

38. Managing Immunisation



Introduction

Immunisation of children and adults significantly reduces the risks, complications, and mortality associated with vaccine preventable diseases. Children's centre staff also benefit from up to date immunisation in the reduction of risks in pregnancy from infectious diseases. Keeping up to date immunisation records for children, children's centre educators and other staff members will facilitate immunisation and the control of infectious diseases during outbreaks in the centre.

Purpose

The most effective method of preventing certain infections is immunisation. Immunisation protects the person who has been immunised, children who are too young to be immunised, and other people who have been immunised but did not respond to the vaccination. Keeping up to date immunisation records for children, and centre staff will facilitate immunisation and the control of infectious diseases during outbreaks in the centre.

Goals – What are we going to do?

The centre will minimise risks, complications and the spread of vaccine preventable diseases, by encouraging children, children's centre staff and other staff members to have up to date immunisation in accordance with the Australian Standard Vaccination Schedule, and keeping an up to date register of children's and staff immunisation.

Strategies – How will it be done?

Since the introduction of vaccination for children in Australia in 1932, deaths from vaccine-preventable diseases have fallen by 99 per cent, despite a threefold increase in the Australian population over that period. Worldwide, it has been estimated that immunisation programmes prevent approximately three million deaths each year.

Immunisation is critical for the health of children and the wider community. For immunisation to provide the greatest benefit, a sufficient number of people need to be vaccinated to halt the spread of bacteria and viruses that cause disease - a phenomenon called 'herd immunity'. The proportion of the population that has to be immune to interrupt disease transmission differs for each vaccine preventable disease, but is around 90 per cent for most diseases. For a highly infectious disease like measles, this is up to 95 per cent of the population. This emphasises the need to stay vigilant and ensure high coverage rates are achieved, not only at the national level, but also at the local level.

In Australia, immunisation coverage rates for children are high, with over 90 per cent of children fully immunised at one, two and five years of age. This high rate of immunisation helps to maintain community immunity, especially for those who are too young to be immunised or those that are not able to be immunised for medical reasons. Without herd immunity, rare diseases will become common again, causing more illness and deaths.

Immunisation is a simple, safe and highly effective way of protecting children and adults from harmful diseases before they come into contact with them. It is estimated that vaccinations currently save up to three million lives worldwide each year.

Immunisation uses the body's natural defence mechanism – the immune response – to build resistance to specific viral infections. When a person is vaccinated, their body produces an immune response in the same way their body would after exposure to a disease, but without the person suffering symptoms of the disease. When a person comes in contact with that disease in the future, their immune system will respond fast enough to prevent the person developing the disease.

Immunisation protects more than just one child's health. Vaccinating a child will reduce the opportunity for that child to pass that disease on to another – especially young babies who cannot yet be fully immunised.

When levels of immunisation in a community are sufficiently high, the risk of specific diseases can fall so low that even those who are too young or too sick to be given a vaccine will not be exposed to it. This communal or 'herd immunity' can save countless lives.

The Australian Government's Immunise Australia Program implements the National Immunisation Program (NIP) Schedule (attached), which currently includes vaccines against a total of 16 diseases.

Vaccine preventable diseases include:

- Diphtheria
- Measles
- Hepatitis A
- Hepatitis B
- Mumps
- Pertussis (whooping cough)
- Poliomyelitis
- Rubella (German measles)
- Pneumococcal disease
- Poliomyelitis (polio)
- Rotavirus
- Tetanus
- Chicken pox (varicella)
- Haemophilus Influenza type b (Hib)
- Meningococcal disease.
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Under the NSW Public Health Act 2010, vaccine preventable diseases must be notified to the local Public Health Unit on 1300 066 055. The Public Health Unit may need to review the centres vaccination register to determine which children are at risk from the outbreak.

Following assessment of the situation, the Public Health Officer may direct the director to exclude certain children for a period, or provide advice regarding preventive measures.

Note: Copies of all verbal or written instructions between centre and Public Health Unit are to be recorded and kept in the centres illness folder, the Approved Provider needs to be advised after the PHU has been notified and a copy of written or verbal report forwarded immediately.

Roles and Responsibilities

Approved Provider and Nominated Supervisor will:

