



## Flu Vaccination Update 2021

April 2021

Magali De Castro

**Clinical Director, HotDoc** 

In the spirit of reconciliation, HotDoc acknowledges the Traditional Custodians of country throughout Australia and their connections to land, sea and community.

We pay our respect to their elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today.

## Flu Vaccination Update 2021

#### This session will cover:

- Information on the 2021 flu vaccine strains
- Considerations for Flu Clinic workflows alongside the COVID-19 vaccine rollout
- Billing considerations: Medicare vs Private billing
- Practice resources and tips for a safe patient flow
- Q&A with Magali De Castro



#### 2021 Influenza Vaccine



#### Key messages

- Influenza vaccinations must be recorded on the Australian Immunisation Register (AIR)
- Administration of an influenza vaccine & a COVID-19 vaccine should be a minimum of 14 days apart
- A new cell-based influenza vaccine (Flucelvax Quad®) is available but not funded under the National Immunisation Program (NIP)
- For adults aged ≥ 65 years, the adjuvanted influenza vaccine, Fluad®
   Quad, is preferentially recommended over standard influenza vaccine

#### 2021 Influenza Vaccine



#### Timing of vaccination

- Optimal protection against influenza occurs within the first 3 to 4 months following vaccination
- Peak influenza circulation is typically June to September for most parts of Australia
- It is never too late to vaccinate since influenza can circulate all year round.
- Vaccination should continue to be offered as long as influenza viruses are circulating and a valid vaccine (before expiration date) is available

## Timing influenza vaccination with COVID-19 vaccination

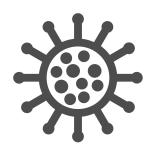
- The preferred minimum interval between a dose of seasonal influenza vaccine and a dose of Comirnaty (Pfizer) or COVID-19 Vaccine AstraZeneca is 14 days
- If an influenza vaccine has been inadvertently coadministered or given within a shorter interval than 14 days with a COVID-19 vaccine, revaccination with either vaccine is not necessary
- There is no particular requirement regarding the order of receiving a dose of influenza vaccine and either the first or second dose of a COVID-19 vaccine

#### **About the 2021 Flu Vaccine**

#### Composition (Egg-based vaccines)

- •A (H1N1): A/Victoria/2570/2019 (H1N1)pdm09-like virus\*
- •A (H3N2): A/Hong Kong/2671/2019 (H3N2)-like virus\*
- •B: B/Washington/02/2019-like (B/Victoria lineage) virus
- •B: B/Phuket/3073/2013 like (B/Yamagata lineage) virus

\* New strain differs from 2020 vaccine



#### **About the 2021 Flu Vaccine**

#### Composition (Cell-based vaccines)

- •A (H1N1): A/Wisconsin/588/2019 (H1N1)pdm09-like virus\*
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\* New strain differs from 2020 vaccine

## **National Immunisation Program**

#### Patients eligible for Governmentfunded flu vaccine:



- Everyone 65 years of age and over
- All pregnant women at during any stage of pregnancy
- All Aboriginal and Torres Strait Islander people 6 months and over
- All children 6 months to less than 5 years
- All persons aged ≥ 6 months who have certain medical conditions (details on next slide)

## **National Immunisation Program**

All persons aged ≥ 6 months who have certain medical conditions:

Table 3. Medical conditions associated with an increased risk of influenza disease complications and for which individuals are eligible for free vaccination under the NIP\*

Category	Medical conditions
Cardiac disease	Cyanotic congenital heart disease, congestive heart failure, coronary artery disease
Chronic respiratory conditions	Severe asthma, cystic fibrosis, bronchiectasis, suppurative lung disease, chronic obstructive pulmonary disease, chronic emphysema
Chronic neurological conditions	Hereditary and degenerative CNS diseases, seizure disorders, spinal cord injuries, neuromuscular disorders
Immunocompromising conditions	Immunocompromise due to disease or treatment, asplenia or splenic dysfunction, HIV infection
Diabetes and other metabolic disorders	Type 1 or 2 diabetes, chronic metabolic disorders
Renal disease	Chronic renal failure
Haematological disorders	Haemoglobinopathies
Long-term aspirin therapy in children aged 6 months to 10 years	These children are at increased risk of Reye syndrome following influenza infection

<sup>\*</sup> See the <u>Australian Immunisation Handbook</u> for advice on people who are strongly recommended to receive annual influenza vaccination but not eligible for NIP-funded influenza vaccines.

