

Manual:	Corporate Policy and Procedure	Ref. No.:	15.02
Section:	Infection Prevention and Control	Issue Date:	November 2021
Title:	COVID-19 Vaccination Policy – Accredited Practitioners	Page:	1 of 10

PURPOSE

Healthscope is responsible for providing a safe workplace and in doing so reduce the risk of transmission of COVID-19. Healthscope recognises that COVID-19 is a highly contagious and potentially fatal condition and has developed this risk-based policy to reduce the risk of COVID-19 transmission in the workplace.

Risk Assessment

This policy has been developed and implemented following a comprehensive risk assessment undertaken by Healthscope and is based on guidance provided by the Australian Government Coronavirus (COVID-19) website, Safe Work Australia and other federal, state and territory government websites and safety regulators.

Healthscope has deployed vaccination as a safety control and considers it to be more effective than alternative controls such as personal protective equipment (PPE). This policy has been deployed to afford all persons affected by Healthscope's undertaking with the greatest protection reasonably practicable.

Control Measures

Healthscope has already implemented a number of safety control measures to manage COVID-19 in the workplace and minimise the risk of its transmission, including:

- COVID Safe Business Plans, Operational Readiness Checklists, ventilation processes, physical distancing, staggering of breaks, increased cleaning of equipment and high touch surfaces, the use of personal protective equipment, good hand hygiene, COVID-19 patient and staff screening app, COVID-19 policies and guidelines.

All practitioners must continue to comply with Healthscope's policies and procedures relating to COVID-19.

This COVID-19 Vaccination Policy supplements and should be read in conjunction with the following Healthscope policies and guidelines:

- Healthscope Respiratory Protection Program (2.72)
- Healthscope COVID-19 PPE Guideline
- Healthscope COVID-19 Asymptomatic Testing
- Local site COVID Safe plan
- Immunisation for Vaccine Preventable Diseases for Healthcare Workers Policy (6.29)
- Personal Protective Equipment Policy (6.23)
- Patient Precautions – Standard and Transmission Based, Management of Policy (2.72)
- Work Health and Safety (WHS) Policy (6.01)

Healthscope recognises that the COVID-19 vaccine is not a complete solution to managing COVID-19 in the workplace but it must form a part of robust, multi-layered strategy to ensure we can go about business and provide care as safely as possible.

SCOPE

This policy applies to all credentialed practitioners working within any Healthscope premises or providing care to Healthscope patients or residents, but not employed or engaged directly by Healthscope, including but not limited to Visiting Medical Officers (VMOs), Resident Medical Officers (RMOs), Surgical Assistants, Registered Health Practitioners, Osteopaths, Dietitians, Dental Assistants, Speech Pathologists, Physiotherapists, Social Workers and Psychologists (hereafter collectively referred to as "**Accredited Practitioners**").

A separate and similar Healthscope COVID-19 vaccination policy is being developed for all clinical, non-clinical, support, administrative and executive workers employed or engaged by Healthscope (see COVID-19 Vaccination Policy – Workers).

A separate and similar Healthscope COVID-19 vaccination policy is being developed for contracted service providers, sub-contractors, employees of a contractor or subcontractor, agency staff and students.

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Manual: Corporate Policy and Procedure
Section: Infection Prevention and Control

Ref. No.: 15.02
Issue Date: November 2021
Page: 2 of 10

Title: COVID-19 Vaccination Policy – Accredited Practitioners

Separate Healthscope COVID-19 vaccination policies, or modifications to existing policies may be developed for other cohorts including temporary workers not engaged directly by Healthscope, Healthscope tenants, visitors and patients. The reason for creating separate policy documents related to vaccination is due to the different legal relationships we have with various stakeholders, and the policy terms need to be appropriate in light of the legal relationships.

POLICY

Principles:

- Healthscope has implemented this risk-based policy to reduce the risk of COVID-19 transmission in the workplace. Healthscope recognises that COVID-19 is a highly contagious and potentially fatal condition.
- Healthscope has a moral and legal responsibility to take all reasonable practical steps to provide a safe workplace.
- Healthscope has deployed vaccination as a safety control and considers it to be more effective than alternative controls such as personal protective equipment (PPE). This policy has been deployed to afford all persons affected by Healthscope’s undertaking with the greatest protection reasonably practicable.

