Home > Public health > Immunisation

Immunisation

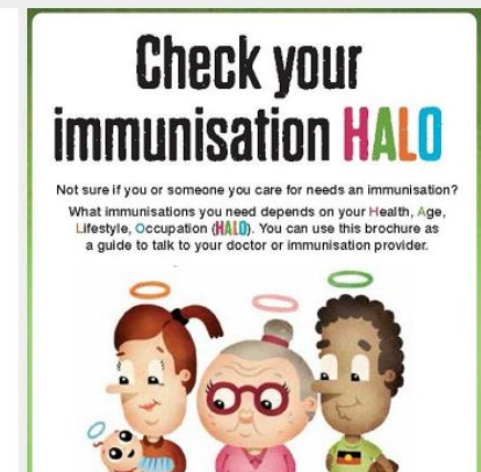
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Latest immunisation newsletter

Immunisation newsletter – October 2019 

- Meningococcal disease and vaccines fact sheet
- Updated zoster vaccine resources
- Free HPV vaccination for MSM – program ceasing 31 October 2019
- Eligibility for free influenza vaccination - keep vaccinating
- No Jab, No Play law – make enrolment easy for families
- Avoiding shoulder injury related to vaccine administration



<https://www2.health.vic.gov.au/public-health/immunisation>

Victorian DHHS Immunisation website

Immunisation schedule and eligibility

View the free vaccine schedule, find out who is eligible, including special risk groups. View past schedules and vaccine introduction timeline.

Special risk groups

In Victoria, vulnerable people, children in out-of-home care, medically at-risk, Aboriginal and Torres Strait Islander people and refugees and asylum seekers are eligible to receive some vaccines for free.

Vaccine orders and stock

Order forms, new account application and stock information for government-supplied vaccines, including influenza & rabies/lyssavirus.

Immunisers in Victoria

Who can administer vaccines in Victoria, qualifications and registration, study programs, guidelines and relevant legislation.

Provider information

Resources for immunisation providers including links to registers, fact sheets, guidelines, data and error reporting.

Cold chain management

How to manage and maintain cold chain including during power outages and how to report a breach of temperature.

Immunisation newsletters

Yellow fever centres

Order resources

<https://www2.health.vic.gov.au/public-health/immunisation>



Victorian DHHS Immunisation website

Adverse events reporting

What, when and where to report an adverse event following immunisation.

Vaccination - infants and children

Immunisation requirements for children in childcare and kindergarten, and those entering primary school, plus information on free vaccine eligibility, including for vulnerable children.

Vaccination - adolescents

Find out about the secondary school vaccination program, vaccinating vulnerable young people, consent forms and council-school information sharing.

Vaccination - adults

Free vaccines for pregnant women and older people, and immunisation recommendations for those with occupation, health or lifestyle risk factors.

Immunity for community

Support the campaign to promote immunisation for the whole community.

<https://www2.health.vic.gov.au/public-health/immunisation>



Ordering vaccines

Vaccine order forms and stock information

Onelink holds and distributes government-supplied vaccines in Victoria. Immunisation providers should use the current order forms to order government-supplied vaccine stock, and ensure that vaccines are stored appropriately when they are delivered.

The department manages orders for rabies vaccine and immunoglobulin. It also provides information on current stock of government-supplied vaccines, including any shortages and stock on back order.

Seasonal influenza vaccine information for providers includes:

- vaccine pre-allocation
- delivery total for the previous year
- influenza strains in the vaccine
- brands of government-supplied vaccine.

New account application

To order government-supplied vaccines, you need a department account number.

Ordering and receiving vaccines

How to order government-supplied vaccines and what to do when you receive them

Order forms

Current forms for ordering vaccines in Victoria.

<https://www2.health.vic.gov.au/public-health/immunisation/vaccine-order-and-stock>



Eligibility for government-funded vaccines

- Prescriber determines eligibility
- Rules for eligibility change, flu eligibility can change annually
- Free routine and catch-up vaccines are available under 20 years of age including **non-Medicare card holders**.
- All Medicare card holders over 20 years for age-appropriate vaccines

<https://www2.health.vic.gov.au/public-health/immunisation/immunisation-schedule-vaccine-eligibility-criteria/immunisation-schedule-victoria>



Eligibility for government-funded vaccines

Medicare and non-Medicare card holders including:

- All refugees and humanitarian entrants including asylum seeker
- Adults born since 1966 without 2 doses of MMR
- People at risk of hepatitis B or rabies infection
- Vulnerable Citizens
- State-based time-limited vaccine programs

<https://www2.health.vic.gov.au/about/publications/factsheets/immunisation-free-vaccine-eligibility-july-2017>



Key steps for Practice Nurse in Immunisation

- Standards for practice for RN & EN
- Design the process
- Pre Immunisation checklist
- Legal prescription
- Obtain informed consent
- Administration of vaccines
- 15 minute wait
- Accurate recording
- Transmit to AIR



