

Sharp and to the Point

Quarterly newsletter produced by the Immunisation Section, SA Health

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This newsletter is produced quarterly by the Immunisation Section. If you have any feedback or comments on what you would like to see in future editions; or would like to receive further copies or have your name removed from our mailing list, please contact Sara Almond on phone (08) 8226 7177, fax (08) 8226 7197 or email sara.almond@health.sa.gov.au.

Immunisation – The Basics

In 2004 the Immunisation Section developed the educational program 'Immunisation – the Basics' (ITB) to meet the needs of health professionals working in the field of immunisation.

Immunisation is becoming increasingly more complex, so to ensure our education program meets the evolving requirements of providers, the Immunisation Section has started development of an accredited version of this highly successful course. A sample of the modules the new course will cover include:

- the impact of infectious disease
- immunisation required in special circumstances
- homeopathy and vaccination

It is anticipated this new and exciting course will be implemented in 2010 and offered on a regular basis in suitable venues across South Australia and endorsed by peak bodies such as the Royal College of Nursing Australia and General Practice Nursing Australia.

Until the accredited course is available, education sessions tailored for health professionals and the community will continue to be provided by the Immunisation Section as requested.

Two 'Immunisation – the Basics' sessions are scheduled for later in 2009.

Providers are strongly encouraged to identify staff in their areas that may benefit from attending this free workshop.

Providers who would like to attend these workshops may register their interest either via

1. Fax back of the attached 'registration of interest' flyer or
2. Email to Angela Newbound at angela.newbound@health.sa.gov.au or
3. Phone on (08) 8226 7177

Information on the H1N1 Pandemic Influenza will be available in the next edition of Sharp and to the Point. For up to date information please visit www.flu.gov.sa.au



Cold chain

Important points to remember about monitoring the temperature of your vaccine dedicated refrigerator and the use of Cold Chain Monitors

1. **Read and Record** the minimum/maximum and current temperatures at the beginning and end of every day. It is important to ensure the vaccines have not been exposed to temperatures outside 2° to 8° degrees prior to the commencement of your clinic. Remember to reset the thermometer after the temperature has been read and recorded.
2. **Check Freeze Watch Cold Chain Monitors (CCMs)** twice daily to ensure the monitor remains intact.

Cold Chain Monitors (CCM) – Freeze Watch

In South Australia all immunisation providers are required to place Freeze Watch CCMs with their vaccines. Freeze Watch CCMs indicate when vaccines have been exposed to 0° degrees or below. They should be placed in every enclosed container that contains vaccines for domestic refrigerators and on each shelf that contains vaccine for vaccine purpose built refrigerators. Together with the Min/Max thermometer, Freeze Watch CCMs assist with assessing the temperature that vaccines have been exposed to and whether the vaccines are safe to be used or not.

How to access CCMs?

There are two types of Cold Chain Monitors used in South Australia, they are Freeze Watch and Heat Sensitive Monitors.

Rural immunisation providers: receive both Freeze Watch and Heat Sensitive CCMs with every vaccine delivery. Upon receipt of vaccines it is important to inspect both monitors immediately. Once the safety and effectiveness of the vaccines has been established, place the Freeze Watch (blue) card in your refrigerator with vaccines for further monitoring and discard the Heat Sensitive (red) card.

The Heat Sensitive monitor is used to assess the temperature the vaccines have been exposed to from the time the vaccines leave the Vaccine Distribution Centre until they are received at the immunisation providers site, and are **not** required for ongoing monitoring at the providers site.

Metropolitan immunisation providers: receive their vaccine delivery in a monitored refrigerated van and therefore do not receive CCMs with their delivery. It is important to inspect your vaccine delivery and refrigerate immediately upon receipt.

Additional cards for all providers can be accessed by phoning the Immunisation Section on (08) 8226 7177.

Look out for the red and blue cards!

