

## HealthEd Immunisation Update: No Jab No Pay - the solution to improving immunisation uptake?

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**CENTRE OF VACCINES & INFECTIOUS DISEASES**


**TELETHON KIDS INSTITUTE**  
Research Power to Care


**THE UNIVERSITY OF WESTERN AUSTRALIA**

## Declaration of conflicts of interest

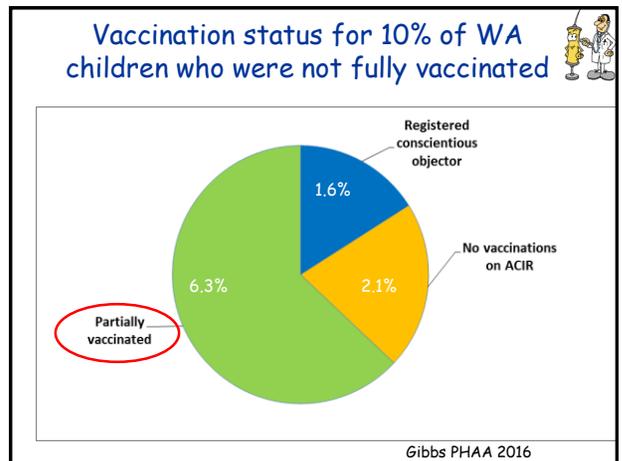
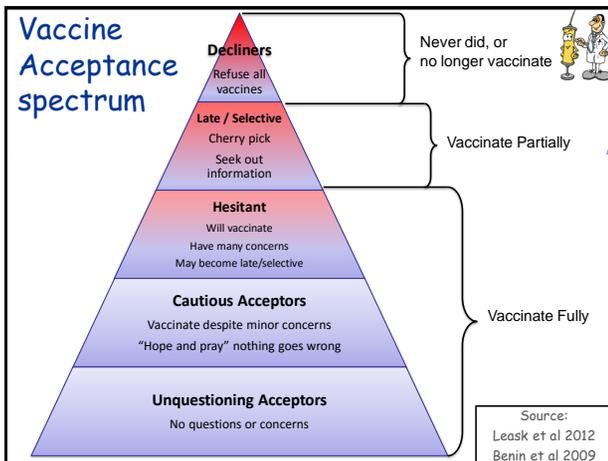
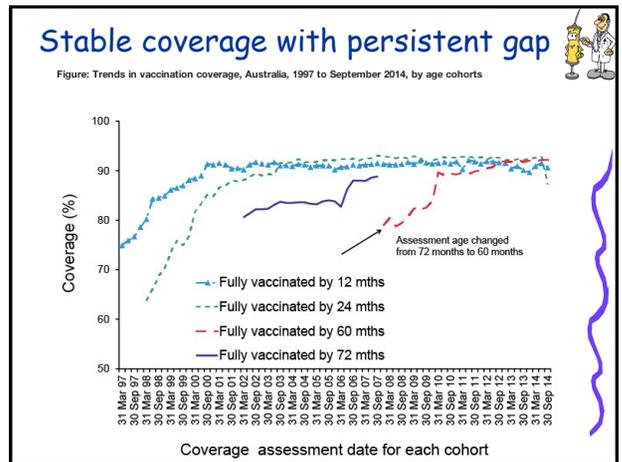


- Membership of Immunisation committees
  - Deputy Chair Australian Technical Advisory Group on Immunisation, 2010-14
  - Chair, ATAGI MMR-Varicella & Zoster Vaccine Working Party, 2006 - 2014
  - Chair, WA Immunisation Scientific Advisory Group, 2011- present
  - Chair, WA Vaccine Safety Advisory Committee, 2011 - present
- Vaccine Scientific Advisory Groups
  - Member, NCIRS Scientific Advisory Committee
  - Influenza Specialist Group (ISG)
  - GlaxoSmithKline - Pertussis
  - Pfizer - Pneumococcal conjugate vaccines
  - Baxter - meningococcal C conjugate & Ross River Virus vaccines
  - CSL Ltd - adjuvanted influenza vaccine
  - MCRI - Rotavirus RV3 DSMB
- Vaccine Research
  - Principal Investigator of industry sponsored multi-centre studies for Baxter, CSL, GSK, Medimmune, Merck, Pfizer, Sanofi, Novartis
  - Travel support to present trial data at scientific conferences
    - Sanofi, Pfizer, Baxter, GSK
  - Research funding for Investigator initiated studies
    - GSK, Merck, CSL, Novartis