Scope of practice

- Consider scope of practice in new clinical environment
- AHPRA Standards for practice RN & EN fact sheets
- RNs, ENs and Nurse Immunisers
- Victorian Drug, Poisons and Controlled Substances Act 2017

<https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx>



Registered nurse standards for practice

- Continuous thinking and analysis in the context of thoughtful development
- Review scope of practice in new clinical environment
- Provide comprehensive safe, quality practice
- Appropriate delegation to enrolled nurses and others
- Provide timely supervision of delegated practice
- Practice in accordance with relevant policies, guidelines, standards, regulations and legislation
- Can become Nurse Immunisers

www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/registered-nurse-standards-for-practice.aspx



Enrolled nurse standards for practice

- Review scope of practice in new clinical environment
- Practice in accordance with relevant policies, guidelines, standards, regulations and legislation
- Provide comprehensive, safe, quality practice
- Identify EN responsibilities delegated by RN
- Don't work beyond competence, education, and experience
- ENs need to work under the direct or indirect supervision of a RN

www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx



Direct and indirect supervision

- **Direct supervision** is when the supervisor is actually present and personally observes, works with, guides and directs the person who is being supervised.
- **Indirect supervision** is when the supervisor works in the same facility or organisation as the supervised person, but does not constantly observe their activities. The supervisor must be available for reasonable access. What is reasonable will depend on the context, the needs of the person receiving care and the needs of the person who is being supervised

<https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/FAQ/Enrolled-nurse-standards-for-practice.aspx>



RNs, ENs and Nurse Immunisers

RN	EN (med endorsed)	NI
Can	Can	Can
<ul style="list-style-type: none"> Administer vaccines with a written order from a GP Supervise EN immunisation practice Assess EN competency in immunisation Delegate cold chain management to EN or non-clinical staff 	<ul style="list-style-type: none"> Work under the supervision of an RN Administer vaccines with a written order from a GP Delegate cold chain management to non-clinical staff 	<ul style="list-style-type: none"> Administer vaccines from the permitted list independently Supervise EN immunisation practice Assess EN competency in immunisation Delegate cold chain management to nursing or non-clinical staff
Cannot	Cannot	Cannot
<ul style="list-style-type: none"> Administer vaccines independently without a GPs written order 	<ul style="list-style-type: none"> Administer vaccines independently without a GPs written order and an RNs supervision 	<ul style="list-style-type: none"> Instruct an RN or EN to administer a vaccine without a GPs written order

Frequently asked questions

- **Can a medication endorsed EN give medications or immunisations with no RN present in the same room?**
 - Yes, if completed education, assessed as competent and has a documented indirect supervision order.
- **Can an EN immunise on a day when there is a GP working in the building but there is no RN on duty?**
 - Yes, as above

<https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/FAQ/Enrolled-nurse-standards-for-practice.aspx>



Anaphylaxis response kit

- Should be available in every location that immunisation takes place
- Recognition and treatment guide
- Checked regularly
- Immunise only when there is someone available who is trained in anaphylaxis response

<https://immunisationhandbook.health.gov.au/vaccination-procedures/preparing-for-vaccination>



Anaphylaxis response kit

- Adrenaline 1:1000 (minimum of three ampoules – check expiry dates)
- 3 drawing up needles
- Minimum of three 1 mL syringes and 25 mm length needles (for intramuscular (IM) injection)
- Cotton wool swabs
- Pen and paper to record time of administration of adrenaline
- Laminated copy of adrenaline doses
- Laminated copy of ‘Recognition and treatment of anaphylaxis’

<https://immunisationhandbook.health.gov.au/resources/handbook-tables/doses-of-intramuscular-11000-adrenaline-for-anaphylaxis><https://immunisationhandbook.health.gov.au/resources/handbook-tables/table-recognition-and-treatment-of-anaphylaxis>



Design the process

- Appointment booking rules
- GP consult room or treatment room
- Who provides the information
- Taking informed consent
- Giving vaccines, single or dual clinicians
- Recording
- Transmitting to AIR



Pre immunisation checklist

Pre-immunisation checklist

This checklist helps your doctor or nurse decide the best immunization schedule for you or your child.

Please tell your doctor or nurse if the person about to be immunised

- is a viral disease
- has a clinical picture which causes immunity to some diseases, e.g. measles, mumps, rubella or is a healing treatment which causes immunity for diseases, and clinical medicines such as perfume and antibiotics
- is a disease of a mother who has received high immunosuppressive therapy (for example, biological disease modifying anti rheumatic drugs (DMARDs) during pregnancy
- has had a severe reaction following an infection
- has a severe chronic disease (for anything)
- has had any vaccine in the last month
- has had an injection of immunoglobulin, or has received blood products or a whole blood transfusion in the past year
- is pregnant
- is planning pregnancy or attempting intercourse
- is a patient, pregnant or owner of a pet
- has a prehistory of Guillain-Barre syndrome
- is a patient below 16 years of age, their 16 weeks gestation, or weighing less than 50kg at birth
- is a baby who has had intubation, or is congenital abnormality that may predispose to infection
- has a chronic illness
- has a bleeding disorder
- does not have a functioning spleen
- has with a child who has a disease which causes immunity to some diseases, e.g. measles, mumps, rubella or is a healing treatment which causes immunity for diseases, and clinical medicines such as perfume and antibiotics
- is a patient, pregnant or owner of a pet
- has a prehistory of Guillain-Barre syndrome
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- has a chronic illness
- has a bleeding disorder
- does not have a functioning spleen

The form may be submitted on letterhead paper, your choice of paper will suit you.