- Display wall charts about immunisation in the centre foyer including the national immunisation schedule programme.
- Review children's immunisation each month, update the child's records kept at the service, and send reminder letters and emails for families
- Ensure that copies of each child's immunisation history statement are kept up to date in each child's file and entered into the Child Care management System (CCMS) to assist in flagging overdue immunisations.
- Not enrol a child into the centre unless approved documentation has been provided that confirms the child is fully immunised for their age, is on a catch up plan or has a medical reason not be immunised (see families will: section).
- Develop a staff immunisation record that documents each staff member's previous infection or immunisation (Staff handbook)
- Require all new and current staff to complete the staff immunisation record
- Regularly update staff immunisation records as staff become vaccinated
- Provide staff with information about vaccine-preventable diseases
- Take all reasonable steps to encourage non-immune staff to be vaccinated.
- Document advice given to educators and other staff, and any refusal to comply with vaccination requests.
- Notify families when an outbreak of a vaccine preventable disease occurs.
- Exclude any child who is not immunised or not fully immunised from the centre if and when an outbreak of a vaccine preventable infectious disease occurs to protect that child and to prevent further spread of infection. In the instance of the child being immunised and the Immunisation record not provided to the Service – the child would be viewed as not being immunised.
- Advise any staff members who fall pregnant to visit their GP immediately and have a test for Cytomegalovirus (CMV) to check their immunity. Any pregnant staff member who is at a heightened risk will not change nappies and will double glove when coming into contact with any body fluids, especially saliva.
- Be aware and inform families that homeopathic immunisation has not been proven to give protection against infectious diseases. Only conventional immunisation produces a measurable immune response, and homeopathic immunisation is not recommended as an alternative to conventional immunisation. Children who have only received homeopathic immunisation are considered not to be protected against vaccine preventable diseases and will not be enrolled.
- Be aware that Aboriginal and Torres Strait Islander children are at higher risk of many infectious diseases, especially respiratory and ear infections, and have a different immunisation schedule to non-Aboriginal and Torres Strait Islander children.

Staff and Educators will:

- Complete staff immunisation record upon employment at the centre
- Be aware that all Australians should have received vaccination in childhood against diphtheria, tetanus, pertussis, polio, measles, mumps and rubella. Adults who have not received these vaccinations should seek advice from their own doctor in relation to the requirements of the latest edition of the Australian immunisation handbook before commencing employment in childcare.
- Be aware of the recommended immunisation for staff and educators working in an early childhood education and care setting are the following:
 - Hepatitis A
 - Measles, mumps, rubella (MMR)
 - Varicella (for seronegative staff)
 - Adult Diphtheria, Tetanus, Acellular Pertussis (adult DTPa)
 - A dose of DTPa vaccine is recommended as a booster for staff and educators providing they have previously received a full course of vaccination for diphtheria and tetanus.
 - MMR vaccine is recommended for staff and educators born during or since 1966. Staff and educators should have evidence of receiving two doses of MMR vaccine. Educators and staff should have their rubella antibody status checked before employment and if seronegative they should have two doses of MMR vaccine one month apart, and have their rubella immunity checked to ensure they are seropositive before employment in an early childhood education and care setting. Pregnant educators and staff should not receive MMR vaccine, and MMR vaccine should be given at least 1 month before planning a pregnancy.
 - Varicella Vaccine is recommended for educators and staff who have not had varicella or are uncertain if they have had varicella. Such staff should seek advice from their own doctor in relation to the requirements of the latest edition of the Australian Immunisation Handbook before commencing employment in an early childhood education and care setting.
 - Hepatitis B is not recommended for educators and staff because of low risk of exposure. However if an educator or staff member is likely to be involved in an emergency procedure or giving first aid to children or they are at risk of exposure to blood or body fluids, they should discuss the risk of hepatitis B exposure with their doctor and have hepatitis B vaccinations if indicated.
- Recommended immunisation boosters for adults:
 - Diphtheria and tetanus (DTPa) age 15-17 and 50 years
 - Pneumococcal vaccine for those aged 65 years and over
 - Pneumococcal vaccine for Aboriginal and Torres Strait Islander people aged 50 years and over
 - Annual influenza vaccine for those aged 65 years and over
 - Annual influenza vaccine for Aboriginal and Torres Strait Islander people aged 50 years and over.
- Educators and staff are advised that before commencing work that the above recommendations for immunisation will minimise transmission and risks of those infectious diseases in children and staff. If a staff member has concerns about these diseases or immunisations they should seek medical advice from their doctor before commencing work.

- Educators and staff should be advised that if an outbreak of a vaccine preventable disease occurs in the centre, educators and staff should inform the Nominated Supervisor if they are not immunised against that disease. Non-immunised staff should consult their doctor to determine if it is appropriate for them not to attend work during the outbreak and discuss any issues relating to their immunisation or other medical management.

Families will:

- Provide the service with a copy of one or more of the following documents
 - An ACIR Immunisation History Statement which shows that the child is up to date with their scheduled vaccinations; or
 - An ACIR Immunisation History Form on which the immunisation provider has certified that the child is on a recognised catch-up schedule; or
 - An ACIR Immunisation Medical Exemption Form which has been certified by a GP
 - Provide the service with an updated copy of their child's current immunisation record every 6 months

Related Legislation

- Education and Care Services National Law Act
- Education and Care Services National Regulations: Regulations 77, 88, 90, 162

Links to other policies and documents

- National Immunisation Program (NIP) Schedule
- Staff Handbook
- Centre Enrolment Package
- Pregnancy in Early Childhood Policy

Links to Education and Care Services National Regulations: 77, 88, 90, 162

Links to National Quality Standards/Elements: 2.1

Sources

- Guide to the Education and Care Services National Law and the Education and Care Services National Regulations
- ECA Code of Ethics.
- Guide to the National Quality Standard.
- Staying Healthy in Child Care
- Australia Childhood Immunisation Register
<https://www.humanservices.gov.au/customer/services/medicare/australian-childhoodimmunisation-register>
- Immunise Australia Program
www.immunise.health.gov.au