



Authorising additional surge workforce to participate in Victoria's COVID-19 vaccination program

Consultation paper – August 2021

1. Consultation and timeline

The COVID-19 vaccination program rollout commenced in Victoria on the 22 February 2021. To support program implementation, the Victorian Department of Health (the Department) authorised a number of workforces to prepare and/or administer the COVID-19 vaccine in Victoria. These workforces have been critical to the successful establishment of state-run vaccination centres and have enabled the administration of millions of doses of COVID-19 vaccine to eligible Victorians, in conjunction with our primary health partners.

There is a significant increase in the supply of COVID-19 vaccine expected later in 2021. To ensure this vaccine can be administered as quickly and safely as possible, without adversely impacting delivery of other critical health services, the Department is proposing to authorise a number of new workforces to support COVID-19 vaccination program delivery.

Please confirm whether your organisation supports the proposed changes detailed in section 4 of this paper. If your organisation does not support these proposed amendments, please advise why, or suggest amendments.

Please email your response to Emma Scott at Emma.Scott@health.vic.gov.au by close of business on 17 August 2021.

If you have any questions, please contact Emma Scott via email Emma.Scott@health.vic.gov.au.

2. Context

Additional COVID-19 vaccine supply is expected later in 2021, with a considerable increase in supply from October until the end of the year. This could mean that by October, more than 500,000 doses of the COVID-19 vaccine will need to be administered per week in Victoria, compared to approximately 200,000 doses administered per week currently.

Additional vaccination activity, and an appropriately trained and authorised workforce to support this increased activity, will be required to achieve the Commonwealth Government's aim of offering all Australian adults at least one dose of the COVID-19 vaccine by the end of the 2021.

Training and authorisation of a range of additional health professions and student cohorts with transferable skills will increase the available workforce pool for the COVID-19 vaccination program, distribute the workforce pressures across a broader range of professions and provide greater flexibility for vaccination service providers to ensure sufficient staff can be sourced from a range of settings.

NSW has recently authorised similar workforces to those proposed in this paper, including qualified healthcare workers and student cohorts, to participate in their COVID-19 vaccination program. Other jurisdictions are also planning the necessary measures to authorise a range of additional workforces to participate in their vaccination programs.

3. Background

The Department has reviewed the existing and potential workforces available to support the expansion of the COVID-19 vaccination program and has assessed the capacity of existing vaccination delivery models in Victoria.

Current authorised workforce participating in the COVID-19 vaccination program

The following authorisations are in place for workforce to prepare and/or administer the COVID-19 vaccine:

- Medical practitioners and nurse practitioners are authorised to administer Scheduled Poisons, including vaccines, under the *Drugs, Poisons and Controlled Substances Act 1981* (Vic).
- Nurse immunisers and pharmacist immunisers are authorised to administer the COVID-19 vaccine through Secretary Approvals under the *Drugs, Poisons and Controlled Substance Regulations 2017* (Vic).
- Registered nurses, midwives, enrolled nurses (with no notation on their registration), paramedics, Aboriginal health practitioners (on written authorisation from a medical practitioner or nurse practitioner) and medical, nursing/midwifery and paramedicine students from select years are authorised to administer the COVID-19 vaccine through Public Health Emergency Orders under section 22D of the *Drugs, Poisons and Controlled Substances Act 1981* (Vic).
- Registered pharmacists, pharmacy technicians, pharmacy students and intern pharmacists are authorised to prepare and draw-up the vaccine through a Public Health Emergency Order under section 22D of the *Drugs, Poisons and Controlled Substances Act 1981* (Vic).

Details of the authorisations and the related Victorian COVID-19 Vaccination Guidelines can be found at <https://www.coronavirus.vic.gov.au/victorian-covid-19-vaccination-guidelines>.

Planning for future workforce participation in the COVID-19 vaccination program

The Public Health Emergency Orders available through the link above are time-limited authorisations for the existing emergency authorised workforce. Planned extensions to these Orders will ensure the workforces they authorise can continue to support the delivery of Victoria's COVID-19 vaccination program.