You will notice **blue Freeze Watch** cards and **red Heat Sensitive** cards will be sent to you instead of the orange cards. There is no need to discard the orange cards as they are still effective as long as they have not expired. The blue & red CCM cards now have instructions on the reverse about how to make an assessment of the cards.

How do I know when my CCM has expired?

Freeze Watch monitors have an expiry date printed on the actual monitor, the year proceeds the month i.e. 2012-12

Please check the expiry date of the cards in your refrigerator and if any have expired please phone the Immunisation Section for replacement cards.

Heat Sensitive monitors also have an expiry date printed on them, however providers should not have these in their refrigerators and the Immunisation Section will ensure only monitors in-date will be used for all vaccine deliveries.

For advice and support regarding vaccine cold chain management please contact the Immunisation Section, SA Health – Monday to Friday 9.00am to 4.30pm on (08) 8226 7177. If you are concerned about your vaccines after hours (including weekends) you must isolate and not use your vaccines and contact the Immunisation Section on the next weekday.



Innovation and best practice in immunisation

Congratulations to South East Regional Community Health Service.

The Immunisation Team Leaders have been nominated by Natala Drew, Local Immunisation Coordinator for the Limestone Coast Division of General Practice, for the development of their exceptional school education resource "Info-jection".

This team of highly dedicated and enthusiastic immunisation providers felt there was a need for Year 8 and 9 students at local high schools to learn more about immunisation and what vaccines they receive during the School Based Immunisation Program.

The aim was to empower the students and assist in reducing anxiety and possible hysteria on the immunisation day.

This education program is running into its 2nd year and comprises a PowerPoint presentation incorporating Hepatitis B, Varicella, dTpa and HPV.

The team presented their program and trial data at the PHAA Immunisation Conference 2008 on the Gold Coast, and have received keen interest from many groups and Divisions throughout the country. Evaluations received from students and teachers have been very positive.

Congratulations to everyone involved!



*Back – Sue Thomson, Eleanor Burrows, Deb Walker
Front – Mandy Turner, Anne Gobbie, Fiona Unger, Dana Hirst*

Each quarter the Immunisation Section will send a 'David Jones' quality produce pack to the provider who fits the values of innovation and best practice in immunisation. Please send nominations to Sara Almond at the Immunisation Section – (08) 8226 7177 or email on Sara.Almond@health.sa.gov.au.

What to do if a child is overdue for vaccines and how to plan catch up vaccination

Every opportunity should be taken to review the child's vaccination history and, based on documentation, administer the appropriate vaccine(s). If the child has not received vaccines scheduled in the National Immunisation Program appropriate for their age, plan and document a catch-up schedule and discuss this with the parent/caregiver. The assessment of vaccination status should be based on the schedule for the State/Territory in which the child lives.

If the child is a refugee, the child and the family can be referred to the New Arrival Refugee Immunisation (NARI) program. Staff offering this service are experienced in developing 'catch-up' vaccination plans. GPs in metropolitan Adelaide can refer to the NARI services www.health.sa.gov.au/pehs/publications/NARI-immunisation-A4-poster-2008.pdf

Never start the schedule again, regardless of the interval since the last dose.

The Immunisation Section has nursing staff available to assist providers in calculating a 'catch-up' plan. They are available by phoning (08) 8226 7177 9am - 4.30pm Monday to Friday.

SA vaccine schedule for funded vaccines

Many vaccines on the SA childhood schedule can only be administered "free" to children who meet specific date of birth criteria. This table may assist you when providing "catch-up" programs.

