# Immunisation Strategy 2022–2025





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## **Acknowledgement of Country**

Logan City Council acknowledges the Traditional Custodians of the land, pays respect to Elders past, present and emerging and extends that respect to all Aboriginal and Torres Strait Islander peoples in the City of Logan.



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# Introduction

### Mayor's message

Logan City Council has a proud history in the delivery of immunisation services to our community. Since 1979 we have provided immunisation services via community clinics and a school program, expanding our services in more recent years to include outreach services, targeted services for at risk members of our community and corporate vaccinations.

The Logan City Immunisation Strategy 2022-2025 continues our practice in immunisation planning and service delivery.

Our proximity and service delivery to our community provides the setting that continues to be the foundation in delivering immunisation services to the community. This strategy defines key directions and actions for us that will contribute to positive health outcomes for our city.

We commit to working closely with the community, business operators, State and Federal Governments to progress implementation of our Immunisation Strategy and ensure that outcomes are being delivered now and into the future.

This is an exciting time for our city and the Immunisation Strategy 2022-2025 will help all of us build an even better City of Logan through cost effective services that meet the needs of our community.



**Mayor Darren Power** 

### **Executive summary**

Immunisation is a global health and development success story, saving millions of lives every year. We have provided free immunisation services to the community since 1979 through a variety of methods, including community clinics, school-based immunisation programs, community outreach, at-risk influenza programs, staff immunisation programs, and public and corporate programs.

In 2018, we adopted our first Immunisation Strategy with the aim to improve vaccination rates by setting out how immunisation services would continue to be provided over the 2018-2021 period. The success of this strategy saw the number of vaccinations rise by 20 per cent in the city since 2018, highlighting the importance of our immunisation services. To continue this success this new strategy, *Immunisation Strategy 2022-2025* has been developed.

The *Immunisation Strategy 2022-2025* (the strategy) is an important framework for the continuing delivery of immunisation services to the City of Logan. Reflected in the strategy are current strengths in our operations and opportunities for improvement.

The strategy consolidates all our immunisation services into one document, providing a strategic approach to planning and service delivery for the City of Logan.

Our Corporate Plan 2021-2026 identifies 7 focus areas that help deliver a long-term vison for the City of Logan. Our Corporate Plan's focus area of Healthy Connected Community (HCC) links strongly with the strategy's key areas of interest.

The strategy lays out the framework for the delivery of tangible health outcomes for the community through the Immunisation Strategy Action Plan (the action plan).

The action plan categorises its main functions under the following 8 key priority areas:

- community immunisation clinics
- school immunisation program
- Logan Hospital immunisation program including pregnancy influenza clinic
- outreach immunisation program
- at-risk influenza immunisation program
- at-risk staff vaccination program
- staff influenza immunisation program
- adhoc corporate and public programs.

### Why do we need this strategy?

The strategy sets out our immunisation objectives for the next 4 years. The main purpose of the strategy is to articulate the services that we strive to provide that contribute to positive health outcomes for our community. The strategy also provides the proactive, strategic framework for us to work collaboratively with the State Government, business operators and residents to improve vaccination rates and ultimately the quality of life for people who live and work within the City of Logan.

The goals of the strategy are to continue to:

- 1. Develop a creative, clear and cohesive framework for proactively managing immunisation issues across the city
- 2. Establish clear objectives, and policy and service delivery priorities in relation to immunisation for the next 4 years
- 3. Articulate the range of immunisation services delivered by us.

### How was this strategy developed?

The Immunisation Strategy 2018-2021 has reached its end of life. A review of that strategy and the outcomes of the services delivered during the last 4 years informed the development of this strategy.

Developing a comprehensive strategy required a robust internal consultation process, followed by expansive community consultation.

Development of the key action items and performance indicators occurred in consultation with internal stakeholders and take into consideration our statutory responsibilities for immunisation, community health needs and our relevant policies and strategic directions.

### How will this strategy be implemented?

Our current policies allow us to understand 'where are we now' in relation to current delivery of immunisation services. Our current directions, actions and focus areas aggregate into 8 broad 'key areas of interest'. Each key area of interest is linked to service delivery through overarching and supporting objectives.

The strategy objectives and action items address current and emerging issues. Objectives and action items emerged through service review and consultation with stakeholders and take into consideration our statutory and contractual responsibilities for immunisation, community health needs and our relevant policies and strategic directions.