Work is underway to optimise use of the existing workforce in the state-run vaccination clinics, enabling more vaccine doses to be administered through more efficient clinic models. There will also be opportunities for further involvement of primary care and community care partners, including activating community pharmacy involvement (recently announced).

However, even with increased efficiency and further involvement of primary care, modelling indicates there will be a shortfall in available workforce to prepare and/or administer the COVID-19 vaccine, and that additional surge workforce will be required to deliver increased vaccination activity later in 2021. Action to authorise additional workforce needs to be taken now to ensure workforce demand can be met when increased vaccine supply is available.

4. Rationale and proposal

This paper proposes authorisation of a number of additional health professions and student cohorts that have suitable transferable skills and capabilities that, once trained, can provide surge workforce capacity for Victoria's COVID-19 vaccination program. These workforces will be known as the new emergency authorised surge workforces.

Following consultation, the agreed workforces will be authorised via a time-limited Public Health Emergency Order by the Secretary to the Department of Health under section 22D of the *Drugs, Poisons and Controlled Substances*

Act 1981 (Vic). Public Health Emergency Orders are valid for a maximum period of six months, unless revoked earlier.

The new emergency authorised surge workforces will be required to successfully complete additional bridging training that will provide them with the specific clinical knowledge required for entry into the mandatory Victorian and Commonwealth COVID-19 online training programs. They will also complete additional practical training. Further detail regarding the scope of this training is available in section 4.3.

Once the new emergency authorised surge workforces have successfully completed all mandatory training, and have been assessed as competent by an appropriately experienced and qualified authorised immuniser, they will work under ratio-based supervision arrangements that ensure they have the clinical oversight and support required to safely and competently prepare and/or administer the COVID-19 vaccine.

A summary of the workforces that are proposed to be authorised to prepare and/or administer the COVID-19 vaccine is outlined in section 4.1 and 4.2 below.

Context for the emergency authorisation of a surge workforce

- Expansion of the emergency authorised workforce is intended to supplement the existing workforce to meet anticipated demand and reduce pressures on clinical service delivery by drawing on multiple and diverse workforces.
- Short-term emergency authorisation is temporary, defined, and does not set policy precedent for ongoing provisions for possession or administration of scheduled medicines. Authorisation will not extend to scheduled medicines other than the COVID-19 vaccine, unless existing provisions apply under Victorian drugs and poisons legislation.
- Authorisation of workforce does not equate to participation. Workforces will be activated as required, and activation does not guarantee employment or engagement.
- All emergency authorised workforce must be supervised by a supervising authorised immuniser according to ratios in the Victorian COVID-19 Vaccination Guidelines. Supervising authorised immunisers have additional training and authorisation to respond to adverse events following immunisation, including administration of adrenaline, if indicated.
- The proposed new emergency authorised surge workforces have been selected based on assumed background knowledge, transferable skills and capabilities, potential to be trained to prepare and/or administer the COVID-19 vaccine and alignment of employment structures within Victorian state-run vaccination services.
- It is acknowledged that transferable knowledge and skillsets of the workforce may differ based on profession, and within professions depending on continuing professional development and employment/educational exposure.
- It is acknowledged that the proposed new emergency authorised surge workforces may not currently have the required knowledge and skills to enable preparation and/or administration of COVID-19 vaccine. This knowledge and skill gap will be met through education and training and will be assessed through a clinical skills and competency assessment.

4.1 Short-term Public Health Emergency Orders under section 22D of the *Drugs, Poisons and Controlled Substances Act 1981* to enable preparation and administration of the COVID-19 vaccine

It is proposed to authorise the below workforce groups to prepare and administer the COVID-19 vaccine.

All proposed workforces *below will be required* to successfully complete and comply with:

- **Mandatory COVID-19 vaccination training packages** – all new emergency authorised surge workforces must complete the training as outlined in Section 4.3 of this paper.