Vaccine brand (antigen)	Introduction	Eligibility for free vaccine
HBVaxII Paed. (Hepatitis B)	May 2000	Born from May 2000
NeisVacC (Meningococcal C)	January 2003	Born from January 2002
Prevenar (Pneumococcal)	January 2005	Less than 2 years of age**
RotaTeq (Rotavirus)	July 2007	6 weeks to 32 weeks of age
Infanrix hexa (DTPa, polio, Hepatitis B, Hib)	March 2008	Less than 8 years of age
Hiberix (Hib)	September 2008	Less than 5 years of age
Varivax (Varicella)	November 2005 (childhood schedule) January 2006 (school program)	Born from May 2004 & Year 8 of secondary school
HBVaxII Adult (Hepatitis B) (2 dose schedule)	January 1999	Year 8 of secondary school
Gardasil (Human papillomavirus)	April 2007 July 2007	Year 8 of secondary school (continuing program) and Women less than 27 years of age (Must have received dose 1 BEFORE 30th June 2009 to be eligible to complete the course with free HPV vaccine – This catch-up program ends 31st December 2009)
Boostrix (dTpa)	January 2004	Year 9 of secondary school

** Additional Pneumococcal vaccines are required if the infant or child has an underlying high risk medical condition (The Australian Immunisation Handbook 9th Edition, page 244)

For further information on free vaccines and their indication for use please contact Immunisation Section, SA Health on (08) 8226 7177 or visit www.health.sa.gov.au/pehs/immunisation-index.htm

Immunisation Questions and Answers

Q Can a woman who is breast feeding still receive vaccines?

A *With the exception of the Rubella vaccine, there is no evidence of risk to the breast fed baby if the mother is vaccinated with any live or inactivated vaccine described in the Australian Immunisation Handbook, 9th Edition 2008, refer to page 89 for further information.*

Q Who is eligible for free influenza vaccine?

A *There are 3 groups eligible for free Influenza vaccine due to their increased risk of complications from Influenza:*

- 1- People aged 65 years of age and over*
- 2- Aboriginal people aged 50 years of age and over*
- 3- Aboriginal people aged from 15-49 years of age with underlying medical conditions*

Influenza vaccine is recommended for any person over the age of 6 months of age, who wishes to reduce the likelihood of becoming ill with influenza, but is only free in the above 3 groups. Refer to the Australian Immunisation Handbook, 9th Edition page 190.

Acronyms

HCW	Health Care Workers
ACW	Aged Care Workers
CDC	Centre for Disease Control
ITB	Immunisation – the Basics
dTpa	diphtheria - Tetanus - acellular pertussis
HPV	Human Papillomavirus
PHAA	Public Health Association Australia

Update: Vaccine Order Form

Immunisation providers receive a new vaccine order form with each new delivery of vaccines; please note this form now includes your scheduled Area of Delivery.

Please start using these forms to place your vaccine order and remember to always fill in your Vaccine Provider ID number.

Immunisation resources for Aboriginal people

The Aboriginal Immunisation Initiative is an important part of closing the 17 year lifespan gap, as many Aboriginal people have an increased risk of complications from many vaccine preventable diseases.

As a part of the Initiative, posters have been produced to promote vaccine uptake by Aboriginal people across a range of age groups. Copies of the posters can be ordered from the Immunisation Section (08) 8226 7177 or downloaded from the website –

www.health.sa.gov.au/pehs/immunisation-index.htm

(go to immunisation, then visit the newly created section "Immunisation for Aboriginal People".)



Did you know?

A post marketing safety study on Gardasil has been conducted by a panel at the Centre for Disease Control in the US. Reports were obtained from Merck, Food and Drug Administration as well as CDC's Vaccine Safety Data link program.

The study examined 375 000 doses of Gardasil administered over a 2 year period to girls aged 9 – 26 years.

Results found there was no increased risk of side effects such as Guillain – Barre Syndrome, stroke, blood clots, fainting, appendicitis or anaphylaxis. Serious reports from Gardasil occur no more frequently than from other vaccines. (Ref: NCIRS Immunisation Newsbrief Oct 2008)

The CDC analysis finds that syncope (fainting) is on the rise with teenage vaccine recipients, but is no more prevalent with Gardasil than other vaccines given in this age group.

Merck's registry of women who were inadvertently given Gardasil while pregnant found no link between HPV vaccine and birth defects, miscarriages and/or infant deaths.