# Strategic fit

### Alignment to Corporate Plan 2021-2026

Corporate Plan Focus Area	How does this strategy align with this Focus Area?
Maintaining Current Levels of Service	The strategy guides delivery of current and ongoing services in the area of immunisation.
Healthy Connected Community	The strategy fosters a healthy social infrastructure outlining the delivery of the range of immunisation services for better health outcomes within the community.
High Performing Organisation	The strategy fosters development of our health professionals through service delivery, education and legislation advocacy initiatives.

### Alignment to legislation

Legislation
Medicines and Poisons Act 2019 and Medicines and Poisons (Medicines) Regulation 2021

### Alignment to National and State Government strategies

Strategy name	How does this strategy align?
National Immunisation Strategy for Australia 2019 to 2024	The National Immunisation Strategy comprises the following 8 key strategic priority areas to complement and strengthen the National Immunisation Program (NIP). The NIP consists of a schedule of recommended vaccines by age group and/or medical risk, made available free of charge to Australians in those age groups and risk groups. The National Immunisation Strategy has a key target to 'work towards achieving immunisation coverage rates of 95% for children aged 1, 2 and 5 years'. Council's immunisation strategy outlines how Council delivers services to support implementation of the NIP and to increase immunisation coverage rates within the City of Logan.
Queensland Health Immunisation Strategy 2017–2022	<ul> <li>The Queensland Health strategy has 5 key focus areas:</li> <li>Childhood immunisation</li> <li>Adolescents</li> <li>People with specific vaccination needs</li> <li>Communication and education</li> <li>Monitoring, surveillance and research.</li> </ul>

	Through a partnership framework, Council's immunisation strategy helps to deliver positive outcomes under these 5 focus areas. Under the NIP Schedule Queensland, Queensland Health provides state funded vaccines to Council for those people who are eligible. In addition, Queensland Health provides grant funding to support the operational delivery of community clinics and the school immunisation program. Under our Immunisation Strategy, we provide additional funding to provide a range of services to the community to increase overall immunisation coverage rates for all ages groups and risk groups under the NIP Schedule Queensland.
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### Alignment to other Council strategies

Strategy name
Access and Inclusion Plan 2019 – 2022
Environmental Health Strategy 2022 - 2026
Health Management Protocol

# **Strategy direction**

### Where are we now?

We provide a variety of immunisation services to the community and our staff with the goal of maintaining and improving vaccination rates. Services are delivered through:

- community immunisation clinics
- school immunisation program
- Logan Hospital immunisation program including pregnancy influenza clinic
- outreach immunisation program
- at risk influenza immunisation program
- at risk staff vaccination program
- staff influenza immunisation program
- adhoc corporate and public programs.

### Vulnerable Communities

### Culturally and Linguistically Diverse (CALD) communities

The City of Logan is one of the most diverse cities in Queensland and is home to more than 217 nationalities and cultures. It is generally recognised that people from CALD communities face a range of complex issues including discrimination, prejudice and difficulties assimilating within the broader Australian culture (Bartels, L 2011). We recognise that people within CALD communities often face additional barriers such as social isolation, language challenges and a lack of knowledge about their rights and available services. These factors can contribute to people from CALD communities being less able to access immunisation services.



#### **Aboriginal and Torres Strait Islander**

Aboriginal and Torres Strait Islander people are often affected by vaccine preventable diseases (VPDs) at a higher rate than non-Indigenous Australians. Our services will help close the gap in immunisation rates between Aboriginal and Torres Strait and non-Indigenous people by providing regular, flexible and accessible immunisation services.

### **Community Feedback**

#### **Community Clinics Online Feedback**

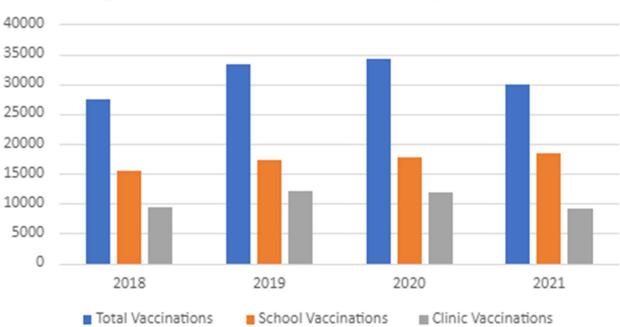
Since 2019, our immunisation program has offered an online mechanism for customers to provide feedback on their experiences using the service. Based on the results from the 589 responses received, our services were rated at 9.62 out of 10 for satisfaction.

