

# Seventh-day Adventist Schools (Northern Australia) Limited



Department: <b>Education</b>	Description: <b>Policy</b>
Administrative Area: <b>Risk Management and Compliance</b>	Type: <b>Mandatory</b>
Document Name: <b>Vaccination Policy</b>	Issue Date: <b>9 March 2022</b>
Document ID: <b>NAS168.003.EDU</b>	Review Date: <b>Term 1 - 2024</b>

## Carlisle Adventist College

### Vaccination Policy

<b>Purpose:</b>	The purpose of this policy is to provide a guideline to Seventh-day Adventist Schools (Northern Australia) Limited on vaccination of students and staff to effectively manage the risk to children and employees of exposure to diseases that are preventable by vaccination.	
<b>Scope:</b>	The policy for vaccination of students and staff is applicable to all schools operated by Seventh-day Adventist Schools (Northern Australia) Limited. It includes children attending all of the system's schools, parents and employees, including full-time, part-time, permanent, fixed-term and casual employees, as well as contractors, volunteers and people undertaking work experience or vocational placements.	
<b>References:</b>	<ul style="list-style-type: none"> <li>Public Health Act 2005 (Qld)</li> <li>Public Health Regulations 2018 (Qld)</li> <li>Australian Privacy Principles</li> </ul>	
<b>Status:</b>	Approved	<b>Supersedes:</b>
<b>Policy Owner:</b>	Seventh-day Adventist Schools (Northern Australia) Limited	
<b>Authorised by:</b>	Education Director	<b>Date of Authorisation:</b> 9 March 2022
<b>Approved by:</b>	<p>This policy has been ratified by the Board of Directors of Seventh-day Adventist Schools (Northern Australia) Limited as the <b>Vaccination Policy</b> for Seventh-day Adventist Schools (Northern Australia) Limited.</p> <p><b>Pr Darren Slade</b> Board of Directors Chairperson: <b>Date of Approval:</b> 19/05/2022</p> <p><b>Jeffrey Masengi</b> Board of Directors CFO: <b>Date of Approval:</b> 19/05/2022</p>	
<b>Review Cycle:</b>	Reviewed Biennially (every two years)	<b>Next Review Date:</b> Term 1 - 2024
<b>Review Team:</b>	Board of Directors, NSSAB, Chief Executive Officer, Project Officers	
<b>Revised by:</b> Steve Cowley (8 February 2018)	<u>Section</u> Appendix	<u>Details of Changes</u> Replaced March 2015 National Immunisation Program (Queensland Schedule) with July 2017 National Immunisation Program (Queensland Schedule)
Vanessa Woodman (5 August 2019)	Whole document	<b>Updated</b> formatting to the New Template
<b>Revised by:</b> Vanessa Woodman	<u>Section</u>	<u>Details of Changes</u> <b>Updated</b> <i>Public Health Regulations 2005 (Qld) to 2018</i>

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(5 August 2019)	Title page - References	<b>Updated</b> ECEC reference to 'ELS' and <b>Added</b> 'Infectious Disease' Policy <b>Removed</b> reference to SDAS(SQ)Ltd Enrolment & Orientation Policy and Record Retention which are school based level policies.
Vanessa Woodman (5 August 2019)	Section 2 - Definitions	<b>Updated</b> Reference for <b>Contagious condition</b> to <i>Public Health Regulations 2018 (Qld), Sch 4, Part 2</i>
Vanessa Woodman (5 August 2019)	Section 3.1.1 & 3.1.3	<b>Updated</b> 'Immunisation' Policy to say 'Vaccination' Policy
Vanessa Woodman (5 August 2019)	Section 6 - Appendices	<b>Replaced</b> July 2017 National Immunisation Program (Queensland Schedule) to April 2019 Immunisation Schedule Queensland
Vanessa Woodman (9 March 2022)	Title page - References	<b>Added</b> 'Schools' to 'WH&S Policy Statement' <b>Updated</b> 'Illness & Infectious Disease Policy' to 'Early Childhood Immunisation Policy'
Vanessa Woodman (9 March 2022)	Section 1.1.1 & 3.1.1	<b>Updated</b> 'vaccination age milestone' from <i>Year 8</i> to <i>Year 7</i>
Vanessa Woodman (9 March 2022)	Section 2	<b>Immunisation history statement:</b> <b>Deleted</b> 'Childhood' from <i>Australian Immunisation Register (AIR)</i> <b>Updated</b> 'immunisation' to 'vaccination' in reference to a 'recognised vaccination provider'.
Vanessa Woodman (9 March 2022)	Section 6 – Appendices & References	<b>Updated</b> the <i>Queensland Immunisation Schedules</i> from 2019 to 2020-2021

