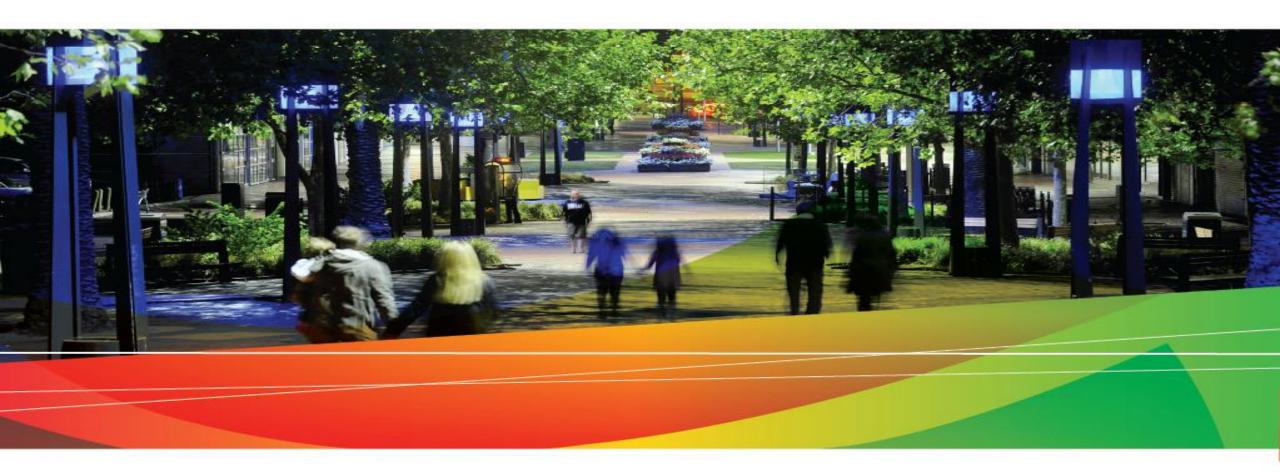
PHN Refugee Immunisation Update

Kate Russo: Immunisation Team Leader Mina Dalili: Refugee Immunisation Nurse





Acknowledgement of Country

We acknowledge the Traditional Custodians of this land, the Bunurong People, and pay respect to their Elders past and present. We recognise and respect their continuing connections to climate, Culture, Country and waters.



City of Greater Dandenong

- This session Covering catch up immunisation from our perspective at CGD Here's an overview:
- The prominent community groups we work with now are Afghani and Burmese
- Vietnamese is the most commonly spoken language after English
- At least 135 different languages are spoken in City of Greater Dandenong

Question for you?

How many antigens are children in Victoria offered up to Age 4?



Eligibility criteria for NIP vaccines (DH Nov 2023)

Access to free NIP vaccines requires a person to hold or be eligible for a Medicare card.

The program offers free essential vaccines to eligible people including:

- infants and children
- adolescents
- pregnant women
- adults and seniors
- Aboriginal and/or Torres Strait Islander people
- people with certain medical conditions that puts them at greater risk of certain disease.
- The program also covers free catch-up vaccinations if they were missed in childhood for:
 - · people aged less than 20 years old
 - refugees and humanitarian entrants of any age.
- The program funds all vaccines linked to family assistance payments.
- Ref: Immunisation schedule Victoria and vaccine eligibility criteria | health.vic.gov.au





Catch up basics and tips

- Any immunisation given after the recommended age is called a 'catch-up' immunisation.
- Catch-up vaccination aims to provide optimal protection against disease as quickly as possible by completing the ageappropriate vaccinations recommended.
- Catch up should be used when an individual is overdue required vaccinations and is therefore at risk from disease.
- Increasing the interval between doses of multi dose vaccines does not diminish the effectiveness of the vaccine
- Decreasing the interval between doses of vaccines may interfere with the antibody response and protection
- Live vaccines should be given simultaneously or separated by a month, to reduce interference by any antibody response





Assess all records for Immunisation History: hard copy, AIR, HAPlite

AIR: via PRODA

HAPlite

Arabic Calender converter

Translate app: Google translate app Apple Translate App

Start with the premise if there is no record then the vaccine hasn't been given.