#### Logan Listens: Residents' Survey

Since 2011, we have surveyed City of Logan residents to gauge their satisfaction with our core services. In terms of quality lifestyles, residents are asked to rate on a scale of 1 to 5, how satisfied they are with 'quality lifestyle programs' that we deliver. Results indicate that our residents place very high importance on the delivery of immunisation services. Additionally, in the 2020 Residents' Survey, the immunisation program ranked in the top 4 services that should be given priority into the future.

### **Our Vaccination Services**

The number of vaccines administered through our services has increased by more than 20 per cent since the previous immunisation strategy started in 2018, see Figure 1 below.



### Figure 1: Number of Vaccinations per Annum

#### **Digital Immunisation Service Solution**

We are committed to the continual improvement of our services and moving towards the implementation of an electronic immunisation consent form to deliver greater functionality and efficiency for all immunisation services from end to end, through a user-friendly, intuitive and simple language form that caters for client needs, including those with low literacy skills or from CALD communities is a high priority. The system will create benefits from automation for numerous back-office functions – both at immunisation clinics and in the office reducing data entry time and improve data accuracy. Additionally, environmental benefits will be achieved through a reduction in printing and disposal of paper forms.

#### **COVID–19 Vaccination Services**

Our nurses and staff will continue to meet qualification and training requirements should our services be required to assist or administer COVID-19 vaccines through our services or vaccination hubs as resources permit.

#### Where are we going?

We will continue to deliver regular, flexible and accessible immunisation services to the community.

It is intended that immunisation services will ensure the community feel comfortable attending our clinics and enjoy the friendly, free-of-charge service provided.

### Where do we want be?

Residents of the City of Logan are fully immunised at or above the state-wide average immunisation rate. Our staff are provided with the necessary vaccinations relevant to their roles as well as offered annual influenza vaccinations.



### Outcomes

Implementation of the Immunisation Strategy 2022–2025 is expected to:

- provide vaccinations for the community, based on the National Immunisation Program Schedule via community clinics, the school immunisation program, outreach services and specialised clinics
- address community immunisation levels and deliver immunisation services to areas with the highest need
- build relationships with groups that do not traditionally access health care services by providing regular, flexible and accessible immunisation services to our community
- play an essential role in protecting the City of Logan community, particularly children, against vaccine preventable diseases
- promote immunisation as a vital health issue, and its benefits to the community
- ensure the community feel comfortable attending our clinics and enjoy the friendly, free-of-charge service provided with no appointment necessary.

### **Policy position**

We are committed to delivering community-based immunisation in a safe and effective way to protect children and adults against certain preventable diseases to contribute towards national goals of achieving and maintaining a vaccination rate of 95 per cent.

Our immunisation services are delivered in accordance with following:

• The Australian Immunisation Handbook (digital handbook)

Published by the National Health and Medical Research Council, the Australian Immunisation Handbook offers immunisation providers clear guidance about vaccination practice. The handbook outlines vaccination procedures with the standard vaccination schedule, vaccination for special risk groups, and vaccines listed by disease.

The handbook as an online version, reviewed 3 times per year and updates are made as required, is considered industry wide as principal reference material. It also contains the Australian Standard Vaccination Schedule which incorporates all vaccines (funded and non-funded) recommended by the National Health and Medical Research Council.

• National Immunisation Program Schedule

The National Immunisation Program Schedule provides a list of all currently funded vaccines available under the National Immunisation Program (see Attachment 1). We provide the vaccinations on the National Immunisation Program Schedule (Queensland) free to eligible residents and non-residents.

• Queensland's Medicines and Poisons (Medicines) Regulation 2021

The Medicines and Poisons (Medicines) Regulation 2021 (the Regulation) grants health professionals authority to handle and administer various vaccines and medicines. Under the regulation a Registered Nurse endorsed to practice under an immunisation program is authorised to possess a restricted drug. The Regulation further states that an Immunisation Program Nurse is authorised to administer vaccines under the supervision of a doctor or an approved Drug Therapy Protocol.