## Seasonal influenza vaccines available for use in Australia in 2021, by age

Table 1. Seasonal influenza vaccines registered and available for use in Australia in 2021, by age

Vaccine Registered age group	Vaxigrip Tetra 0.5 mL (Sanofi)	Fluarix Tetra 0.5 mL (GSK)	FluQuadri 0.5 mL (Sanofi)	Influvac Tetra 0.50 mL (Mylan)	Afluria Quad 0.5 mL (Seqirus)	Flucelvax Quad 0.5 mL (Seqirus)	Fluad Quad 0.5 mL (Seqirus)
6 to 35 months (<3 years)	✓	✓	✓	x	X	X	x
≥3 to <5 years	✓	✓	✓	✓	X	X	X
≥5 to <9 years	<b>√</b> *	<b>√</b> *	✓	✓	<b>√</b> *	X	X
≥9 to <65 years	<b>√</b> *	<b>√</b> *	✓	✓	<b>√</b> *	✓	x
≥65 years	✓	✓	✓	✓	✓	✓	✓

Ticks indicate age at which a vaccine is registered and available. Shaded boxes indicate the vaccine is funded under the NIP for eligible people.

<sup>\*</sup> NIP funding only for Aboriginal and Torres Strait Islander people, pregnant women and people who have certain medical conditions.

#### **Dose recommendations**

Most people should receive <u>1 dose</u> of influenza vaccine <u>each year</u>

However the following should receive 2 doses, 4 weeks apart:

- Children aged 6 months to <9 years receiving influenza vaccine for the first time
- People of any age receiving influenza vaccine for the first time after haematopoietic stem cell or solid organ transplant

#### **Contraindications**



#### The only **absolute** contraindications:

- Anaphylaxis following a previous dose of any influenza vaccine
- Anaphylaxis following any vaccine component

#### People with **known egg allergy**:

People with egg allergy, including a history of anaphylaxis, can be safely vaccinated with influenza vaccines

If there is **significant parental or health professional anxiety**, the vaccine may be administered in primary care settings with a **longer waiting period of 30 minutes** 

https://immunisationhandbook.health.gov.au/vaccine-preventable-diseases/influenza-flu retrieved 14/04/20

#### Side effects and reactions

#### Side effects may include:

- Injection site reactions: pain/redness/swelling/hardening of tissue
- Fever
- Muscle aches
- Tiredness

#### Anaphylaxis is very rare, but very serious if it occurs.

- Adrenaline and a suitably trained provider must always be readily available
- Patients should wait at least 15 minutes at the clinic after their vaccination



## Mandatory reporting of influenza vaccinations to the AIR

From 1 March 2021, it has become mandatory for all vaccination providers to report flu vaccinations to the AIR

#### Before giving an influenza vaccine, you should tell the patient:

- That you will report their vaccination details to the Australian Immunisation Register
- This will include some personal information such as name, date of birth, contact details and some health care identifiers including their Medicare card number.

### Other considerations



Post-vaccination side effects may mimic influenza symptoms.

None of the influenza vaccines available in Australia contain live influenza viruses, so they cannot cause influenza.

Repeat vaccination every year.

Report adverse events to TGA: www.tga.gov.au/reporting-problems-1

Adverse Medicines Events Line: 1300 134 237 (for patients)





Immunise as many people as possible while reducing any potential risk of COVID-19 cross-infection

#### **Key considerations:**

- Promptly <u>identify anyone with fever or respiratory symptoms or</u> <u>any coronavirus risk factors</u>
- If current fever over 38.5C then postpone immunisation until well
- If current acute systemic illness consider postponing immunisation
- Run either separate low risk and higher risk flu clinics OR only low risk clinics

Low risk = no symptoms, no contact with neither known nor suspected cases, no travel interstate or overseas in the previous 14 days, and not from a high risk area with confirmed cases.

## Additional measures for infection control



- Maintain social distancing between patients at all times
- Reduce unnecessary contact between patients and practice surfaces
- Use minimal equipment and chairs/furniture that can be easily cleaned/disinfected between patients
- Consider the best way to prevent patients from entering the clinic, particularly if unable to socially distance, until it's time for their vaccination (eg. Getting patients to wait in their car and messaging/ringing them when the clinician is ready)

## Additional measures for infection control



- Have a waiting area ready for observations for 15 minutes post immunisation, where patients can socially distance appropriately
- Space out vaccination times to prevent overcrowding of the post-vaccine observation waiting area
- Streamline documentation: consider creating a shortcut or autofill text for your clinical software:
- e.g. "Informed consent for influenza vaccination obtained (verbally) / (attach consent form to patient file). Patient advised to stay in our designated observation area, while maintaining social distancing, for 15 minutes after vaccination."