## 1. Policy

Seventh-day Adventist Schools (Northern Australia) Ltd. is committed to ensuring the health and safety of children and employees at the schools we operate who are at risk of exposure to diseases that are preventable by vaccination. Immunisation of children and employees is an effective way to manage this risk.

It is the policy of Seventh-day Adventist Schools (Northern Australia) Ltd. to:

- Actively support the immunisation of all children enrolled at the service;
- Actively support the immunisation of all employees working at the service; and
- Inform parents and employees of vaccination recommendations.

In line with the Public Health Act 2005, Seventh-day Adventist Schools (Northern Australia) Ltd. will comply with requests from Queensland Health for information regarding a child enrolled at the service who has a contagious condition.

### 1.1.1 Children

Seventh-day Adventist Schools (Northern Australia) Ltd. requires details of any previous infection with vaccine-preventable diseases and the immunisation status for such disease for each child to be kept in their enrolment record. Accordingly, an immunisation history statement will be sought from families upon the enrolment of their child, and thereafter when the child passes a vaccination age milestone relevant to Seventh-day Adventist Schools (Northern Australia) Ltd. (being in Years 7 and 10).

In accordance with the National Health and Medical Research Council, Seventh-day Adventist Schools (Northern Australia) Ltd. recommends that enrolled children are vaccinated according to their age group. Please see Appendices for more information regarding the recommended vaccinations according to a child's age group.

### 1.1.2 Outbreaks of Infectious Disease:

In accordance with the *Public Health Act* 2005, if children are not medically vaccinated according to their age group, they will be excluded from attendance at Seventh-day Adventist Schools (Northern Australia) Ltd. during outbreaks of some infectious diseases in the community (such as measles and pertussis), even if the child is well. If a family has not provided an immunisation history statement to the service, Seventh-day Adventist Schools (Northern Australia) Ltd. will assume that the child is not medically vaccinated and act accordingly.

Seventh-day Adventist Schools (Northern Australia) Ltd. requires details of any previous infection with vaccine-preventable diseases and the immunisation status for such diseases for each employee to be kept in their employment record.

Furthermore, Seventh-day Adventist Schools (Northern Australia) Ltd. recommends that its employees are immunised against:

- Pertussis
- Measles–mumps–rubella (MMR)
- Varicella

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- Hepatitis A
- Influenza
- Hepatitis B (if caring for children with intellectual disabilities)

Employees who are pregnant or immunocompromised should seek their own medical advice about vaccinations.

If an employee refuses reasonable requests for immunisation, there may be potential consequences as follows:

- Being excluded from work during outbreaks of preventable diseases.

## 2. Definitions

Definitions relevant to this policy include:

**Catch-up schedule:** a documented plan to complete a course of vaccination and provide optimal protection against disease as quickly as possible

**Contagious condition:** means a contagious medical condition prescribed under the *Public Health Regulation 2018*, Schedule 4, Part 2 as a contagious condition

**Immunisation:** both receiving a vaccine and becoming immune to a disease, as a result of being vaccinated

**Immunisation history statement:** Section 160A of the *Public Health Act 2005* defines this statement as being:

- an official record issued by the Australian Immunisation Register (AIR) or
- a letter from a recognised vaccination provider (e.g. a General Practitioner or recognised immunisation nurse).