There is no legislation requiring local governments to deliver immunisation services. However, we have a proud history of providing proactive immunisation services to our community.

• Health Management Protocol for Logan City Council Immunisation

The Health Management Protocol supports and details the clinical use, being the administration of vaccinations and includes the following information:

o procedures for clinical assessment, management and follow-up of patients

- o procedures for obtaining valid consent
- o name, form and strength of the drug and the condition/situation for which it is intended
- $\circ \quad \mbox{recommended dose of the drug}$
- $\circ$  route of administration of the drug
- procedures for recording vaccination, documenting and notifying adverse reactions to vaccinations
- type of equipment and management procedures required for management of an emergency associated with the use of the drug.

# **Strategy implementation**

### **Financial impacts**

Our immunisation services are funded through a combination of grants and contributions from the State Government, Council funding and other revenue from the sale of vaccines and cost recovery for vaccination services.



# Key areas of interest

The City of Logan has historically had low vaccination rates. We will continue to provide regular, flexible and accessible immunisation services together with marketing and promotion services to educate the community on the safety and effectiveness of immunisation with the aim of improving vaccination rates. This will be achieved through the following 8 key priority areas:

- community immunisation clinics
- school immunisation program
- Logan Hospital immunisation program
- outreach immunisation program
- at-risk influenza immunisation program
- at-risk staff immunisation program
- staff influenza immunisation program
- corporate and public events.

# **Strategy action plan**

### Key priority area 1: Community Immunisation Clinics

#	Action	Lead responsibility	Key stakeholders	Performance indicators	Target
	We will deliver 11 community clinics throughout the city each	Environmental Health &	Queensland Health – Metro South Public	Number of clinics delivered per week	11 community clinics delivered per week
1.1	week (as per Attachment 2).	Immunisation Program	Health Unit Community members	Number of vaccinations delivered per annum	Maintain or increase the number of vaccinations delivered per annum

Key	priority	area 2:	School	Immunisation	Program
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#	Action	Lead responsibility	Key stakeholders	Performance indicators	Target
				Per cent of secondary schools in the City of Logan and Redland City participating in the school immunisation program	100 per cent of schools participating per annum
				Per cent of consent forms returned	95 per cent of consent forms returned
2.1	Deliver the school immunisation program, in accordance with the contract with Queensland Health, to all secondary schools within the City of Logan and Redland City that choose to participate.	Environmental Health & Immunisation Program	Queensland Health – Metro South Public Health Unit Community members	Per cent of students who do not return a consent form are followed up	95 per cent of parents of students who do not return a consent form are followed up
				Per cent of students who returned yes consent forms vaccinated	Vaccinate 95 per cent of students who returned yes consent forms
				Per cent of the eligible student population vaccinated	Vaccinate at least 75 per cent of the eligible population

### Key priority area 3: Logan Hospital Immunisation Program

#	Action	Lead responsibility	Key stakeholders	Performance indicators	Target
3.1	Deliver weekly clinics at the Logan Hospital, specifically for the antenatal clinic, providing vaccinations to new babies and information to their parents on how to access our immunisation services in the future.	Environmental Health & Immunisation Program	Queensland Health – Metro South Public Health Unit Community members	Number of vaccinations provided per annum	Provide at least 600 vaccinations per annum

### Key priority area 4: Outreach Immunisation Program

#	Action	Lead responsibility	Key stakeholders	Performance indicators	Target		
	Provide outreach immunisation services in people's homes for persons:			Number of days services are provided per annum	Services provided at least 45 days per annum		
4.1	<ul> <li>overdue for vaccinations</li> <li>who may have difficulty for whatever reason in accessing immunisation services</li> </ul>	Environmental Health & Immunisation	Health &	Health &	Queensland Health – Metro South Public Health Unit	Number of vaccinations provided per annum	Provide at least 1,000 vaccinations per annum
	<ul> <li>requiring immunisation and residing in the same residence where multiple people live</li> <li>referred from Logan Hospital</li> <li>from CALD communities.</li> </ul>	Program	Community members	Per cent of eligible people who applied were visited and received their vaccinations	95 per cent of eligible people who applied were visited and received their vaccinations		