3. Do you need more information to decide whether to proceed?

It is important for you to receive a personal record of your or your child's immunizations. If you don't have a record, ask your doctor or nurse to give you one. Bring this record with you for your doctor or nurse to complete every time you or your child visit for immunization. Your child may need this record to enter kindergarten, preschool or school.

For further information, contact your doctor or local council.

Material adapted from The Australian Immunisation Handbook, 8th Edition 2018 (updated March 2019).
<https://www.health.gov.au/government/publications/the-australian-immunisation-handbook>

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Comparison of the effects of diseases and the side effects of the vaccines

[illegible]

<https://www2.health.vic.gov.au/about/publications/Factsheets/pre-immunisation-checklist>

<https://immunisationhandbook.govcms.gov.au/resources/handbook-tables/table-responses-to-conditions-or-circumstances-identified-through-the-pre>



Legal prescription

- Can be electronic record in clinical notes
- Prescriber details
- Patient details and allergies
- Instruction to nurse administering
- Drug name, dosage form, strength and dose required
- No verbal orders



Legal prescription

Writing “as per Immunisation schedule” is not correct. Always consider the 5 rights:

- Right patient
- Right drug
- Right dose
- Right route
- Right date and time
- **No verbal orders**



Obtaining informed consent

- For consent to be legally valid, the following elements must be present:
 - Must be given by a person with legal capacity
 - Must be given voluntarily
 - Specific to the procedure
 - Risks and benefits explained
- Children or adolescents can refuse a vaccine after consent is given by parent
- Mature minors are young people under 18 years with capacity to consent

<https://immunisationhandbook.govcms.gov.au/vaccination-procedures/preparing-for-vaccination>



Side effects factsheet

Vaccine side effects
Please wait a minimum of 15 minutes after immunisation

Vaccines given today: 1/20 indicated below by tick in boxes. Time vaccine given: _____

Rotavirus vaccine	Measles/mumps/rubella vaccine	Measles/mumps/rubella vaccine - 1st dose	Measles/mumps/rubella vaccine - 2nd dose
<p>Sometimes, rotavirus vaccine can cause a mild diarrhoea or stomach ache.</p> <p>By mouth</p>	<p>Some 30-month-olds have a large reaction to the reaction of measles and mumps from the vaccine.</p> <p>By mouth</p>	<p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat 	<p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat
<p>Cholera vaccine</p> <p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat 	<p>Measles/mumps/rubella vaccine</p> <p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat 	<p>Measles/mumps/rubella vaccine</p> <p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat 	<p>Influenza vaccine</p> <p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat
<p>Polio vaccine</p> <p>By mouth</p>	<p>Measles/mumps/rubella vaccine</p> <p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat 	<p>Measles/mumps/rubella vaccine</p> <p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat 	<p>Influenza vaccine</p> <p>About 7 to 10 days after vaccination:</p> <ul style="list-style-type: none"> • Fever (up to 38°C) • Swollen lymph nodes • Swelling of salivary glands • Swelling of the throat

Common side effects occur soon after vaccination and last 1 to 2 days

Vaccinations may cause the following reactions:

- Mild fever (38°C) that doesn't last long
- Sore throat, redness, swelling or pain
- Where the needle was, there may be a small bump, redness, swelling or pain

What to do at home:

- If baby/child has a fever, give them paracetamol or ibuprofen. Do not give aspirin.
- Gently feed milk, usually within 15 minutes.
- Put a cold wet cloth on the injection site.

When to seek medical advice:

- If your baby or child has a fever that lasts more than 2 days.
- If the reaction is not getting better or if you are worried about your child's health.

Very rare vaccine side effects requiring immediate medical attention

- **Severe allergic reaction (anaphylaxis)** generally occurs within 1 to 30 minutes after vaccination. Signs of anaphylaxis include:
 - Swelling of the face, lips, tongue or throat
 - Difficulty breathing
 - Rash or hives
 - Dizziness or fainting
 - Loss of consciousness
- **Encephalopathy** (swelling of the brain) is a rare side effect of the measles vaccine. It usually occurs within 1 to 3 weeks after vaccination. Signs of encephalopathy include:
 - Irritability
 - Vomiting
 - Seizures
 - Loss of consciousness
 - Swelling of the brain
- **Guillain-Barre syndrome** (swelling of the nerves) is a rare side effect of the influenza vaccine. It usually occurs within 1 to 6 weeks after vaccination. Signs of Guillain-Barre syndrome include:
 - Weakness or numbness in the arms and legs
 - Difficulty walking
 - Loss of bladder or bowel control

For significant or unexpected side effects following immunisation, you can contact the Victorian vaccine safety service on 1300 802 024 / vss@victoria.gov.au / www.victoria.gov.au/vss. This service does not give immediate emergency management for a side effect.