All doses count, don't start course again for NIP vaccines*.

Give everything that is due on the day.

Use the standard intervals and ages recommended in the NIP schedule once up to date.

If antigens are required that are only available in combination vaccines it is acceptable to use age-appropriate combination vaccines, even if this means that the number of doses of another antigen exceeds the number required in a schedule.

E.g. Hib component of HEXA for >5-years-old



Tips for planning a catch-up immunisation schedule



Assess immunisation status.

Use the <u>principles of catch-up vaccination</u> to develop an immunisation catch-up schedule based on the previous documented immunisation history.

Use the Australian Immunisation Handbook <u>catch-up resources</u> to plan recommended catch-up vaccinations and determine number of visits required.

Ensure correct vaccine brand and dosing intervals for age.

Always check the Australian Immunisation Register records prior to each catchup vaccination visit.

Report all vaccinations administered to the Australian Immunisation Register.

Developing the catch up



Correct Name (vital to ensure accuracy of records)

Age of individual (DOB)

Work out age accurately, especially for children

over or under 10 years

in weeks and days for infant (rotavirus)

Build on previous doses

Number of vaccines required

What is not required e.g. rotavirus vaccines due to age

Should be developed by clinical staff. Nurses require a doctor's order if not an accredited immuniser.

Tools of the Trade



- National catch-up immunisation tool <10 years of age.
- Victorian immunisation catch-up guidelines for 10 years and older (health.vic.gov.au)
- Translating Overseas Immunisation Records Aid

Vaccine side effects (healthtranslations.vic.gov.au)

CGD catch up templates (hard copies)

Typical scenario for under 10-year-old arriving as a Refugee from Afghanistan

Zara

DOB: 05/03/2021 (3 years)

Female

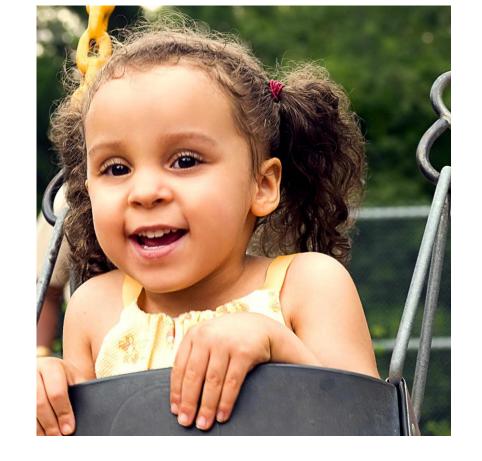
Documented Immunisation History:

Dose 1 Measles (monovalent) on 07/01/2022

Dose 1 OPV (oral polio) on 06/03/2021*

What would you give today?

What next?





- Give today: 4 injections
- What's next?

GREATER DANDENONG
City of Opportunity

CGD Immunisation C	atch-	Up_		CIRV			EEATER DANDENONG of Opportunity
Name: Zara HABIB				Ph		Date for Next II	nmunisation:
Address: Parent/Guardian:						2 rd visit:	
DOB:05/03/2021		Current Age:	3		Female	4 th visit:	
Immunisation Nurse Use Only							
fedicare Number:		Language:			Interpreter: YES	S/NO	
dditional Notes:							
ast vaccines added to AIR: YES/N	D Dat	te added:			Date Scanned to Obj	ective	
Vi	No	4st Jane	2nd	4	2rd -l	4th J	Eth J

IST VACCINES Added to AIR. TES/IV	io Dat	e added.		Date Scanned to Obj		
Vaccine	No. Extra	1st dose (Date)	2 nd dose (Date)	3 rd dose (Date)	4 th dose (Date)	5 th dose (Date)
DTPa-hepB-IPV-Hib (Infanrix-hexa)		DUE NOW	(Duto)	(Duto)	(Duto)	(Duto)
DTPa-IPV (Infanrix-IPV/Quadracel)						
OTPa (Infanrix/Tripacel)						
Pneumococcal (Prevenar 13)		DUE NOW				
Hib						
Hepatitis B (adult/gaed.) (LtB.vax/Engerixb)						
IPV/OPV (lpol)						
dTpa-IPV (Boostrix IPV/Adacel Polio)						
dTpa (Boostrix)						
Measles/Mumps/Rubella (Priorix/MMR11)		DUE NOW				
MMRV (Priorix-Tetra/ProQuad)						
Meningococcal ACWY (Nimenrix)		DUE NOW				
HPV (Gardasil /Gardasil 9)						
Varicella (Varilrix/ <u>Varivax</u>)						
Influenza						
COVID-19						
Other						
Other						

