

Vaccine preventable diseases, staff immunity and vaccination mandatory requirements

Procedure authorisation

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Authorised by

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Date authorised

20/09/2016

Review date

20/09/2018

Document control

Document ID

000029

Version

5.0

Key words (metadata)

Vaccine preventable diseases requirements, VPD requirements, staff immunity, staff VPD, SCHHS

Supersedes

000029.04

Purpose

This procedure identifies the mandatory requirements for vaccine preventable diseases (VPD) screening of all preferred candidates and staff employed within the Sunshine Coast Hospital and Health Service (SCHHS).

Scope

In accordance with Health employment directive No.01/16 - [Vaccine preventable diseases \(VPD\) requirements](#), from 1 July 2016, SCHHS employees, contractors, students and volunteers must provide documentary evidence prior to appointment of immunity / vaccination for any of the VPDs listed below:

- Measles, mumps and rubella;
- Pertussis;
- Varicella;
- Hepatitis B;
- Hepatitis A.

Evidence of Hepatitis B vaccination or evidence that the person is not susceptible is required for all prospective employees and for all existing employees engaged prior to 1 July 2016 who were subject to a previously existing Hepatitis B condition of employment for roles that:

- Have direct contact with patients, or
- In the course of their work, may be exposed to blood/ body fluids or contaminated sharps.

Employees engaged prior to 1 July 2016 are not subject to the new VPD requirements unless they begin a new role with VPD requirements in another Queensland Health Hospital and Health service or the Department of Health.

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External organisations

Approved organisation's employees i.e. contractors, volunteers, students, are subject to the same VPD evidencing requirements. Organisations may develop their own forms for use but must ensure the minimum requirements stated in this procedure are met. The SCHHS will complete Form A and communicate vaccination requirements to education providers.

Line manager

SCHHS line managers or delegate must complete Form A: Risk role checklist for vaccine preventable diseases when recruiting externally or internally, seeking bids or tenders from contractors and when engaging labour hire staff, volunteers or students. External organisations must complete an equivalent.

Form A is not required for employees engaged prior to 1 July 2016 unless they apply for a new role with VPD requirements in another Queensland Health Hospital and Health service or the Department of Health

If identified on Form A that the role requires evidence of immunity/ vaccination of a vaccine preventable disease, Forms B Healthcare provider certification form for vaccine preventable disease **AND/OR C** Candidate evidence form for vaccine preventable diseases, are to be provided to preferred candidates by the line manager (or delegate)

The line manager (or delegate) in consultation with Human Resources is responsible for monitoring the employee's compliance with VPD requirements associated with the employee's probation period (dependent on award) and/ or continuing engagement.

VPD mandatory forms

For consideration of employment, **Form A** must be completed by the Line manager (or delegate) to determine if a position is at risk of VPD. If a position is identified as being at risk and requires evidenced immunity/ vaccination of a VPD, the Line manager (or delegate) must provide the candidate with a copy of completed **Form A** for their reference and for completion by the candidate **Form B and/or Form C**.

- [Form A](#): Risk role checklist for vaccine preventable diseases
- [Form B](#): Healthcare provider certification form for vaccine preventable diseases
- [Form C](#): Candidate evidence form for vaccine preventable diseases

If Form A identifies that there is no VPD requirement for the role, this must be recorded on Form A and submitted to HR or equivalent. Form B or Form C are not required if there is no VPD risk identified.

All forms must be submitted to HR by the Line manager (or delegate).

Certifying and evidencing VPDs

If the candidate is unable to evidence one or all of the VPDs identified in Form A, the Line manager (or delegate) must provide the candidate **Form B** for completion by their healthcare or vaccine service provider and complete the required VPD section(s). If the candidate has all the required evidence Form C can be completed. If Form C can only be partially completed, Form B must be used.

To complete Form B the candidate must:

- Arrange for a medical practitioner or vaccine service provider to document and evidence the required VPD on Form B;
- Form B must be signed and stamped by the candidate's healthcare provider.
- Candidate to complete the Tuberculosis (TB) screening section;
- Candidate to sign the privacy notice and consent.

OR

If the candidate is able to evidence all of the VPDs identified in Form A, the line manager (or delegate) must provide the candidate **Form C** for completion. If Form C can only be partially completed, Form B must be used.

To complete Form C the candidate must complete each VPD section in Form C and attach the required evidence.

- All supporting evidence from vaccine service providers must be printed on practice/ facility letterhead paper or stamped with practice/facility stamp and be signed by the service provider including their name and designation.
- Candidate's own statutory declarations will not be accepted.
- Complete the tuberculosis (TB) screening section;
- Candidate sign the privacy notice and consent.

VPD monitoring

Immunity/ vaccination evidence required to meet pre-employment checks must be sourced external to the SCHHS.

Once employment requirements have been met ongoing vaccinations are available with the SCHHS immunisation program for SCHHS staff only. Line managers are encouraged to share information on the service provided by the Infection Management Service (IMS). Contractors, students and volunteers must seek ongoing vaccinations externally

Compliance of VPD requirements must be monitored by the Line managers (or delegate) and reported to Human Resources as part of the employee's identified probation period.