- **Clinical skills and competency assessment** – all new emergency authorised surge workforces must complete a clinical skills and competency assessment prior to their commencement in the COVID-19 vaccination program as outlined in Section 4.3 of this paper.
- **Proposed supervision arrangements** – the *below* new emergency authorised surge workforces require supervision by a supervising authorised immuniser. It is proposed that supervisors can supervise up to 10 individuals from emergency authorised workforce groups, however, this new emergency authorised surge workforces may comprise no more than 50% of that ratio. This is subject to change depending on final workforce models.
- **Additional bridging training** – the *below* new emergency authorised surge workforces will be required to successfully complete additional training that will provide them with the clinical knowledge and practical skills to then complete the mandatory Victorian and Commonwealth training modules. This includes both an online component and a practical component completed at different stages of the training pathway.

4.1.1 Dental and Oral Health Workforce

Workforce	Role	Proposed supervision	Training and assessment
Dentist	Prepare and administer	Supervision by a supervising authorised immuniser Ratio 1:10 (no more than 50% of this surge workforce)	<ul style="list-style-type: none"> • Mandatory COVID-19 vaccination training packages • Mandatory clinical skills and competency assessment • Mandatory bridging training
Oral health therapist			
Dental hygienist			
Dental Therapist			

Transferable skills and capabilities

Dental and Oral Health workforce have knowledge and experience in injectable medication administration (including adrenaline), (discrete) anatomy, physiology, pharmacology, healthcare assessment, infection prevention.

4.1.2 Allied Health Workforce

Workforce	Role	Proposed supervision	Training and assessment
Physiotherapist	Prepare and administer	Supervision by supervising authorised immuniser Ratio 1:10 (no more than 50% of this surge workforce)	<ul style="list-style-type: none"> • Mandatory COVID-19 training packages • Mandatory clinical skills and competency assessment • Mandatory bridging training
Occupational therapist			
Podiatrist			
Optometrist			
Medical Radiation Practitioner			
Orthoptist			
Prosthetist/ Orthotist			
Dietician			
Speech Pathologist			

Transferable skills and capabilities

Allied Health workforce have knowledge and experience in medication administration (where they have an Ahpra registration endorsement and are authorised under Drugs, Poisons and Controlled Substances legislation in their respective areas of professional practice), (general or discrete) anatomy, physiology, pharmacology, healthcare assessment, potentially vocational CPR/basic life support training and infection prevention.

4.1.3 Pharmacy Workforce

Workforce	Role	Proposed supervision	Training and assessment
Pharmacist	Prepare and administer	Supervision by supervising authorised immuniser Ratio 1:10 (no more than 50% of this surge workforce)	<ul style="list-style-type: none"> • Mandatory COVID-19 training packages • Mandatory clinical skills and competency assessment • Mandatory bridging training
Intern Pharmacist			

Transferable skills and capabilities

Pharmacists and intern pharmacists have knowledge of anatomy, physiology, pharmacology, healthcare assessment and preparation of medicines (including aseptic techniques and labelling).

Pharmacists and intern pharmacists are already authorised to prepare and draw-up the COVID-19 vaccine (see section 3). This proposed emergency authorisation will also enable these workforces to administer the vaccine.

4.1.4 Pathology Workforce

Workforce	Role	Proposed supervision	Training and assessment
Pathology collector (including Phlebotomist)	Prepare and administer	Supervision by supervising authorised immuniser Ratio 1:10 (no more than 50% of this surge workforce)	<ul style="list-style-type: none"> • Mandatory COVID-19 training packages • Mandatory clinical skills and competency assessment • Mandatory bridging training

Transferable skills and capabilities

Pathology collectors (including Phlebotomists) have knowledge of infection prevention, first aid, syringe handling, healthcare communication and records keeping.

4.1.5 Dentistry, oral health, allied health, pharmacy, nursing/midwifery and paramedicine students

Workforce	Role	Proposed supervision	Training and assessment
Dentistry student (fourth year and above or second year Master's)	Prepare and administer	Supervision by supervising authorised immuniser Ratio 1:10 (no more than 50% of this surge workforce)	<ul style="list-style-type: none"> • Mandatory COVID-19 training packages • Mandatory clinical skills and competency assessment • Mandatory bridging training
Oral health students (third year)			
Physiotherapy student (fourth year or second year Master's, or equivalent)			
Occupational therapy student (fourth year or second year Master's or equiv)			
Pharmacy student (fourth year)			
Podiatry student (fourth year)			
Nursing/midwifery student (second year)			
Paramedicine student (second year)			

Transferable skills and capabilities

Dentistry, oral health, allied health, pharmacy, nursing/midwifery and paramedicine students have basic knowledge of (general or discrete) anatomy, physiology, pharmacology, healthcare assessment, preparation and/or injection of medicines (where applicable to scope of practice) and potentially basic life support.

