

Health Care Worker and Student Vaccination

Phone: 1300 066 055

Email: hnelhd-phimmunisation@health.nsw.gov.au

03 April 2024

Rebecca Johnson
Clinical Nurse Consultant -
Immunisation

Last Update August 2023

Reviewed as new advice needs to be considered

Health care worker vaccination

Policy directive →

Frequently asked questions (FAQ) →

Online training module for policy assessors →

Vaccination record card for Category A workers and students →

Undertaking/Declaration form →

Tuberculosis (TB) Assessment Tool →

Hepatitis B Vaccination Declaration Form →

Policy Directive: Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases

<https://www.health.nsw.gov.au/immunisation/Pages/default.aspx>



Policy Directive



Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases

Summary To provide a framework for the assessment, screening and vaccination of all workers and students to reduce the risk associated with vaccine-preventable diseases in accordance with the risk category of their position.

Document type Policy Directive

Document number PD2023_022

Publication date 23 August 2023

Author branch Communicable Diseases

Branch contact (02) 9391 9195

Replaces PD2022_030

Review date 23 August 2028

Policy manual Not applicable

File number H23/54670

Status Active

Functional group Personnel/Workforce - Employment Screening, Industrial and Employee Relations, Occupational Health and Safety

Population Health - Communicable Diseases, Health Promotion, Infection Control

Applies to Ministry of Health, Public Health Units, Local Health Districts, Board Governed Statutory Health Corporations, Chief Executive Governed Statutory Health Corporations, Speciality Network Governed Statutory Health Corporations, Affiliated Health Organisations, NSW Health Pathology, Public Health System Support Division, Cancer Institute, Government Medical Officers, Community Health Centres, NSW Ambulance Service, Dental Schools and Clinics, Public Hospitals

Distributed to Ministry of Health, Public Health System, Government Medical Officers, NSW Ambulance Service, Health Associations Unions, Tertiary Education Institutes

Audience All NSW Health workers and students

Vaccine Preventable Diseases Covered

Vaccination/ TB assessment requirements by position risk category

Infectious Disease	Category A	Category B
SARS-CoV-2 (COVID-19)	Required	Required
Measles	Required	Recommended
Mumps	Required	Recommended
Rubella	Required	Recommended
Hepatitis B	Required	Recommended
Varicella (Chickenpox)	Required	Recommended
Diphtheria	Required	Recommended
Tetanus	Required	Recommended
Pertussis (Whooping Cough)	Required	Recommended
Influenza	Required	Recommended
Tuberculosis assessment	Required	Recommended
*Hepatitis A	*Recommended	*Recommended

- All workers in NSW Health facilities
e.g. students, new recruits, volunteers and agency staff
- Requirements must be met prior to commencement
- Temporary compliance may be issued for Hep B

Evidence of Protection

Vaccination Record Card for Category A Workers (including Students)



INSTRUCTIONS

- Enough information must be provided to enable an assessor to verify that an appropriate vaccine has been administered by a vaccination provider therefore:
 - Providers should record their full name, signature, date specific vaccine given and official provider stamp at the time of vaccine administration.
 - Record batch numbers where possible.
 - Serological results should be recorded on the card as numerical values or positive/negative, as appropriate, not simply "immune".
 - Copies of vaccination records (e.g. childhood vaccination) and copies of relevant pathology reports may be attached to the card, if available.
 - Attach another card if additional recording space is required.

Evidence required for Category A Staff

Disease	Evidence of vaccination	Documented serology results	Other evidence
COVID-19	<input type="checkbox"/> AIR Immunisation History Statement or AIR COVID-19 digital certificate OR Evidence of a temporary or permanent medical contraindication - recorded on the AIR Immunisation History Statement.	Not applicable	
Diphtheria, tetanus, pertussis (whooping cough)	<input type="checkbox"/> One adult dose of pertussis containing vaccine (aTpa ¹) within the last 10 years. Do not use ADT vaccine as it does not contain the pertussis component	Serology must not be accepted	
Hepatitis B	<input type="checkbox"/> History of completed age-appropriate course of hepatitis B vaccine Adolescent course: two doses of adult vaccine, given 4 to 6 months apart, between 11-15 years of age; an accelerated course is not acceptable.	<input type="checkbox"/> Anti-HBs greater than or equal to 10mIU/mL. Serology must be at least 4 weeks after completing the hepatitis B vaccine course	<input type="checkbox"/> Documented evidence of anti-HBc, indicating past hepatitis B infection, and/or HBsAg+
Measles, mumps, rubella (MMR)	<input type="checkbox"/> 2 doses of MMR vaccine at least one month apart Serology is NOT REQUIRED following completion of a documented MMR vaccination course.	<input type="checkbox"/> Positive IgG for measles, mumps and rubella ²	<input type="checkbox"/> Birth date before 1966
Varicella (chickenpox)	<input type="checkbox"/> 2 doses of varicella vaccine at least one month apart Evidence of one dose is sufficient if the person was vaccinated before 14 years of age)	<input type="checkbox"/> Positive IgG for varicella ³	<input type="checkbox"/> An Australian Immunisation Register (AIR) history statement that records natural immunity to chickenpox can also be accepted as evidence of compliance for varicella ³
Tuberculosis (TB)	Not applicable	<input type="checkbox"/> Interferon Gamma Release Assay (IGRA) + Clinical review for positive results by TB Service/Chest Clinic	<input type="checkbox"/> Tuberculin skin test (TST) + Clinical review for positive results by TB Service/Chest Clinic
* For those assessed as requiring screening	Not applicable		
Influenza vaccine	<input type="checkbox"/> One dose of current southern hemisphere seasonal influenza vaccine by 1 June each year	Not applicable	

