

Influenza 2022

Immunisation Provider Kit



Contents

Introduction	3
2022 Influenza season	3
2022 Influenza vaccines	4
Influenza virus strains included in the 2022 southern hemisphere seasonal influenza vaccines: ..	4
Be prepared for 2022 influenza season	4
2022 Influenza vaccination campaign	4
Vaccine delivery	4
Government funded vaccine ordering	4
Before accepting your first influenza vaccines:.....	5
Cold Chain Management.....	5
Who is eligible for NIP funded influenza vaccine?	6
Pregnant women	6
Children aged 6 months to under 5 years.....	6
People aged 65 years and over	7
All Aboriginal and Torres Strait Islander people aged 6 months and over	7
Medically at-risk patients	7
Flu vaccine safety.....	8
Vaccine Age Restrictions	8
Discuss with practice staff, practical steps, and protocols to ensure patients receive the correct vaccine every time.....	8
Contraindications	8
Egg allergy	9
People with a history of Guillain- Barré syndrome.....	9
Adverse Events Following Immunisation (AEFI).....	9
Reporting vaccinations to the Australian Immunisation Register	9
Three ways to record information on the AIR.....	10
How to get the immunisation message to consumers	10

Introduction

Annual influenza vaccination is recommended for all people aged six months and over (unless contraindicated) to reduce their chance of becoming ill with influenza.

ACT Health Immunisation Unit has developed a toolkit to assist all ACT immunisation providers with the managing of the 2022 National Immunisation Program (NIP) influenza program. This product will assist with the delivery and implementation of the influenza vaccination program along with providing support for immunisation providers.

2022 Influenza season

The Australian Technical Advisory Group on Immunisation (ATAGI) has provided advice to support immunisation providers ahead of this year's influenza season. The 2022 ATAGI Statement is provided on the Australian Government Department of Health website

<https://www.health.gov.au/resources/publications/atagi-advice-on-seasonal-influenza-vaccines-in-2022>

Overview of key points and updates for 2022

- Annual vaccination is the most important measure to prevent influenza and its complications. It is recommended for all people >6 months of age.
- All vaccinations must be recorded on the Australian Immunisation Register (AIR).
- During the COVID-19 pandemic, there has been reduced circulation of influenza virus and lower levels of influenza vaccine coverage compared with previous years. With borders reopening, a resurgence of influenza is expected in 2022.
- All COVID-19 vaccines can be co-administered (given on the same day) with an influenza vaccine.
- For adults aged ≥ 65 years, the adjuvanted influenza vaccine, Fludax[®] Quad, is preferentially recommended over standard influenza vaccine. There is no preference for use between either Fludax[®] Quad or Fluzone High-Dose Quadrivalent in this age group.
- If a person had a 2021 influenza vaccine in late 2021 or early 2022, they are still recommended to receive a 2022 formulation of influenza vaccine when it becomes available (likely from March 2022).

Optimal protection against influenza occurs within the first three to four months following vaccination. Timing of vaccination should aim to achieve the highest level of protection during peak influenza season (June to September). However, influenza epidemiology may be atypical this year, particularly in the context of COVID-19 and the return of international travel. Some Northern Hemisphere countries have seen a concurrent surge of influenza and COVID-19 activity.

Pregnant women should be vaccinated at any time during the year.

2022 Influenza vaccines

In 2022 there are four influenza vaccines provided under the NIP registered for use in specific age groups.

The vaccines available are:

- Vaxigrip Tetra®
- Fluarix Tetra®
- Afluria Quad®
- Flud®Quad

All 2022 vaccines available are quadrivalent influenza vaccines (QIVs).

- Flud®Quad is specifically formulated for people aged 65 years and over.