This client is currently on an Immunisation catch- up schedule with the City of Greater Dandenong. Provider No: V16271F. *If you require further information, please contact our Immunisation Team*Phone: 8571 1477. E: immunisation@cgd.vic.gov.au Web: www.greaterdandenong.com PO Box 200 Dandenong VIC 3175

Nurse Immuniser:			Date:
	(print name)	(signature)	

CGD	Immun	isation	Catch-U
(All Ame	-1		





Date for Next Immunisation:

Name: Zara HABIB	
Address:	

Parent/Guardian: DOB:05/03/2021

Female

Immunisation Nurse Use Only

Interpreter: YES/NO

Additional Notes:

Past vaccines added to AIR: YES/NO Date added:

Language:

Current Age: 3

Past vaccines added to AIR: YES/N	O Dat	e added:		Date Scanned to Obje	ective	
Vaccine	No.	1st dose	2 nd dose	3 rd dose	4 th dose	5 th dose
	Extra	(Date)	(Date)	(Date)	(Date)	(Date)
DTPa-hepB-IPV-Hib		DUE NOW	! MONTH	3 MONTHS		
(Infanrix-hexa)		DOLITON	LATER	LATER		
DTPa-IPV					@ 4 <u>yrs</u> of	
(Infanrix-IPV/Quadracel)					age	
DIPa						
(Infanrix/Tripacel)						
Pneumococcal		DUE NOW				
(Prevenar 13)						
Hib						
Hepatitis B (adult/paed.)						
(HBvax/Engerixb)						
IPV/OPV						
(leal)						
dTpa-IPV						
(Boostrix IPV/Adacel Polio)						
dIpa (Boostrix)						
Measles/Mumps/Rubel						
la		DUE NOW				
MMRV			DUE IN 1			
(Priorix-Tetra/ProQuad)			month			
Meningococcal		DUE NOW				
ACWY		BOLITON				
HPV						
(Gardasil /Gardasil 9)						
Varicella						
(Varilrix/ <u>Variyax</u>)						
Influenza						
COVID-19						
Other						
Other						

This client is currently on an Immunisation catch- up schedule with the City of Greater Dandenong. Provider No: V16271	F.
If you require further information, please contact our Immunisation Team	
Phone: 8571 1477. E: immunisation@cod vic gov au Web: www.greaterdandenong.com PO Box 200 Dandenong VIC 3	175

Immunise

(print name)

(signature)

Date:



3 more visits with decreasing injections required each time.

Typical scenario for 10-19 year old arriving as a Refugee

Moey

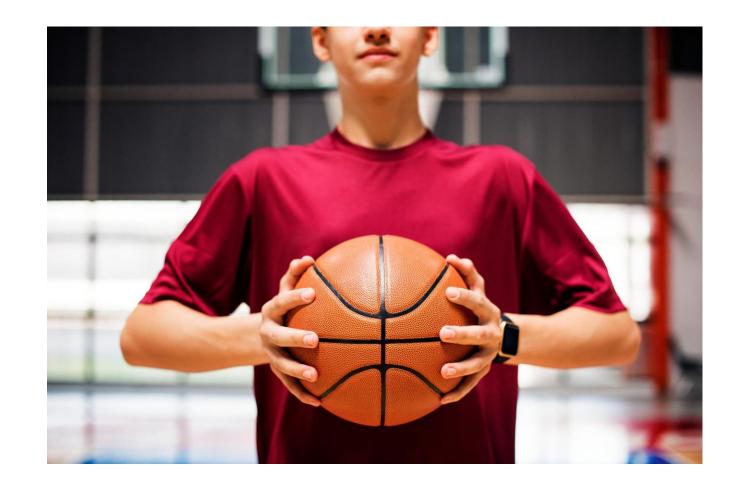
DOB: 04/04/2011 (13 years)

Male

Documented Immunisation History:

Dose 1 OPV (oral polio) on 07/04/2022

What would you give today? What next?





