

Aboriginal and Torres Strait Islander Health Practitioner Immunisation Clinical Guideline

Version 1.0

Approval date: 10 November 2021



Contents

1.	Name of guideline	3
2.	Relationship to parent policy.....	3
3.	Guideline statement	3
4.	Applicability	4
5.	Guideline details	5
5.1	Principles of the standard:.....	5
5.2	Legislation:	5
5.3	Best Practice and quality standards.....	6
6.	Definitions	8
7.	Supporting documents	8
8.	Document Ownership	8
9.	Document History	8

INFORMAL COPY WHEN PRINTED



Aboriginal and Torres Strait Islander Health Practitioner Immunisation Clinical Guideline

1. Name of guideline

Aboriginal and Torres Strait Islander Health Practitioner Immunisation Practice Clinical Guideline

2. Relationship to parent policy

The development of the new guideline is to support changes to the Vaccine Administration Code, under section 18(1d)(a)(iii) of the Controlled Substances Act 1984 (the Act) rather than an existing Policy.

3. Guideline statement

This guideline is to provide a consistent state-wide approach to the role of Aboriginal and Torres Strait Islander Health Practitioners (ATSIHPs) providing immunisation services and to inform local governance frameworks supporting authorised ATSIHPs to vaccinate.

Previously vaccine administration by ATSIHPs was only undertaken via the direct or indirect supervision of a medical officer (MO) or registered nurse (RN) and the MO or RN must have completed the pre assessment and gained valid consent from the individual to be vaccinated.

It should be noted there is conflicting information in the South Australian, Aboriginal and Torres Strait Islander Health Practitioner Clinical Governance Framework and Minimum Scope of Practice, April 2017, that does not reflect the legislation. The document states:

'ATSIHPs may administer a vaccine under direct or indirect supervision of a medical practitioner or Registered Nurse (RN) if the following conditions are met:

- The relevant clinical competencies have been met and maintained
- Is under the direction of a medical practitioner or authorised RN, and
- If the medical practitioner or authorised RN has completed a pre-assessment of the individual to be vaccinated and gained valid consent.'

Evidence demonstrates the role of ATSIHPs is important to improving health outcomes of Aboriginal and Torres Strait Islander people. ATSIHPs play a vital role in a culturally safe and accessible primary health care workforce, providing clinical and primary care for individuals, families and community groups.

The success of immunisation programs in Aboriginal and Torres Strait Islander (ATSI) children is evident in the decreased burden of vaccine preventable disease and the decreased rate of hospital admissions for these conditions following the introduction of the National Immunisation Program (NIP).

However, there remains a gap in the immunisation coverage rates between Aboriginal and non-Aboriginal children in the younger age groups. Delayed immunisations leave children vulnerable to vaccine preventable diseases at ages when they are most at risk.

Increasing immunisation coverage rates and timeliness of vaccine administration as per the NIP schedule remains a priority in South Australia. In addition, community confidence in immunisation programs remains vital and must be maintained to ensure ongoing program success. Improving or maintaining high immunisation coverage rates, ensuring an adequately skilled immunisation workforce and enhanced vaccine safety surveillance, are the priority areas identified in the National Immunisation Strategy to strengthen and support the NIP.

4. Applicability

The Controlled Substances (Poisons) Regulation 2011, sub regulation 18(3) provides authorisation for a registered health practitioner determined by the Minister, to administer vaccine without a medical order. The authorisation is conditional to the administration being in accordance with the Vaccine Administration Code (the Code).

The Code has been amended to recognise ATSIHPs as a class of registered health practitioner that can vaccinate independent of a medical order.

To meet the requirements of the legislation a vaccine must be administered by and as follows:

- a class of health practitioner approved by the Minister, and
- the health practitioner must have successfully completed an approved immunisation education program, and
- the vaccine is administered by a health practitioner working for an organisation that is approved by the Minister, and
- the vaccine is administered as part of a specified immunisation program.

Registered nurses, midwives, pharmacists and ATSIHPs who have successfully completed an approved immunisation training program, and work for an approved organisation, are considered authorised immunisation providers and can administer vaccines as part of a specified immunisation program independent of a medical order.

Approved organisations are recognised health facilities and include incorporated hospitals, SA Ambulance Service, councils and council subsidiaries.

Other organisations wanting to administer vaccines as part of a specified immunisation program without medical orders require approval from the Minister.

Specified immunisation programs are defined as the:

- National Immunisation Program, including the current South Australian National Immunisation Program (NIP) and Annual Influenza Program
- State funded immunisation programs:
 - Meningococcal B Immunisation Program
 - High Risk Hepatitis B Immunisation Program
- Other specified immunisation programs, including:
 - Occupational health programs, as listed in the online Australian Immunisation Handbook,
 - Seasonal Influenza Program,
 - Pharmacy Vaccination Service (including Pharmacy Influenza Vaccination Program), or
 - COVID-19 Vaccination Program (including COVID-19 Vaccination in Community Pharmacy (CVCP) Program).

Vaccine administration for the specified immunisation programs must be in accordance with the current recommendations as published in the online Australian Immunisation Handbook.