Translating and Interpreting service. Call 131 450

For further information Contact your doctor or your local council immunisation service. Or visit www.victoria.gov.au/vss

To receive this publication in an accessible format email immunisation@phn.vic.gov.au

Revised edition from The Australian Immunisation Handbook 10th Edition 2012 (updated June 2013). Authorised and published by the Victorian Government, Melbourne, Victoria. In State of Victoria, March 2013. Available at <http://www.victoria.gov.au/vss> or <http://www.victoria.gov.au/vss>

<https://www2.health.vic.gov.au/about/publications/factsheets/vaccine-side-effects>

Administration of vaccines

- Health and safety
- Equipment and preparation
- Recommended injection site
- Positioning and holding
- Practical immunisation tips
- Recording given vaccines
- Transmitting to AIR



Health and Safety

- Being aware of sharps risks
- Risks of having multiple people in the room
- Data entry and clinical notes errors



Equipment & preparation

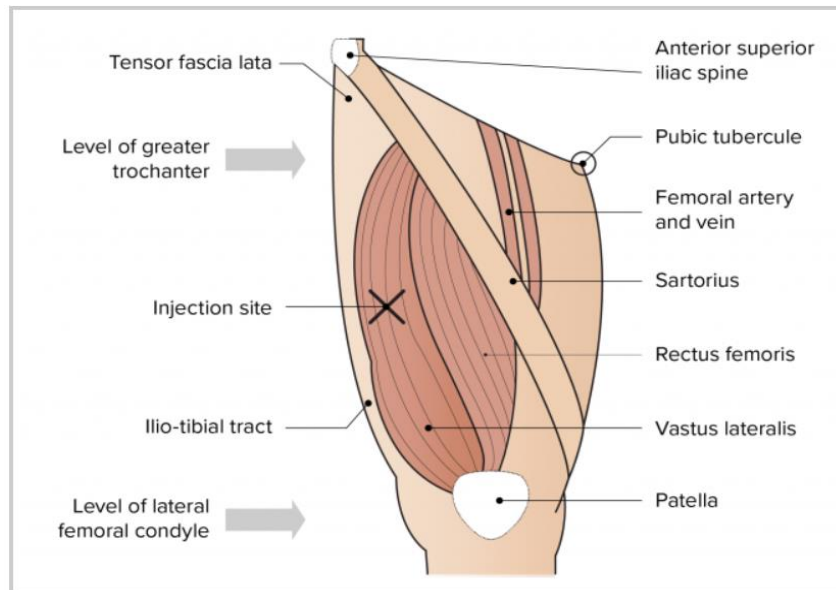
- Use diluent. **Do not** use sterile water for injection or saline
- Diluent at the same temperature as vaccine
- Needle choice
- Avoid children seeing preparation
- Band-aids for older children not babies
- Avoid children seeing preparation

Age or size of person to be vaccinated	Needle type	Angle of needle insertion
Infant, child or adult for intramuscular vaccines	22–25 gauge, 25 mm long	90° to skin plane
Preterm infant (<37 weeks gestation) up to 2 months of age, and/or very small infant	23–25 gauge, 16 mm long	90° to skin plane
Very large or obese person	22–25 gauge, 38 mm long	90° to skin plane
Subcutaneous injection in all people	25–27 gauge, 16 mm long	45° to skin plane

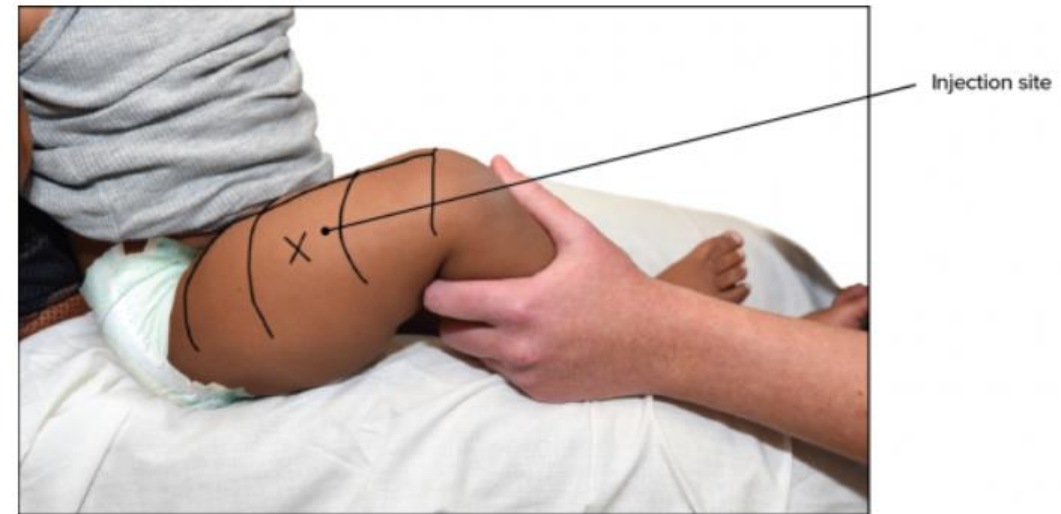
<https://immunisationhandbook.govcms.gov.au/resources/handbook-tables/table-recommended-needle-size-length-and-angle-for-administering-vaccines>