- Yes, 6 injections at one time.
- It is safe
- 2.5 cm apart
- All in the approach.

Name: Moey DONTWOR	RRY		Ph:			ation next du
Address:						
DOB:04042011		Current	Age 13:	Male	3 rd visit: _ 4 th visit:	
I understand the information benefits of vaccinating or not			isation for my child/r	nyself and had the		
I consent for my child /mysel	f to rece	eive the catch-up va	ocination schedule a	s below.		
Signature Parent/Guardia	an/Self				Date / _	/
Print Name:			Relationship to	child:		
Immunisation Nurse Use Only						
Medicare Number:		Language:	In	terpreter required:		
Additional Notes:						
Past vaccines added to AIR?			Date added:			
Vaccines	No. Extr	1 st dose (Date)	2 nd dose (Date)	3 rd dose (Date)	4 th dose (Date)	5 th dose (Date)
dTpa (Diptheria/Tetanus/Pertussis) (Boostrix/Adacel)	3	DUE NOW	(Date)	108127	- IDalei	(Date)
Diptheria/Tetanus (Tet-tox absorb/ADT)						
(lpol)	2		DUE NOW			
Hepatitis B (<mark>adult)</mark>	2	DUE NOW				
Measles/Mumps/Rubella (Priorix/MMR11	1					
Varicella (Varilrix/Varivax) 2 doses ≥14yrs	1					
Priorix tetra/ProQuad)	1	DUE NOW				
Meningococcal ACWY	1	DUE NOW				
	1	DUE NOW				
(Gardasil)						

2 more visits, with deceasing injections needed

Person 10-19years			D.			y of Opportunity
Name: Moey DONTWORRY			Ph:			ation next due:
Address:					2 nd visit:	
DOB:04042011		Current	Age 13:	Male		
I understand the information	aiven t	o me about immur	nisation for my child/n	ovself and had the	4 th visit:	
benefits of vaccinating or not	_		isation for my orman	nysen and nad the	opportunity to disc	and the fine and
I consent for my child /myself	f to rece	eive the catch-up v	accination schedule a	s below.		
Signature Parent/Guardia	n/Self	:			Date / _	/
Print Name:			Relationship to	child:		
Immunisation Nurse Use Only						
Medicare Number:		Language:	Int	terpreter required:		
Additional Notes:						
Past vaccines added to AIR?	Y/N		Date added:			
Vaccines	No. Extr	1 st dose (Date)	2 nd dose (Date)	3 rd dose	4 th dose (Date)	5 th dose (Date)
dTpa (Diotheria/Tetanus/Pertussis)			1 month	1 month	(Date)	(Date)
(Boostrix/Adacel)	3	DUE NOW	later	later		
Diptheria/Tetanus						
Polio	_			1 month		
(lpol)	2		DUE NOW	later		
Hepatitis B		B. 15 110111	At least 4			
(adult)	2	DUE NOW	months later			
Measles/Mumps/Rubella			1 month			
Priorix/MMR11	1		later			
Varicella (Varilrix/Varivax) 2 doses ≥14vrs	1					
MMRV < 14yrs						
Priorix	1	DUE NOW				
tetra/ProQuad)						
		DUE NOW				
Meningococcal	1					1
tetra/ProQuad) Meningococcal ACWY HPV 12-25 (inclusive)						
Meningococcal ACWY	1	DUE NOW				
Meningococcal ACWY HPV 12-25 (inclusive)		DUE NOW				



A newly arrived Adult refugee

Cool Mina

DOB: 01/01/1965 (59 years)*

Female

Documented Immunisation History:

Varicella Immunity is recorded.

What would you give today? What next?

- * This date is often automatically recorded if unknown on arrival. Important to remember when setting up My.Gov, Medicare or reporting to AIR that the same details are used. This decreases the risk of another record being established.
- This can occur if they find existing records with correct birthdate and sometimes correct spelling of their name.
- This needs to be updated officially.





