



COLD CHAIN MATTERS ... No break for the cold chain



Take a moment to check your cold chain management process is clear and understood by all the staff who will be working through this time. This is particularly important if you have locum staff in to cover.

The minimum cold chain requirements are:

- » Your Cold Chain Management Policy is up to date and your back up refrigerator facilities are available over this period.
- » Daily min/max temperatures are checked and recorded every day your clinic is open.
- » All staff know how to download the data logger and review the information if a cold chain breach has been identified or there is a variation in the min/max temperature readings. Don't assume that everyone knows how to use the logger.
- » All staff know what actions are required and who to contact if there is a cold chain problem. Each DHB has an Immunisation and/or Cold Chain Coordinator. Generally they will only be available on business days. If your clinic is open on statutory days, ensure a plan is in place should a cold chain problem occur.
- » It is strongly recommended that the data logger is downloaded at least weekly if your fridge is older than 7 years.

Remember, if there is a cold chain problem and you have any concern about the stability of vaccines, quarantine them at +2°C to +8°C until you can get more advice from your Immunisation Coordinator.

New, improved National Cold Chain Audit



The National Cold Chain Audit (NCCA) monitors the delivery and storage of around 10% National Immunisation Schedule vaccines from ProPharma regional stores to immunisation providers. IMAC is now responsible for the management of the NCCA on behalf of the Ministry of Health.

Two National Cold Chain Audit pilots were conducted during 2016 through the Wellington ProPharma store. Providers involved in the pilots and participants in the National Immunisation Workshop held in September provided valuable feedback that guided the final NCCA process.

Forget about TagAlerts. The new, improved NCCA uses simple and durable yellow Temprecord Econolog loggers and is being rolled out nationally between November 2016 and March 2017.

- » A yellow sticker on the outside of the order alerts providers to the presence of the logger before the order is unpacked.
- » A yellow instruction sheet explaining how to check the logger will be inside the order on top of the vaccines.
- » An addressed, prepaid courier envelope is provided for return of the logger to IMAC.

The logger stays with the vaccine box until all doses in the vaccine box have been administered or up to two weeks, whichever occurs first. Providers are not able to turn the logger off. The logger is downloaded by IMAC once it has been returned to us.

Key points

- » The logger stays with the vaccine box until:
 - » All the vaccines have been administered, or
 - » Up to two weeks, whichever occurs first.
- » The logger cannot be turned off by providers.
- » The logger is returned to IMAC in the addressed, prepaid courier envelope.
- » Contact your Immunisation or Cold Chain Coordinator if you need any assistance.

For more information on the NCCA, including logger instructions for providers – visit the Health Professionals/Cold Chain webpage on our website.

Providers need to contact their Immunisation or Cold Chain Coordinator if a cold chain breach has occurred, they need assistance with the logger, or the prepaid courier envelope is lost.



The Immunisation Advisory Centre team would like to thank you for your support and efforts to protect our community from vaccine preventable diseases throughout 2016.



We wish you and your whānau a joyous Christmas and healthy New Year.



0800 IMMUNE Christmas/New Year hours

The 0800 IMMUNE phone line and email service will close at 4.30pm on Friday 23 December and re-open at 9am on Wednesday 4 January 2016. An advisor will be available for urgent clinical queries on 29, 30 and 31 December 2016, telephone 0800 IMMUNE for contact details if required.



When the phone line is closed –

Health professionals should contact their Immunisation/Cold Chain Coordinator for cold chain and immunisation inquiries.

Immunisation/Cold Chain Coordinator contact details are available on our Health Professionals/Regional Advisors and Local Coordinators webpage.



2017 Education courses

Dates for 2017 courses will be available on our [Education and Training](#) webpage in mid-December. Courses in 2017 include:

Vaccinator Training Course – Two Day for new vaccinators

- » 2 day course
 - » Priority for 2 day VTC's is given to those delivering childhood schedule vaccines.

Vaccinator Training Course – Flexible Learning for new vaccinators

- » Includes 12 hours of self-directed online learning followed by a 4 hour tutorial.
- » Register 4 weeks before tutorial and complete self-directed learning before the tutorial.