The Red Book or Personal Health Record from Queensland Health is a good record for parents. However, as it contains hand written immunisation records it is not recognised as an official record of a child’s immunisation status and is not an acceptable form of proof of vaccination.

**Medically vaccinated:** when a person has received a vaccine that has been scientifically proven to be effective in preventing disease

**Non-medically vaccinated:** when a person has either not received a vaccination at all, or has received a treatment that is said to act as a vaccine but has not been scientifically proven to be effective (e.g. homeopathic or naturopathic vaccination)

**Vaccination:** having a vaccine; that is, actually getting the injection

## 3. Responsibilities

### 3.1.1 Parents

- To inform the school promptly if their child contracts a preventable disease.
- Be aware of and act in accordance with **Seventh-day Adventist Schools (Northern Australia) Ltd. Vaccination Policy**;
- Provide an accurate and up to date record of their child’s infectious disease record and an up to date immunisation history statement upon enrolment;

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- Provide an accurate and up to date copy of their child’s immunisation history statement when the child passes a vaccination age milestone relevant to **Seventh-day Adventist Schools (Northern Australia) Ltd.** (being in Years 7 and 10); and
- Accept and act upon decisions by **Seventh-day Adventist Schools (Northern Australia) Ltd.** to exclude their child during outbreaks of some infectious diseases if the child is not medically vaccinated against the disease, as recommended by the National Health and Medical Research Council exclusion guidelines and the *Public Health Act 2005*.

### 3.1.2 School Principal

- To discuss with the parents/carers:
  - The school’s policy on vaccination including the recommendation that all students should be vaccinated,
  - The need for disclosure to the school of the child’s vaccination status and record
  - The need to keep their child home during outbreaks of preventable diseases in the community
  - The need to inform the school promptly if the child contracts a preventable disease.
- To communicate with school staff and provide:
  - training and support regarding
    - the vaccination policy,
    - Information about their obligation to provide the school with their vaccination status and record.
    - Their obligation to remain at home during outbreaks of preventable diseases in the community.
    - Their obligation to exclude from school unvaccinated children during outbreaks of preventable diseases in the community.
- Keep up to date and accurate records of the immunisation status of children and employees;
- Manage the collection of “sensitive information” about health information, including immunisation, in accordance with the *Australian Privacy Principles*;
- Take all reasonable steps to encourage children and employees who are not medically vaccinated to be vaccinated; and
- Comply with information requests by Queensland Health under section 172 of the *Public Health Act 2005*.

### 3.1.3 School Staff

- To participate in training provided regarding the vaccination policy.
- To follow any instructions and directions given by the School Principal regarding preventable diseases.
- Be aware of and act in accordance with **Seventh-day Adventist Schools (Northern Australia) Ltd.** Vaccination Policy;
- Provide an accurate and up to date record of their infectious disease record and immunisation status upon commencement;
- Advise **Seventh-day Adventist Schools (Northern Australia) Ltd.** in a timely manner when they receive a vaccination;
- Accept and act upon decisions by **Seventh-day Adventist Schools (Northern Australia) Ltd.** to take appropriate action to protect employees who are not medically immunised from infectious diseases; and

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- Accept and act upon decisions by **Seventh-day Adventist Schools (Northern Australia) Ltd.** to exclude employees during outbreaks of some infectious diseases if they are not medically vaccinated against the disease, as recommended by the National Health and Medical Research Council exclusion guidelines.

#### 4. Implementation

In practice, **Seventh-day Adventist Schools (Northern Australia) Ltd.** commitment to effectively managing the risk of exposure to diseases that are preventable by vaccination means that it will implement the following measures:

