# Immunisation: NSW priorities

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## **Acknowledgement of country**

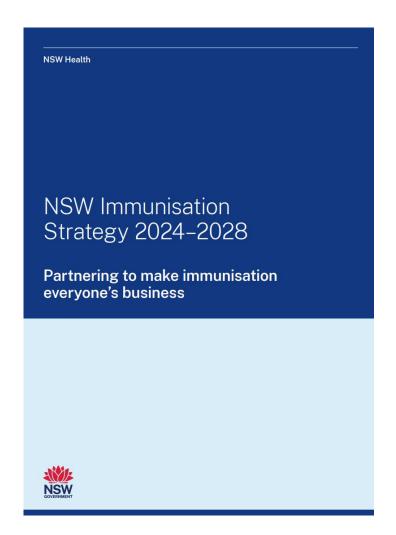
We acknowledge Aboriginal people as the Traditional Custodians of the lands and waters in which we all work, live and learn.

We recognise the incredible richness, strength and resilience of the world's oldest living cultures, including cultural practices, languages and connection to Country.

Left: The artwork 'Journey Together' (2023) by Mumbullla Creative recognises the knowledge, strength and capacity within Aboriginal communities to improve their health and the health of their community by embarking on a journey to quitting smoking and vaping.

## Immunisation is everyone's business







# How do we get there?



### Making immunisation everyone's business

Embed immunisation in routine healthcare

Enhance community awareness and understanding of immunisation

Maximise workforce capacity to support immunisation

Use data to better drive performance and outcomes

Optimise the use of digital systems to support programs

Prepare to adopt and implement new vaccines





Antenatal visits are an important opportunity to improve delivery of effective vaccines

Maternal vaccination coverage in NSW, 2022-23

90%

less likely to get whooping cough (pertussis)

**Pertussis** 

82%

Young infants are...

**72%** 

less likely to be hospitalised for influenza

...if their mother received the corresponding vaccine during pregnancy

Influenza

**57%** 

**57%** 

Australian Immunisation Handbook. 2023

Kampmann et al. *NEJM*. 2023

Nunes et al. Hum Vaccin Immunother. 2017.

less likely to be hospitalised for **RSV** 

**RSV** 

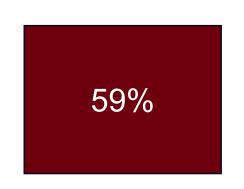
N/A – new vaccine in 2025





We need to better leverage touchpoints with NSW Health facilities to immunise people who are otherwise missing out

Influenza vaccination is associated with a 29% reduced odds\* of all-cause death **yet...** in renal dialysis patients



of renal dialysis patients in NSW were <u>not</u> vaccinated for influenza in 2024

60%

of unvaccinated people aged 65+ who have been hospitalised in NSW during the influenza season **remain unvaccinated** by the end of the season





There is considerable room to improve influenza vaccine coverage

#### Snapshot of the 2025 influenza vaccination coverage data in Australia, by jurisdiction

#### All persons

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	ACT	NSW	Vic	Qld	SA	WA	Tas	NT	AUS
6 mo-<5 yrs	48.4	24.4	30.4	20.1	27.6	23.0	29.6	35.4	25.7
5-<15 yrs	24.3	13.3	16.0	13.2	15.3	15.3	14.8	12.8	14.5
15-<50 yrs	32.7	19.5	23.7	18.3	23.6	18.8	23.4	21.5	20.8
50-<65 yrs	44.3	30.1	34.2	31.4	36.2	30.9	39.4	25.4	32.3
≥65 yrs	66.0	58.2	61.8	60.4	66.6	59.8	67.9	34.9	60.5

#### **Aboriginal and Torres Strait Islander persons**

	ACT	NSW	Vic	Qld	SA	WA	Tas	NT	AUS
6 mo-<5 yrs	30.5	16.9	21.1	14.1	17.2	17.3	21.3	35.8	17.8
5-<15 yrs	17.0	10.8	12.1	10.3	11.9	11.2	12.5	20.7	11.6
15-<50 yrs	25.9	16.7	19.2	15.5	18.8	15.2	19.1	29.3	17.7
50-<65 yrs	45.9	36.4	36.4	34.6	37.7	32.1	45.1	42.3	36.4
≥65 yrs	68.5	62.0	62.7	59.2	62.9	53.4	69.4	45.2	59.6