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CGD Immunisation Catch Up

Person 26+ years

Name: Mina COOL Ph:

Address:

DOB: 01/01/1965 Current Age: 59 Female

I understand the information given to me about immunisation for myself and had the opportunity to discuss the risks and benefits of vaccinating or not-vaccinating.

I consent to receive the catch-up vaccination schedule as below.

Signature:	Date /	/

Immunisation Nurse Use Only

Medicare Number: Language: Interpreter required:

Additional Notes: PREGNANT: NO/YES/NA AIR Check:

Past vaccines added to AIR? Medical history: Allergies:

Vaccines	No. Extr	1 st dose (Date)	2 nd dose (Date)	3 rd dose (Date)	4 th dose (Date)	5 th dose	
dTpa (Olpheda(Tetanua/Pertussis) (Boostrix/Adacel)	3	Due now					
Diptheria/Tetanus (Tet-tox absorb/ADT)							
(lpol)	3	Due now					
Hepatitis B (adult) (HBvax/Engerix b)	3	Due now					
Measles/Mumps/Rubella (Priorix/MMR11)		BORN BEFORE 66	BORN BEFORE 66				
Varicella (Varilrix/Varivax)		NATURAL IMMUNITY	NATURAL IMMUNITY				
Influenza (If <u>eligible)</u>							
COVID-19							
Other							

3 visits to complete catch up

Important to record serology onto AIR

CGD Immunisation Catch Up

Person 26+ years

Name: Mina COOL P

Address

DOB: 01/01/1965 Current Age: 59 Female

I understand the information given to me about immunisation for myself and had the opportunity to discuss the risks and benefits of vaccinating or not-vaccinating.

City of Opportunity

I consent to receive the catch-up vaccination schedule as below.

Signature:		Date / /	
 Immunisation Nurse Use Only			
Medicare Number:	Language:	Interpreter required:	
Additional Notes:	PREGNANT: NO/YES/NA	AIR Check:	
Past vaccines added to AIR?	Medical history:	Allergies:	

Vaccines	No. Extr	1 st dose (Date)	2 nd dose (Date)	3 rd dose (Date)	4 th dose (Date)	5 th dose
dTpa (Clotheria/Tetanus/Pertussis) (Boostrix/Adacel)	3	Due now	1 month later	1 months later		
Diptheria/Tetanus (Tet-tox absorb/ADT)						
Polio ([pol)	3	Due now	1 month later	1 months later		
Hepatitis B (adult) (HBvax/Engerixh)	3	Due now	1 month later	3 months later		
Measles/Mumps/Rubella (Priorix/MMR11)		BORN BEFORE 66	BORN BEFORE 66			
Varicella (Varilrix/ <u>Variyax</u>)		NATURAL IMMUNITY	NATURAL IMMUNITY			
Influenza (If <u>eligible)</u>						
COVID-19						
Other						

This client is currently on an Immunisation catch- up schedule with the City of Greater Dandenong. Provider No: V16271F. If you require further information, please contact our Immunisation Team Phone: 8571 1477. E: refugeeimmunisation@cgd.vic.gov.au Web: www.greaterdandenong.com PO Box 200 Dandenong VIC 3175								
Nurse <u>Immuniser</u> :	(print <u>name)</u>	Date: (signature)						



The information you provide on this consent card is for the sole purpose of monitoring immunisation programs by the State and Australian Governments. All data will be kept confidential and identifying information will not be disclosed for any other purpose. You can access your information by contacting the City of Greater Dandenons.