Vaccinator Update Course for current vaccinators

- » 4 hour vaccinator update tutorial

Online Vaccinator Update Course for current vaccinators

- » Equivalent to the 4 hour update tutorial
- » Can log in and out as many times as needed
- » Separate online immunisation updates for:
 - » Vaccinators of infants to adults
 - » Vaccinators of adolescents and adults
 - » Pharmacists
 - » Public Health Nurses
 - » Midwives
 - » Approved by the Midwifery Council of New Zealand as elective education and allocated 5 ongoing education (CME) points

Midwife Immunisation Course for midwives

- » 1 day course – can be purchased
- » Approved by the Midwifery Council of New Zealand as elective education and allocated 5 ongoing education (CME) points

Online HPV Vaccination Module for health professionals **FREE**

- » 1 hour tutorial plus assessment questions

Immunisation Information Course for non-vaccinators

- » 1 day course – can be purchased

●●● from the phones

Addressing some of the questions we receive on the 0800 IMMUNE phone line

Requests for early immunisation

Parents often request the early administration of vaccines because of holidays, special events, or to fit them into busy life. Requests seem to be particularly frequent as Christmas/New Year approaches with the additional challenges of public holidays, and practices with reduced staffing or closed for short periods of time. Early administration is not generally recommended for many of the infant Schedule vaccines.

The fact sheet [Administration of either early or expired vaccines](#) can be downloaded from the [Resources/Written Resources](#) webpage on our website.

Management of tetanus-prone wounds

The [Guidelines for the management of tetanus-prone wounds](#) use an easy to follow flow chart to determine whether tetanus immunoglobulin (TIG) and/or tetanus-containing vaccine is required to reduce the risk of tetanus for an individual with a tetanus-prone wound. The fact sheet can be downloaded from the [Resources/Written Resources](#) webpage on our website.

Chapter 19, section 19.5.3, in the electronic [Immunisation Handbook 2014 \(2nd edition\)](#) provides a guide for tetanus-risk assessment of wounds, general measures for treatment of tetanus-prone wounds, and information about TIG. The electronic Handbook can be downloaded from the Ministry of Health website www.health.govt.nz/publication/immunisation-handbook-2014-2nd-edn.

GET THE FACTS ON IMMUNISATION



HPV immunisation from 1 January 2017

Gardasil® and Gardasil® 9 are fully interchangeable.

- » Gardasil® 9 (HPV9) will be distributed to primary care after the national stock of Gardasil® (HPV4) has been used up.
- » Eligible individuals can receive either Gardasil® (HPV4) or Gardasil® 9 (HPV9) from 1 January 2017.
 - » Individuals who begin with Gardasil® (HPV4) can complete their vaccine course with Gardasil® 9 (HPV9).
 - » There are no safety concerns with changing vaccine brands during a course of vaccines.
 - » The number and timing of doses is the same for both vaccines.

Eligibility for funded HPV vaccine

- » Males and females aged 9 years to under 27 years.
 - » HPV immunisation course is funded from 9 years in primary healthcare.
 - » The School-based Immunisation Programme deliver the vaccine to school students in year 8.
 - » Non-residents must be aged under 18 years to receive funded HPV vaccine doses.
- » Males and females aged under 27 years who are HIV-positive, or who have received a solid organ or stem cell transplantation.
- » Males and females aged under 27 years who completed a course of three HPV vaccine doses before having chemotherapy – one additional dose post-chemotherapy.
- » Catch-up eligibility for NZ residents: if at least one dose was given before 27 years of age, there is no upper age limit to receive funded catch-up doses.

HPV vaccine administration

- » Males and females aged 9 years to under 15 years
 - » Two HPV vaccine doses at 0 and 6–12 months with a minimum interval of 5 months between doses one and two.
- UPDATED**
 - » If doses one and two are given at least 5 months apart, no further doses are required.
 - » If doses one and two are given less than 5 months apart, a third HPV vaccine dose is required.
 - » If dose two is not given until the child is aged 15 years or older, a third HPV vaccine dose is required.
- » Males and females aged 15 years to under 27 years
 - » Three HPV vaccine doses at 0, 2, and 6 months.
 - » An alternate schedule can be followed, 0, 1, 4 months
- » Males and females aged 9 years to under 27 years who are HIV-positive, post-solid organ or post-stem cell transplantation
 - » Three HPV vaccine doses for all ages at 0, 2, and 6 months.

Catch-up planning by primary care

- » There will not be a formal HPV vaccine catch-up programme.
- » Primary care will need to identify and recall eligible individuals who will not be offered HPV immunisation through a school-based vaccination programme (students in year 8).
- » It is suggested that primary care extend existing query builders and processes used to identify girls who have not received any HPV vaccine doses, or who have not completed their HPV vaccine course through a school-based vaccination programme.

UPDATED Answers to frequent HPV related questions

The updated fact sheet is available on our website and explains:

- » Gardasil® and Gardasil® 9 are fully interchangeable from 1 January 2017
- » Gardasil® 9 availability in 2017
- » HPV vaccine eligibility
- » Catch-up planning for primary care
- » Vaccine administration schedules from 1 January 2017
- » Answers to frequently asked HPV vaccine administration questions
- » HPV vaccine efficacy and safety

Visit the [Hot Topics](#) box or [Written Resources](#) page on our website to download the fact sheet.

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