Influenza virus strains included in the 2022 southern hemisphere seasonal influenza vaccines:

Egg-based influenza vaccines	Cell-based influenza vaccines
A/Victoria/2570/2019 (H1N1)pdm09-like virus	A/Wisconsin/588/2019 (H1N1)pdm09-like virus
A/Darwin/9/2021 (H3N2)-like virus	A/Darwin/6/2021 (H3N2)-like virus
B/Austria/1359417/2021-like (B/Victoria lineage) virus	B/Austria/1359417/2021-like (B/Victoria lineage) virus
B/Phuket/3073/2013-like (B/Yamagata lineage) virus	B/Phuket/3073/2013-like (B/Yamagata lineage) virus

The 2022 ACT Influenza Immunisation Schedule is provided at [Appendix A](#).

Be prepared for 2022 influenza season

2022 Influenza vaccination campaign

Government programs promoting the 2022 Influenza Vaccination Program will commence following delivery of vaccines to ensure all providers have stocks. Providers can commence vaccinations once supplies are received, however please note that the influenza vaccine rollout dates may vary between providers by a few days.

Vaccine delivery

Government funded vaccine ordering

NIP funded influenza vaccines will be delivered to all immunisation providers in early April depending on availability of vaccines from the Australian Government.

NIP influenza vaccine stock delivered will depend on your fridge capacity. Staff at the Vaccine Management Unit (VMU) will review all provider fridge capacity for vaccine storage and determine the amount of stock that can safely be stored within your fridge. The VMU team will then deliver this amount to your practice. After this initial delivery, vaccines can be ordered **at**

least 2 working days prior to scheduled delivery date using the order form at [Appendix B](#).

****Urgent orders may take up to 5 business days for delivery.**

Before accepting your first influenza vaccines:

- Consider developing an influenza vaccination plan (review your patient/ clientele ages, how many clinics will be needed and what time and days of the week they are run).
- Consider estimating how many vaccines will be required to sustain this plan and maintain stock levels.
- Check to make sure you have a monitored vaccine fridge that has the space to safely store the amount of stock you plan on ordering for your clinics. VMU will review fridge capacity and will only leave vaccines if it is deemed safe to do so.
- Consider utilising a second vaccine fridge (contact VMU to arrange an additional datalogger).
- Review and maintain [National Vaccine Storage Guidelines: Strive for 5](#).
- Place subsequent orders **at least 2 working days prior** to scheduled delivery date.

It is important to identify patients who are eligible for NIP funded influenza vaccine. This will assist with promotion and delivery of the vaccination program within your practice. Utilising message boards, practice webpages, reminder texts and social media will improve the uptake of your influenza vaccination program.

Cold Chain Management

Cold chain is the system of transporting and storing vaccines within the safe temperature range of +2°C to +8°C.

All immunisation providers responsible for ordering, storing, and administering vaccines must understand the principles of vaccine storage.

The [National Vaccine Storage Guidelines: Strive for 5](#) provide best practice guidelines for storing vaccines and managing the cold chain. Resources are available from the [National Vaccine Storage resource collection](#).

A breach occurs when vaccines experience temperatures outside of the recommended +2°C to +8°C range. **If a breach occurs:**

- **Quarantine vaccines immediately AND**
- **Contact the Immunisation Unit on (02) 5124 9800 to report the breach as soon as possible.**

Further information on Cold Chain Management can be found in the Immunisation Provider Toolkit provided by ACT Health.

Who is eligible for NIP funded influenza vaccine?

People eligible for a free influenza vaccine through the NIP include:

Pregnant women
Children aged 6 months to under 5 years
People aged 65 years and over
All Aboriginal and Torres Strait Islander people 6 months and over
People aged 6 months and over with certain medical risk factors

Pregnant women

Pregnant women are twice as likely to be admitted to hospital as other people with influenza. Influenza vaccination during pregnancy has been shown to be safe and effective at protecting pregnant women from influenza and its complications. Vaccination is the best way to protect newborns against influenza during the critical early months of life. The timing of vaccination depends on the time of the year, vaccine availability and the anticipated duration of immunity. Influenza vaccine can be given at any stage of pregnancy and can be given at the same time as pertussis vaccine and/or COVID-19 but may be given earlier and should not be delayed if the winter influenza season has begun or is imminent. Pregnant women who received an influenza vaccine in 2021 should receive a 2022 influenza vaccine if it becomes available before the end of pregnancy. Women who receive influenza vaccine before becoming pregnant should be revaccinated during pregnancy to protect the unborn infant. Ensure that the flu vaccine is recorded on the woman's antenatal record card.

