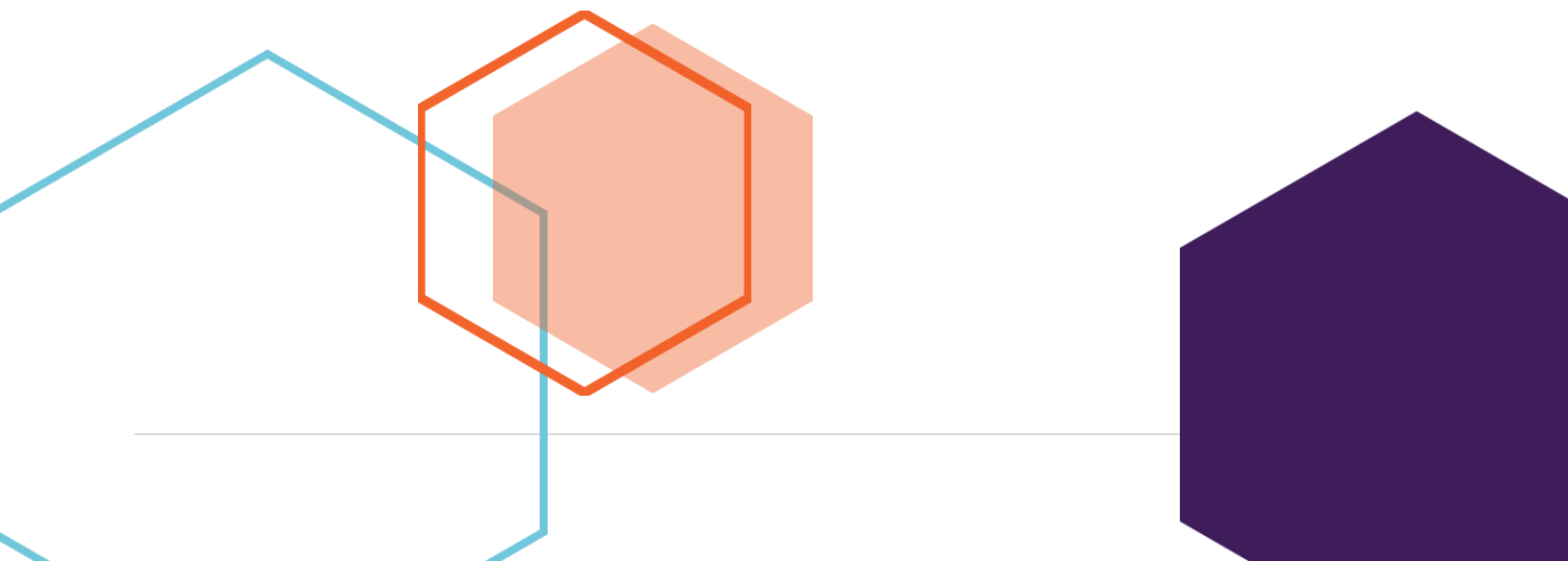




Childhood Immunisation Coverage and Timeliness

Handbook for General Practices



Acknowledgments

The Bay of Plenty District Health Board and Eastern Bay Primary Health Alliance collaboratively developed these guidelines:

- National Immunisation Register (staff)
- Childhood Immunisation Liaison
- Immunisation Co-ordinators

We thank the following members of the working group for their contribution of time and experience in developing this handbook: Anne Bailey, Gina Burney, Katie Natusch, Kerri Lawrence and Suzanne Thompson.

Approved By:

Greig Dean
Chief Executive Officer (Interim)
Eastern Bay Primary Health Alliance

Lindsey Webber
Chief Executive Officer
Western Bay of Plenty Primary Health
organisation

Janice Kuka
Chief Executive Officer
Ngā Mataapuna Oranga

Karen Smith
Business Leader
Regional Community Services/Woman
Child and Family
Bay of Plenty District Health Board

Released November 2019

Bay of Plenty District Health Board (Planning and Funding)

Table of Contents

The Pre-enrolment Process	5
Accepting a Nomination.....	5
Declining a Nomination.....	6
Casual Children and Vaccinations.....	7
Recording 'opt offs' on the NIR	7
The National Immunisation Schedule	8
Timely Delivery of Childhood Immunisations	9
Immunisation Process Map	11
Pre-Call and Re-Call.....	12
Allay Concerns about Vaccinations	13
How can parents give informed consent before their child is vaccinated?.....	13
How effective are vaccines?.....	13
What is the difference between vaccination and immunisation?.....	13
Where do I go if I have questions about immunisation and vaccination-preventable diseases?.....	14
Processes for Managing Declines and Delays	14
Communication Approaches	15
ImmsNet	16
Using ImmsNet.....	16
Secure inbox.....	16
Regional Childhood Immunisation Support Services	16
What is the Regional Childhood Immunisation Support Services?.....	16
How will services be provided?.....	17
Ways the 'Collective' provides support to general practices and OIS vaccinators.....	17
Childhood Immunisation Liaison.....	17
Immunisation Co-ordinators.....	18
Advocates.....	18
Useful Number and Websites	20
Immunisation Co-ordinator Allocation of General Practice.....	21
Sample Letter.....	22
ImmsNet Flowchart.....	23