(Reference – HPV/Genital Warts Health Centre – Gardasil Passes a 2 year Safety Check, WebMD November 2008

www.webmd.com/sexual-conditions/hpv-genital-warts/news/20081022/gardasil-passes-a-2check

[NCIRS Newsbriefs:October 2008])

For more information please contact Immunisation Section on (08) 8226 7177 or by emailing Sara.Almond@health.sa.gov.au www.health.sa.gov.au/pehs/immunisation-index.htm

Focus on...

Influenza vaccination in Aged Care

The National Health and Medical Research Council recommends residents in nursing homes and other long term care facilities receive annual influenza immunisation as they are at increased risk of influenza complications. The infrastructure for vaccine delivery to both residents and staff in the Aged Care Sector has shown:

- Inconsistencies in vaccine storage and delivery, potentially affecting the potency of the vaccine
- Difficulty in producing timely accurate coverage data on residents and health care workers during an influenza outbreak in the facility
- Decreased confidence in the ability to support vaccine delivery in the event of an influenza pandemic.

In 2006 a pilot program with 5 Residential Aged Care Facilities (RACFs) offered a coordinated approach to the influenza vaccination program. This program has now expanded across the Aged Care Sector to include in excess of 40 facilities across SA.

The benefits of a coordinated influenza vaccination program in aged care include:

For residents:

- Is an effective means of reducing complications, hospitalisations and deaths from influenza

For the facility:

- Are an important infection control measure
- Fulfilling the duty of care by the organisation and the individual to protect vulnerable residents in their care
- Supporting the SA Pandemic Vaccination Strategy by building the infrastructure in the Aged Care Sector where pandemic vaccine could be delivered
- Readily accessible coverage data held by facilities in the event of an outbreak.
- Reducing staff absenteeism (due to influenza like illness) in a highly vaccinated workforce

For the staff:

- Greater likelihood of vaccine uptake by staff due to accessibility and ease of receiving the vaccination
- Reducing chances of transmitting virus to family members'
- Provision of professional development for program coordinators.

The Immunisation Section has developed education workshops and Model Documents to support the implementation of this program. Standing Drug Orders, policies and resources are available on our website www.health.sa.gov.au/pehs/immunisation-index.htm

Influenza vaccination in Aged Care

In 2009 the Immunisation Section offered Health Care Workers (HCWs) and Aged Care Workers (ACWs) the opportunity to attend the HCW Influenza Vaccination Program education workshops. Four training days were presented during February and March and high attendance rates were observed in all sessions, with a majority of the 151 attendees working in Aged Care. Training is offered in order to up-skill staff who may not have been involved with the planning, implementation and evaluation of an influenza program previously. Key messages were delivered in a series of power point modules with an interactive discussion workshop at the end of the day focusing on influenza vaccine myths and barriers.

Topics covered included:

- Introduction to the role of the Immunisation Section
- Disease prevention – the reasons behind vaccination programs
- Roles and responsibilities for HCWs and ACWs to implement, deliver and then evaluate annual influenza programs
- Vaccine Cold Chain – the importance of correct vaccine storage
- Vaccine safety
- HCW influenza vaccination program best practice
- Myths and barriers workshop.

The importance of safe and efficient vaccine storage, the correct injection technique and high coverage, are crucial to achieving a successful vaccination program.

Evaluations following the workshops indicate that the attendees felt they gained skills in developing and promoting influenza vaccination in their workplace, felt more confident in gaining valid consent from staff members and were better informed about the myths and realities surrounding influenza vaccination.

Following the success of the 2009 program, the Immunisation Section is now planning the 2010 education program for HCWs and ACWs.

For more information please contact Karel Gilligan on (08) 8226 7177 or email karel.gilligan@health.sa.gov.au

Useful links

Immunisation Section www.health.sa.gov.au

Aged and Community Services SA and NT <http://www.agedcommunity.asn.au>

Aged Care Association of South Australia <http://www.acaasa.com.au>

Department of Health and Ageing www.agedcareaustralia.gov.au