Template









ame:		Ph:				
		PII.				
Address:						
OOB:	Cu	rrent Age:	F	emale/Male		
understand the information enefits of vaccinating or not			nisation for my chil	d/myself and had th	ne opportunity to di	scuss the risks a
consent for my child/myself	to receive	the catch-up va	accination schedule	as below.		
Parent/Guardian Signatu	re:			Date		
mmunisation Nurse Use Only						
edicare Number:			Language:		Interpreter:	
Iditional Notes:					AIR Check:	
st vaccines added to AIR? YES	MO Date	addad:			7111 011001	
st vaccines added to AIR? 123	No.	1st dose	2 nd dose	3 rd dose	4 th dose	5th dose
DTD- I D IDW III	Extra	(Date)	(Date)	(Date)	(Date)	(Date)
DTPa-hepB-IPV-Hib (Infanrix-hexa)						
DTPa-IPV						
(Infanrix-IPV/Quadracel) DTPa	+					
(Infanrix/Tripacel)						
Pneumococcal						
(Prevenar 13)	_					
Hib						
Hepatitis B (adult/gaed.)						
(HBvax/Engerixb) ADT						
(Diphtheria/tetanus)						
IPV/OPV						
(lpol)						
dTpa (Boostrix)						
Measles/Mumps/Rubella						
(Priorix/MMR11)						
MMRV (Priorix-Tetra/ProQuad)						
Meningococcal ACWY						
(Nimentix)						
HPV 12-25 (inclusive) (Gardasil 9)						
Varicella						
(Varilrix/Varivax)						
Influenza						
Other						
Other						
				nong. Provider No: V162		

Useful resources



- Immunisation Handbook 10th Edition
- https://www.health.gov.au/resources/publications/the-australian-immunisation-handbook
- Victorian Department of Health Immunisation resources
- https://www.health.vic.gov.au/public-health/immunisation
- Immunisation catch up calculator
- https://immunisationhandbook.health.gov.au/catch-up-calculator/calculator



Links from the presentation

- Assessing immunisation status:
- https://immunisationhandbook.health.gov.au/contents/c atch-up-vaccination#assessing-immunisation-status
- Principles of Catch-up vaccination:
- https://immunisationhandbook.health.gov.au/contents/c atch-up-vaccination#principles-of-catchup-vaccination
- Catch-up resources:
- Catch-up resources | Catch-up vaccination | The Australian Immunisation Handbook (health.gov.au)

Managing patients from refugee backgrounds: 10 tips for primary care (Dr Larissa Wale, Refugee Fellow, Monash Refugee Health Service) 1. Use accredited interpreters (onsite/telephone) for non-English speaking clients rather than family/friends/staff

Use of interpreters has been shown to improve both delivery of care and patient experience whilst also reducing medico-legal risk. General practice can register with FREE service TIS to get a client code. Contact the Telephone Interpreting Service (TIS and ATIS) on 1300 131 450 or access 24/7 TIS National Doctors Priority Line.

- 2. Be aware of entitlement difference between an asylum seeker and refugee status identification and understanding the difference between a refugee and asylum seeker is important. Refugees will have the access to Medicare, Centrelink and settlement support. Asylum seekers often present with complex vulnerabilities associated with visa status which may impact work rights and access to financial support, case management and Medicare.
- 3. Use Refugee Health Assessment (RHA) for screening new patients
 Utilise longer or multiple appointments to complete RHA. A useful template for all new refugee patients and the dedicated RHA MBS billing item can be used if the patient is ≤1year post arrival/visa lodgement. Refugee Health Assessment Template: incorporated into practice software
- 4. Complete on-arrival pathology screening

The RHA recommends screening for a number of infectious diseases and nutritional deficiencies. Australasian Society for Infectious Disease, Refugee Guidelines 2016 Royal Children's Hospital clinical resources on migrant health





10 tips for Primary Care (con't)

- 5. Consider referring all new clients to public dental/optometry/ audiology services These are all high-prevalence on-arrival health concerns.
- 6. Consider mental health referrals Foundation House is a dedicated torture and trauma services. Referrals can be made via their website.

 For access to psychological services with an interpreter, refer to your PHN.
- 7. Utilise health literacy resources:

Resources to develop culturally competent practice include www.ceh.org.au and for scripts www.easidose.com Remember to explain what a prescription 'repeat' is.

- 8. Provide catch-up immunisations as indicated:
 Check for pre-existing immunisation records and use national
- Check for pre-existing immunisation records and use national immunisation schedule and catch- up schedule. Remind them that it can take up to 3-4 visits.
- 9. Use dedicated refugee health resources: updates on services, policies, and refugee specific issues, consider joining the Victorian Refugee Health Network (VRHN) or visit refugeehealthnetwork.org.au
- 10. Refugee Health and Wellbeing and Refugee Health regional contacts: rhp-agency-contact-list-march-2022-doc.docx (live.com)









Acknowledgement:
PRIME Team CGD
Dr Larissa Wales MRHS



