



Attn Jessica Malone
Senior Policy Advisor
Health Workforce Innovation and Reform
Jessica.malone@dhhs.vic.gov.au

Dear Ms Malone

Re: Victorian Pharmacist Administered Vaccination Program

Australian College of Nursing (ACN) is the national professional organisation for all nurse leaders and its aim is to ensure that the Australian community receives quality nursing care now and in the future. ACN is a membership organisation with members in all states and territories, health care settings and nursing specialties. ACN is also the Australian member of the International Council of Nurses headquartered in Geneva.

Australian College of Nursing (ACN) welcomes the opportunity to provide comments on the Victorian Pharmacist Administered Vaccination Program. ACN welcomes any program that improves access to vaccinations for the Australian community. ACN supports the Victorian government decision to adopt the nationally consistent curriculum for immunisation providers should be developed and that all immunisation providers should acquire their qualifications through education programs delivering such a curriculum. Further, ACN believes that authorising nurse immunisers to administer most vaccines in the planned amendment of the *Drugs, Poisons and Controlled Substances Regulations 2006* would be administratively efficient, contribute to improved access to vaccinations and lay the groundwork for future health workforce reform.

Please do not hesitate to contact me should you require clarification or any further information regarding this submission.

Yours sincerely

Adjunct Professor Kylie Ward
FACN Chief Executive Officer

26 February 2016



Australian
College of
Nursing

Submission on proposed introduction of the
Victorian Pharmacist Administered
Vaccination Program

Submission on proposed introduction of the Victorian Pharmacist Administered Vaccination Program

Australian College of Nursing (ACN) supports the implementation of any health policy designed to improve equitable access to immunisation services. Improving such access may increase the rate of vaccination in the community and deliver improved levels of immunity in the community. However, improved access to vaccinations must not be implemented at the expense of safety. ACN is strongly of the view that all immunisation providers must, at all times, demonstrate the knowledge and skills to practice according to relevant legislation, best practice, and follow the recommendations published in the most recent edition of The Australian Immunisation Handbook developed by the Australian Technical Advisory Group on Immunisation (ATAGI) and National Vaccine Storage Guidelines from Australian Government, Department of Health and Ageing. Further, ACN agrees that the National Immunisation Education Framework for Health Professionals should be adopted as the minimum standard for a nationally consistent curriculum for immunisation providers. ACN is of the view that all health care professionals eligible to train as immunisation providers should be prepared to a nationally consistent standard.

ACN notes that the Victorian government plans to amend the *Drugs, Poisons and Controlled Substances Regulations 2006* to authorise pharmacists to administer vaccines to patients without prescription. While this initiative has the potential to improve access to immunisations, ACN believes that concurrently authorising accredited immunisation nurses would not only be administratively efficient but also maximise the potential of an existing and prepared workforce able to contribute to increasing immunisation rates in the community. Nurse immunisers are a resource available within the existing health care workforce and are educationally well prepared to provide such a service in a wide variety of settings.

The Australian College of Nursing supports any vaccination program, pharmacist administered or otherwise, that is implemented to safely improve access to or address identified gaps in current service delivery. Further, ACN believes that guidelines need to be in place that ensure the ongoing competence and continuing professional development of pharmacists providing vaccinations. These guidelines must ensure the annual review of best practice policy for immunisation to maintain authority to immunise and attaining an annual statement of proficiency in cardio-pulmonary resuscitation and the management of anaphylaxis.

ACN considers vaccinations delivered by pharmacists as immunisation providers in community pharmacies to be inappropriate if the vaccine has a high profile of side effects and/or requires the immuniser to have comprehensive skills in clinical assessment. For example, vaccination of individuals that require recipients to have a comprehensive clinical assessment or administration of vaccines that are associated with a significant risk of adverse reaction are unsuitable for administration by a pharmacist in a community setting.

Further, ACN does not support a pharmacist vaccination program if the model presents a risk to continuity of care. Fragmentation is likely to occur where multiple doses are required for the vaccination to be effective or if

the administration of a vaccine requires follow-up to evaluate effectiveness. ACN also considers that there is a high risk of fragmentation and duplication of services if there are not robust pathways in place that ensure effective and efficient communication between health care providers.

ACN supports the planned requirement for Victorian pharmacies providing vaccination services to report Adverse Events Following Immunisation (AEFI) to the Surveillance of Adverse Events Following Vaccination in the Community (SAFEVIC) register. In ACN's view the implementation of any health initiative needs to be evaluated in terms of effectiveness, efficacy and safety.

ACN believes that, at the current level of development of this type of service, limiting a pharmacy vaccination program to the influenza and pertussis containing vaccines to be appropriate. The administration of these vaccines is associated with a low risk of adverse side effects and does not require any follow-up by a health professional. ACN would support the expansion of the pharmacy vaccination program to include other vaccines with a low profile of side effects if mechanisms were implemented to ensure (1) continuity of care and (2) effective communication with appropriate health professionals involved in a person's care.

ACN is of the view that there should be no fixed age limit for children receiving an influenza vaccine in a community pharmacy as the registration of influenza vaccines specifies at what age the vaccine can be administered to children. ACN believes however, that pharmacists providing influenza immunisations to children must be equipped to safely manage the administration of vaccines to younger age groups and understand the relevant differences in doing so relative to immunising adults.

Routine childhood immunisations in particular should continue to be delivered through Maternal, Child and Family Health nurse services or General Practitioners so that developmental and other health assessments are able to be conducted concurrently. ACN is therefore opposed to such immunisations being undertaken by pharmacists. This approach will not increase the time burden on families while preventing health advancement opportunities being lost through service fragmentation. Pharmacist provision of immunisations must therefore be seen as an adjunct to existing health services rather than a replacement or alternative for all immunisation services.

ACN also believes that it is important that prior to receiving the service, potential vaccine recipients must be informed of the full out-of pocket cost they will incur.