### Key priority area 5: At-Risk Influenza Immunisation Program

#	Action	Lead responsibility	Key stakeholders	Performance indicators	Target
5.1	Delivery of a series of drop- in clinics at 6 community venues from April each year to vaccinate medically at-risk people, which includes those over 65 years of age, Aboriginal and Torres Strait Islanders aged 6 months to 5 years or over 15 years of age, women during pregnancy, diabetics, severe asthmatics or the chronically obese.	Environmental Health & Immunisation Program	Queensland Health – Metro South Public Health Unit Community members	Number of clinics provided per annum	Deliver at least 6 specialist clinics per annum



### Key priority area 6: At-Risk Staff Immunisation Program

#	Action	Lead responsibility	Key stakeholders	Performance indicators	Target
	We will deliver vaccinations to our staff who are in positions identified as at risk	Environmental	Queensland Health – Metro South Public	Per cent of identified at-risk workers are reviewed by our immunisation team	100 per cent of identified at-risk staff are reviewed
6.1	of infection by a vaccine preventable disease, as specified in their position descriptions.	Immunisation Program	Health Unit	Per cent of identified at-risk workers are offered vaccination through our clinics	100 per cent of identified at-risk workers are offered vaccination

### Key priority area 7: Staff Influenza Immunisation Program

#	Action	Lead responsibility	Key stakeholders	Performance indicators	Target
7 1	We will ensure all Councillors and staff have the opportunity to be	Environmental Health &	Queensland Health – Metro South Public	Per cent of Councillors and staff offered free influenza vaccinations per annum	100 per cent of Councillors and staff offered free influenza vaccinations
7.1	vaccinated for influenza by the end of April every year.	Immunisation Program	Health Unit Council staff	Number of free influenza vaccinations delivered to Councillors and Council staff per annum	Provide at least 900 vaccinations per annum

### Key priority area 8: Corporate and Public Events

#	Action	Lead responsibility	Key stakeholders	Performance indicators	Target
8.1	Upon request, we will provide corporate influenza vaccinations on a cost recovery basis.	Environmental Health & Immunisation Program	Queensland Health – Metro South Public Health Unit Corporations Community members	Number of corporate influenza vaccinations delivered per annum	95 per cent of requested corporate clinics provided per annum

# **Strategy management and review**

### How will we know we are achieving the strategy?

The action plan provides individual deliverables which are anticipated to be provided annually during the life of the strategy.

Performance indicators built into each action item provide tangible metrics to assess successful service delivery, allow us to accurately measure service delivery success, develop benchmarking metrics and facilitate evaluation of service delivery trends.

### Strategy amendment controls and procedure

Annual review results, when coupled with internal consultation, contribute to shaping the development and delivery of the next year's strategic actions. Reviews are not limited strictly to annual reviews, legislative, political, changes to funding or similar scenarios may trigger an 'as needed' review.

### How will the performance of delivering this strategy be reported?

Each action item reflects program reporting requirements and will be reported as part of existing operational and performance reporting processes. Further reports are collated as part of our legislative and contractual requirements with the State Government.

# Glossary

Term	Definition	
CALD	Culturally and linguistically diverse	
NIP	National Immunisation Program	
PCYC Police Citizens Youth Club		
The handbook Australian Immunisation Handbook (digital handbook)		
The strategy	Immunisation Strategy 2022-2025	
The action plan	Immunisation Strategy Action Plan	
VPDs	Vaccine preventable diseases	