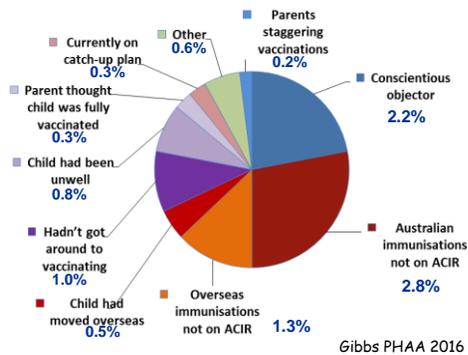
## Talk Outline



- Current Immunisation Coverage
- Influences on Vaccine Coverage
- No Jab No Pay implications
- Issues with non-NIP vaccines
- The Way Forward
- Acknowledgements:
  - Julie Leask, NCIRS Sydney
  - Robyn Gibbs, Paul Effler, Annette Regan, Lauren Bloomfield CDCD, Chris Blyth, UWA
  - Allan Leeb & Ian Peters, SmartVax
  - Katie Atwell Murdoch Uni, Tom Snelling & VTG TKI



## Reasons why WA children are not recorded as fully vaccinated on the ACIR



## Conclusions of WA Study

- Over 4% of children had incomplete records on the ACIR - immunisations had been given but were not recorded
- The true rate of fully immunised children in WA is likely to be closer to 95%
- About half of the remaining parents (2.5%) were not opposed to vaccination, but vaccinations were late

## WA Recommendations

### Improving data quality on ACIR

- For families from overseas, vaccination history should be provided at Medicare enrolment
- GPs should ask parents to provide overseas histories for adding to the ACIR\*
- More ACIR training & support for immunisation providers\*
- Stronger relationship with practice software companies \* (endorsement?)
- Practice incentives

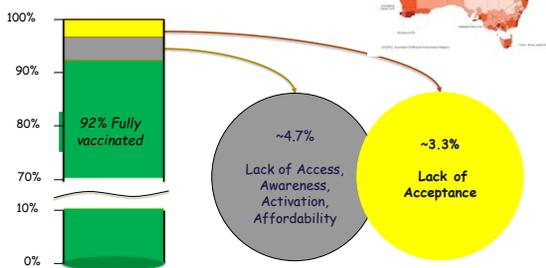
\* Strategies being developed by CDCD in WA

## Recommendations

### Catching up 'late' children

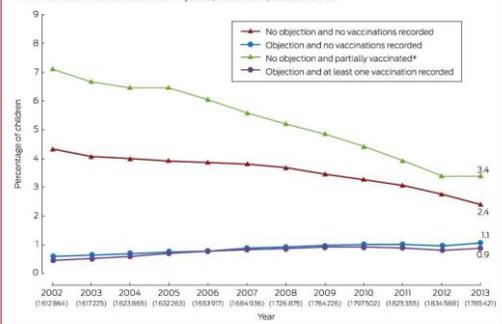
- SMS practice/clinic reminders to parents of overdue children\*
- More education for providers and parents that being unwell is not a general contradiction to vaccination
- Improving opportunistic immunisation