Check List for a Vaccination Event 24

Choosing not to vaccinate your child?..... 25

References..... 26

The Pre-enrolment Process

At birth, a newborn's parent/caregiver or whanau submit National Immunisation Register (NIR) information for the child, and nominates a general practice to be responsible for their vaccinations.

The NIR forwards this information to the general practice in the form of an electronic nomination message. Notification messages are sent to the practice administration 'inbox', which should be checked daily. The general practice accepts or declines the NIR's notification (*ideally within two weeks of birth*). All electronic nomination messages must be actioned.

Accepting a Nomination

The general practice enters the newborn's details into their patient management system (PMS), along with:

- the appropriate pre-enrolment code ('Newborn Preliminary Enrolment (B) Code' or a variation of this), which signifies that the full enrolment process is yet to be completed;
- the date of pre-enrolment, which should be the date of entry into the PMS (the date of last consultation will be blank until the first consultation); and
- ensuring that the newborn is 'opted on' to the NIR (*Medtech Users only: F6> Immunisations Tab> select Schedule Selection 3> look at the far right side of the screen – this will show NIR 'opt on'/ 'opt off' or blank*). If the parent/caregiver or whanau choses to 'opt off' the NIR do not 'opt off' on the PMS.

Having closed books for new patients or if the parent /caregiver or whanau has bad debt are not reasons to decline nominations.

Where the general practice cannot identify the parent /caregiver or whanau from the nomination message the general practice should contact the NIR prior to declining the

nomination; as the NIR may be able to provide additional information about the parent /caregiver or whanau.

Within a week of accepting the NIR notification the general practice will send a letter to the family welcoming the newborn to the practice (Appendix 1), a six week vaccination appointment and if the newborn is eligible enclose an enrolment form (Refer to the mother or father is a New Zealand citizen <https://www.health.govt.nz/new-zealand-health-system/eligibility-publicly-funded-health-services/eligibility-explained>.)

The newborn in the care and control of the parent/caregiver or whanau, who is a New Zealand citizen, is eligible for the same publicly funded health and disability services as their parent/caregiver or whanau. The newborn in the care and control of a person applying to legally adopt them, or become their legal guardian, is also eligible. Time spent overseas does not affect New Zealand citizens' eligibility. However, if the parent/caregiver or whanau is only temporarily in New Zealand, they (including the newborn) may not meet the requirements for general practice enrolment.

When the general practice receives a completed enrolment form the newborn's enrolment status can be changed in the PMS from 'pre-enrolled' to 'enrolled', and the date of enrolment updated with the date the parent/caregiver or whanau signed the form. It is important that full enrolment takes place within three months of birth.

Declining a Nomination

Notifications should be declined if the general practice receives notification that the newborn is registered with another practice.

Declined nominations will automatically send the nomination to the NIR unmatched file with a rejection message. The NIR will search for a general practice to enrol the newborn.

Casual Children and Vaccinations

A general practice may vaccinate a child who is not enrolled (casual patient). The service provision is the same as is provided to an enrolled child, the only difference being that the service is provided to a casual or non-enrolled child.

If no enrolment document is received, the general practice is to remove the enrolment details. The child will remain registered and be identified through a re-call system; however the general practice will not receive funding.

Recording 'opt offs' on the NIR

The parent/caregiver or whanau can opt their newborn off the NIR via the general practice. To 'opt off' the NIR the following is to be completed:

- Discuss with the parent/caregiver or whanau what 'opt off' means, for example the difference between 'opt off', declining or delaying immunisation
- The parent/caregiver or whanau must complete the 'NIR 2 opt off' form
- The completed 'NIR 2 opt off' is to be forwarded to the NIR who will update the newborns status
- Do not 'opt off' the newborn on the PMS.