Recommended injection site

Under 12 months



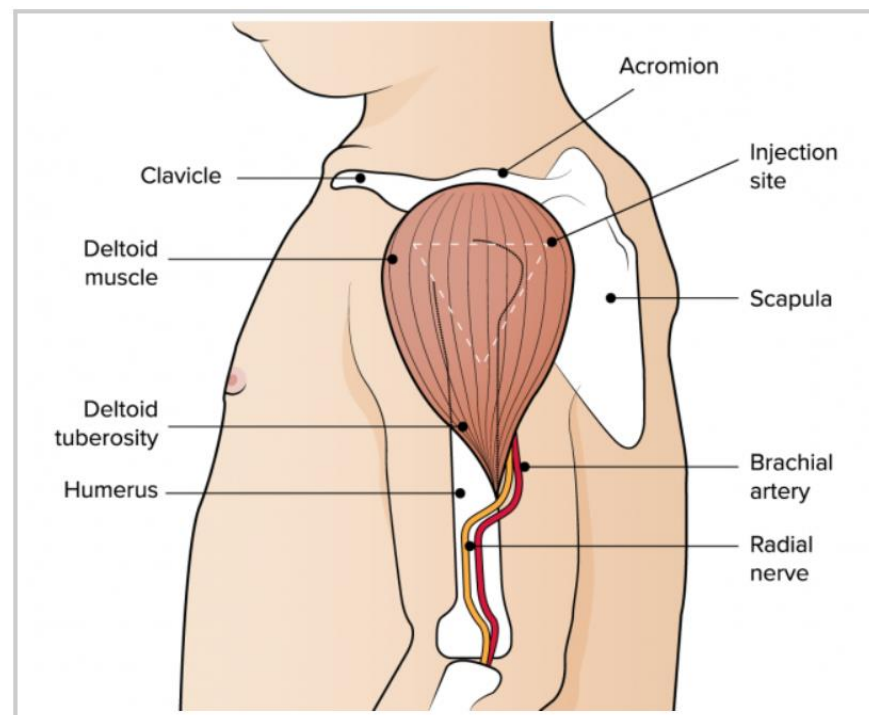
No cleaning unless visibly dirty



<https://immunisationhandbook.health.gov.au/vaccination-procedures/administration-of-vaccines#recommended-injection-sites>

