Northern Territory of Australia

Medicines, Poisons and Therapeutic Goods Act 2012

Immunisation Scheduled Substance Treatment Protocol (SSTP) for Pharmacists
Approval

I, Christine Maree Connors, Chief Health Officer:

(a) under section 254(1) of the Act, approve each Scheduled substance treatment protocol specified in Schedule A;

(b) under section 254(3) of the Act, state that each Schedule substance treatment protocol specified in Schedule A remains in effect for a period of 2 years on and from the date of this instrument.

Dated 07/12/23

Chief Health Officer

Schedule A

Title	Publication Date	Author
Immunisation Scheduled Substance Treatment Protocol (SSTP) for Pharmacists	06/12/2023	Medicines and Poisons, Northern Territory Government, Department of Health

Immunisation Scheduled Substance Treatment Protocol (SSTP) for Pharmacists

Areas Applicable	NT Wide
Health Professionals authorised by this SSTP	Pharmacists
Scheduled Substance(s)	COVID-19 Vaccine Diphtheria, Tetanus, Pertussis Vaccine - Combination Vaccine Haemophilus influenza type B (Hib) Vaccine Hepatitis A Vaccine Hepatitis B Vaccine Herpes Zoster Vaccine Human Papillomavirus Vaccine Influenza Vaccine Measles, Mumps, Rubella - Combination Vaccine Meningococcal ACWY Vaccine Meningococcal B Vaccine Pneumococcal Vaccine Poliomyelitis Vaccine Varicella Vaccine
Indication	Influenza vaccine, Measles-Mumps-Rubella and Diphtheria-Tetanus-Pertussis Vaccines: • All persons aged 5 years and over who are eligible for immunisation as part of the NIP/ NT Immunisation Schedule, or eligible as per Australian Immunisation Handbook. ALL other vaccines as per this SSTP: • Any person aged 5 years and over eligible for immunisation as part of the NT Immunisation Schedule and National Immunisation Program and including catch up schedules

Contraindications and/or Exclusions*	As per the current Australian Immunisation Handbook and; Pharmacists may only administer vaccines to patients aged 5 years and above and; Where the Australian Immunisation Handbook states vaccination is not recommended for specific cohorts, such as pregnant women or immunocompromised patients, this protocol cannot be used in that group
Dose and Route*	Dose as per the current version Australian Immunisation Handbook
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, be easily accessible and contain: ○ 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** All Premises All vaccines must be administered in a location, service and manner that allows the practitioner to manage anaphylaxis including emergency response kit outline above. Pharmacy Premises Vaccines administered on a pharmacy premises must also meet the requirements as outlined in the current PS5 Premises & Equipment Standard for Pharmacy Based Immunisations. Non-Pharmacy Premises Vaccines administered in a location other than a pharmacy premises must: • ensure privacy of the consumer

	• ensure 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
	• have equipment to facilitate safe immunisation administration including
	  ○ 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 eg needles, hypoallergenic tape, cottonwool swabs and/or adhesive bandage strips

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*	Post vaccination procedures should be followed as per the Australian Immunisation Handbook. 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. Report any adverse event during or post vaccination to the NT Centre for Disease Control using the 'Adverse event following vaccination' form available online or in hard copy on the Recording and reports on immunisations | NT Health

Health Professional Accreditation Requirements	Pharmacists
	• Be registered with the Pharmacy Board of Australia with no conditions or undertakings which may limit delivery of clinical services directly to patients
	And:
	Hold a current certificate of completion of either:
	• Prior to 1 January 2017:
	  ○ APPIMM806A - Manage the delivery and administration of injections and immunisations -Pharmaceutical Society of Australia; or
	  ○ 10455NAT - Course in conduct immunisation services within a community pharmacy environment - Pharmacy Guild of Australia;
	• After 1 January 2017:
	  ○ a training program accredited as meeting the standards set by the Australian Pharmacy Council's 'Standards for the accreditation of programs to support Pharmacist Administration of vaccines'.
	• Maintain continuing professional development related to skills and competencies required for the delivery of medicines and COVID-19

<table>
<tr><td></td><td colspan="3">vaccines including the use of multi-dose vials and management of anaphylaxis
• Hold a current Cardiopulmonary Resuscitation (CPR) certificate</td></tr>
<tr><td>Documentation
(including necessary information to the patient)</td><td colspan="3">Patient consent (written or verbal) for vaccination must be recorded. Records of consent are to be maintained by the clinical service.
The health professional must:
• Complete all clinical documentation requirements as outlined by the Health Service
• Enter the patient details, vaccine brand name, dose, site of administration and batch number 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.</td></tr>
<tr><td>Related Documents</td><td colspan="3">• 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)
• PS5-Premises-and-Equipment-Standard-for-Pharmacy-Based-Immunisation-Programs-V1.3-December-2021.docx (live.com)</td></tr>
<tr><td rowspan="2">Chief Health Officer</td><td>Signature</td><td>Name</td><td>Date</td></tr>
<tr><td>EDOC2023/364656</td><td>Christine Connors</td><td>07/12/23@1:53pm</td></tr>
<tr><td>Period of effect</td><td colspan="3">This SSTP remains in force until 08/12/2025 or revoked earlier.</td></tr>
<tr><td colspan="4">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</td></tr>
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