The National Immunisation Schedule

Age	Diseases covered
Pregnant women	Influenza 1 Injection annually, at any stage of pregnancy
	Tetanus/Diphtheria/Pertussis (whooping cough) 1 injection, from the second trimester of pregnancy
6 weeks	Rotavirus (start first dose before 15 weeks) 1 oral vaccine
	Diphtheria/Tetanus/Pertussis/Polio/Hepatitis B/Haemophilus influenzae type B 1 injection
	Pneumococcal 1 injection
3 months	Rotavirus (second dose must be given before 25 weeks) 1 oral vaccine
	Diphtheria/Tetanus/Pertussis/Polio/Hepatitis B/Haemophilus influenzae type B 1 injection
	Pneumococcal 1 injection
5 months	Diphtheria/Tetanus/Pertussis/Polio/Hepatitis B/Haemophilus influenzae type B 1 injection
	Pneumococcal 1 injection
15 months	Haemophilus influenzae type B 1 injection
	Measles/Mumps/Rubella 1 injection
	Pneumococcal 1 injection
	Varicella (Chickenpox) 1 injection
4 Years	Diphtheria/Tetanus/Pertussis/Polio 1 injection
	Measles/Mumps/Rubella 1 injection

The schedule of vaccines listed above applies from 1 July 2019.

Timely Delivery of Childhood Immunisations

Multiple strategies can be used to improve immunisation coverage and timeliness. These include but not limited to:

- Identify a immunisation champion who has dedicated time each week to undertake immunisation work
- Notify the Immunisation Co-ordinator of new practice staff to arrange support, advice and training
- Use a pre-call/re-call system to facilitate the identification of children for whom vaccination is due or overdue
- Use the *Let's talk about Immunisation* flip chart to stimulate discussion with the parent/caregiver or whanau. Information presented should cover positive messages about the benefits of immunisation and how immunisation works
- Information should be presented to the parent/caregiver or whanau in a factual way over several appointments, if required
- Once the vaccination is given, the next immunisation milestone should be discussed and an appointment booked for this event giving the parent/caregiver or whanau a reminder card
- Use education strategies such as a general practice immunisation campaign week to promote positive immunisation messages
- Display immunisation posters and have immunisation brochures readily available
- Implement processes to regularly assess the immunisation status of children, for example if a vaccination is declined or delayed for a child by the parent/caregiver or whanau set a reminder in the child's record to periodically revisit this decision
- Record the reasons for any delay, decline or 'opt off' the register so that strategies to address the needs of local population can be developed
- For all newly enrolled children, ensure that the general practice has records of immunisations transferred from the previous practice, and assess the child's immunisation status to identify what vaccines are required

- Ensure timely referral to the Outreach Immunisation Service (OIS)
- Use available data reports to monitor progress towards immunisation health targets and performance measures.

Immunisation Process Map

At birth the LMC confirms the newborn's general practice with the parent/caregiver or whanau. This information is loaded into the electronic 'systems'. The NIR forwards this information to the general practice in the form of an electronic nomination message

The parent/caregiver or whanau can opt their child off the NIR via the general practice. To 'opt off' the NIR the following is to be completed:

- Discuss with the parent/caregiver or whanau what 'opt off' means, e.g. difference between opt off, declining or delaying immunisation
- The parent/caregiver or whanau must complete the NIR 2 opt off for
- Send the completed form to the NIR, and the NIR team will update the child's status

The general practice receives newborn information in the form of an electronic nomination message.

In accepting a nomination the general practice enters the newborn into their PMS, using Newborn Preliminary Enrolment (B)

Notify the NIR of the declined nomination

The NIR will search for a general practice to enroll the newborn

If no general practice is found to enroll the newborn, the child is recorded as 'GP Unknown'

In accepting the nomination the general practice will send a letter to the family welcoming the newborn to the practice, a six week immunisation appointment and enclose an enrolment form, if the newborn is eligible

Pre-Call and Re-Call Process

Send a pre-call to all children two weeks before any event is due

The parent/caregiver or whanau non responsive to pre-call

The parent/caregiver or whanau contacts general practice to arrange an appointment

The parent/caregiver or whanau delays or declines vaccination (see Decline / Delay Process)

General practice send two re-calls for the overdue vaccination

The parent/caregiver or whanau do not attend appointment

General practice re-schedules a new appointment for one weeks'

The parent/caregiver or whanau cancel appointment

The child is referred to OIS

Child Immunised

Childhood Immunisation Liaison attempts to contact the parent/caregiver or whanau

The parent/caregiver or whanau cannot be contacted

The parent/caregiver or whanau is contacted but unable to attend general practice appointment

The parent/caregiver or whanau is contacted to encourage to, or they state that they will attend general practice appointment

Referral to OIS

The parent/caregiver or whanau cannot be located

OIS is declined

OIS contact parent/caregiver or whanau and child is vaccinated

Child cannot be located. 'gone - no address' status applied.

Non enrolled child who has never presented at general practice removed to 'GP Unknown' status

General practice advised

CIL

NIR

OIS

Parent/caregiver or whanau

General Practice

To improve immunisation rates within the Bay of Plenty region the Immunisation Co-ordinators work closely with practices. General practices may receive a phone call, visit or emails from an Immunisation Co-ordinator regarding progress of children with overdue vaccinations.