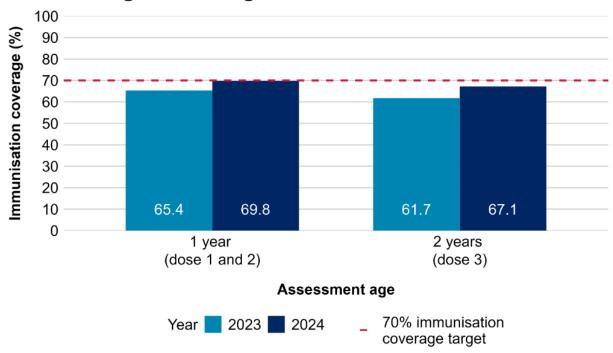
Year-to-date (YTD) coverage calculated using vaccinations given 1 March—31 August 2025 (inclusive). AIR data as at 7 September 2025. **Source:** National Centre for Immunisation Research and Surveillance.





There is room to improve meningococcal B vaccine coverage

#### Meningococcal B immunisation coverage for Aboriginal and Torres Strait Islander children by assessment age and dose



<u>Data source: childhood immunisation coverage data from the Australian Immunisation Register (AIR), which combines the March, June, September and December assessment quarters for each reported year. Data were provided to NSW Health by Services Australia in March 2025</u>



### Embed immunisation in routine healthcare



### Elevating immunisation in the 2025-2029 Service Level Agreements

- Local Health District (LHDs) Chief Executives were required to choose <u>up to three</u> priority areas to focus on over the four-year horizon
  - Six LHDs, serving over 3.7 million people, haven chosen to focus on immunisation
  - Sydney Children's Hospitals Network, St Vincent's Hospital, and Justice Health and Forensic Mental Health have also chosen immunisation
- <u>All</u> LHDs will also receive an incentive payment for every RSV, pertussis, and influenza vaccine that they give during pregnancy

Develop Health Outcomes Action Plan

Submit plan by 30 September 2025

Plan approved by Chief Health Officer Achievement of Health Outcomes Action Plan

Target: 90% of actions completed for FY

Underperforming: 80 - <90%

Not performing < 80%



### Embed immunisation in routine healthcare



### **Priority Populations Immunisation Program (PPIP)**

- Eight LHDs have been funded to build capacity to offer vaccination as part of good clinical care, including in inpatient and outpatient settings.
- South Eastern Sydney Local Health District has used PPIP funds to establish VaxConnect. Components include:
  - vaccinating people attending outpatient appointments for renal dialysis, aged care, and infectious diseases
  - a fortnightly, walk-in vaccination clinic for Aboriginal people at the La Perouse Aboriginal Community Health Centre





## Enhance community awareness and understanding



#### Immunisation messaging features in:

- NSW Winter Respiratory Campaign
- Keep our Mob Safe electronic direct mail (eDMs)
- Yarn Up newsletter
- Paid advertising on NITV, Koori Mail and in Aboriginal Medical Services
- Videos with community members





### Enhance community awareness and understanding



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Aboriginal Immunisation Health Workers are employed by Local Health Districts and support individuals and communities to access existing services







### Maximise workforce capacity to support immunisation



#### **Aboriginal Health Practitioner Immunisers**

- In 2024, NSW Health issued an authority to allow Aboriginal Health Practitioners to administer influenza vaccination after completing additional training.
  - In 2024/2025 training scholarships were provided to support more than 15 Aboriginal Health Practitioners to become immunisers.

### Pharmacy immunisation

In 2025, the NSW Pharmacist Vaccination Standards were updated to allow pharmacist immunisers to administer influenza vaccines to people aged 2 years and over.