4.2 Short-term Public Health Emergency Orders under section 22D of the *Drugs, Poisons and Controlled Substances Act 1981* to enable preparation of the COVID-19 vaccine

It is proposed to authorise the below workforce groups to prepare (only) the COVID-19 vaccine.

All proposed workforces *below will be required* to successfully complete and comply with:

- **Mandatory COVID-19 training packages** – all new emergency authorised surge workforces must complete the training as outlined in Section 4.3 of this paper.
- **Clinical skills and competency assessment** – new emergency authorised surge workforces must complete a clinical skills and competency assessment prior to their commencement in the COVID-19 vaccination program as outlined in Section 4.3 of this paper.
- **Proposed supervision arrangements** – the *below* new emergency authorised surge workforces require supervision by an authorised vaccine preparation supervisor, reporting to a registered pharmacist. It is proposed that supervisors can supervise up to five emergency authorised workforce once deemed competent in authorised COVID-19 vaccination activities. Supervisory models to be confirmed and subject to change depending on final workforce models.

All workforces *below will be recommended* to complete the online component of the training:

- **Additional bridging training** – the below new emergency authorised surge workforces will be recommended to complete additional online bridging training to provide them with the clinical knowledge and practical skills to then complete the mandatory Victorian and Commonwealth training modules.

4.2.1 Laboratory science, research and technician workforce

Workforce	Role	Proposed supervision	Proposed ratio	Training and assessment
Medical laboratory scientist	Prepare only	Reports to registered pharmacist	TBC	<ul style="list-style-type: none"> • Mandatory COVID-19 vaccination training packages • Mandatory clinical skills and competency assessment • Recommended bridging training
Postdoctoral researcher/Research fellow (biomedical laboratory experience)		Pharmacist (may also be to medical laboratory scientist, depending on final workforce models)	1:5	
Research assistant/Research officer (biomedical laboratory experience)				
Medical laboratory technician				

Transferable skills and capabilities

Medical laboratory scientists and technicians, postdoctoral researchers/research fellows and research assistants/research officers (with biomedical laboratory experience) have knowledge and experience in handling restricted substances and fluids, aseptic techniques and technical skills in measurement.

4.2.2 Medical laboratory science students and dental assistants

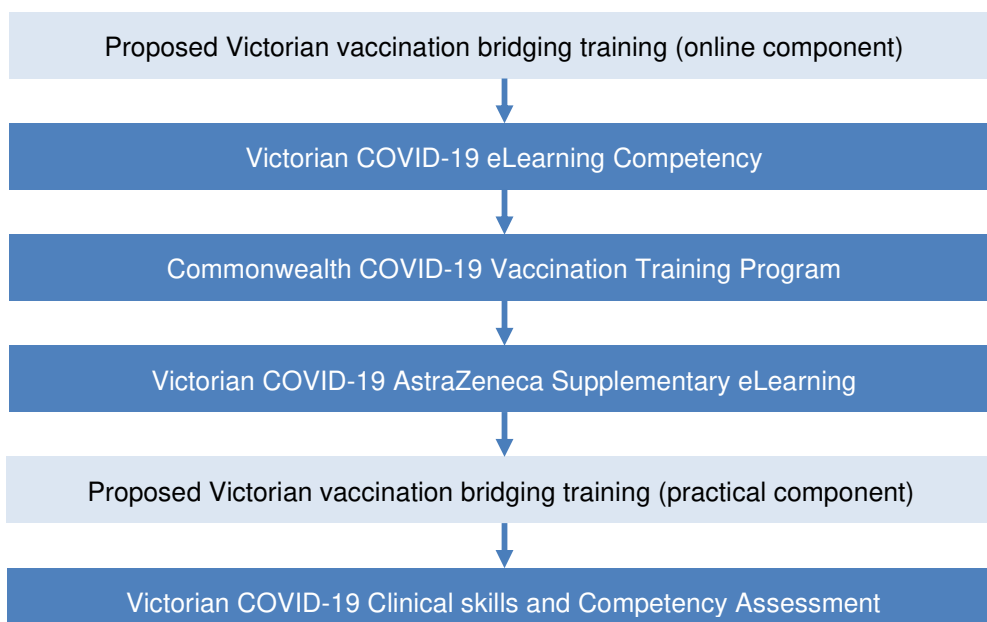
Workforce	Role	Proposed supervision	Proposed ratio	Training and assessment
Medical laboratory science student (final year)	Prepare only	Pharmacist (may also be to medical laboratory scientist, depending on final workforce model)	1:5	<ul style="list-style-type: none"> • Mandatory COVID-19 vaccination training packages • Mandatory clinical skills and competency assessment • Recommended bridging training
Dental assistant (Cert IV)				