Age	Pre-Call	Re-Call	Re-Call	Childhood Liaison Referral to Outreach Immunisation Service
Birth	Welcome letter including 6 week appointment and enrolment form			
6 Weeks	5 Weeks	7 Weeks	8 Weeks	10 Weeks (ImmsNet report)
3 Months	12 Weeks	13 Weeks	14 Weeks	4 ½ Months (ImmsNet report)
5 Months	20 Weeks	21 Weeks	22 Weeks	6 ½ Months (ImmsNet report)
15 Months	14 ½ Months	15 Months	15 ½ Months	18 Months (ImmsNet report)
4 Years	3 Years, 50 Weeks	4 Years, 3 Months	4 Years, 6 Months	4 Years, 6 Months (ImmsNet report)

Pre-Call and Re-Call

- *Pre-Call* – send letter and/or phone, leave a message, then text the first phone number identified as the most relevant phone number. If the phone number is unobtainable then other listed phone numbers should be tried.
- *Re-Call (1)* – phone, leave a message, then text as above and email (where an email address is available).
- *Re-Call (2)* – The process for the first re-call is repeated with a final phone call and text message left. All available numbers are tried. Finally, if no contact can be made use ImmsNet to refer the child to the OIS.
- *Re-Call (3)* (recommended practice) – before referring to the OIS, phone and leave a message advising that a referral will be made to the OIS and why this referral is to be made.

Allay Concerns about Vaccinations

How can parents give informed consent before their child is vaccinated?

Informed consent is a fundamental concept in the provision of health care services, including vaccination. Practice staff have a duty to provide factual information to enable the parent/caregiver or whanau to understand the benefits and risks of vaccination in order to make an informed choice and give informed consent.

HealthEd have free health resources produced by the Health Promotion Agency and the Ministry of Health that assist people to make informed decisions.

<https://www.healthed.govt.nz/>

How effective are vaccines?

Vaccines on the New Zealand National Immunisation Schedule are recommended because they are extremely effective at controlling some potentially dangerous diseases.

The measure of effectiveness varies depending on the vaccine and the disease, for example:

- Two doses of measles vaccine protect 98% of those who catch the virus from becoming ill and one dose protects over 90%. Protection is likely to be lifelong.
- Pertussis-containing vaccination of a pregnant woman offers over 90% protection to the newborn child, but as this is passive transfer of antibodies for protection, it will wane by a few months of age.
- A primary course of pertussis-containing vaccine offers around 81–85% protection, but this protection does wane after 3–6 years.

What is the difference between vaccination and immunisation?

The term vaccine is derived from the word vaccinia (cowpox), the virus used in the first vaccine. A vaccine is used to induce immunity, to immunise.

The terms immunisation programme and a vaccination programme are more or less interchangeable, used to refer to a process designed to induce immunity against specific diseases in groups of people at risk of the disease or complications.

Immunisation Advisory Centre (Adapted) (August 2017)

Where do I go if I have questions about immunisation and vaccination-preventable diseases?

Get independent information about immunisation and vaccines from the Immunisation Advisory Centre.

- Freephone [0800 IMMUNE \(0800 466 863\)](tel:0800466863)
- <https://www.immune.org.nz/>

Health Ed is a catalogue of **free** health resources produced by the Health Promotion Agency and the Ministry of Health.

- <https://www.healthed.govt.nz/>

Talk to your Lead Maternity Carer, general practitioner, nurse, Plunket nurse or Well Child provider or call PlunketLine (0800 933 922).

Processes for Managing Declines and Delays

- General practices can record a child as a decline on the NIR only when they have spoken to the parent/caregiver or whanau and they wish to decline a vaccine event
- Do not invite the parent/caregiver or whanau to sign a 'decline form' – this may increase decline rates as it closes the conversation
- Advise the parent/caregiver or whanau that they can change their mind at any time and have their child vaccinated. State that they will be contacted again at the next scheduled immunisation
- Advise the parent/caregiver or whanau of the implications of declining or delaying immunisations
- For those parent/caregiver or whanau who delay having their child immunised – establish a timeframe for how long they are delaying vaccination
- When the parent/caregiver or whanau state they would like to delay vaccines, do not record this as a decline. Only record that particular vaccine event as a decline – do not decline future events

- Record the delay or decline on the PMS. Record all discussions, actions and outcomes in the child's records.

Communication Approaches

Building trust and rapport with the parent/caregiver or whanau is paramount. Practice staff play an important role and may be the most trusted sources of vaccine information. It is important to communicate the benefits and risks of not vaccinating. Poor communication may contribute to the parent/caregiver or whanau declining vaccinations. Ideally, the parent/caregiver or whanau should receive written materials or web links prior to the child's vaccine appointment.