- Awareness - regularly raise awareness of the importance of immunisation, including by the development and implementation of this Policy, taking all reasonable steps to encourage children and employees to be vaccinated via the clear support and promotion of this Policy; and
- Record keeping, monitoring, reporting – keep appropriate records, monitor and report on immunisation within the school.
- Recognise preventable diseases as a hazard when carrying out risk assessments for excursions to remote and/or overseas locations where the availability of medical assistance is limited and take into account risks to the following:
  - Unvaccinated children
  - Unvaccinated staff
  - Other people with whom students may come into contact during the excursion such as passengers on all forms of transport and unvaccinated people in developing countries.
- Where preventable diseases are included as a hazard, the same risk management principles must be applied as with all other hazards. Eliminate the hazard where practicable and apply control measures where it is not. Residual risk ratings must be tolerable or lower for the excursion to proceed. Because excluding unvaccinated children from class during outbreaks of preventable diseases is part of this policy, exclusion of unvaccinated children from high risk activities where prompt, up-to-date medical treatment is not easily accessible must be considered as a viable method of controlling risk.

#### 5. Compliance and Monitoring

In accordance with its responsibilities, **Seventh-day Adventist Schools (Northern Australia) Ltd.** will undertake the following compliance and monitoring activities:

- Keep up to date and accurate records of the immunisation status of children and employees, as follows:
  - Develop a child and employee immunisation record that documents each child and employee’s previous infection with vaccine-preventable diseases or immunisation for such diseases;
  - Require all new and current children and employees to complete the immunisation record;
  - When enrolling children, make a note of when the child will need updates to their vaccinations and remind parents of this in the month prior;
  - Regularly update child and employee immunisation records as vaccinations are administered; and

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- Conduct an annual review of the immunisation status of all children and employees and take reasonable steps to support appropriate immunisation;
- Document advice given to parents and employees; and
- Comply with requests by Queensland Health under section 172 of the *Public Health Act 2005*.

## 6. Appendices & References

See Queensland Health:

<https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation/schedule>













### Appendix 1 – Immunisation Schedule Queensland – Children

For larger image: [https://www.health.qld.gov.au/\\_data/assets/pdf\\_file/0032/989114/qld-immunisation-schedule-children.pdf](https://www.health.qld.gov.au/_data/assets/pdf_file/0032/989114/qld-immunisation-schedule-children.pdf)

### Appendix 2 - Immunisation Schedule Queensland – Adolescents & Adults

For larger image: [https://www.health.qld.gov.au/\\_data/assets/pdf\\_file/0031/989113/qld-immunisation-schedule-adolescent-adult.pdf](https://www.health.qld.gov.au/_data/assets/pdf_file/0031/989113/qld-immunisation-schedule-adolescent-adult.pdf)