## Sample Flu Clinic Patient Flow

Sample clinic where a vaccine is given ever 5 minutes:

- The post vaccination
   waiting area must be able
   to accomodate at least
   4 patients with
   adequate social
   distancing at any given
   time
- Providers need to stay in the practice for at least 15min after the last patient was immunised

Time	Patient being vaccinated	Patient waiting post vaccination (15min)			
10:00	# 1	ı			
10:05	# 2	#1			
10:10	# 3	#1	#2		
10:15	# 4	#1	#2	#3	
10:20	# 5	#2	#3	#4	
10:25	# 6	#3	#4	#5	
10:30	# 7	#4	#5	#6	
10:35	# 8	#5	#6	#7	
10:40	# 9	#6	#7	#8	
10:45	# 10	#7	#8	#9	
10:50	# 11	#8	#9	#10	
10:55	# 12	#9	#10	#11	
11:00	End of Vaccinations	#10	#11	#12	
11:05	Wait post vaccine	#11	#12		
11:10	Wait post vaccine	#12			
11:15	End of clinic	-			

## Flu Clinic Types

#### At the practice



- Allocate protected days/times for vaccination sessions (flu clinic appointment)
- If participating in COVID-19 vaccinations, consider running flu/covid vaccine clinics on alternate days or morning vs evening
- Nurse-led vaccination clinics
- Team approach of GP + nurse

#### Workplace/Corporate vaccinations

Assist with uptake and herd immunity

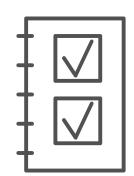
Challenges of off-site flu clinics (staff, equipment and cold chain logistics)

#### Pop-up/Mobile service

Outreach service

## Preparing the practice

For safe & efficient patient flow



Opportunistic vs Planned approach to flu vaccines

Use clinical software to get a list of eligible patients

Allocate nurse/GP times, sessions or days when flu clinics will run

Decide if the practice will be **Bulk billing or Privately billing** consults

**Inform all staff** of flu clinic process (staff discussion or electronically)

Ensure there's enough stock to meet demand

Discard stock from the previous season & check expiry dates

Check vaccine fridge temperatures are recorded daily and are within recommended range +2° to +8° C

Ensure there is adequate **equipment & staff for anaphylaxis management** 

### Preparing the practice

# SA,

#### For safe & efficient patient flow

#### Recruit patients

Poster outside practice and in the waiting room to promote flu vaccination

**Proactively invite patients**: SMS Broadcast (with opt-out option), or via social media posts, letters or phone

Promote influenza vaccination to all patients

Immunise practice staff!!

#### **Essential Resources**

#### For safe & efficient patient flow

- Waiting room poster, social media post and/or practice website promotion of your flu vaccination service
- Invitation SMS/email/letter
- Patient fact sheet/consent form: consider electronic format (sent before appointment) or have available at the practice printed or in large poster format (eg A3) so patients can read it while they wait and then provide verbal consent during the consult
- Clinical reference to have ready access to:
  - The Australian Immunisation Handbook (online)
  - Age/brand/dosage table (ATAGI)
  - Anaphylaxis management dose table (Immunisation Handbook)

### Nurses' scope of practice

#### RN Div 1 or Med-endrosed EN Div 2

Influenza vaccines are Schedule 4 drugs

The vaccine must be initiated/authorised by a GP prior to administration

A GP must be readily available (at the clinic) in case of anaphylaxis (including until the last patient's 15min waiting time is up)

The authorising/ordering GP must make an entry in the patient file

#### Credentialed Nurse Immunisers

May initiate influenza vaccines as per the National Immunisation Schedule

GP intervention is not required

Nurse must have CPR and anaphylaxis management skills up to date

## Billing considerations

#### Bulk billing vs Private billing

MBS Items:



3 or Telehealth equivalent— Brief. Must include a GP consult & entry in patient file

23 or Telehealth equivalent - Standard (up to 20min). Must include a GP consult & file entry

10997 – Nurse Monitor/Support. Patient must have a GPMP in place. Consult should include a <u>documented</u> element of monitoring or support of the patient's chronic illness as per the patient's GPMP beyond simply "giving the jab"

#### Private billing without a Medicare rebate

Private fee for nurse consult (\$5 - \$15+)