¹ TB screening (TST or IGRA) required if the person was born in a country with high incidence of TB, or has resided or travelled for a cumulative time of 3 months or longer in a country with a high incidence of TB, as listed at: www.health.nsw.gov.au/infectious/tuberculosis/Pages/high-incidence-countries.aspx

² Serology must not be performed to detect pertussis immunity.

³ Serology is only required for MMR protection if vaccination records are not available and the person was born during or after 1966.

⁴ A verbal history of Varicella disease must not be accepted.

NSW HCW Vaccination Card

3 Pages
Easily lost
Good Instructions

AIR Statement

Schedule	Date given	Immunisation	Brand name given
Birth	30 Jul 2017	Hepatitis B	Engerix-B
2 months	30 Sep 2017	Diphtheria Tetanus Pertussis Hib Hepatitis B Poliomyelitis Pneumococcal Rotavirus	Hexaxim Prevenar 13
4 months	30 Nov 2017	Diphtheria Tetanus Pertussis Hib Hepatitis B Poliomyelitis Pneumococcal Rotavirus	Hexaxim Prevenar 13
6 months	30 Jan 2018	Diphtheria Tetanus Pertussis Hib Hepatitis B Poliomyelitis Measles Mumps Rubella	Hexaxim MMR II
12 months	30 Jul 2018	Meningococcal ACWY Pneumococcal	Nimenrix Prevenar 13
18 months	30 Jan 2019	Hib Diphtheria Tetanus Pertussis Measles Mumps Rubella Varicella	Hiberix Infanrix Priorix-Tetra
4 years	30 Jul 2021	Diphtheria Tetanus Pertussis Poliomyelitis	Infanrix IPV

Next NIP Immunisation's due: No vaccines due.

Notice/s: This individual has received all vaccines required under the National Immunisation Program childhood schedule.

Original Pathology results

REPORT STATUS: FINAL

ORDERING PHYSICIAN: [REDACTED]

PATIENT INFORMATION: DOB: [REDACTED], AGE: [REDACTED], GENDER: [REDACTED], FASTING: [REDACTED]

CLIENT INFORMATION: ACCESSA, Order Today, www.accessalabs.com/iters

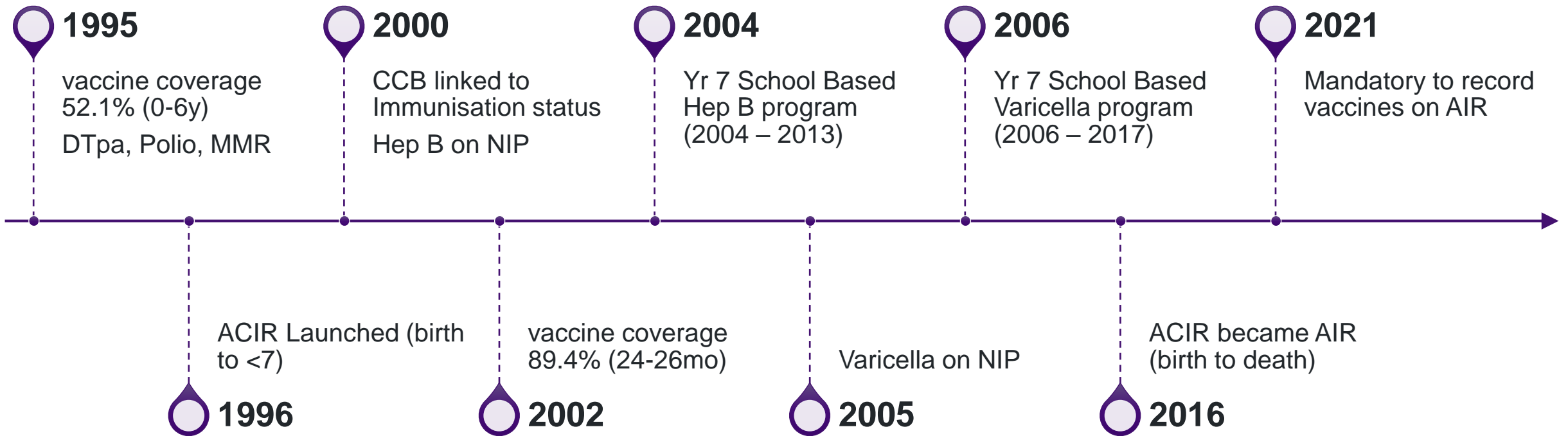
Test Name	Result	Flag	Reference Range	Lab
HEPATITIS B SURFACE ANTIBODY (QUANT)	HEPATITIS B SURFACE ANTIBODY (QUANT)850		850/ML	DR

Patient has immunity to hepatitis B virus.