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Immunisation Schedule Queensland			July 2020				
CHILDREN							
		<b>Before vaccinating:</b> <ul style="list-style-type: none"> <li>• ALWAYS review the Australian Immunisation Register (AIR) to check the patient's previous immunisation history</li> <li>• Check the online Australian Immunisation Handbook (the Handbook) or download the Handbook app for information about catch-up vaccination, timing of vaccination for special risk groups at immunisationhandbook.health.gov.au/</li> <li>• Check the correct vaccine dose number has been recorded and report all vaccinations to AIR as soon as possible.</li> </ul>				<b>LEGEND</b>  Reconstitute IM Intramuscular SC Subcutaneous AL Anterolateral	
		<b>IMPORTANT:</b> Children diagnosed with medical risk factors for invasive meningococcal disease are funded to receive multiple doses of Meningococcal ACWY (Nimenrix) and Meningococcal B (Bexsero) vaccine. The number and timing of doses is dependent on the age at diagnosis. Refer to the Meningococcal chapter of the Handbook for number and timing of doses.					
AGE	DISEASE	VACCINE BRAND	ALL CHILDREN (incl. Aboriginal and Torres Strait Islander children and Children with medical risk factors)	Additional vaccines for: Aboriginal and Torres Strait Islander children	Children born with medical risk factors	METHOD & SITE	IMPORTANT NOTES
Birth	Hepatitis B	H-B-Vaxil paediatric OR Engerix B paediatric	●			IM / AL thigh	● Give within 24 hours of birth. Can be given up to 7 days after birth
	Tuberculosis	BCG 		▲		Intradermal / Deltoid	▲ Aged 15 years living in Aboriginal and Torres Strait Islander communities. For further information regarding eligibility search 'BCG vaccination' on the Queensland Health website
2 months (can be given from 6 weeks) AND 4 months	DTPa-hepB-IPV-Hib	Infanrix Hexa 	●			IM / AL thigh	
	Pneumococcal	Prevenar 13	●			IM / AL thigh	
	Rotavirus	Rotarix	●			Oral / By mouth	● First dose must be given <15 weeks of age. Second dose must be given <25 weeks of age. Check Rotarix wheel for timing of vaccination
	Meningococcal B	Bexsero		▲		IM / AL thigh	
6 months	DTPa-hepB-IPV-Hib	Infanrix Hexa 	●			IM / AL thigh	
	Meningococcal B	Bexsero		▲		IM / AL thigh	▲ Aboriginal and Torres Strait Islander children with medical risk factors for IMD (see Handbook)
	Pneumococcal	Prevenar 13		▲	◆	IM / AL thigh	◆ Medical risk factors for invasive pneumococcal disease (IPD) (see Handbook)
12 months	Measles-mumps-rubella	Priorix  OR MMR11 	●			IM or SC / Deltoid	
	Meningococcal ACWY	Nimenrix 	●			IM / Deltoid	
	Pneumococcal	Prevenar 13	●			IM / Deltoid	◆ Children diagnosed with medical risk factors for IPD at >12 months refer to the Adolescents & Adults schedule for number and timing of doses
	Meningococcal B	Bexsero		▲		IM / Deltoid	
	Hepatitis B	H-B-Vaxil paediatric OR Engerix B paediatric			◆	IM / Deltoid	◆ Premature baby (<32 weeks gestation or <2000g birthweight only)
18 months	Measles-mumps-rubella-varicella	Priorix Tetra  OR Proquad 	●			IM or SC / Deltoid	
	<i>Haemophilus influenzae</i> type b	Act-HIB 	●			IM or SC / Deltoid	
	DTPa	Infanrix OR Tripacel	●			IM / Deltoid	
	Hepatitis A	Vaqta paediatric		▲		IM / Deltoid	
4 years	DTPa-IPV	Infanrix IPV OR Quadracel	●			IM / Deltoid	
	Hepatitis A	Vaqta paediatric		▲		IM / Deltoid	
	Pneumococcal	Pneumovax 23		▲	◆	IM or SC / Deltoid	◆ Medical risk factors for IPD (see Handbook) ▲ Dose at 4 years of age with additional dose at least 5 years later

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Immunisation Schedule Queensland

October 2021

ADOLESCENTS & ADULTS Updated October 2021

STOP

**Before vaccinating:**

- ALWAYS review the Australian Immunisation Register (AIR) to check the patient's previous immunisation history
- Check the online **Australian Immunisation Handbook** (the Handbook) or download the Handbook app for information about catch-up vaccination, timing of vaccination for special risk groups at [immunisationhandbook.health.gov.au/](http://immunisationhandbook.health.gov.au/)
- Check the correct vaccine dose number has been recorded and report all vaccinations to AIR as soon as possible.