HealthEd and Immunisation Advisory Centre resources may assist in the delivery of messages. In addition the World Health Organisation has published a booklet '*Talking to Parents about Vaccines for Children (strategies for Health professionals)*' to support health professionals to have successful vaccine conversations with the parent/caregiver or whanau. Encouraging questions to identify concerns may provide opportunities for providing additional vaccine information to the parent/caregiver and whanau.

Vaccine hesitant or delaying parents/caregiver or whanau

- Spend adequate time with child and parent/ caregiver or whanau
- Encourage questions and seek permission to discuss concerns
- Specifically address each concern
- Accept concerns. Do not try not to minimise or dismiss them
- Discuss the disease, the benefits and risks of not vaccinating
- Communicate risks with words as well as simple graphics
- Support discussions with HealthEd, MoH and IMAC resources
- Avoid being too detailed in scientific information that may overwhelm the parent/caregiver or whanau
- Offer another appointment if appropriate

Parents/caregiver or whanau who decline vaccination

- Seek permission to discuss
- Check importance of vaccines and confidence
- Do not dismiss concerns – acknowledge
- Do not overstate vaccine safety. Challenging firmly held beliefs is unhelpful
- Avoid confrontation
- Provide links to HealthEd, MoH and IMAC resources if wanted
- Consider a tailored immunisation schedule however explain the risks
- Offer another appointment if appropriate

A positive approach to parents with concerns about vaccination for the family physician (Adapted).

ImmsNet

ImmsNet is a web based application to enhance childhood immunisation communication using real-time electronic messaging between general practices and the NIR. The NIR generate a monthly 'overdue' report to notify general practices of children who are overdue their vaccinations. General practices using the 'overdue' report will provide feedback to the NIR on all overdue childhood immunisations.

The quality of data on the NIR is dependent on the quality of data received from general practices. Ensure that accurate and up to date records are maintained.

Using ImmsNet

The '*ImmsNet User Guide for Clinics*' contains written guidance and associated imagery on the use of ImmsNet. The Immunisation Co-ordinators will provide ImmsNet training for general practices on request.

Secure inbox

It is important that the general practice ImmsNet 'secure inbox' is checked regularly as responses to referrals received by the OIS are visible in the inbox, and may include up-to-date phone numbers and new addresses or other information which is to be used to update the PMS.

Regional Childhood Immunisation Support Services

What is the Regional Childhood Immunisation Support Services?

Eastern Bay Primary Health Alliance hold an Agreement with the Bay of Plenty District Health Board to provide the Regional Childhood Immunisation Support Services. This service is known as 'The Collective', who work in collaboration and cooperation with the Bay of Plenty District Health Board, Ngā Mataapuna Oranga and Western Bay of Plenty Primary Health Organisation.

The Collective's aim is to prevent disease through a coordinated collective approach that improves vaccination rates to meet the Ministry of Health targets. Effective local monitoring will occur by the NIR, Childhood Immunisation Liaison, Immunisation Co-

ordinators and responsive Outreach Immunisation Services. The Collective will wrap around general practices and OIS vaccinators to work seamlessly to support immunisations.

How will services be provided?

The Collective offers flexible arrangements for support, advising and training of general practice staff and OIS vaccinators, and assist in locating children (and their family-whanau) who are due or overdue their vaccinations.

Reports will be available to share up-to-date childhood immunisation information.

Ways the 'Collective' provides support to general practices and OIS vaccinators

Childhood Immunisation Liaison has the important function of updating and sharing information between general practices and the Collective (inclusive of the NIR) which may include but not limited to:

- Following a referral provide general practices with up-to-date information for example new contact information for the parent/caregiver or whanau
- Providing the NIR with up-to-date information obtained via the Advocates and OIS vaccinators
- Encouraging the parent/caregiver or whanau to enroll their child with a general practice where the general practice is 'unknown'
- Encouraging the parent/caregiver or whanau to make an general practice appointment for their child to be vaccinated
- Ensuring that if no contact is able to be made with the parent/caregiver or whanau, referral is urgent or at the request of the parent/caregiver or whanau a referral sent to the OIS
- Supporting Immunisation Coordinators through the delivery of 'overdue' reports.