Children aged 6 months to under 5 years

Before you administer a flu vaccine:

- check your patient's age*
- check that you have the correct vaccine

**The packaging and syringe have the appropriate age groups written on them*

In 2022 it is particularly important to increase uptake in children aged 6 months to less than 5 years. Lower vaccine coverage and exposure to influenza last year in this cohort increases the risk of complications from influenza in children who have potentially never been exposed to influenza.

Influenza vaccine is free for all children 6 month to under 5 years of age though the NIP program.

Children aged 6 months to under 9 years require **two doses in the first year** they receive the vaccine. This is to maximise the immune response to the vaccine strains. Doses should be at least **4 weeks apart**. Children who have received one or more doses of influenza vaccine in previous years will only need one dose in current and future seasons.

Before you administer an influenza vaccine, check your patient's age and that you have the correct vaccine. The packaging and syringe have the age groups written on them.

The influenza vaccine can be administered with any other vaccine. There is a possible small increased risk of fever following co-administration of the influenza vaccine and 13-valent pneumococcal conjugate vaccine (13vPCV). Parents/carers of infants or children should be advised of the possible risk and given the option of administering these 2 vaccines on separate days, with an interval of at least 3 days.

People aged 65 years and over

Influenza vaccine is free for all adults aged 65 years and older through the NIP program. Influenza-associated mortality rates are highest among adults aged ≥ 65 years. Vaccinating elderly people reduces hospitalisations from influenza and pneumonia, and all-cause mortality.

For adults aged ≥ 65 years the adjuvanted QIV, Flud[®]Quad, is preferentially recommended over standard QIVs. Flud[®]Quad is funded by the NIP and has been specifically designed to create a greater immune response amongst the elderly, who are known to have a weaker response to immunisation. Flud[®]Quad is not registered for use in people younger than 65 years – its effectiveness and safety has not been assessed in younger populations.

Prevenar 13 (70 years and over) and Zostavax (70-79 years of age) and COVID-19 vaccines should also be opportunistically offered to eligible people at the time of their influenza vaccination if not previously given. In people who are immunocompromised due to a medical condition or medical treatment, consider the safety of giving zoster vaccine on a case-by-case basis. More information can be found at: <https://immunisationhandbook.health.gov.au/vaccine-preventable-diseases/zoster-herpes-zoster>

All Aboriginal and Torres Strait Islander people aged 6 months and over

Influenza vaccine is free for all Aboriginal and Torres Strait Islander people aged 6 months and over through the NIP program. Identification as an Aboriginal and/or Torres Strait Islander is therefore important for delivering holistic health care. This disclosure is voluntary and identification questions should be asked respectfully and in private.

Children aged 6 months to under 9 years require **two doses in the first year** they receive the vaccine and doses should **be at least 4 weeks apart**. Children who have received the influenza vaccine in previous years will only need one dose in current and future seasons.

Prevenar 13 and Pneumovax 23 (50 years and over), Zostavax (70-79 years of age) and COVID-19 vaccines should also be opportunistically offered to eligible Aboriginal and Torres Strait Islander people at the time of their influenza vaccination if required.

Medically at-risk patients

Influenza vaccine is free through the NIP program for all people aged 6 months and over with certain medical conditions predisposing them to severe influenza including:

Category	Vaccination strongly recommended for individuals with the following 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	Immunocompromised 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

Flu vaccine safety

Vaccine Age Restrictions

CAUTION: Age restrictions apply to all vaccines

All influenza vaccines are approved for use in specific age cohorts, based on research and evidence about their clinical safety and effectiveness. With multiple vaccines in use, mistakes can easily be made. If a vaccine medication error occurs, please call the Immunisation unit on 5124 9800 and fill out the Vaccination Medication Reporting Form and email it to Immunisation@act.gov.au

Recommendations to reduce the risk of off-label use:

- Organise vaccine fridge so that vaccines are quarantined and clearly labelled in separate spaces with signs showing the appropriate age indications, e.g., '6 months to 64 years only' '5 to 64 years only' '65 years and over only'.
- Make sure two clinical staff check vaccines before they are administered.
- Refresh your knowledge of influenza vaccination on the Immunise Australia website (<https://beta.health.gov.au/health-topics/immunisation/health-professionals>); and

Discuss with practice staff, practical steps, and protocols to ensure patients receive the correct vaccine every time.