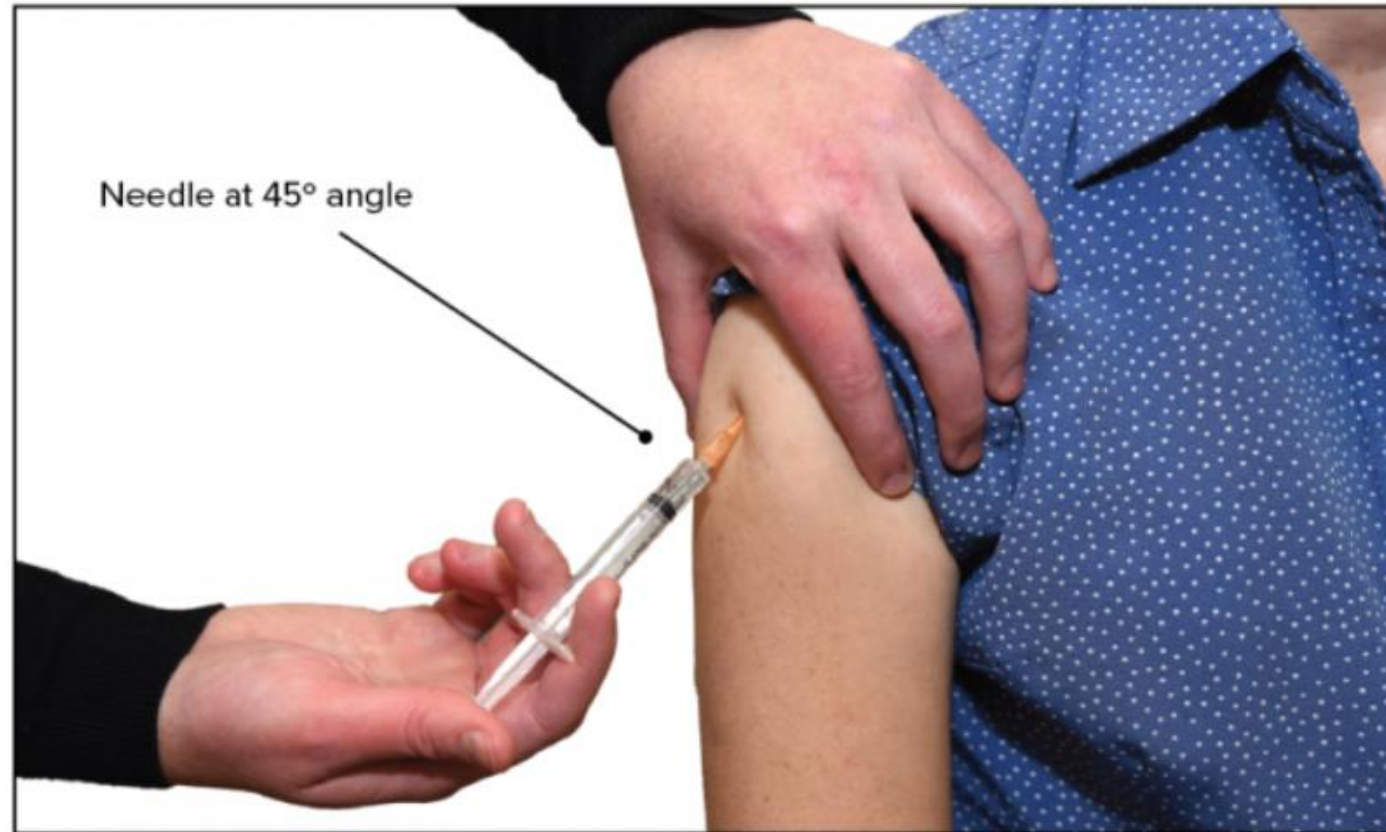
Recommended injection site

12 months and over



<https://immunisationhandbook.govcms.gov.au/vaccination-procedures/administration-of-vaccines>

Subcutaneous Injection into the deltoid



<https://immunisationhandbook.health.gov.au/resources/handbook-figures/figure-subcutaneous-injection-into-the-deltoid-area>



Recommended injection site

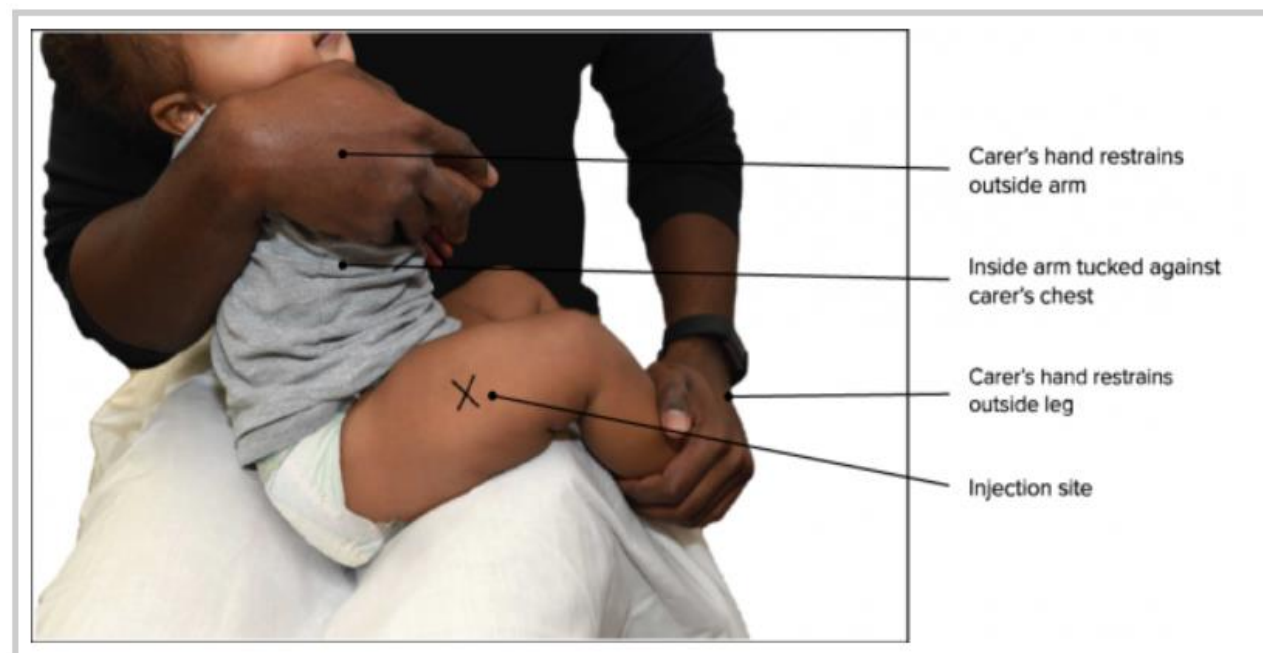
Where should I inject vaccines – Poster



<https://www2.health.vic.gov.au/about/publications/factsheets/where-should-i-inject-vaccines-poster>