Vaccines cannot be administered for the purposes of travel or for the management of a tetanus prone wound.

Vaccines cannot be administered under the Code if they are not part of a specified program.

5. Guideline details

5.1 Principles of the standard:

Standard:

This clinical guideline is formally aligned with national standards and guidelines

The national standards and guidelines are published in the Australian Technical Advisory Group on Immunisation (ATAGI) Australian Immunisation Handbook, Australian Government Department of Health, Canberra, 2018, <https://immunisationhandbook.health.gov.au/>

The Australian Immunisation Handbook is published under this approval:

'The guideline recommendations were approved by the Chief Executive Officer of the National Health and Medical Research Council (NHMRC) on 9 July 2018, with subsequent amendments approved on 20 March 2019 (updated Pertussis recommendations) and 14 May 2020 (updated Pneumococcal recommendations) under section 14A of the *National Health and Medical Research Council Act (Cth), 1992.*'

Principle:

The principle of the standards is to outline the best practice and quality standards for the provision of an immunisation service.

5.2 Legislation:

In South Australia, section 18(1d)(a)(iii) of the Controlled Substances Act 1984 (SA) (the Act) authorises a registered health practitioner to administer a prescription drug (not being a drug of dependence), hereafter referred to as an S4 drug, to a person if the practitioner is acting in the ordinary course of the practitioner's profession and the practitioner is authorised to administer the drug under the relevant regulations.

For the purposes of section 18(1d)(a)(iii) of the Act, regulation 18(3) of the Controlled Substances (Poisons) Regulations 2011 (the Regulations) provides authorisation for registered health practitioners as determined by the Minister, to administer specified S4 drugs (vaccines) without a medical order if the following requirements are met:

- The registered health practitioner has successfully completed a training program approved by the Minister for the purposes of regulation 18(3).
- The vaccine is listed in the Vaccine Administration Code (the Code) published by the South Australian Department for Health and Wellbeing (the Department). Listed vaccines can be given either singly or in combination.
- The vaccine is administered as part of an immunisation program delivered by an incorporated hospital; or South Australian Ambulance Service; or a council or council subsidiary; or an immunisation program delivered by an organisation approved by the Minister for the purposes of regulation 18(3).
- The drug is administered in accordance with the Code; and in the case of a drug administered as part of the National Immunisation Program, the drug is administered in accordance with the National Immunisation Program Schedule and the online Australian Immunisation Handbook; or in any other case the drug is administered in accordance with requirements specified by the Minister (i.e. any immunisation procedures and guidelines published by the Department).

Registered health practitioners administering vaccines under the specifications listed above are referred to as authorised registered health practitioners.

5.3 Best Practice and quality standards

5.3.1 Professional practice standards, codes and guidelines

Under the Australian Health Practitioner Regulation Agency (AHPRA), health professionals have a legal obligation to perform within their scope of practice according to the education and training they have received and within any regulatory or legislative frameworks.

Employers and organisations are responsible for providing sufficient resources to enable the health practitioners to provide safe and competent care. This includes policies and procedures that support the development of a risk management framework.

5.3.2 Clinical governance and risk management

Each Local Health Network (LHN) should establish a process, via an appropriate committee or executive structure, to support the implementation and operation of the SA Aboriginal and Torres Strait Islander Health Practitioner Immunisation Practice Clinical Guideline.

Employers and organisations are responsible for providing sufficient resources to enable health practitioners to provide safe and competent care. This includes policies and procedures that support ATSIHPs to provide an immunisation service.

The following functions should be observed:

- Oversight of the development, implementation and review of LHN/site specific procedures;
- Dissemination and communication of relevant policies and procedures;
- Monitoring the implementation and performance assessment of agreed activities and standards;
- Development and oversight of evaluation and audit processes; and
- Oversight of staff training requirements and development/implementation of appropriate staff training programs.

5.3.3 Credentialing for registered health practitioners

Credentialing and defining scope of clinical practice are corporate governance responsibilities. LHNs will need to establish a process for credentialing and defining scope of practice for authorised ATSIHPs.

The procedure must outline the authentication and credentialing process by which authorised ATSIHPs across health sites are considered, endorsed and reviewed.

This process should align with the following SA Health Policy Directive: *Registration of Health Practitioners – Recording and Monitoring Policy Directive (2014)*

5.3.4 Ongoing performance reviews and competency assessments

The Aboriginal and Torres Strait Islander Health Practice Board (ATSIHPB) of Australia regulates the practice of all registered ATSIHPs in Australia, ensuring that all registered health practitioners are suitably qualified to practice in a competent and ethical manner. Registered health practitioners must participate in ongoing performance review and competency assessments. The registered health practitioners have an obligation to advise employers if they are not competent to provide an immunisation service.

The ongoing competence and safety of the authorised registered health practitioner may be assessed through the following:

- Compliance with the Recency of Practice registration standard published by ATSIHPB.
- Participation in Continuing Professional Development (CPD). It is mandatory for all registered health practitioners to complete a minimum number of annual CPD hours directly relevant to the health practitioner's context of clinical practice.
- Annual participation and competence in Basic Life Support.