Contraindications

The only absolute contraindications to influenza vaccines are:

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

Egg allergy

Egg allergy is not a contraindication to influenza vaccination. Patients with an egg allergy, including anaphylaxis, can be safely vaccinated with the influenza vaccine. Published evidence indicates the risk of anaphylaxis in patients who are allergic to eggs is very low.

People with a history of anaphylaxis to egg should be vaccinated by healthcare providers experienced in recognising and treating anaphylaxis.

Refer to the Australian Immunisation Handbook and the [Australasian Society of Clinical Immunology and Allergy \(ASCIA\) guidelines](#) for additional information on influenza vaccination of individuals with an allergy to eggs.

People with a history of Guillain- Barré syndrome

Influenza vaccination is generally not recommended for people with a history of Guillain-Barré syndrome (*GBS*) whose first episode occurred within 6 weeks of receiving an influenza vaccine. People with a history of *GBS* whose first episode was not after influenza vaccination have an extremely low risk of recurrence of *GBS* after vaccination and the influenza vaccination is recommended for these people. Individual concerns should be discussed, and expert advice sought from the treating physician and/or an immunisation specialist when considering influenza vaccination for a person with a history of *GBS*.

Adverse Events Following Immunisation (AEFI)

An adverse event following immunisation (AEFI) is an unwanted or unexpected event following immunisation that may be related to the vaccine itself, its handling or administration, or may occur by coincidence, that is, regardless of the vaccine.

Adverse events following immunisation (AEFI) are notifiable under the *Public Health Act 1997*. If your patient experiences an AEFI, please complete the online Immunisation Adverse Event Reporting Form available at <https://health.act.gov.au/services-and-programs/immunisation/health-professionals/clinical-information#adverseevents>

General information on AEFI for clinicians can be found on the ACT Health Health professionals webpage <https://health.act.gov.au/services-and-programs/immunisation/health-professionals>

Reporting vaccinations to the Australian Immunisation Register

From 1 July 2021, it became mandatory for vaccination providers to report all NIP vaccines administered to the Australian Immunisation Register (AIR). This assists in providing a true record of vaccination status for all individuals and in determining immunisation coverage in the ACT. Downloading the latest version of your practice management software will ensure you have access to the latest AIR functionality and vaccine codes.

Three ways to record information on the AIR

1. Use your Practice Management Software (PMS). The details you enter will be able to be transferred from your PMS to the AIR.
 - Make sure you are using the latest version of your PMS, so you have up to date vaccine codes (contact your software vendor for further information).
 - Ensure you select the correct vaccine that has been given to the patient (please ensure that all old batch numbers are deleted off practice software to avoid data entry errors).
2. Use the AIR site. You can record immunisation details using the Identify Individual and Record Encounter functions.
3. Complete the Australian Immunisation Register – immunisation encounter form.

The Department of Human Services (DHS) has published five AIR eLearning education modules to help vaccination providers understand how to access and use AIR site and record vaccination episodes. The five modules provide detailed steps and screen shots to help with:

- Registering and requesting access to the AIR site
- Accessing the AIR site for the first time
- Submitting information to the AIR
- Recording overseas immunisations
- Recording immunisation medical exemptions
- PRODA education for health professionals

The modules can be viewed at www.humanservices.gov.au/hpeducation

To register as a vaccination provider with the AIR: Complete the application form at: <https://www.humanservices.gov.au/organisations/health-professionals/forms/im004> and forward it via email to Immunisation@act.gov.au

Practice management software: It is recommended that you check if your practice management software needs to be updated to enable AIR reporting.