Positioning and holding

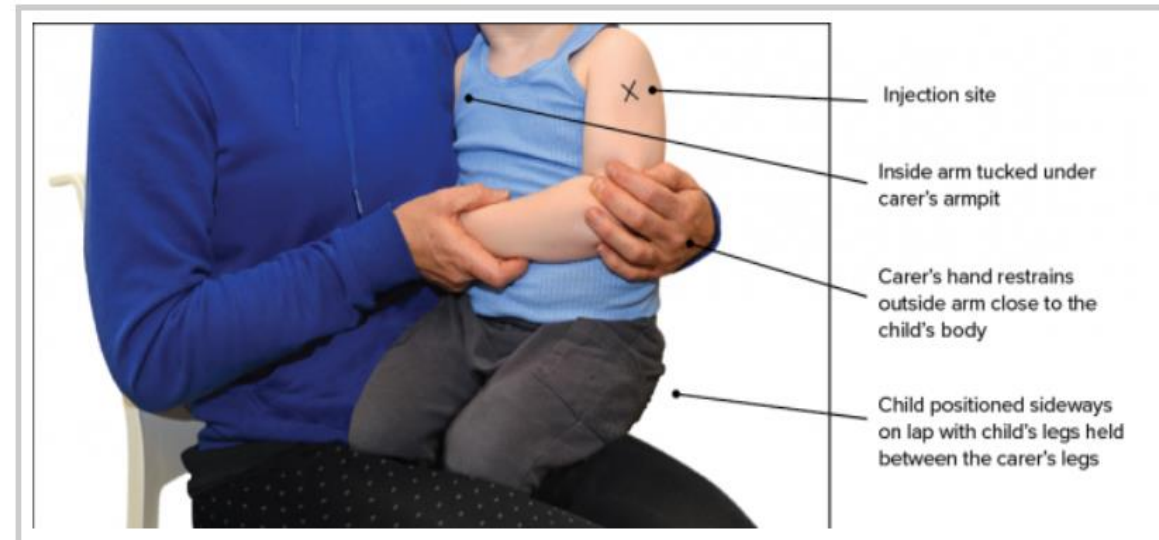
Cuddle position



<https://immunisationhandbook.health.gov.au/vaccination-procedures/administration-of-vaccines>

Positioning and holding

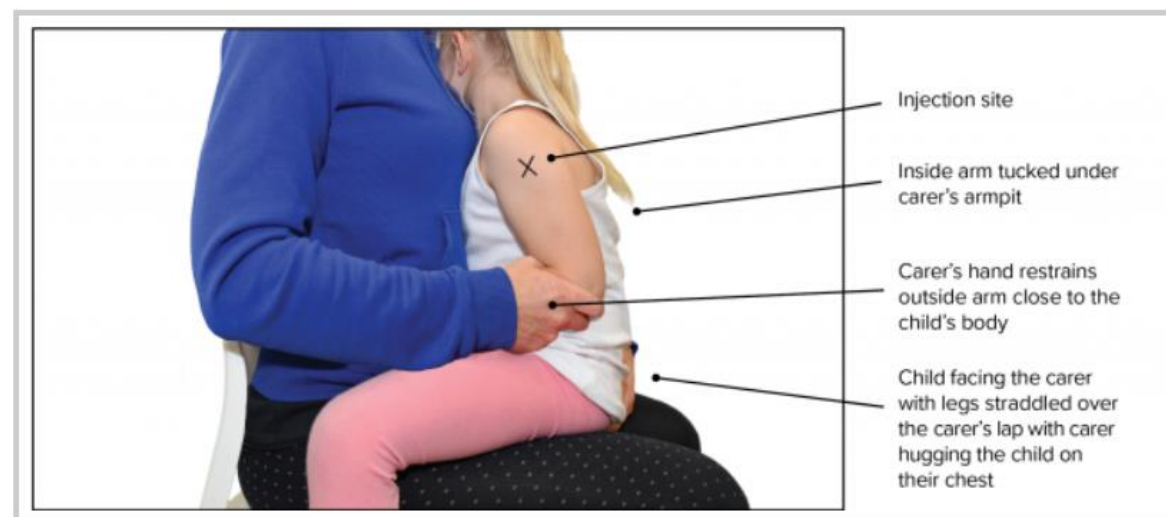
Cuddle for 12 month +



<https://immunisationhandbook.health.gov.au/vaccination-procedures/administration-of-vaccines>

Positioning and holding

Straddle position



<https://immunisationhandbook.health.gov.au/vaccination-procedures/administration-of-vaccines>

Positioning and holding



- Hold limb firmly to avoid movement when injecting
- Anticipate the child moving so you can move with them
- Give clear instructions to parent to keep holding on until told you are finished