COVID-19 Vaccination Program Aims:

- Ensure optimal protection for our patients from COVID-19, especially vulnerable patients
- Provide safe workplaces for our people and partners
- Create a reputation as a safe health provider and destination health employer
- Assure compliance with Public Health Orders

Policy Framework:

- **Unless required to do so earlier pursuant to an applicable Public Health Order or other legislation or directive, to perform work at Healthscope premises after 31 January 2022, all Accredited Practitioners are required to show evidence of completed vaccination against COVID-19, or alternatively to demonstrate evidence of a valid medical exemption as endorsed through Healthscope governance processes.**
- The requirement for COVID-19 vaccination is based on the high transmissibility and level of risk to the Accredited Practitioners or patients of exposure to COVID-19.
- **It is the Accredited Practitioner’s responsibility to arrange their vaccination to ensure compliance with this policy or applicable Public Health Order.**
- In some Healthscope facilities, Healthscope will offer on-site administration of COVID-19 vaccinations.
- COVID-19 vaccination does not exempt Accredited Practitioners from compliance with all other infection prevention policies, protocols and directives such as those itemised in Healthscope’s Respiratory Protection policy.

Evidence:

- Evidence of COVID-19 vaccination can be in the form of either an individual’s **COVID-19 Vaccination Certificate** or **Immunisation History Statement** from the Australian Immunisation register (AIR). Data will be collected in accordance with Healthscope’s COVID-19 Vaccination privacy statement. If the Accredited Practitioner is unable to obtain the prescribed form of required evidence, Healthscope will discuss alternative acceptable evidence under the circumstances.

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Manual: Corporate Policy and Procedure
Section: Infection Prevention and Control

Ref. No.: 15.02
Issue Date: November 2021
Page: 3 of 10

Title: COVID-19 Vaccination Policy – Accredited Practitioners

- **All Accredited Practitioners are required to provide evidence for verification by Healthscope by 31 January 2022 to confirm they have received the required COVID-19 vaccinations, unless required earlier pursuant to a Public Health Order or other legislation or directive.**
- When applying for accreditation and/or re-accreditation with Healthscope, Accredited Practitioners are required to provide evidence of receipt of the COVID-19 vaccinations or valid exemption.

Exemptions:

- Healthscope is only able to offer exemptions where permitted by law.
- Healthscope recognises that there may be circumstances which prevent an Accredited Practitioner from being able to comply with this policy, for example in circumstances where a medical contraindication makes it unsafe for the Accredited Practitioner to have the COVID-19 vaccination. Healthscope will consider and discuss those circumstances with the relevant Accredited Practitioner and determine whether to grant an exemption.
- Should an Accredited Practitioner wish to apply for an exemption, the Accredited Practitioner is required to:
 - Provide a completed 'Request for Exemption Form', together with supporting documentation in writing to the General Manager of the Healthscope premises at which the Accredited Practitioner works.
 - **Exemptions must be submitted to the relevant General Manager by no later than 30 November 2021**, unless required earlier pursuant to a Public Health Order or other legislation or directive.
 - For medical contraindications, supporting documentation must follow the prescribed form pursuant to any applicable Public Health Order, and if no standard form applies, be issued from a qualified medical practitioner and state the medical reason(s) why the Accredited Practitioner should be exempt.
- Once the above has been received, Healthscope will assess each exemption request on a case-by-case basis. Healthscope may request additional information from the Accredited Practitioner as part of this assessment. Healthscope may not in all cases be able to grant an Accredited Practitioner's request. Examples of exemption requests which are not likely to be accepted by Healthscope include:
 - 'Conscientious objections' (i.e. theories or personal positions against COVID-19 vaccination)
 - Requests where the reason for the exemption does not meet the Public Health Order or legislative requirements for exemption, as applicable (for example, only limited medical contraindications are permitted pursuant to the NSW Public Health Order).
- If an exemption is granted, Healthscope will conduct a risk assessment and may, at its discretion, implement additional control measures for the Accredited Practitioner which may include additional COVID-19 testing, the use of PPE and/or explore alternative work arrangements to ensure the health and safety of the Accredited Practitioner and others in the workplace.
- It should be considered that additional control measures may not be sufficient depending on matters including but not limited to:
 - The high infectivity of the COVID-19 virus and risk of transmission
 - The inherent requirements of the role
 - Patient case mix, and/or
 - The location of high-risk people in the workplace

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Manual: Corporate Policy and Procedure
Section: Infection Prevention and Control

Ref. No.: 15.02
Issue Date: November 2021
Page: 4 of 10

Title: COVID-19 Vaccination Policy – Accredited Practitioners

- If an exemption is not granted or where additional control measures is not possible, the Accredited Practitioner will have their circumstances reviewed by the relevant General Manager in consultation with WHS, WPR and Infection Prevention and Control. Healthscope will need to review the Accredited Practitioner's ongoing accreditation under these circumstances.