Transferable skills and capabilities

Medical laboratory science students and dental assistants have skills and knowledge in handling scheduled medicines/restricted substances and fluids, aseptic techniques

4.3 Training and competency assessment

The proposed pathway for training and assessment of the new emergency authorised surge workforces is outlined below.



4.3.1 Victorian vaccination bridging training (estimated 2.5 - 3hrs online and practical)

New emergency authorised surge workforce outlined in this paper will be required to successfully complete bridging training (online component) before commencing the other mandatory COVID-19 online vaccination training. The Department is working closely with Victorian training providers to develop the bridging training. The bridging training will include an additional practical component which must occur on-site (or at a designated nearby training site) after completion of the other COVID-19 online modules) and be delivered by an appropriately experienced and trained authorised immuniser. This practical training will be completed prior to the clinical skills and competency assessment.

This bridging training will recognise the lower baseline level of skills and competency in vaccination and will seek to address any knowledge gaps and better prepare these workforces for the subsequent training modules, competency assessment and related roles. The training will include:

- Introduction to immunisation – the regulatory framework, public health messaging, the immune system and immunisation
- Administering vaccines – vaccine storage and handling, communication and consent, administering the vaccine and aftercare
- Adverse Events Following Immunisation – identifying and responding to adverse reactions and documentation requirements.

4.3.2 Victorian COVID-19 eLearning Competency (1.5 - 2hrs online)

The Department's training package combines foundational vaccination modules, with key courses from the Melbourne Vaccination Education Centre (MVEC). It is mandatory for all emergency authorised workforce and contains the following modules:

- Vaccination procedures – an overview of the immunisation processes
- Shoulder Injury Related to Vaccine Administration (SIRVA) – an overview of prevention, diagnosis and treatment of shoulder injury related to administration
- Use of Multi-dose Vials – an overview of safe preparation and storage of vaccines from multi-dose vials
- Preparing Comirnaty™ (Pfizer BNT162b2) Vaccine.

For further detail <https://education-mvec.mcri.edu.au/courses/dh-covid19/>

4.3.3 Commonwealth COVID-19 Vaccination Training Program (3 - 4 hrs online)

The Commonwealth COVID-19 Vaccination Training Program supports healthcare professionals to deliver the COVID-19 vaccine. It is mandatory for all COVID-19 vaccination workforce and contains the following modules:

- COVID-19 introduction
- Handling and storage
- Communication and purpose
- Multi-dose vial (MDV) training
- Documentation and reporting
- Safety and surveillance monitoring and reporting for adverse events following immunisation.

Additional COVID-19 training modules include specific training for:

- Pfizer/BioNTech (module available)
- Oxford University/AstraZeneca (module available)
- Future vaccines (as possible new vaccines emerge)

For further detail <https://www.health.gov.au/covid-19-vaccination-training-program>.