# **Appendix A**

### National Immunisation Program Schedule 1 July 2020





Age	Disease	Vaccine Brand	Notes		
Birth	Hepatitis B (usually offered in hospital)	H-B-Vax <sup>®</sup> II Paediatric or Engerix B <sup>®</sup> Paediatric	Hepatitis B vaccine: Should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.		
2 months Can be given from	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, Haemophilus influenzae type b (Hib)</li> </ul>	Infanrix® hexa	Rotavirus vaccine: First dose must be given by 14 weeks of age.		
6 weeks of age	Rotavirus	Rotarix®	Meningococcal B vaccine: All Aboriginal and Torres Strait Islander children from 6 weeks of age		
	Pneumococcal	Prevenar 13 <sup>8</sup>	with a three year catch-up program for Aboriginal and Torres Strait Islander children aged less than 2 years old until 30 June 2023. Refer to the Australian Immunisation Handbook (the		
	Meningococcal B (Indigenous children)	Bexsero®	Handbook) for dose intervals.		
4 months	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, Haemophilus influenzae type b (Hib)</li> </ul>	Infanrix® hexa	Rotavirus vaccine: The second dose must be given by 24 weeks of age.		
	Rotavirus	Rotarix®			
	Pneumococcal	Prevenar 13 <sup>a</sup>			
	Meningococcal B (Indigenous children)	Bexsero®			
6 months	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, Haemophilus influenzae type b (Hib)</li> </ul>	Infanrix <sup>®</sup> hexa	Pneumococcal vaccine: An additional (3rd) dose of 13vPCV is required for Indigenous children living in WA, NT, SA, Old, and all children with specified medical risk conditions for pneumococci		
	<ul> <li>Pneumococcal (All children with specified medical risk conditions)</li> </ul>	Prevenar 13®	disease. Refer to the Handbook.		
	Pneumococcal (Indigenous children living in WA, NT, SA, Qld)	Prevenar 13®	Meningococcal B vaccine: An additional (3rd) dose of Bexsero® is required for Indigenous of with specified medical risk conditions for meningococcal disease, <u>Refer to the Handbook</u> .		
	Meningococcal B (Indigenous children with specified medical risk conditions)	Bexsero®			
12 months	Meningococcal ACWY	Nimenrix®			
	Measles, mumps, rubella	M-M-R <sup>®</sup> II or Priorix <sup>®</sup>			
	Pneumococcal	Prevenar 13 <sup>®</sup>			
	Meningococcal B (Indigenous children)	Bexsero®			
	Haemophilus influenzae type b (Hib)	ActHIB <sup>®</sup>	Hepatitis A vaccine: First dose of the 2-dose hepatitis A vaccination schedule if not previously		
18 months	<ul> <li>Measles, mumps, rubella, varicella (chickenpox)</li> </ul>	Priorix-Tetra® or ProQuad®	received a dose. The second dose is now scheduled at 4 years.		
	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough)</li> </ul>	Infanrix® or Tripacel®			
	Hepatitis A (Indigenous children in WA, NT, SA, Qld)	Vaqta® Paediatric			
4 years	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), polio</li> </ul>	Infanrix® IPV or Quadracel®	Pneumococcal vaccine: Administer first dose of 23vPPV at age 4 years, followed by second		
	<ul> <li>Pneumococcal (All children with specified medical risk conditions)</li> </ul>	Pneumovax 23#	dose of 23vPPV at least 5 years later. Refer to the Handbook for risk conditions.		
	<ul> <li>Pneumococcal (Indigenous children living in WA, NT, SA, Qid)</li> </ul>	Pneumovax 23*	Hepatitis A vaccine: Not required if previously received 2 doses (first dose at age 212 months) at least 6 months apart.		
	Hepatitis A (Indigenous children in WA, NT, SA, Qld)	Vagta® Paediatric			

