



POLICY

Immunisation in Community Pharmacy

Position

The Pharmacy Guild of Australia supports the National Immunisation Strategy 2013-2018, aimed at:

- improving immunisation rates;
- strengthening the National Immunisation Program;
- enhancing vaccine safety and monitoring systems; and
- ensuring adequate skilled immunisation workforce¹.

This aligns with the Guild's strategic vision, which is to advance the health and quality use of medicines for all Australians, in collaboration with other health professionals, through community pharmacy. As one of the most highly trusted and easily accessible health care providers, community pharmacies are ideally placed to supply and administer immunisations, encourage uptake of immunisation in the community, address the concerns and dispel myths and misinformation in relation to immunisation. To that end, since 2014, the Guild has worked with Australian States and Territories to enable pharmacists practising in the community pharmacy setting to supply and administer immunisations by amending the relevant jurisdictional legislations.

The Guild has identified a number of barriers related to community pharmacy that must be addressed so that community pharmacy can play an optimal role in helping to meet the objectives of the National Immunisation Strategy 2013-2018. This includes:

- nationally consistent scope of practice for pharmacist immunisers, to help support adequately skilled immunisation workforce and overcome the barriers to efficient delivery
- broadening of range of pharmacist administered immunisations to the objectives of the Immunise Australia program
- access to the National Immunisation Program to eligible populations through community pharmacy, in order to improve immunisation rates in adults, adolescents and children
- promoting the uptake and use of the Australian Immunisation Register in community pharmacies, through IT enablement and integration.

¹ Commonwealth of Australia, 2014, 'National Immunisation Strategy for Australia 2013-2018', [http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/B2D3E81EEDF2346ACA257D4D0081E4BC/\\$File/nat-immune-strategy-2013-18-final.pdf](http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/B2D3E81EEDF2346ACA257D4D0081E4BC/$File/nat-immune-strategy-2013-18-final.pdf)

Background

Immunisation has emerged as one of the most effective public health strategies of the past 200 years and can be credited with saving countless lives around the globe². World Health Organisation estimates that annually, vaccines prevent around 2.5 million deaths world-wide¹. Immunisation remains an important public health issue in Australia and the low incidence of vaccine preventable diseases is a testament to the effectiveness of Australia's National Immunisation Strategy and national immunisation programs.

Community pharmacies are the most accessible and highly trusted providers of primary health care, making them ideally placed to contribute to health initiatives, such as immunisations, that are designed to improve the wellbeing of Australians.

Nationally Consistent Scope of Practice

National Immunisation Strategy 2013-2018 recognises that jurisdictional variations in training and credentialing standards pose a barrier to efficient delivery of immunisations across Australia. This is inconsistent with national registration of the health workforce, which enables registered health professionals, including pharmacists, to attain national recognition of their training and skills, so that they may practise in all States and Territories in their full capacity.

The Pharmacy Board of Australia recognises immunisation within the scope of pharmacists' practice. Hence, in line with other professional duties that lie within a pharmacist's role, immunisation training, scope and standards of practice should be nationally standardised to enable the transfer of skills and training across the country, thereby helping to minimise workforce capacity as a barrier to greater immunisation rates. Furthermore, the role of community pharmacy should be recognised in key national regulatory and strategy documents, such as the National Immunisation Strategy 2013-2018.

Broadening the range of vaccines administered in community pharmacies

The range of vaccines that may be administered in the community pharmacy varies across States and Territories. Under the oversight of the Pharmacy Board of Australia, pharmacists' scope of practice should be expanded to include the supply and administration of all immunisations and to all age groups, in line with Immunise Australia program. This has the potential to increase and maintain the rates of immunisation in the community, consistent with strategic priorities of the Australian National Immunisation Strategy 2013-2018. Internationally, the range of immunisations administered by pharmacists encompasses childhood and adolescent, as well as adult vaccines. It includes vaccines funded under national immunisation programs as well as privately funded vaccines, such as travel vaccines³. Overall, this broader scope of vaccination offered in community pharmacy would see pharmacy integrated as a core provider of immunisation services in the primary health care setting.

² World Health Organization (WHO) 2013, 'Global Vaccine Action Plan 2011-2020, World Health Organization Geneva

³ International Pharmaceutical Federation (FIP) 2016, 'An overview of current pharmacy impact on immunisation: A global report', FIP Geneva. https://fip.org/files/fip/publications/FIP_report_on_Immunisation.pdf

National Immunisation Program (NIP) administered in community pharmacies and the role of pharmacy in pandemic response planning

National Immunisation Program was established with the aim of improving immunisation coverage rates, by delivering essential vaccinations to children, adolescents and eligible adults, free of charge⁴. The overall rates of immunisation in Australia are high, exceeding 90% on average. However, for some communicable diseases such as influenza, which is the leading cause of illness among adults in the winter months⁵, the rates of annual immunisation are on the decline⁶. As well as time off work, it poses a particular risk of hospitalisation and death among the elderly and at risk populations, including people with chronic illness such as respiratory and heart disease, Aboriginal and Torres Strait Islanders and those with compromised immunity⁷. These patients are often living with one or more chronic diseases⁸ that require treatment with medicines and they frequent their pharmacies on a regular basis.

Therefore, as the most accessible and highly frequented health destinations, community pharmacies are ideally placed to promote the benefits and administer the broader NIP funded vaccines to all Australians. This would also assist the Primary Health Networks in their objectives of increasing immunisation rates. Pharmacists offering immunisation in community pharmacies can also be a valuable resource to State and Territory governments in times of pandemics and should be included in pandemic response planning.

Increasing the use of the Australian Immunisation Register (AIR)

Access to AIR will be essential in clinical practice, as the scope of pharmacist immunisation expands and meaningful use of AIR in community pharmacies should be supported by the profession and the Department of Human Services. Community pharmacies can contribute to accurate and complete immunisation records through the use of AIR, which will update the person's My Health Record (MyHR) and be accessible to both patients and other health professionals along their health journey.

Authority

Endorsed

National Council – January 2018

Reviewed

Policy and Regulation Sub-Committee – October 2017

Pharmacy Viability Committee – November 2017

⁴ Commonwealth of Australia, 2014, 'National Immunisation Strategy for Australia 2013-2018', [http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/B2D3E81EEDF2346ACA257D4D0081E4BC/\\$File/nat-immune-strategy-2013-18-final.pdf](http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/B2D3E81EEDF2346ACA257D4D0081E4BC/$File/nat-immune-strategy-2013-18-final.pdf)

⁵ Dey, A, Knox, S, Wang, H, Beard, FH and McIntyre, PB 2016, 'Summary of National Surveillance Data on Vaccine Preventable Diseases in Australia, 2008-2011', National Centre for Immunisation Research and Surveillance of Vaccine Preventable Diseases (NCIRS). < <http://health.gov.au/internet/main/publishing.nsf/Content/cda-cdi40suppl.htm>>

⁶ Western Australian Department of Health 2017, 'Minister for Health: Flu vaccination rates slump to an alarming low', media release, <http://ww2.health.wa.gov.au/Media-releases/Flu-vaccination-rates-slump-to-an-alarming-low>

⁷ Immunise Australia Program 2015, 'Immunise Australia program: Introduction', Australian Government Department of Health, Commonwealth of Australia. 2017. <<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/introduction-ai>>

⁸ The Australian Immunisation Handbook 2017, <http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook10-home>, Commonwealth of Australia, Canberra