Assistance

- Information regarding the risks and efficacy of vaccines is available. Please refer to information and links provided with this policy.
- Accredited Practitioners with questions or concerns regarding COVID-19 vaccines and/or Accredited Practitioners with impaired immunity are encouraged to discuss with their primary health care provider.
- It is the Accredited Practitioner's responsibility to arrange their vaccination to ensure compliance with this policy or applicable Public Health Order. However, in some Healthscope facilities, Healthscope will offer on-site administration of COVID-19 vaccinations.

Breach

- The Healthscope Limited Hospital By-Laws (the By-Laws) require Accredited Practitioners to comply with the policies, rules and procedures of Healthscope Limited and each Healthscope Hospital, which includes compliance with this policy.
- In the case of an Accredited Practitioner who fails to comply with the terms of this policy or unreasonably refuses to disclose their vaccination status as required, Healthscope may prohibit them attending or performing work within a Healthscope premises until compliant.
- In the event of continued non-compliance, Healthscope may review the Accredited Practitioner's accreditation pursuant to the By-Laws, with potential outcomes including imposition of special conditions, suspension of accreditation or termination of accreditation.

Variation

- Healthscope follows the best available evidence and advice by government and other experts in the management of COVID-19, and the administration of the COVID-19 vaccination program.
- Healthscope will continue to review the situation in relation to vaccinations under its ongoing COVID-19 risk assessment. Healthscope may need to review and/ or amend this policy depending on its risk assessments or government guidance.
- This policy is not contractual in nature.

1. BACKGROUND

World Health Organisation

- Coronavirus disease (COVID-19) is an infectious disease caused by the coronavirus SARS-CoV-2.
- Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness.
- The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes, so it's important that you also practice respiratory etiquette (for example, by coughing into a flexed elbow). There has also been evidence suggesting aerosol transmission.
- All patients represent a vulnerable, high risk group whilst unwell or in the perioperative phase of treatment when an overlying COVID-19 infection would hold serious risk.

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Manual: Corporate Policy and Procedure
Section: Infection Prevention and Control

Ref. No.: 15.02
Issue Date: November 2021
Page: 5 of 10

Title: COVID-19 Vaccination Policy – Accredited Practitioners

- In addition, the consequences of an outbreak in a Healthscope facility or premises would be potentially harmful to our patients, workforce and organisation.

2. COVID-19 VACCINES:

Australian Government Advice:

- Before a COVID-19 vaccine is approved for use in Australia, it must pass the Therapeutic Goods Administration's (TGA) rigorous assessment and approval processes. This includes assessment of the evidence surrounding a vaccine's safety, quality and effectiveness.
- None of the vaccines currently provisionally approved or being reviewed for use in Australia contain a live virus that can cause COVID-19. This means that the COVID-19 vaccine cannot result in illness from COVID-19.
- As part of regulatory assessment, the Therapeutic Goods Administration considers information about possible side effects. For a vaccine to be registered for use in Australia, the benefits must outweigh the risks. All vaccines can cause side effects. Usually any side effects are mild and temporary.
- Clinical trials of COVID-19 vaccines have reported temporary side effects typical of vaccines, such as pain or redness at the injection site, as well as mild to moderate fever, tiredness, headache, muscle aches and chills. These side effects may be more common after the second dose.
- A very small number of people may have more severe side effects—defined as side effects affecting a person's ability to do their normal daily activities. These side effects usually only last a day or two after getting the vaccine.
- For the COVID-19 vaccines that are provisionally approved or currently available in Australia, each person will need to receive two doses of the vaccine to be adequately immunised against COVID-19.
- The latest information can be found at: <https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines>. Here are several trusted sources of information:
 - [Is it true?](https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/is-it-true) (https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/is-it-true)
 - Answers to common questions on COVID-19 vaccines is available [in 63 languages](https://www.health.gov.au/resources/translated/covid-19-vaccination-covid-19-vaccines-common-questions-other-languages). (https://www.health.gov.au/resources/translated/covid-19-vaccination-covid-19-vaccines-common-questions-other-languages)
 - [Getting vaccinated – information pack](https://www.health.gov.au/resources/collections/covid-19-vaccination-patient-resources) (https://www.health.gov.au/resources/collections/covid-19-vaccination-patient-resources)
 - [About the Vaxzevria \(AstraZeneca\) vaccine](https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/learn-about-covid-19-vaccines/about-the-vaxzevria-astrazeneca-covid-19-vaccine) (https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/learn-about-covid-19-vaccines/about-the-vaxzevria-astrazeneca-covid-19-vaccine)
 - [About the Comirnaty \(Pfizer\) vaccine](https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/learn-about-covid-19-vaccines/about-the-comirnaty-pfizer-covid-19-vaccine) (https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/learn-about-covid-19-vaccines/about-the-comirnaty-pfizer-covid-19-vaccine)
 - [Myth busting information from the Australian Government](https://www.australia.gov.au/covid-19-mythbusting) (https://www.australia.gov.au/covid-19-mythbusting)