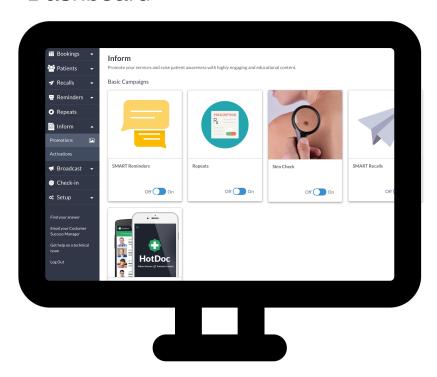
Private fee for vaccine if not eligible for government supply (\$10 - \$25+)

Must use private stock if charging for vaccines

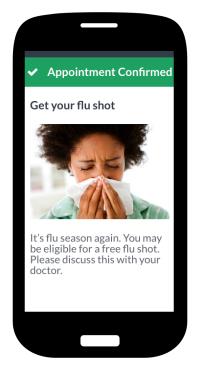
### Effective tools to help your practice

#### HotDoc Inform Promotions

#### Dashboard



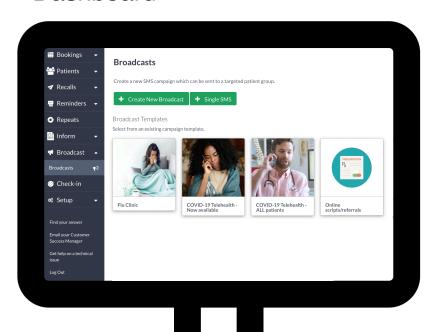
#### Patient Message



#### Effective tools to help your practice

#### Broadcast (SMS Campaign)

#### Dashboard



#### Filter query by:

Patient age

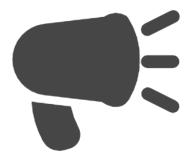
Gender

Or

Use a CSV export from your clinical software or Audit Tool (eg Pen CAT or POLAR GP)

## Helping practices communicate with patients

4c SMS for any Broadcast campaigns during the month of April



#### FREE RESOURCE

## Flu Clinic Kit

Download link in the chat

#### New features coming 27th April

Some of our new COVID-19 vaccine features will be available for flu vaccine appointments too

You'll be able to from 27th April:

- Send a flu vaccine patient consent form
- Schedule multiple bookings in one appointment slot
- Create appointments with multiple practitioners

Please set up your practice software as per the Practice Software Set-up Guide located in the Flu Clinic Kit.





**COVID Vaccine Roll Out:** Where are we now?

WED 14 APRIL 12:30pm AEST



Magali De Castro Clinical Director at HotDoc



Riwka Hagen Medical Business Services



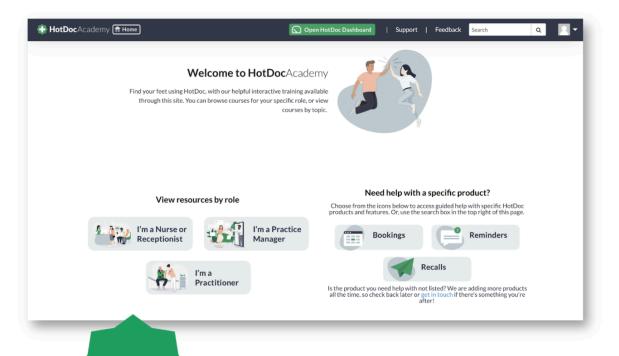
Kim Poyner MediCoach

#### Online Resource

## COVID-19 Vaccine Hub

Access via - https://practices.hotdoc.com.au/covid-19-vaccine-hub/





**COVID-19 Vaccination Resources** 

courses available below.

Get your clinic ready COVID-19 Vaccinations with these

free resources from HotDoc Academy. Choose from the

#### **Online Learning**

## HotDoc Academy

Access via - https://academy.hotdoc.com.au

#### **Online Resource**

## Medical Reception Training Hub

Access via - https://practices.hotdoc.com.au/reception-training-hub/

HUB

#### Medical Reception Training Hub

Welcome to our training hub for medical receptionists and practice admin teams.



This hub is the perfect starting place for any new receptionist or PM joining your team and for refreshing the skills of existing staff.

We've divided the hub into two sections: (1) training most relevant to frontdesk staff and (2) training most relevant to PMs and Business Owners.



#### Training for the front-desk team

These topics are great as part of staff induction or as refreshers for existing staff. All courses earn **CPD hours**.



Customer Service & Patient Feedback



Triage Principles & Tools



Privacy & Confidentiality



Working with Interpreters



Cold Chain Management

Pletche Weiter
Infection Centrel Update
for the General Practice Team
Water
State and Teach Control of Team
Practice Team
Practice Control of Team
Practice Control of Team
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Infection Control

#### **Online Resource**

# Accreditation Buddy

Access via - https://try.hotdoc.com.au/accreditation-buddy