How to get the immunisation message to consumers

Promoting vaccination programs is an important element for successful vaccine uptake. It is recommended to utilise current systems practices such as social media, websites and waiting room messaging.

Promotional resources and additional information can be obtained from the ACT Health Immunisation Unit by accessing and filling out the ACT Health Immunisation Resource Order Form on the ACT Health website <https://health.act.gov.au/services/immunisation>

Sharing Knowledge About Immunisation SKAI <http://www.talkingaboutimmunisation.org.au/>

National Centre for Immunisation Research and Surveillance: <http://www.ncirs.org.au/health-professionals/ncirs-fact-sheets-faqs>

Commonwealth Government Department of Health:
<https://www.health.gov.au/funnelback/search?query=resources&f.Topics%7ChealthTopics=Immunisation>

For more information about the program visit:

<http://health.act.gov.au/our-services/immunisation>

and

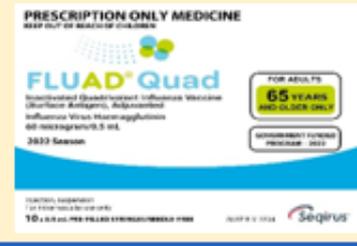
<https://beta.health.gov.au/health-topics/immunisation>

Contact Health Protection Service, Immunisation Unit, on (02) 5124 9800.

Acknowledgment of country.

ACT Health acknowledges the Traditional Custodians of the land, the Ngunnawal people. ACT Health respects their continuing culture and connections to the land and the unique contributions they make to the life of this area. ACT Health also acknowledges and welcomes Aboriginal and Torres Strait Islander peoples who are part of the community we serve.

Appendix A – 2022 ACT Influenza Immunisation Schedule

National Immunisation Program (NIP) funded influenza vaccines 2022		
Check your patient's age	Check that you have the correct vaccine	All influenza vaccines are latex free
Children < 9 years of age will need 2 doses at least 4 weeks apart in their first year of vaccination		
Influenza vaccines can be co-administered (on the same day) with COVID-19 vaccines.		
Influenza vaccine can be administered as stock becomes available until the vaccine expires		
Age	Influenza vaccine image	
Vaxigrip Tetra®		
6 months to 64 years	All children aged 6 months to 5 years of age, including Aboriginal and Torres Strait Island children and those with certain medical conditions	
	People aged 5 to 64 years with medical risk factors predisposing them to severe influenza	
	All Aboriginal and Torres Strait Island people aged 6 months to 64 years	
	Pregnant women	
<i>Registered for ages 6 months and over.</i>		
Fluarix Tetra®		
6 months to 64 years	All children aged 6 months to 5 years of age, including Aboriginal and Torres Strait Island children and those with certain medical conditions	
	People aged 5 to 64 years with medical risk factors predisposing them to severe influenza	
	All Aboriginal and Torres Strait Island people aged 6 months to 64 years	
	Pregnant women	
<i>Registered for ages 6 months and over.</i>		
Afluria Quad®		
5 to 64 years	People aged 5 to 64 years with medical risk factors predisposing them to severe influenza	
	All Aboriginal and Torres Strait Island people aged 5 to 64 years	
	Pregnant women	
	<i>Registered for ages 5 years and over.</i>	
Fluad® Quad		
65 years and over (only)	All people 65 years and over	
	Quadrivalent vaccine	
<i>Registered for ages 65 years and over</i>		

Influenza vaccines and vaccination schedule can be viewed at health.act.gov.au/services/immunisation