## Under-vaccination of children <5 years - what causes it?



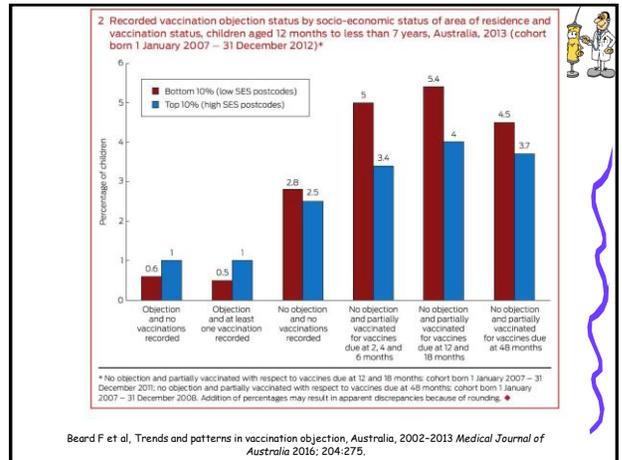
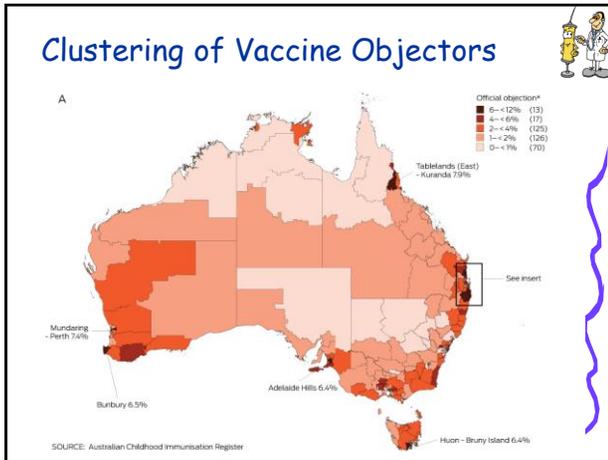
Beard FH et al. Trends and patterns in vaccination objection, Australia, 2002-2013 *Medical Journal of Australia* 2016; 204(7):275  
 Thomson A et al. (2016) *Vaccine*. 34:1018-1024.  
 Senn A. Human rights and capabilities. *Journal of Human Development*. 2005;6:151-66.

1 Trends in recorded vaccination objection status and vaccination status of children aged from 12 months to less than 7 years, Australia, 2002-2013



\* For vaccines due at 2, 4 and 6 months of age. The number of children in each annual cohort is given below the respective year number.

Beard FH et al. Trends and patterns in vaccination objection, Australia, 2002-2013 *Medical Journal of Australia* 2016; 204:275.



- ## Increasing coverage in children: what works?
- 'Education' when teamed with multicomponent strategies
  - Recalls/reminder systems
  - Routinely checking immunisation status
  - Home visits
  - Incentives
  - Catch up plans
  - Provider record audits
  - Clinical decision support systems
  - Standing orders
  - School entry linkage
1. Guide to Community Preventive Services. Universally recommended vaccinations: community-based interventions implemented in combination [www.thecommunityguide.org/vaccines/universally/communityinterventions.html](http://www.thecommunityguide.org/vaccines/universally/communityinterventions.html)
  2. Ward K et al. Strategies to improve vaccination uptake in Australia, a systematic review of types and effectiveness. *Australian and New Zealand Journal of Public Health* 2012; 36(4):369-77.



## News Limited's campaign in 2014

### 'Einstein parents' say no to kids' vaccination

SUE DUNLEVY AND DANIELA ONGARO • THE DAILY TELEGRAPH • APRIL 11, 2013 12:00AM BE THE FIRST TO RESPOND

**theTelegraph**

**We are demanding:**

- > The state government amend the Public Health Act 2010 to allow childcare centres to ban unvaccinated children.
- > The federal government stop paying childcare rebate and family tax benefit to parents who claim they are "conscientious objectors".

**#NoJabNoPlay**

## Political drivers of National "No jab - no play" policy in 2015

### Claire Harvey: Anti-vaxers, you are baby killers

CLAIRE HARVEY THE SUNDAY TELEGRAPH MARCH 22, 2015 12:00AM

### Galaxy Poll: 86 per cent of Australians want childhood vaccination to be compulsory

SAMANTHA MAIDEN NATIONAL POLITICAL EDITOR THE SUNDAY TELEGRAPH APRIL 03 2015 12:00AM

## Not all experts agree with "No jab - no play" policy

27 February 2015, 6:30am AEDT

### Forget 'no jab, no pay' schemes, there are better ways to boost vaccination

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 Associate Professor, Discipline of Paediatrics and Child Health at University of Sydney

**DISCLOSURE STATEMENT**  
 Kristine Macartney receives funding as an employee of the National Centre for Immunisation Research and Surveillance (NCIRS). She has also conducted research on vaccines, vaccine-preventable diseases and vaccine safety funded by the National Health and Medical Research Council (NHMRC).