#### About the project

NSW Health is leading a program to support more authorised Aboriginal Health Practitioners (AHPs) to be able to immunise patients in NSW Health Settings. We are looking for AHPs who are interested in this exciting opportunity. This is part of a broader initiative to enhance integration of AHP within Multidisciplinary teams (MDTs) and support the growth of the profession.

In 2024/25 more than 15 AHPs in NSW Health were supported to supply by administration the influenza vaccine to patients and local community according to the <u>Authority – Supply of vaccines</u> by <u>Aboriginal Health Practitioners and the NSW Aboriginal Health Practitioners Vaccination Standards.</u>

#### About the AHP Immuniser role

AHPs are a registered, skilled, health professional workforce who provide culturally safe health and wellbeing promotion, preventative health care and clinical treatment services in a diversity of locations including urban, rural and remote settings. They combine clinical skills with deep community knowledge. They help improve communication, trust, and engagement between Aboriginal patients and the health system.

Supporting AHPs to vaccinate in their own community can build trust and improve health outcomes. Aboriginal people experience poorer health outcomes, and a higher disease burden than the rest of the population. Influenza vaccination is funded for all Aboriginal and Torres Strait Islander persons aged 6 months and over, but coverage decreased across all age groups in 2024. Influenza vaccination coverage in Aboriginal and Torres Strait Islander Peoples was lower in all age groups in 2024 than in 2023. (ref.).

This successful program has demonstrated the opportunity for statewide expansion with the aim to:

- · Boost awareness of and access to vaccinations for priority populations.
- · Provide an immunisation service which is accessible and culturally appropriate.
- Increase uptake of vaccination, reduce illness and hospitalisations, and improve health outcomes for the population.
- Enhance and promote the value of Aboriginal Health Practitioners in NSW Health embedded within multidisciplinary teams
- Expand the scope of practice for appropriately trained AHPs

NSW Health

Aboriginal Health Practitioner Immunisers | September 2025 [CM H25/83776] 1

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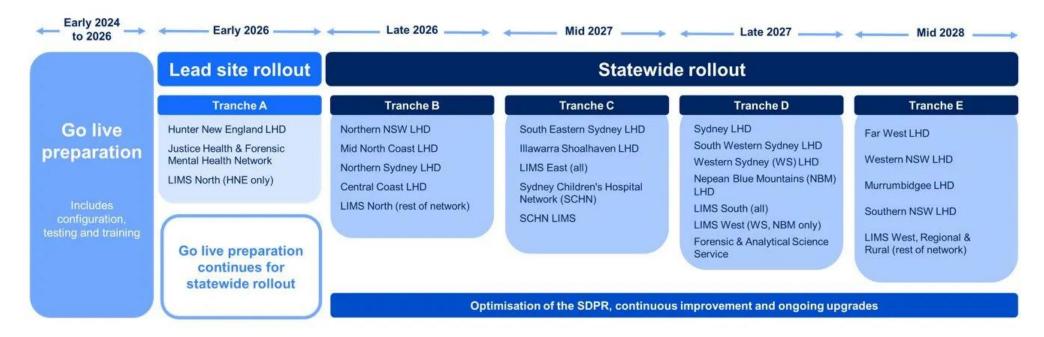


### Optimise the use of digital systems to support programs



#### **Single Digital Patient Record**

- Integration with Australian Immunisation Register
- Decision support for high priority vaccines, including maternal pertussis, influenza and RSV





### Prepare to adopt and implement new vaccines\*



2024

2025

2026

#### **Nirsevimab**

Outcomes for Aboriginal babies in NSW:

74%

against RSV notification

89%

against RSV hospitalisation

# Nirsevimab + maternal RSV vaccination

# 20 valent pneumococcal vaccine (Prevenar 20)

From 1 September 2025, Prevenar 20 replaced Prevenar 13 and Pneumovax 23 on the National Immunisation Program.

A four-dose schedule is recommended for Aboriginal children (doses at 2, 4, 6 and 12 months of age)

#### Intranasal influenza vaccine

Funded by NSW for all children between 2 and under 5 years old for the 2026 season

## Immunisation is everyone's business