3. HEALTHSCOPE VACCINATION CLINICS:

- Healthscope has no control over which COVID-19 vaccine is available for distribution to, or for administration at Healthscope vaccination clinics.
- If administered at a Healthscope vaccination clinic, a pre-vaccination assessment will be conducted by the person providing the vaccination, and Accredited Practitioners will be informed of any potential

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Manual: Corporate Policy and Procedure
Section: Infection Prevention and Control

Ref. No.: 15.02
Issue Date: November 2021
Page: 6 of 10

Title: COVID-19 Vaccination Policy – Accredited Practitioners

adverse reactions associated with the vaccination. Advice will be provided in a confidential manner. The Accredited Practitioner will be required to provide informed consent before being vaccinated at a Healthscope vaccination clinic.

4. VACCINATION EXEMPTIONS:

Current Medical exemptions from receiving the COVID-19 vaccines in Australia include:

- History of any vaccine anaphylaxis. Further medical assessment will be necessary before COVID-19 vaccination.
- Anaphylaxis following a previous dose of the relevant vaccine
- Anaphylaxis following any component of the relevant vaccine

In the case of the COVID-19 vaccination, there may be other circumstances where exemptions may be considered.

5. ACCREDITED PRACTITIONER RISK PROFILE:

Healthscope's Risk Assessment¹ is based on used an industry-standard **7-question checklist** to assess risk of COVID-19 infection and transmission in the workplace:

1. Could the role require travel to multiple sites/locations?
2. Could the role require face to face interaction or close contact between a large number of workers? (e.g. shared kitchen, cafeteria or tea room, shared toilets, group meetings, open plan office space)
3. Could the role require face to face interaction or close contact between workers, customers/clients or other members of the community?
4. Could any workers in the workplace fall within a high risk category:
 - People who are 70 years of age or over;
 - People 65 years or older with a chronic medical condition;
 - Identified Aboriginal or Torres Strait Islander aged 50 or older with a chronic medical condition
 - People who are under 12 years of age;
 - People who have had organ transplant and are on immune suppressive therapy;
 - People who have had a bone marrow transplant in the last 24 months;
 - Pregnant people;
 - People who are on immune suppressive therapy for graft versus host disease; and
 - People who are having chemotherapy or radiotherapy?
5. Could the role require workers to interact with persons who fall into a high risk category set out above, or require contact with surfaces used by person who falls within a high risk category?
6. Could the worker interact with people who are at an increased risk of being infected by COVID-19 (e.g. due to proximity with COVID-19 hotspots, such as a hospital)?
7. Is the workplace predominantly indoors with low airflow areas or without separate air handling units that would control the risk of transmission?

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Manual: Corporate Policy and Procedure
Section: Infection Prevention and Control

Ref. No.: 15.02
Issue Date: November 2021
Page: 7 of 10

Title: COVID-19 Vaccination Policy – Accredited Practitioners

Healthscope’s Risk Assessment for Accredited Practitioners produced the following results:

		Risk Assessment	
Healthscope Worker categories for COVID-19 Risk Assessment:		Mandatory Vaccine	Priority based on risk
Accredited Practitioners including but not limited to Visiting Medical Officers (VMOs), Resident Medical Officers (RMOs), Surgical Assistants, Registered Health Practitioners, Osteopaths, Dietitians, Dental Assistants, Speech Pathologists, Physiotherapists, Social Workers and Psychologists: who are not employed or engaged by Healthscope but who work in Healthscope facilities and have interaction with other Healthscope workers and patients;		yes	Red

# Yes Responses	Code	Vaccine Mandate – Priority Ranking
0	Green	No mandate – encourage vaccination
1	Yellow	Lower priority for mandate
2 – 3	Orange	Medium priority for mandate
3 +	Red	Highest priority for mandate (immediate action)

¹ In the risk assessment:

"close contact" refers to physical proximity and, if applicable, circumstances where workers use the same equipment and surfaces which are not sanitised between uses.

"large number of workers" in relation to indoor and outdoor settings, refers to the area density capacity requirements set out under the relevant State/Territory public health orders or health advice.