- Regular and ongoing performance review, including but not limited to review of all incidents, reports, complaints and compliments.
- Performance management if required.
- Ability to demonstrate that the authorised registered health practitioner is knowledgeable and credible in the delivery of immunisation services.
- Ability to demonstrate that the authorised registered health practitioner's clinical practice reflects the current Australian Immunisation Handbook recommendations, as well as organisational guidelines, policies and procedures relating to immunisation practice.

5.3.5 Professional practice standards, codes and guidelines

Under AHPRA, health professionals have a legal obligation to perform within their scope of practice according to the education and training they have received and within any regulatory or legislative frameworks.

The authorised ATSIHP must administer the vaccine in accordance with the legislative requirements listed at 5.2.

Immunisation practice standards are to cover all aspects of the delivery of high quality immunisation services.

Policies and procedures are to be in place that support practice and at a minimum are to include:

- Storage and handling of vaccine, including cold chain monitoring
- Pre-vaccination screening
- Patient exclusion for vaccination
- Obtaining valid consent
- Vaccine administration
- Access to, use of and management of an anaphylaxis response kit
- Managing anaphylaxis and vaso-vagal episodes
- Adverse events management and reporting
- Vaccination documentation, provision of personal records to all persons vaccinated, record keeping and retention of records
- Handling of sharps, maintaining infection control including management of needle stick injury and exposure to blood or body fluids. Sharps and clinical waste disposal
- Management of staff training and credentialing
- Employing organisations must have an appropriate medication licence

The following resources provide information on practice standards:

- The online Australian Immunisation Handbook
- The National Vaccine Storage Guidelines: Strive for 5
- Australian Immunisation Register (AIR) and reporting vaccination information available at: <https://www.servicesaustralia.gov.au/organisations/health-professionals/services/medicare/australian-immunisation-register-health-professionals>
- Legislative documentation requirements information available at: <http://www.archives.sa.gov.au/alias/recordkeeping>.

5.3.6 Eligibility criteria

Aboriginal and Torres Strait Islander Health Practitioners (ATSIHPs) that have obtained:

- HLT40213 Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice, or
- HLT50213 Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care Practice, or
- HLT60113 Advanced Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care Practice,

are registered with Australian Health Practitioner Regulation Agency (AHPRA) and have completed the SA Health approved immunisation education program, *Immunisation Education Program for Aboriginal Health Practitioners*, will be eligible to practice as authorised registered health practitioners and administer vaccines in accordance with the requirements of the Code.

6. Definitions

Aboriginal and Torres Strait Islander Health Practitioner:

Aboriginal and Torres Strait Islander Health Practitioner means a person registered by the Aboriginal and Torres Strait Islander Health Practice Board in accordance with the Health Practitioner Regulation National Law (the National Law) as in force in each state or territory, with approval taking effect from 1 July 2012.

Vaccine Administration Code:

The Vaccine Administration Code (the Code) outlines the requirements necessary to support the authorisation of a registered health practitioner to administer schedule 4 (S4) drugs without a medical order.

Authorised registered health practitioners:

Authorisation of classes of registered health practitioners is determined by the Minister for Health and Wellbeing (the Minister) in accordance with the requirements listed in the Code. The authorised registered health practitioner must have successfully completed an approved training program to administer a vaccine as part of a specified immunisation program delivered by an approved organisation.

Approved organisation:

Organisations that have applied for approval from the Minister are considered approved organisations. Approved organisations are published on the SA Health website www.sahealth.sa.gov.au/immunisationprovider. Incorporated hospitals, SA Ambulance Service, councils and council subsidiaries are recognised health services and do not need approval from the Minister.

National Immunisation Program Schedule:

The National Immunisation Program (NIP) Schedule is a series of immunisations given at specific times throughout life. All vaccines listed in the NIP schedule are funded by the Commonwealth Government.

State funded immunisation programs:

The Meningococcal B Immunisation Program and High Risk Hepatitis B Immunisation Program are state funded immunisation programs, with specific eligibility criteria.

7. Supporting documents

- Australian Technical Advisory Group on Immunisation (ATAGI). Australian Immunisation Handbook, Australian Government Department of Health, Canberra, 2018, <https://immunisationhandbook.health.gov.au/>
- South Australian Government, Department for Health and Wellbeing, Vaccine Administration Code, as published on the SA Health website.

8. Document Ownership

Clinical Guideline owner: Dr Louise Flood, as Domain Custodian for the Director, Communicable Disease Control Branch Policy Domain

Title: Aboriginal and Torres Strait Islander Health Practitioner Immunisation Clinical Guideline

ISBN: 978-1-76083-456-2

Objective reference number: 2020-02343 – A3174919

Review date: November 2023

Contact for enquiries: healthimmunisation@sa.gov.au

9. Document History

Version	Date approved	Approved by	Amendment notes
1	10/11/2021	Domain Custodian, Clinical Governance, Safety and Quality	Original approved by Chief Public Health Officer (20 October 2021)