Removing the childcare rebate for parents who do not fully immunise their children is

PRIME MINISTER OF AUSTRALIA  
THE HON. TONY ABBOTT MP

Home » Media » No jab - no play and no pay for child care

## NO JAB - NO PLAY AND NO PAY FOR CHILD CARE

12 April 2015  
Prime Minister

The Commonwealth Government will end the conscientious objector exemption on children's vaccination for access to taxpayer funded Child Care Benefits, the Child Care Rebate and the Family Tax Benefit Part A end of year supplement from 1 January 2016.

Parents who vaccinate their children should have confidence that they can take their children to child care without the fear that their children will be at risk of contracting a serious or potentially life-threatening illness because of the conscientious objections of others.

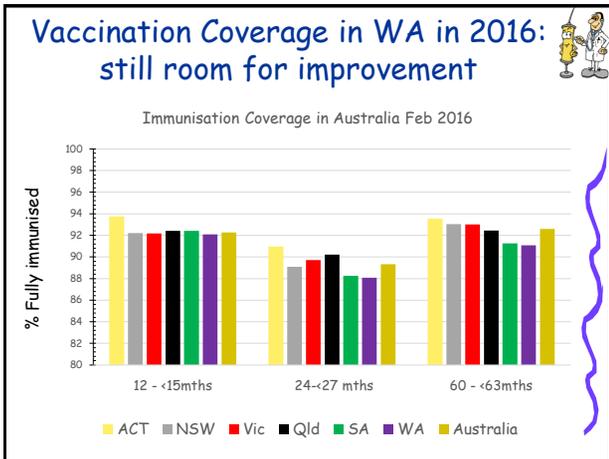


## No Jab No Pay A Department of Social Services policy

1999-2015 "Parental incentives"	From 2016 "No Jab No Pay"
Full vaccination or exemption required for receipt of <ul style="list-style-type: none"> <li>• FTB-A supplement</li> <li>• Childcare Benefit</li> <li>• Childcare Rebate</li> </ul>	Full vaccination or exemption required for receipt of same payments <u>No exemption for objectors</u> Medical exemption tightened
Penalty applied when child turned 1, 2 and 5 years	Penalty applied <u>every year</u> from 1 year to 19 years

## Impacts of No Jab No Pay policy

Upsides	Downsides
<b>Savings</b> Policy savings estimated at \$500 million in 2015 federal budget  <b>Program boost in needed areas</b> Department of Health able to spend \$26 million Catch-up incentives for providers \$6 per vaccine given Free vaccine for over 5's Extending the childhood register to adulthood Communications campaign	<b>Measurement</b> No more monitoring of objection rates <b>Childcare access</b> Reports of students on visas with children can't access childcare because they aren't on Medicare or vaccinated overseas; <b>Those lacking opportunity affected by more frequent penalty</b> Reports from AMS's of remote families are having trouble access timely vaccination because of transport barriers; <b>Register recording error</b> Reports of children being re-vaccinated <b>Primary and secondary care</b> Angry and distressed parents confronting GPs, nurses and clinics to obtain medical exemption <b>Vaccine refusal communities</b> Reports of planned pop-up childcare for unvaccinated kids Community Rallies attending discussing ways of organising opposition to policy <b>Low income families</b> Report impending financial hardship Changed work arrangements
<b>Coverage</b> Reports of some objectors changing their minds Reports of high demand for catch-up vaccination in some services	



## Coverage for recommended non- NIP vaccines in WA

- Maternal influenza vaccination - 60%
- Maternal pertussis vaccination - 75%
- Paediatric influenza vaccine - 15%