	(also see influenza vaccine ar	Adolescent vaccinat nd additional vaccination for	ion people with medical risk conditions)			
Age	Disease	Vaccine Brand	Notes			
12–13 years School program)	Diphtheria, tetanus, pertussis (whooping cough)     Human papillomavirus (HPV)	Boostrix® Gardasil®9	9 to <15 years: 2 doses, 6 mont medical conditions: 3 doses, 0,	HPV vaccine: Observe Gardasil <sup>®</sup> 9 dosing schedules by age and al-tisk conditions. 9 to <15 years: 2 doses, 6 months minimum interval. 215 years and/or have ce medical conditions: 3 doses, 0, 2 and 6 month schedule. Only 2 doses funded c unless a 12–<15 year old has certain medical risk factors.		
14-16 years School program)	Meningococcal ACWY	Nimenrix®				
	(also see influenza vaccine a	Adult vaccination	people with medical risk conditions)			
Age	Disease	Vaccine Brand	Notes			
50 years and over	Pneumococcal (Indigenous adults)	Prevenar 13 <sup>®</sup> and Pneumov	x 23 <sup>e</sup> Pneumococcal vaccine: Administer later (2–12 months acceptable), ther			
70 years and over	<ul> <li>Pneumococcal (non-Indigenous adults)</li> </ul>	Prevenar 13®				
70–79 years	Shingles (herpes zoster)	Zostavax <sup>a</sup>		Shingles vaccine: All people aged 70 years old with a five year catch-up program for peop 71–79 years old until 31 October 2021.		
Pregnant women	Pertussis (whooping cough)	Boostrix® or Adacel®	Pertussis vaccine: Single dose reco but may be given up until delivery.	Pertussis vaccine: Single dose recommended each pregnancy, ideally between 20–32 weeks, but may be given up until delivery.		
	Additional vaccinat	ion for people with me	lical risk conditions			
Age/risk condition Disease		Vaccine Brand	Notes			
All people with asplenia, hyposplenia, complement deficiency and those undergoing reatment with eculizumab	Meningococcal ACWY     Meningococcal B	Nimenrix® Bexsero®	Meningococcal vaccines: Refer to t required vary with age.	Meningococcal vaccines: Refer to the Handbook for dosing schedule. The number of dose required vary with age.		
People ≥5 years with asplenia or hyposplenia	• Haemophilus influenzae type b (Hib)	Act-Hib <sup>a</sup>	vaccinated. (Note that all children a	Hib vaccine: A single dose is required if the person was not vaccinated in infancy or incomplete vaccinated. (Note that all children aged <5 years are recommended to complete Hib vaccination regardless of asplenia or hyposplenia)		
People <12 months of age with conditions that increase their risk of pneumococcal disease	Pneumococcal	Prevenar 13 <sup>®</sup> and Pneumovax 23 <sup>®</sup>	followed by a routine booster at 12	Pneumococcal vaccine: An additional (3rd) dose of 13vPCV is required at 6 months of age, followed by a routine booster at 12 months (all children), then a first dose of 23vPPV at age 4 years, followed by second dose of 23vPPV at least 5 years later. Refer to the Handbook for risk conditions.		
People 212 months of age with conditions that increase their risk of pneumococcal disease	Pneumococcal	Prevenar 13® and Pneumovax 23®		Pneumococcal vaccine: Administer a dose of I3vPCV at diagnosis followed by 2 doses of 23vP Refer to the Handbook for dose intervals and <u>risk conditions</u> .		
Funded annual influenza vaccination (Refer to annual ATAGI advice on seasonal influenza vaccines)		catch	ople aged less than 20 years are eligible for free up vaccines. The number and range of vaccines sees that are eligible for NIP funded catch-up is	State/Territory Australian Capital Territory	Contact Number (02) 5124 9800	
Children 6 months to less than 5 years of age			and obses that are engine for NP number catch-up is different for people aged less than 10 years and those aged 10–19 years. (08) 8922 804			
People 6 months and over with sp	ecified medical risk conditions			Queensland South Australia	HEALTH (13 4325 84) 1300 232 272	
People 65 years and over			Adult refugees and humanitarian entrants are eligible for free catch-up vaccines. Refer to NIP catch-up fact Tasmania 1800 671 738			
Pregnant women			sheets. Victoria 1300 882 008 Western Australia (08) 9321 1312			

# **Appendix B**

### **Community Clinic Schedule of Locations and Times**

### **Flagstone Community Centre**

19 Trailblazer Drive, Flagstone Monday excluding Public Holidays 9 am–10 am

### **Greenbank State School**

Gate 8, Old School Building 24-36 Goodna Road, Greenbank Monday 11 am–11:45 am (closed during school and public holidays)

#### Jimboomba Library

18-22 Honora Street, Jimboomba Thursday 11 am–Noon

### **Browns Plains Early Years Centre**

Cnr Wineglass and Middle Roads, Hillcrest Thursday Noon–1 pm

#### Yarrabilba Family and Community Place

3 Darnell Street, Yarrabilba Wednesday 9 am–10 am

#### **PCYC - Crestmead Community Centre**

Gimlet Street, Crestmead Wednesday 11 am–11:30 am

### **Beenleigh Library**

Crete Street, Beenleigh Thursday 9 am–10 am

### Logan Hyperdome Library

66 Mandew Street, Shailer Park Saturday excluding Public Holidays 9 am–11 am

#### Logan Central Library

26 Wilbur Street, Logan Central Thursday 3.30 pm–7 pm

#### Springwood Child Health Centre

16 Cinderella Dr Springwood Friday excluding Public Holidays 9 am–10 am

### Marsden Library

35 Chambers Flat Road, Marsden Friday excluding Public Holidays Noon–1 pm