4.3.4 Victorian COVID-19 AstraZeneca Supplementary eLearning module (online)

The Victorian COVID-19 AstraZeneca Supplementary eLearning has been developed to support vaccine providers to confidently deliver the AstraZeneca COVID-19 vaccine to people aged under 60 years. This includes a revised consent process, updated in June 2021.

4.3.5 Victorian COVID-19 Clinical Skills and Competency Assessment (practical)

Workforces authorised via a Public Health Emergency Order to participate in Victoria's COVID-19 vaccination program must undergo a clinical skills and competency assessment prior to commencing in the role to ensure they are clinically skilled and competent to prepare and/or administer the COVID-19 vaccine.

Workforces preparing and administering the COVID-19 vaccine

The competency assessment is conducted by an appropriately experienced and trained authorised immuniser who assesses the employee's competence against nine key criteria. The staff member:

- can demonstrate ability to obtain consent for and communicate procedure to consumer
- can describe additional action that must be considered to obtain consent in vulnerable patient groups
- can demonstrate the ability to perform vaccination pre-screening and can address contraindications and precautions
- can answer common patient questions associated with COVID-19 vaccines
- can demonstrate how to record a completed vaccination
- has successfully complete training in the preparation and handling of multi-dose vaccine vials
- can demonstrate appropriate administration technique
- has successfully completed a minimum of five supervised vaccinations
- demonstrates an understanding of escalation points in instances of:
 - difficulties in obtaining valid consent
 - adverse events following immunisation
 - vaccination errors.

A Victorian COVID-19 Clinical Skills and Competencies Training Certificate is issued to the employee by an appropriately experienced and trained authorised immuniser upon successful completion of the assessment.

Workforces preparing the COVID-19 vaccine only

All workforces authorised to prepare the COVID-19 vaccine must undertake a local competency assessment in aseptic preparation techniques in addition to the mandatory online training and successfully complete a competency assessment relevant to their authorised activities prior to commencing in their role.

4.4 Clinical governance and supervision

All existing emergency authorised workforce and new emergency authorised surge workforces are supported and must be supervised by a supervising authorised immuniser with relevant skills and experience in the technical aspects of vaccination and authorisation to possess and administer adrenaline. Supervising authorised immunisers are able to respond to clinical questions and issues that may be escalated to them by emergency-authorised immunisers, including identification and management of Adverse Events Following Immunisation (AEFI).

Supervising authorised immunisers can provide clinical supervision to a maximum of 10 emergency-authorised immunisers – with the new emergency authorised surge workforces proposed in this paper making up no more than 50 per cent of the supervision quota.

Vaccination service providers are also required to appoint suitability qualified personnel to oversee the clinical governance and day-to-day operations of fixed sites.

For further details on clinical governance requirements and the supervision of participating workforce, please consult the Victorian COVID-19 Vaccination Guidelines at <https://www.coronavirus.vic.gov.au/victorian-covid-19-vaccination-guidelines>. Compliance with these Guidelines is a condition of all Victorian COVID-19 vaccination workforce authorisations.

5. Application of emergency authorisations in clinical practice

The proposed new Public Health Emergency Orders will enable a temporary broadening of the individual scope of practice for a number of practitioners from a Victorian regulatory perspective. These proposed Orders will be temporary, defined, and will not set policy precedent for ongoing provisions for possession or administration of scheduled medicines.

For all settings where MBS billing is undertaken, the requirements for MBS items must still be met. Refer to the Australian Government website, Information for COVID-19 vaccination providers for further information at: <https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/information-for-covid-19-vaccination-providers>.

6. Next steps

Feedback from this consultation paper will inform decisions regarding the new emergency authorised surge workforces to be authorised to prepare and/or administer the COVID-19 vaccine and the scope of the authorisation.

Informed by the outcome of the consultation process, the workforces recommended for authorisation will be the subject of a submission to the Department's Health Professions Drug Access Committee and subsequent consideration and action by the Secretary to the Department of Health, through a Public Health Emergency Order.

All workforces participating in Victoria's COVID-19 vaccination program will continue to adhere to current standards, guidelines and protocols to support safe COVID-19 vaccination including compliance with the [Victorian COVID-19 Vaccination Guidelines](#).