Immunisation Co-ordinators will periodically visit general practices to provide support, advice and training which may include be not limited to:

- Encouraging the general practices to identify a dedicated person responsible for ensuring that the practice administration 'inbox' is checked daily
- Ensuring that the appropriate pre-enrolment code ('Newborn Preliminary Enrolment (B) Code' or a variation of this), are used until full enrolment process are completed
- Ensuring and encouraging the general practices to send a letter to the family welcoming the newborn to the practice, a six week vaccination appointment and an enrolment form, if the newborn is eligible
- Ensuring that the general practices following the recommended pre-call and re-call schedule. Discussing and encouraging general practices to implement catch up plans if required
- Answering enquiries about the immunisation schedule
- Ensuring the effective use of ImmsNet through monitoring usage and providing timely support and training where areas for improve are identified
- Actioning and monitoring 'overdue' reports
- Working in collaboration with IMAC and others to organise regular training for professionals (including non-clinical staff)
- Undertaking Cold Chain Accreditation assessments
- Assisting in managing cold chain breaches
- Completing vaccinator training and clinical assessments
- Completing monthly Immunisation Co-ordinator reports detailing work undertaken in each of the general practices
- Providing opportunistic vaccinations.

Advocates (schedulers) are responsible for:

- Providing support and information within the Bay of Plenty communities on the benefits of immunisation
- Providing administration support to the OIS vaccinators

- Ensuring that OIS referrals are processed in a timely manner
- Planning OIS vaccinators day; ensuring priority children are identified
- Supporting OIS vaccinators to deliver immunisations within the community setting
- Establishing and maintaining relationships with primary and secondary providers through the facilitation of immunisation forums
- Use data reports provided by the NIR to inform their work.

Useful Number and Websites

<p>NIR Phone: +64 7 577 3330</p>	
<p>Childhood Immunisation Liaison Katie Natusch Katie.Natusch@bopdhb.govt.nz Phone: +64 7 557 5754 Mobile: +64 27 643 1630</p>	
<p>Immunisation Co-ordinator Suzanne Thompson Suzanne.Thompson@ebpha.org.nz Phone: +64 7 306 2311 Mobile: +64 21 587 281</p>	<p>Immunisation Co-ordinator Kerri Lawrence Kerri.Lawrence@ebpha.org.nz Mobile: +64 22 023 3244</p>
<p>Advocate (east) Glennis Tupe Glennis.Tupe@EBPHA.org.nz Phone: +64 7 306 2328 Mobile: +64 27 787 76212</p>	<p>Advocate (west) Donna Durning donnad@wboppho.org.nz Phone: +64 07 577 3281 Mobile: +64 27 252 7720</p>
	<p>Advocate (west) Karen Bidois k.bidois@temanutoroa.org.nz Mobile: +64 20 401 17281</p>
<p>The Immunisation Advisory Centre https://www.immune.org.nz/ Phone: 0800 Immune / 0800 466 863</p>	<p>Plunket Clinical Leader Phone: +64 7 755 78110 Mobile: +64 27 290 2647</p>
<p>For children who have arrived Australia, their immunisation history can be obtained by contacting Australian Immunisation Register (AIR) on Phone: 0800 441 248.</p>	
<p>HealthEd Resource Toi Te Ora – Public Health Service Level 1 510 Cameron Road Tauranga 3110 https://www.healthed.govt.nz Phone: 0800 221 555 option 6</p>	

Immunisation Co-ordinator Allocation of General Practice

PHO	IC	Provider Name	PHO	IC	Provider Name
EB	Suzanne	Church Street Surgery	WB	Kerri	Bethlehem Family Doctors
EB	Suzanne	Kawerau Medical Centre	WB	Kerri	Bethlehem Medical Centre
EB	Suzanne	Ohope Beach Medical Centre	WB	Kerri	Cameron Medical Clinic
EB	Suzanne	Toi Ora Health	WB	Kerri	Chadwick Healthcare Greerton
EB	Suzanne	Med Central	WB	Kerri	Chadwick Healthcare South City
EB	Suzanne	Riverslea Medical	WB	Kerri	Fifth Avenue Family Practice
EB	Suzanne	Taneatua Medical Centre	WB	Kerri	Gate Pa Medical Centre
EB	Suzanne	Tarawera Medical Centre	WB	Kerri	Healthcare on Fifteenth
EB	Suzanne	Whakatohea Health Centre	WB	Kerri	Katikati Medical Centre
WB	Suzanne	Dee Street Medical Centre	WB	Kerri	Ngati Kahu Hauora
WB	Suzanne	Farm Street Family Health Centre	WB	Kerri	Otumoetai Doctors
WB	Suzanne	Girven Road Medical Centre	WB	Kerri	Omokoroa Medical Centre
WB	Suzanne	Hairini Family Health Centre	WB	Kerri	Pyes Pa Doctors
WB	Suzanne	Mount Medical Centre	WB	Kerri	Pyes Pa Lakes
WB	Suzanne	Nga Kakano Family Health Services	WB	Kerri	The Doctors Bayfair
WB	Suzanne	Papamoa Beach Family Practice	WB	Kerri	The Doctors Bureta
WB	Suzanne	Papamoa Pines Medical Centre	WB	Kerri	The Doctors Papamoa
WB	Suzanne	Tara Street Medical Centre	WB	Kerri	The Doctors Tauranga
WB	Suzanne	Te Puke Medical Centre	WB	Kerri	Waihi Beach Medical Centre
WB	Suzanne	The Doctors Kopeopeo	NMO	Kerri	Pirirākau Hauora
WB	Suzanne	The Doctors Phoenix	NMO	Kerri	Tauranga Moana City Clinic
WB	Suzanne	The Doctors Welcome Bay	NMO	Kerri	Te Ākau Hauora
WB	Suzanne	Total Health Doctors	NMO	Kerri	Waitaha Health Centre
			BBC	Kerri	Bethlehem Birthing Centre