6. RISK OF SERIOUS ILLNESS FROM COVID-19

People are at **high risk** of serious illness from COVID-19 if they:

- are age 70 years and older
- have had an organ transplant and are on immune suppressive therapy
- have had a bone marrow transplant in the past 24 months
- are on immune suppressive therapy for graft versus host disease
- have had a blood cancer — for example, leukaemia, lymphoma or myelodysplastic syndrome — in the past 5 years
- are having chemotherapy or radiotherapy

People are at **moderate risk** of serious illness from COVID-19 if they have:

- chronic kidney failure
- heart disease
- chronic lung disease — but excluding mild or moderate asthma
- a non-blood cancer in the past 12 months
- diabetes
- severe obesity with a BMI (body mass index) of 40kg per square metre or more
- chronic liver disease
- some neurological conditions such as stroke or dementia
- some chronic inflammatory conditions and treatments
- other primary or acquired immunodeficiencies
- poorly controlled blood pressure

Having 2 or more conditions might increase the risk, regardless of the person’s age. If the condition is severe or poorly controlled, this might also increase the risk of serious illness from COVID-19.

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Manual: Corporate Policy and Procedure
Section: Infection Prevention and Control

Ref. No.: 15.02
Issue Date: November 2021
Page: 8 of 10

Title: COVID-19 Vaccination Policy – Accredited Practitioners

Other factors that might **increase the risk** of severe illness include:

- age — risk increases as you get older, even for those under 70
- being male
- living in poverty
- smoking
- Late pregnancy

7. PREGNANCY AND BREASTFEEDING

Current evidence notes that pregnant women with COVID-19 have a higher risk of severe illness compared to non-pregnant women with COVID-19 of the same age.

This includes an increased risk of:

- hospitalisation
- admission to an intensive care unit
- invasive ventilation.

COVID-19 during pregnancy also increases the risk of complications for the baby including a higher risk of stillbirth and of being born prematurely.

Vaccination is the best way to reduce these risks. Pregnant women are a **priority** group for COVID-19 vaccination, and should be routinely offered the appropriate vaccine as determined by their antenatal care provider, at any stage of pregnancy.

Women who are trying to become pregnant can receive vaccination and do not need to delay vaccination or avoid becoming pregnant after vaccination.

8. GUIDELINES FOR IMMUNISATION:

It is recommended that the flu vaccine or any other vaccine not be administered to a person within 7 days of receiving the COVID-19 vaccine. The same applies if the flu vaccine or another vaccine is received first. The COVID-19 vaccine should not be administered within 7 days of receipt of a flu vaccine or any other vaccine.

- Facilities administering vaccinations must upload vaccination data to the AIR and provide the Accredited Practitioner with a record of the vaccination which includes:
 - the date,
 - name of vaccination
 - dosage administered
 - information about subsequent dosages that are required
- Accredited Practitioners with impaired immunity should consult their treating medical practitioner prior to vaccination.

9. IMMUNISATION RECORDS:

Recording of COVID-19 vaccine administration in the Australian Immunisation Register (AIR) is mandatory. This assists in ensuring that the correct vaccine and interval is used for the second dose, and in identifying those who are due for a second dose. This will also allow verification or provision of evidence of completion of COVID-19 vaccination, if required.

10. ADVERSE EVENT REPORTING:

An adverse event following immunisation (AEFI) is any negative reaction that follows vaccination. It does not necessarily have a causal relationship with the vaccine.

The adverse event may be any:

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Manual:	Corporate Policy and Procedure	Ref. No.:	15.02
Section:	Infection Prevention and Control	Issue Date:	November 2021
Title:	COVID-19 Vaccination Policy – Accredited Practitioners	Page:	9 of 10

- unfavourable or unintended sign
- unfavourable or unintended symptom
- disease
- abnormal laboratory finding

Information related to adverse events and State and Territory reporting requirements and processes are available:

<https://immunisationhandbook.health.gov.au/vaccination-procedures/after-vaccination>

Adverse events following the administration of a COVID-19 vaccine in a Healthscope facility, are to be entered into Riskman as a WHS incident.

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Authors: Chief Medical Officer

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Manual: Corporate Policy and Procedure
Section: Infection Prevention and Control

Ref. No.: 15.02
Issue Date: November 2021
Page: 10 of 10

Title: COVID-19 Vaccination Policy – Accredited Practitioners

- Healthscope Policy 8.01 Respiratory Protection Policy
- Healthscope Policy 6.29 Immunisation for Vaccine Preventable Diseases for Healthcare Workers
- Healthscope Policy 6.01 Occupational Health and Safety
- Healthscope Policy 6.14 Pre-Employment Medical Assessment

REVIEW / CONSULTATION

All General Managers Chairs of Medical Advisory Committees Chief Medical Officer
All Infection Control Coordinators Corporate WHS Team
COVID Vaccination Working Group & Steering Committee

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