<https://www.cdc.gov/vaccines/parents/tools/holds-factsheet.html>



Practical immunisation tips

- Small amounts at a time for oral vaccine
- Distraction method/reward options for older children
- Two provider method for simultaneous immunisations
- Multiple injections in one muscle: 2cm apart, 1 upper, 1 lower
- Interrupted doses
- Any problem, discuss with GP



<https://immunisationhandbook.govcms.gov.au/vaccination-procedures/administration-of-vaccines>



Patient-held record

- Their full name and date of birth
- details of the vaccine given, including the brand name, batch number and dose number
- date and time of vaccination
- site of administration
- name of the person providing the vaccination
- date the next vaccination is due



Clinical notes

- Which GP referred
- Pre-Immunisation checklist attended
- Side effects sheet given
- Risks and benefits discussion
- Who gave informed consent
- Patient-held notes updated
- Asked 15 minute wait



Transmitting records to AIR

- Vaccine entry must be in correct location
- Accurate recording for AIR transmission (no free text)
- Software update when schedule changes
- Transmission of immunisation records should be prompt and timely
- DoH AIR learning modules

<https://www.humanservices.gov.au/organisations/health-professionals/subjects/air-education-vaccination-providers>



Victorian child health record

- Complete date, time, vaccines (brand/batch/dose number), site, name, signature (pen), clinic stamp and next due date (pencil)
- Child's name and DOB on each page
- Update previous records if given at clinic
- Photocopy records from other providers

<https://immunisationhandbook.govcms.gov.au/vaccination-procedures/after-vaccination>



Australian Immunisation Register

- AIR undergoing modernisation
- AIR is a whole of life register
- Part of Health Professional Online Service (HPOS)
- Contains significant personal data
- Reporting to AIR is a commitment of the Victorian Government Vaccine Account

<https://www.humanservices.gov.au/organisations/health-professionals/services/medicare/australian-immunisation-register-health-professionals>



The importance of AIR data

AIR data can be used:

- to monitor the effectiveness of vaccines and vaccination programs
- to inform immunisation policy and research
- to identify areas at risk during disease outbreaks
- for eligibility for Family Tax Benefit and Child Care Subsidy payments
- as proof of vaccination for entry to child care and school, and for employment purposes



Australian Immunisation Register

- Overseas immunisation records for children
- Uploading immunisation history is time consuming but an important service
- Translating and Interpreting Service (TIS National)

<https://www.humanservices.gov.au/organisations/health-professionals/services/medicare/australian-immunisation-register-health-professionals>
<https://www.tisnational.gov.au/>



AIR

- Phone: 1800 653 809 for AIR general enquiries
Monday to Friday, 8 am to 5 pm local time
- Phone: 1300 650 039 for AIR Internet helpdesk
Monday to Friday, 8 am to 5 pm local time
- Fax: 08 9254 4810
- Email: air@humanservices.gov.au Post to: Australian Immunisation Register
PO Box 7852 Canberra ACT 2610



Adverse events

- An adverse event following immunisation (AEFI) is any untoward medical occurrence that follows immunisation and does not necessarily have a causal relationship with the usage of the vaccine
- Encourage contact if concerned
- Vaccinate at safe times

<https://immunisationhandbook.govcms.gov.au/vaccination-procedures/after-vaccination>



Adverse event reporting

- SAEFVIC supports immunisation providers for significant or unexpected adverse events following immunisation (AEFI).
- Report adverse events to SAEFVIC
- RCH Immunisation Hotline: 1300 882 924 (choose option 1)
Staffed 9am and 4pm. An answering machine will take calls at all other times.
- Email: saefvic@mcri.edu.au Online: saefvic.org.au
- Fax: (03) 9345 4163 (24 hours)



www2.health.vic.gov.au/public-health/immunisation/adverse-events-following-immunisation-reporting



Privately funded vaccines

- Any recommended vaccine where the patient is not eligible for NIP funding
- GP to prescribe
- Process is the same, but consent must be obtained by GP as there are no side effects supporting resources
- All private vaccine should be reported to AIR
- Explain cost before giving



Immunisation Resources



<http://www.mvec.vic.edu.au/>

1300 882 924 Mon – Fri 9am – 4pm



SA Catch Up Calculator

<https://immunisationcalculator.sahealth.sa.gov.au/>



Health
and Human
Services

Victorian DHHS Immunisation Branch 1300 882 008

Mon-Fri 9am-12pm, 2-3pm email: immunisation@dhhs.vic.gov.au



<http://www.ncirs.org.au/>



HealthPathways Resources



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Immunisation

See also [Australian Immunisation Handbook](#).

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To request access to your local HealthPathways website, contact your local HealthPathways team.

<https://www.healthpathwayscommunity.org/Home/AccessToHealthPathways.aspx>

Immunisation – Keeping Up to Date

<https://www2.health.vic.gov.au/public-health/immunisation>

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