

Immunisation Scheduled Substance Treatment Protocol (SSTP) for Nurses, Midwives and Aboriginal and Torres Strait Islander Health Practitioners

Areas Applicable	NT Wide
Health Professionals authorised by this SSTP	Nurses Midwives Aboriginal and Torres Strait Islander Health Practitioners
Scheduled Substance(s)	<p>COVID 19 Vaccine Diphtheria Vaccine Haemophilus influenza type b (Hib) Vaccine Hepatitis A Vaccine Hepatitis B Vaccine Human Papillomavirus Vaccine Influenza Vaccine Measles Vaccine Meningococcal Vaccine Mumps Vaccine Pertussis (Whooping Cough) Vaccine Pneumococcal Vaccine Poliomyelitis Vaccine Rotavirus Vaccine Rubella Vaccine Tetanus Vaccine Varicella (Chickenpox) Vaccine Zoster (Herpes Zoster) Vaccine</p> <p>Note: this Includes any combination vaccines of the above mentioned substances.</p>
Indication	Immunisation against vaccine preventable diseases as per the current version of the NT Immunisation Schedule and the Australian Immunisation Handbook.

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Contraindications and/or Exclusions*	Exclusions As per the Australian Immunisation Handbook; and Where the Australian Immunisation Handbook states that vaccination is not recommended for pregnant women or immunocompromised patients, this protocol cannot be used in that group.
Dose and Route	Dose as per the Australian Immunisation Handbook. Route as per the Product Information.
Administration	Immunisation providers should screen people for eligibility before vaccination, obtain valid consent, and ensure that the correct equipment and procedures are in place before vaccination. Management of Anaphylaxis Administration of any vaccine from this protocol must occur where another person, who holds a current Basic Life Support Certificate or Provide First Aid Certificate, is immediately available to provide emergency assistance if required. Administration of any vaccine from this protocol must occur where there is a complete anaphylaxis Emergency Response Kit for the use in treatment and management of anaphylaxis in line with procedures from the current Australian Immunisation Handbook. Emergency Response Kit must be checked regularly, maintained, easily accessible and contain: <ul style="list-style-type: none"> • Adrenaline 1:1000 (minimum of 3 ampoules) • 1mL syringes and 25mm needles for IM injection (minimum of 3 of each) • Cotton wool swabs • Pen and paper to record time of administration of adrenaline • Laminated copy of 'Recognition and treatment of anaphylaxis' and the 'Doses of intramuscular 1:1000 adrenaline for anaphylaxis' available from the Table. Recognition and treatment of anaphylaxis The Australian Immunisation Handbook (health.gov.au) Administration Premises Requirements Vaccines must be administered in a location that: <ul style="list-style-type: none"> • ensures privacy of the consumer • ensures sufficient room to accommodate the consumer, carer and immuniser and allow sufficient space, surfaces and be able to respond to medical emergencies including sufficient space for the consumer to lie down if required • has equipment to facilitate safe immunisation administration including

	<ul style="list-style-type: none"> ○ Easy access to a sink with running water and hand soap for washing hands and/or ready access to hand sanitiser ○ Sharps disposal container and dedicated bin for medical waste ○ Equipment and storage facilities to meet the National Vaccine Storage Guidelines ○ Consumables for the delivery of a vaccine e.g. needles, hypoallergenic tape, cottonwool swabs and/or adhesive bandage strips <p>Vaccines must be stored in accordance with the National Vaccine Storage Guidelines.</p>
Dose Frequency	Dosing frequency and intervals between vaccines, as per the current version NT Immunisation Schedule and Australian Immunisation Handbook
Drug Interactions	As per interactions listed in the current Australian Immunisation Handbook and individual vaccine product information.
Monitoring requirements	<p>Post vaccination procedures should be followed as per the Australian Immunisation Handbook.</p> <p>All patients must be monitored post vaccination for 15 minutes unless they withdraw consent to be monitored. Ensure withdrawn consent is documented in the person's clinical record.</p> <p>Report any adverse event during or post vaccination to the NT Centre for Disease Control using the 'Adverse event following vaccination' form available online https://health.nt.gov.au/professionals/centre-for-disease-control/immunisation-program</p>
Health Professional Accreditation Requirements	<p>Health professionals using this guideline must meet the requirements outlined by the NT Chief Health Officer:</p> <p>Nurses and Midwives:</p> <ul style="list-style-type: none"> • Be registered with the Nursing and Midwifery Board of Australia with no conditions, undertakings or notations which may limit delivery of clinical services directly to patients <p>Aboriginal Health Practitioners:</p> <ul style="list-style-type: none"> • Be registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients <p>All health professionals following this protocol must:</p> <ul style="list-style-type: none"> • Maintain continuing professional development related to skills and competencies required for the delivery of medicines and vaccines including the use of multi-dose vials and management of anaphylaxis • Hold a current Cardiopulmonary Resuscitation (CPR) certificate

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	<p>All health professionals administering vaccines from this protocol must have completed and hold a current qualification in:</p> <ul style="list-style-type: none"> • A program of study accredited by Health Education Services Australia (HESA) or; • A program of study approved by the Chief Health Officer or; • Completed the assessment of an immuniser program of study that meets the curriculum content requirements of the National Immunisation Education Framework for Health Professionals. 		
<p>Documentation <i>(including necessary information to the patient)</i></p>	<p>Patient consent (written or verbal) for vaccination must be recorded. Records of this should be maintained by the clinical service.</p> <p>The health professional must:</p> <ul style="list-style-type: none"> • Complete all clinical documentation requirements as outlined by the Health Service. • Enter the mandatory fields in the Australian Immunisation Register within 24 hours and no later than 10 days after administration. For many vaccine providers this involves entry into routine clinical information systems for automatic upload 		
<p>Related Documents</p>	<ul style="list-style-type: none"> • Immunisation program NT Health • The Australian Immunisation Handbook (health.gov.au) • National vaccine storage guidelines - Strive for 5, 3rd edition (health.gov.au) • ASCIA HP Guidelines Acute Management Anaphylaxis 2023.pdf (allergy.org.au) 		
<p>Chief Health Officer</p>	<p>Signature</p>	<p>Name</p>	<p>Date</p>
	<p>EDOC2024/10161</p>	<p>Adj Prof Christine Connors</p>	<p>28/06/2024</p>
<p>Period of effect</p>	<p>This SSTP remains in force until 28/06/2026 unless revoked earlier</p>		
<p>References: * The drug information provided is to act as a guide to outline the limits of legal dealing with the named scheduled substances. Further information reference should be made to the full manufacturer's product info and other reliable sources of medicines information. If contraindications or interactions are present refer to medical officer before administration</p>			