## Maternal vaccination

- Strategy for preventing disease in mothers and their young infants

2011

RANZCOG recommendation for influenza vaccination in any trimester of pregnancy

ACIP recommends pertussis vaccine for pregnant women in third trimester

2011

2012

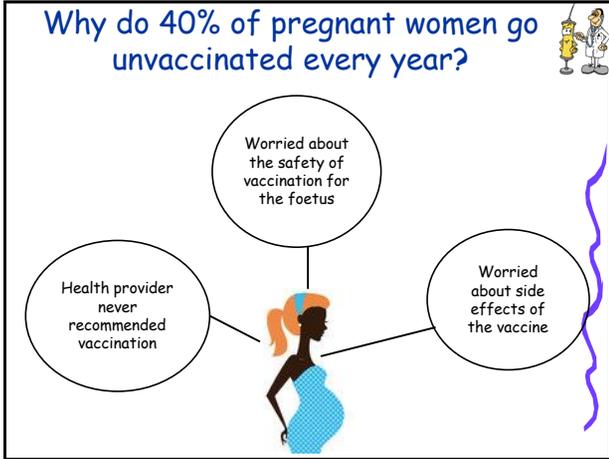
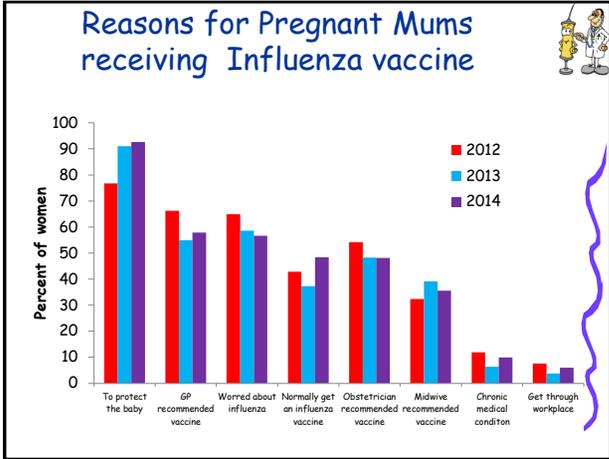
WHO SAGE list pregnant women as highest priority group for seasonal influenza vaccines

PH England introduces pertussis vaccination program for pregnant women

2012

2015

Implementation of state maternal pertussis vaccination programs in Australia



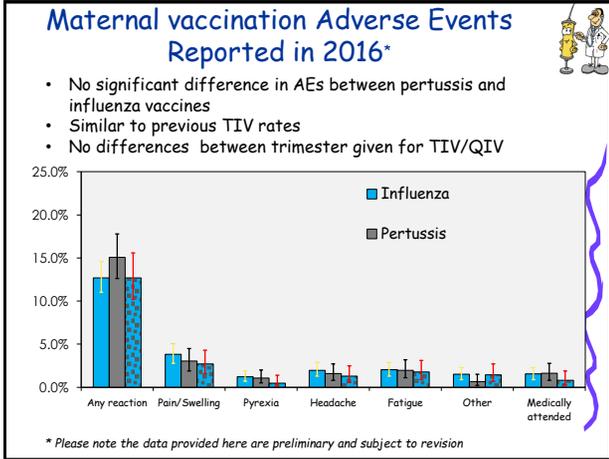
This is a message from the WA Department of Health. Our records show that you recently had a flu vaccine and we are conducting routine follow up. Please respond Y if you experienced any kind of reaction, fever, or illness in the week following your vaccination, or N if there was no reaction

Yes

As a result of your reaction, did you visit a doctor, medical centre, after hours medical service, or hospital emergency department?