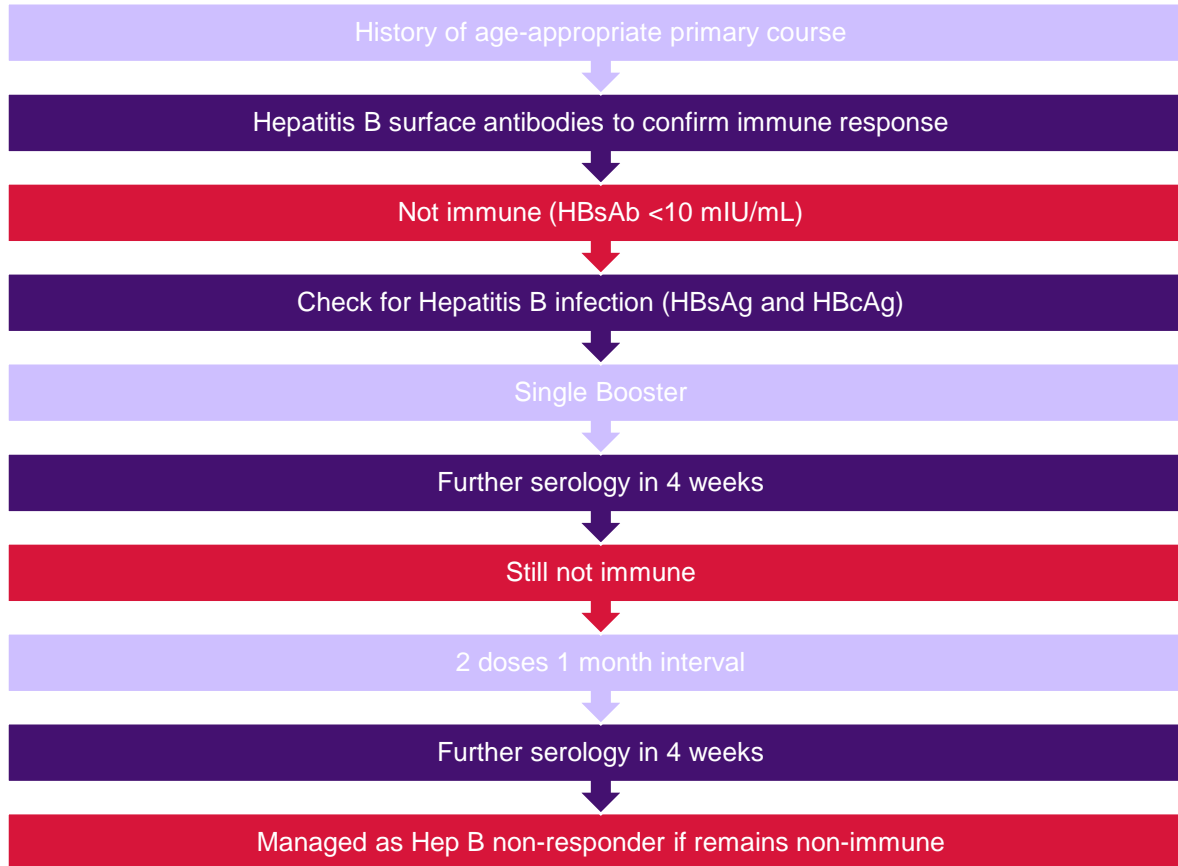
This test was performed using the Siemens chemiluminescent method effective November 21, 2013. Quantitative values from the previous Ortho Vitros method should not be used interchangeably.

Performing Laboratory Information:

Where are my vaccines?



Hepatitis B



3 Dose schedule highly effective at stimulating neutralising antibodies

- 90% healthy adults
- >97% children



Protection should be assumed based on number of documented doses received



Minimum interval 28 days between live vaccines

MMR not Immune what to do?

2 doses documented	1 dose documented	0 doses documented
<ul style="list-style-type: none">• 1 x Booster	<ul style="list-style-type: none">• Give second dose	<ul style="list-style-type: none">• Give two doses (1 month apart)



Varicella not immune?

- Vaccinate if no Hx
- Talk to the lab

References



[Department of Health and Aged Care | Immunisation coverage in Australian children: a systematic review 1990-1998](#)

[Significant events in hepatitis B vaccination practice in Australia \(ncirs.org.au\)](#)

[Varicella_History table.pdf \(ncirs.org.au\)](#)

[4813.0.55.001 - Occasional Paper: Vaccination Coverage in Australian Children - ABS Statistics and the Australian Childhood Immunisation Register \(ACIR\), 2001](#)

[Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases \(nsw.gov.au\)](#)

[Hepatitis B vaccination: A completed schedule enough to control HBV lifelong?: Milan, Italy, 17–18 November 2011 - ScienceDirect](#)