Employees, contractors, students, volunteers must maintain their vaccination status and documented evidence to fulfil the conditions of their employment/ status with the SCHHS as indicated below:

- If a second measles, mumps, rubella vaccine is required, this must be administered within 1 months of the first vaccine; refer to SCHHS standing order Measles, Mumps and Rubella (MMR) vaccine administration for employees;
- Pertussis vaccination must be administered every 10 years; SCHHS Standing Order [Diphtheria-tetanus-acellular \(dTpa\) pertussis vaccine administration for employees](#);
- If a second varicella vaccine is required, this must be administered within 1 months of the first vaccine; refer to SCHHS standing order Varicella vaccine administration for employees.
- Completion of a Hepatitis B vaccination course in accordance with the SCHHS Standing Order [Hepatitis B vaccine administration for employees](#);
 - For vaccine non-responders completion of a total of 6 vaccinations followed by Hepatitis B serology would be acceptable and completion of an intradermal pathway is optional.
- If a second Hepatitis A vaccine is required, this must be administered within 6 months of the first vaccine.

Storing candidate personal information

All SCHHS employee's documented immunity/ vaccination evidence of VPDs will be recorded and stored in a database Staff Protect Application (SPA) and personal HR file (P file). It is only accessible to authorised personnel and maintained in accordance with the *Information Privacy Act 2009* and the *Public Records Act 2002*.

The SCHHS is not responsible for storing student immunity/ vaccination evidence. Student's immunity/ vaccination evidence of VPDs must be maintained by the education provider. The education provider may be asked by the SCHHS to provide a completed Form B and Form C. The SCHHS will complete form A and communicate vaccination requirements to education providers.

The SCHHS is not responsible for storing immunity/ vaccination evidence of external employees. It is a requirement that a representative in the respective organisation e.g. health and safety advisor, maintains immunity/ vaccination evidence in a secure database, in accordance with the *Information Privacy Act 2009* and the *Public Records Act 2002* and at the request of the SCHHS be supplied to IMS and/ or HR.

Primary policy guidelines and other authority

Health Employment Directive No.01/16 - [Vaccine preventable diseases \(VPD\) requirements](#)

Health Service Directive: Vaccine preventable disease (QH-HSD-047:2016) - [Screening for Contractors, Students and Volunteers](#)

Protocol: Vaccine preventable disease (QH-HSD-047-1:2016) - [Screening for Contractors Students and Volunteers](#)

Department of Health Human Resources policy B1 (QH-POL-212) - [Recruitment and selection](#)

Queensland Health guideline - [Vaccination of healthcare workers](#)

EQUIP National Standards (ACSQHC)

Standard 3 criterion 1 – Effective governance and management systems for healthcare associated infections are implemented and maintained.

Other supporting documents

[Form A](#): Risk role checklist for vaccine preventable diseases

[Form B](#): Healthcare provider certification form for vaccine preventable diseases

[Form C](#): Candidate evidence form for vaccine preventable diseases

Department of Health - [The Australian Immunisation Handbook](#)

SCHHS Standing Order 001044 - [Hepatitis B vaccine administration for employees](#)

SCHHS Standing Order 000653 – [Measles Mumps and Rubella \(MMR\) vaccine administration for employees](#)

SCHHS Standing Order 000652 – [Diphtheria-tetanus-acellular \(dTpa\) pertussis vaccine administration for employees](#)

SCHHS Standing Order 000654 – [Varicella vaccine administrations for employees](#)

Consultation

Clinical Nurse Consultant Infection Management Service

Senior Medical Officer Infectious Diseases

Executive Director Human Resources

Nursing Director Medical Services Group

Senior HR Advisor Human Resources- Recruitment

Principal HR Advisor Human Resources

A/Executive Director Clinical Services

Team Leader Practice Development Unit

Service Director CSSG

Chief Finance Officer

Deputy Executive Director Medical Services

Audit/ compliance strategy

At the time of document review evidence will be required to demonstrate effectiveness of and compliance to the procedure.

Level of risk	Medium
Audit strategy	<p>Review of completed candidate VPD certification / evidence forms and risk role checklist of all new employees by Recruitment, Medical Administration and the Infection Management Service (IMS)</p> <p>Review of ongoing compliance reviewed at end of probation period (dependent on the award) of all new employees by Line managers.</p> <p>Review of existing staff Hepatitis B compliance, monthly by IMS.</p> <p>Compliance records, including action plans for continuing engagement of contractors, student and volunteers to be provided to the SCHHS 6 monthly by the nominated representative and reported at the Infection Prevention and Control Committee</p>
Audit frequency/ reporting month/s	<p>Every record of new staff member</p> <p>At end of relevant probation period</p> <p>Monthly</p> <p>Biannual (February, August)</p>
Key elements, indicators and / or outcomes	100% compliance with VPD immunity / vaccine requirements

Document revision and approval

Version	Reviewed by	Approval date	Authorised by	Comment
5.0	Clinical Nurse Infection Management Service	20/09/2016	Executive Director Medical Services	