



11:00 am

Targeting and delivering vaccination to at-risk groups: a GP perspective

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#### Introduction



• Importance of vaccinations in preventing disease and protecting public health

#### • Objectives:

- Identifying at-risk groups
- Discuss strategies for effectively targeting and delivering vaccinations to at-risk groups

# Identifying At-Risk Groups: Definition and examples



- Elderly population: higher risk of complications from diseases like influenza and pneumococcal infections
- Chronic disease patients: diabetes, heart disease, respiratory conditions
- Immunocompromised individuals: cancer patients, those on immunosuppressive therapy
- Pregnant women: increased risk of complications from infections like influenza and pertussis
- Infants and young children (esp pre-term): particularly vulnerable to diseases like RSV, influenza and whooping cough
- Aboriginal and Torres Strait Islander peoples: close the gap
- Healthcare workers: increased exposure risk and potential for transmission to vulnerable patients

### Strategies for Targeting At-Risk Groups:



- Data Utilisation:
  - Electronic Health Records (EHR): Use EHR to identify and recall patients who are due for vaccinations (Search/query/Primary Sense 5 steps)
  - Risk Assessment Tools: Implement tools to assess patients' risk profiles and vaccination needs during consultations. Eg CoRiCal (<a href="https://corical.immunisationcoalition.org.au/">https://corical.immunisationcoalition.org.au/</a>), Vaxical (<a href="https://www.vaxical.com/">https://www.vaxical.com/</a>)
- Patient Education:
  - Information Materials: Digital content eg social media, practice website, waiting room communication (TV, posters, pamphlets/brochures), practice newsletter, on hold telephone message
    - SKAI Sharing Knowledge Around Immunisation (https://skai.org.au/) Mums, newborns, childhood vaccines
  - · Counselling Sessions: Educate patients during visits about the benefits and safety of vaccines
- · Community Outreach:
  - Partnerships: Collaborate with local organisations, community centres, and residential aged care facilities
  - Mobile Clinics: Organise vaccination drives in accessible locations (VacSeen Project <a href="https://www.vacseen.org.au/">https://www.vacseen.org.au/</a>)
- Reminder Systems:
  - Automated Reminders: Use SMS, emails, and phone calls to remind patients of upcoming vaccinations (opt in consent for notifications)
    - Triggers: Milestone Birthday electronic message/postcard: 50/65/70 check up/preventive health/vaccination review

# **Delivery of Vaccinations**



- In-Clinic Administration:
  - Dedicated Vaccination Clinics: Set specific times or days for vaccination appointments, including extended or out of hours
  - Walk-in Availability: Allow walk-ins to increase accessibility
  - Opportunistic: appointment, already receiving another vaccination, milestone birthdays, >75 Health assessments, GP management plan, becoming a grandparent, medical review of motor vehicle license etc
- Staff Training:
  - Vaccination Protocols: Ensure all staff are trained on vaccination guidelines and protocols
  - Patient Interaction: Train staff to address vaccine hesitancy and answer patient questions effectively
- Cold Chain Management:
  - Vaccine Storage: proper storage and handling to maintain efficacy
  - Monitoring Systems: Temperature monitoring devices to track storage conditions

# Addressing Vaccine Hesitancy



- Understanding Concerns:
  - Consultations: Engage with patients to understand their concerns and misconceptions
  - Clear Communication:
    - Evidence-Based Information: provide clear, evidence-based information about vaccine safety and efficacy
    - Addressing Myths: Dispelling common myths and misinformation about vaccines
  - Building Trust:
    - Consistent Messaging: Maintain a consistent, empathetic approach in all patient interactions
    - Positive Reinforcement: Share success stories and positive outcomes of vaccination programs
- Overcoming Other Barriers: so many! vaccine hesitancy (misinformation, trust issues), access and availability (geographic, economic, healthcare and logistical infrastructure), lack of awareness of risk or recommendations, language barriers, inconsistent policies and recommendations, insufficient funding. Balancing public health needs with individual rights and freedoms. Equity and ethics of distribution and access especially in times of shortages

#### Monitoring and Follow-Up



- Tracking Systems:
  - EHR: Electronic Health Record integration
  - AIR: Australian Immunisation Register
- Adverse Event Reporting:
  - Surveillance Systems: Monitor and report any adverse events following immunisation
    - patient/consumer
    - health profession
  - Patient Support: Provide support and information for patients experiencing side effects

#### Conclusion



- Summary:
  - Targeting and delivering vaccinations to at-risk groups remains an important role not just for GPs but all health professionals
- Call to Action:
  - Are you as a health care professional leading by example? KPI
  - What proactive measures are effective in your practice for targeting and delivering vaccinations to at-risk groups?
  - How can you ensure continuous implementation of these measures?
  - Can they be replicated in another health setting? If so, please share.
- Q&A