No

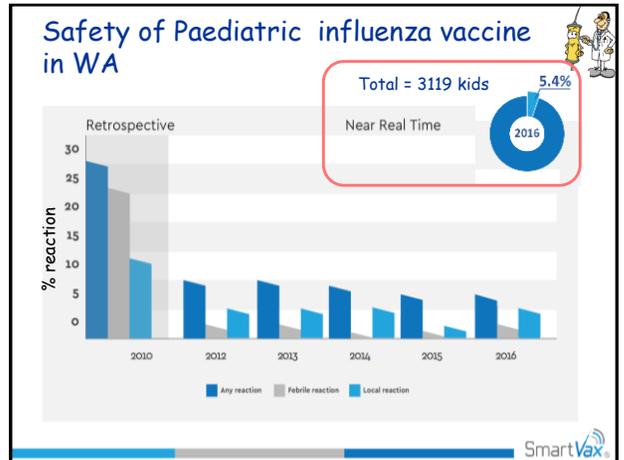
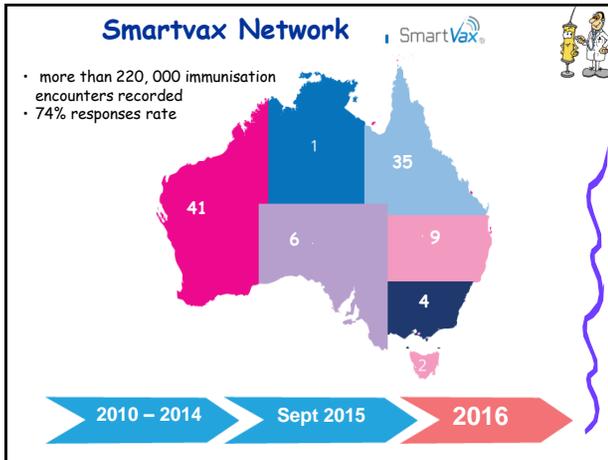
Thank you, your ongoing health is important to us. Please click [here](#) to answer a 5 minutes survey about your reaction. Alternatively, please respond CALL if you would prefer to be telephoned about your reaction.



Paediatric influenza vaccine safety

Immunizations SAVE LIVES

know it



### AUSVAXSAFETY

2016 Report No. 3  
14 March - 15 May 2016

**AUSVAXSAFETY PERTUSSIS**  
report of Australia's active surveillance for AEFI following influenza vaccine in children < 7 years

Prepared by: Alexis Pillsbury, Dr Helen Quinn, A/Prof Kristine Macartney, Dr Tom Snelling, A/Prof Peter Jacoby and Dr Parveen Fathima, on behalf of the AusVaxSafety team

**SURVEILLANCE SUMMARY**  
NO Safety Signals have been

**AUSVAXSAFETY INFLUENZA**  
report of Australia's active surveillance for AEFI following influenza vaccine in children < 5 years

2016 Report No. 6  
16 May - 22 May 2016

Prepared by: Alexis Pillsbury, Dr Helen Quinn, A/Prof Kristine Macartney, Dr Tom Snelling, A/Prof Peter Jacoby and Dr Parveen Fathima, on behalf of the AusVaxSafety team

Data provided by SmartVax and Vax tracker

**SURVEILLANCE SUMMARY**  
NO Safety Signals have been identified to date

As of 15 May:

2281	Total number enrolled
1534	Total Number of respondents
339	Total number reporting any reaction
29	Total number reporting a reaction requiring medical attendance

As of 22 May:

2201	Total number enrolled
1548	Total Number of respondents
75%	Response rate
163	Total number reporting any reaction
15	Total number reporting a reaction requiring medical attendance

Participants by Jurisdiction

- ### Summary
- Coverage for children under 5 years is high and fairly stable for routine NIP vaccines
  - Objectors make up less than half of all under-vaccinated
  - Those facing lack of opportunity are a larger group - the social determinants of vaccination
  - Low vaccination rates can be improved by minimising the barriers:
    - free and accessible vaccines and vaccine provision
    - accurate ACIR recording and reminders, incentives or systems to prompt providers & parents when a vaccine is due or overdue
    - enable qualified providers to give a vaccine without a doctor's involvement each time.
  - Policies about vaccination need to be made using epidemiological and behavioural evidence. The right strategy for the right group.
  - Evaluation of programmes is essential
  - Real-time vaccine safety surveillance now established
  - A no fault compensation system for rare serious vaccine injury is overdue

### Reference Websites

Immunisation handbook: [www.immunise.health.gov.au](http://www.immunise.health.gov.au)

WA Health Immunisation page: [www.public.health.wa.gov.au/3/469/3/immunisation\\_homepage.pm](http://www.public.health.wa.gov.au/3/469/3/immunisation_homepage.pm)

AusvaxSafety website: [www.ncirs.edu.au/surveillance/ausvaxsafety/index.php](http://www.ncirs.edu.au/surveillance/ausvaxsafety/index.php)

### Questions?

### Questions