Appendix One

Sample Letter

XXXX [Guardians name and address pulled from PMS account holder]

Dear **XXXX**

We have recently received notification from the National Immunisation Register regarding the birth of **XXXX** [newborn name if known / your baby].

We would like to take this opportunity to congratulate you on the arrival of your new baby and invite you to enroll **XXXX** [newborn name / your baby] with our practice.

Please find enclosed an enrolment form for completion and return. While we await the return of this form we have arranged a temporary enrolment for **XXXX** [newborn name / your baby] to ensure that you are able to access our services in the meantime.

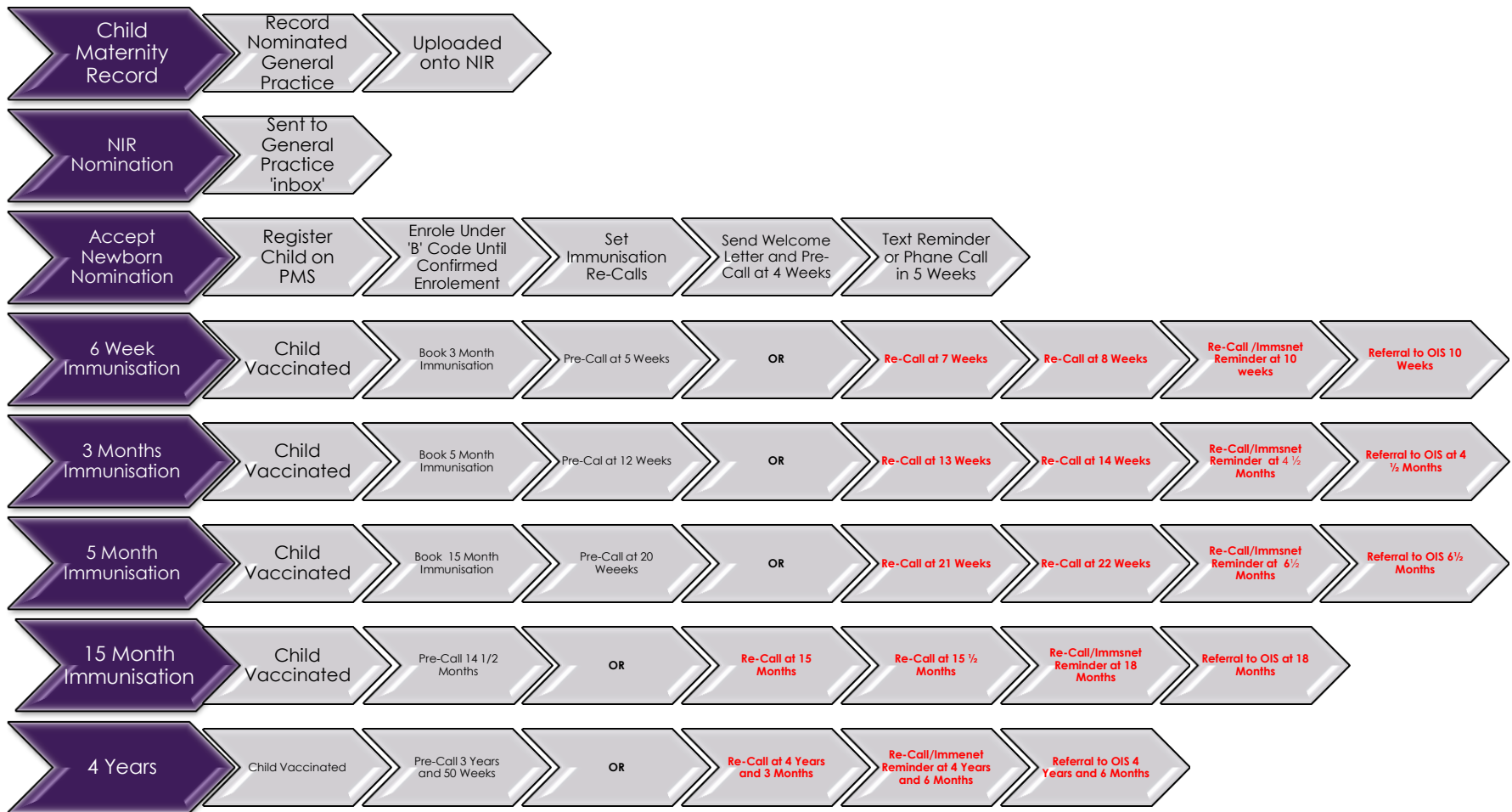
It is essential that we receive the completed enrolment form as soon as possible, as temporary enrolment is only valid for a maximum of three months.