**LEGEND**

R Reconstitute

IM Intramuscular

SC Subcutaneous

AL Anterolateral

AGE	DISEASE	VACCINE BRAND	ALL PEOPLE (incl. Aboriginal and Torres Strait Islander people and People with medical risk factors)	Additional vaccines for:		METHOD & SITE	IMPORTANT NOTES
				Aboriginal and Torres Strait Islander people	People with medical risk factors		
Year 7 students † (or age equivalent)	Human papillomavirus (HPV)	Gardasil 9	●			IM / Deltoid	● 2 doses given at 0 and 6 months ◆ Immunocompromised and 15 to 19 year old adolescents require 3 doses given at 0, 2 and 6 months
	Diphtheria-tetanus-pertussis	Boostrix	●			IM / Deltoid	● 1 dose
Year 10 students † (or age equivalent)	Meningococcal ACWY	Nimenrix <span style="border: 1px solid red; padding: 0 2px;">R</span>	●			IM / Deltoid	● 1 dose
Pregnant women	Diphtheria-tetanus-pertussis	Adacel OR Boostrix	●			IM Deltoid	● 1 dose recommended for each pregnancy. Administer between 20–32 weeks gestation for optimal protection
Born during or since 1966	Measles-mumps-rubella	Priorix <span style="border: 1px solid red; padding: 0 2px;">R</span> OR MMRII <span style="border: 1px solid red; padding: 0 2px;">R</span>	●			IM or SC / Deltoid	● 2 doses. Minimum interval between doses is 4 weeks
≥50 years	Pneumococcal	Prevenar 13		▲		IM / Deltoid	▲ Aboriginal and Torres Strait Islander people only. Dependent on previous pneumococcal vaccinations— <b>Check AIR</b>
Additional dose 2-12 months later		Pneumovax 23 †		▲		IM or SC / Deltoid	▲ Dose of Prevenar 13 at ≥50 years of age with a dose of Pneumovax 23, 2–12 months after that and then a second dose of Pneumovax 23 at least 5 years after the previous dose (see Handbook)
Additional dose 5+ years later		Pneumovax 23 †		▲		IM or SC / Deltoid	
≥70 years	Pneumococcal	Prevenar 13	●			IM / Deltoid	● 1 dose at ≥70 years for all non-Indigenous people. Must be given at least 12 months after any previous Pneumovax 23 dose ▲ Not required if fully vaccinated previously against pneumococcal— <b>Check AIR</b>
	Varicella zoster (shingles)	Zostavax	●			SC / Deltoid	● 1 dose. Catch-up available for ages 71–79 years (until 31 Oct 2023). <b>Not to be used in people with compromised immune function (see Handbook).</b>
<b>People diagnosed with medical risk factors:</b>							
At diagnosis	Pneumococcal	Prevenar 13			◆	IM / Deltoid	◆ Children 12 months of age, adolescents and adults of any age diagnosed with medical risk factors for invasive pneumococcal disease (see Handbook)
Additional dose 2–12 months after previous dose or at ≥4 years of age, whichever is later		Pneumovax 23 †			◆	IM or SC / Deltoid	◆ Dose of Prevenar 13 at diagnosis ◆ Dose of Pneumovax 23, 2–12 months after the diagnosis dose or at 4 years of age, whichever is later
Second dose 5+ years later		Pneumovax 23 †			◆	IM or SC / Deltoid	◆ Second dose of Pneumovax 23 at least 5 years after the previous dose
At diagnosis	Meningococcal ACWY	Nimenrix <span style="border: 1px solid red; padding: 0 2px;">R</span>			◆	IM / Deltoid	◆ Medical risk factors for invasive meningococcal disease
	Meningococcal B	Bexsero			◆	IM /Deltoid	◆ Multiple doses of Meningococcal ACWY and Meningococcal B vaccine are recommended dependent on age of diagnosis and ongoing risk of disease ◆ Refer to the Meningococcal chapter of the Handbook for number and timing of doses

† Catch-up is available for adolescents up to 19 years of age for diphtheria-tetanus-pertussis, poliomyelitis, measles-mumps-rubella, hepatitis B, chickenpox, human papillomavirus, meningococcal ACWY

‡ Maximum 2 lifetime doses of Pneumovax 23

Seasonal influenza vaccination

**Eligible groups (refer to the Handbook for further information):**

- All children aged 6 months to less than 5 years
- All Aboriginal and Torres Strait Islander people aged 6 months and older
- All pregnant women at any stage of pregnancy
- Individuals with medical conditions predisposing them to severe influenza
- All individuals aged 65 years and older.

**Note:** Refugees and other humanitarian entrants aged 20 years and older with no documented history of vaccination are eligible for the following vaccinations: diphtheria-tetanus-pertussis, chickenpox, poliomyelitis, measles-mumps-rubella and hepatitis B.

**Refer to the Handbook for number and timing of doses.**

<https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation>

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