Eligibility for National Immunisation Program funded influenza vaccines 2022

National Immunisation Program (NIP) Categories

Age	Comments
Children from 6 months to under 5 years	<ul style="list-style-type: none"> • Children up to 9 years of age who are receiving the influenza vaccine for the first time will require 2 influenza vaccines at least 4 weeks apart. • Children who have received one or more doses of influenza vaccine in previous years will only need one dose.
All persons aged ≥65 years	None
Pregnant women (during any stage of pregnancy)	<ul style="list-style-type: none"> • Influenza vaccine is recommended in every pregnancy and at any stage of pregnancy. • Influenza vaccine can safely be given at the same time as pertussis vaccine. • Women who received an influenza vaccine in 2021 can be revaccinated when 2022 influenza vaccine becomes available before the end of their pregnancy. • For women who receive an influenza vaccine before becoming pregnant, revaccinate during pregnancy to protect the unborn infant.
Aboriginal and Torres Strait Islander persons aged 6 months and over	None
All persons aged 6 months and over who have certain medical conditions which increase the risk of influenza-related complications	<ul style="list-style-type: none"> • Cardiac disease • Chronic respiratory conditions • Chronic neurological conditions which affect breathing • Severe asthma (requiring frequent medical consultations or use of multiple medications) • Immunocompromising conditions • Diabetes • Renal disease • Haematological disorders • Children aged 6 months to 10 years on long term aspirin therapy

Timing of vaccination

- The influenza vaccine should be given before Australia's peak influenza months of June to September.
- Optimal protection against influenza occurs within the first 3 to 4 months following vaccination.
- Continue offering the influenza vaccine as long as the vaccines are within their expiry date.
- Influenza vaccines can be co-administered (on the same day) with COVID-19 vaccines.

For further information please contact the Health Protection Service
Immunisation enquiry line on 51249800

Vaccine	Current Stock Numbers	Doses Required
Act-HIB® (Hib)		
Adacel® / Boostrix® (dTpa) <i>Adolescent and Antenatal</i> from 20 weeks' gestation or as soon as possible after this. Can be given up to delivery		
Infanrix® / Tripacel® (DTPa)		
Infanrix®-Hexa (DTPa, Hib, Polio, Hep B)		
Infanrix®-IPV / Quadracel® (DTPa & Polio)		
IPOL® (IPV)		
Neisvac-C® (MenCCV)		
Nimenrix® (Meningococcal ACWY)		
Pneumovax 23® (Pneumococcal)		
Prevenar 13® (<i>Paediatric</i>) (Pneumococcal)		
Prevenar 13® (<i>Adult</i>) (Pneumococcal)		
Priorix® or MMR®II (MMR)		
Priorix Tetra® / Proquad® (MMRV)		
Rotarix® (Rotavirus)		
Varilrix® / Varivax (Varicella)		
Zostavax® (Herpes Zoster)		
Other:		

Please turn over for influenza and links to HPV, Meningococcal B and Hepatitis B vaccine orders.

**Influenza Vaccine Orders (please note advice below)**

Vaccine	Current Stock Numbers	Doses Required
Influenza - 6 months to <5 years		
Influenza - 5 years to 64 years		
Influenza - 65 years and over		

~ Before you administer an influenza vaccine check your patient's age and check that you have the correct vaccine. The packaging and syringe have the age groups written on them ~

HPV Orders

Please use the HPV order form available from the Vaccine Management Unit or Website
<https://www.health.act.gov.au/services/immunisation>

Men B (Bexsero) Orders

Please use the Men B order form available from the Vaccine Management Unit or Website
<https://www.health.act.gov.au/services/immunisation>

HEP B

Please use the Hep B order form available from the Vaccine Management Unit or Website
<https://www.health.act.gov.au/services/immunisation>

Return form to Vaccine Management Unit by

Email: immunisation@act.gov.au (with Practice Name in subject) or Fax: 5124 9307

I agree that:

- All vaccines will be stored in accordance with the National Vaccine Storage Guidelines "Strive for 5".
- Any temperature breaches outside of the recommended range of +2 to +8°C will be immediately notified to the Health Protection Service.
- All funded vaccines will only be administered to eligible persons. (National Immunisation Program or ACT Government Program)
- Data on recipients of influenza vaccine will be faxed to HPS fortnightly.
- All vaccines administered will be recorded on the Australian Immunisation Register.

Signature: _____
 (signature of staff member ordering vaccines)

Date: ___/___/___