We look forward to providing general practice services to **XXXX** [newborn name / your baby], and meeting him/her on **XXXX** for his/her six-week immunisation check.

Yours sincerely

XXXX

ImmsNet Flowchart



Overdue children will appear on ImmsNet at 10 weeks, 4½ months, 6½ months and 18 months.

Practices must complete ImmsNet Reports within 2 weeks

If a child is referred to Outreach Immunisation Service (OIS) or re-scheduled they will not appear on ImmsNet –practices are encouraged to establish internal reminders and alerts so children are not overlooked. Communication from the NIR must be actioned promptly. Casual children: follow practice protocols. Send pre-calls and re-calls to encourage timely immunisation.

— RED cells represent system safeguards

Check List for a Vaccination Event

- ☑ Welcome the parent, caregiver or whanau to the practice and thank them for bring their child in to be vaccinated. Acknowledge what an important decision s/he has made in vaccinating their child from preventable diseases.
- ☑ Explain to parent, caregiver or whanau what vaccine/s is to be given and what disease/s it will protect against. Encourage them to ask questions.
- ☑ Address any concerns. *'That's a good question'* IMAC prompt sheet may be used.
- ☑ Explain possible side effects and how to manage these. If the parent, caregiver or whanau knows the potential side effects s/he may not be as worried by any discomfort the child may experience. The *'Childhood Immunisation (Information for Families of Babies and Young Children)'* details information about reactions to immunisations.
- ☑ Once the vaccination is given, the next immunisation milestone should be discussed and an appointment booked for this event giving the parent/caregiver or whanau a reminder card.
- ☑ Check for understanding! Ask the parent, caregiver or whanau when s/he will return for the next vaccination event. Thank again the parent, caregiver or whanau for bringing their child in to be vaccinated.

Choosing not to vaccinate your child?

- ☑ There are a series of vaccines that are offered **free** to babies, children, adolescents and adults.
- ☑ The first time we are exposed to a germ it takes time for our immune system to respond and we become unwell. Once the immune system has memory of the infection, it is able to respond rapidly to destroy the germ the next time we are exposed.
- ☑ Vaccines contain parts of or weakened versions (inactivated or weakened) of a particular germ. Vaccination exposes the body to parts of the germ for the first time without causing disease, and the real germ can be destroyed if it enters the body to prevent illness.
- ☑ ***If you are worried about vaccine safety:*** visit the below link to the publications that allow you to read the evidence for yourself.
<https://www.healthychildren.org/English/safety-prevention/immunizations/Pages/Vaccine-Studies-Examine-the-Evidence.aspx>

For face to face or phone-based information: The Immunisation Advisory Centre provide a free phone line - 0800 IMMUNE (466 863), available Monday to Friday 9 am to 4.30 pm. You are welcome to call the Immunisation Advisory Centre to find out about the information you need, all the advisors are qualified nurses with extensive immunisation and vaccine-preventable disease knowledge. Alternatively you can talk to your nurse or general practitioner.

- ☑ You can change your mind at any time and have yourself or your child vaccinated.
- ☑ If you are worried or have difficulties in attending a general practice or nurse appointment, talk to your nurse or general practitioner who will discuss other options to you or your child receiving a vaccination.

References

A positive approach to parents with concerns about vaccination for the family physician

[Volume 43, No.10, October 2014](#) Pages 690-694.

Auckland and Waitemata District Health Boards. Immunisation Process Flowchart.

Canterbury District Health Board. Immunisation Process Chart Ministry of Health. 2012.

Newborn Pre-Enrolment Toolkit. Wellington: Ministry of Health. Ministry of Health. 2019.

Guide to eligibility for publicly funded health services. <https://www.health.govt.nz/new-zealand-health-system/eligibility-publicly-funded-health-services>

Answers to frequent concerns and questions arising from Vaxxed. The Immunisation Advisory Centre. August 2017.

Influenza start date and resources, Zoster, Measles, Meningococcal vaccine, HPV vaccine, Immunisation promotion, Recording on the NIR. Wellington: Ministry of Health.

Immunisation Advisory Centre. <https://www.immune.org.nz/>

