



Australian Government

**COVID-19**  
**VACCINATION**

# COVID-19 vaccine roll-out

## TARGETED EXPRESSION OF INTEREST (EOI) FOR GENERAL PRACTICES (ASTRAZENECA)

Following the successful onboarding of more than 4,600 primary care vaccination sites between March and April 2021 (including 4,400 general practices), the Commonwealth is further expanding participation in the COVID-19 Vaccination Program through general practices to **up to 900 additional sites**.

The focus of this targeted EOI is for general practices to indicate their interest in joining the COVID-19 Vaccination. **All general practices not currently participating** in the vaccine roll-out are invited to apply through this EOI, however, **practices located within and around the regions** identified to have limited access to COVID-19 vaccines **will be prioritised to be brought on board in the first instance**. The results of this EOI may be used to bring further practices on board as the roll-out progresses.

Primary care is a critical partner in the delivery of Australia's national COVID-19 vaccination program. As at 23 May 2021 (Week 14 of the roll-out), over 3.6 million vaccinations have been administered across Australia, of which, over 2 million were administered through primary care.

High uptake of COVID-19 vaccines will ensure safety of all people in Australia, particularly those who are at risk of severe COVID, and the trusted relationship between GPs and their patients will continue to support the uptake of COVID-19 vaccines within local eligible populations.

The Commonwealth Department of Health (the Department) has worked closely with states, territories and Primary Health Networks (PHNs), and undertaken comprehensive modelling and analysis to identify projected COVID-19 vaccine gaps across Australia.

The analysis compares the remaining eligible population to the rate of vaccination by area, and the dose allocation within current primary care vaccination sites. Through this analysis, the Department has identified areas which are likely to have lower vaccination rates, unless additional vaccine access is provided.

This EOI is intended to identify additional sites to immediately join the COVID-19 Vaccination Program (the Program) to increase vaccine access within areas of limited vaccine availability for those aged 50 and over to ensure equitable and timely access to COVID-19 vaccines across Australia.

It will also be used to create a list of interested practices that can be drawn from for any future expansions as vaccine availability allows.

## Expression of Interest

Primary Health Networks (PHNs) will coordinate a short expression of interest (EOI) process within their regions, with interested general practices asked to provide minimum details required to be onboarded to the Program.

All general practices that participate in the National Immunisation Program (NIP) are invited to apply through this EOI, however, practices located within and around the regions identified to have limited access to COVID-19 vaccines will be prioritised to be brought on board in the first instance.

Selected practices will be allocated a baseline of **300 doses of AstraZeneca per fortnight** and will be onboarded over two weeks from mid-June.

Practices selected through this EOI will receive the AstraZeneca vaccine only (at this point), and will not be considered for further expansion to other COVID-19 vaccines until the last quarter of 2021.

**Practices already participating in the COVID-19 Vaccine Roll-out do not need to apply through this EOI.**

## Selection of practices

PHNs are assisting the Commonwealth with the COVID-19 vaccine roll-out, by engaging directly with practices in their regions, providing local intelligence and coordination support.

The final decision of which practices will participate, their commencement dates and allocations will be made by the Commonwealth, in consultation with states and territories.

All selected practices **MUST meet the AstraZeneca Site Requirements**. The site requirements have been developed following advice from the Australian Technical Advisory Group on Immunisation (ATAGI) and the standards outlined in the Australian Immunisation Handbook. The site requirements can be found at [Attachment A](#).

Practices will be prioritised for selection based on:

- **Location:**
  - Practices situated within areas of limited vaccine access;
- **Access for vulnerable population groups:**
  - Practices who currently service, or willing to actively support, vulnerable populations such as culturally and linguistically diverse and/or homeless populations;
- **Accreditation status:**
  - All practices who administer National Immunisation Program (NIP) vaccines are eligible to apply, however, accredited practices will be prioritised.
    - Accreditation through the National General Practice Accreditation Scheme provides quality assurance of the ability to maintain vaccine potency through adherence to Royal Australian College of General Practitioner standards and the National Vaccine Storage Guidelines.
  - In the event that an accredited practice is not identified within an area of need, the Department may consider (in order of priority);
    - a practice currently in the process of being assessed for accreditation; or
    - a non-accredited practice who is currently administering vaccines within the NIP.

## Program Requirements

All selected practices will be provided with a detailed onboarding pack containing detailed information on the Program. Key items are summarised below:

### Funding:

- COVID-19 vaccines are for free for everyone living in Australia, including all Australian citizens, permanent residents, and visa-holders, including those not Medicare eligible.
- Funding for GPs to administer vaccines will be provided on a fee for service basis via the Medicare Benefits Schedule (MBS).
- Sixteen temporary MBS COVID-19 vaccine assessments items have been introduced and these services must be bulk-billed.
- A Practice Incentive Payment (PIP) will apply where an individual receives both doses of the vaccine at the same clinic.
- Further detail can be found within the COVID-19 Vaccine Suitability Assessment [factsheet](#).

### Training:

- In order to administer vaccines, each health professional involved in the administration of COVID-19 vaccines is required to:
  - be authorised to administer vaccinations in their relevant state and territory;
  - have completed all necessary immunisation training/qualifications; and
  - have completed (and hold evidence of completing) the [COVID-19 Vaccination Training Program](#), including the relevant vaccine module.

### COVID-19 Vaccine Clinic Finder:

- All practices participating in the Program must be listed on the Vaccine Clinic Finder to ensure timely and transparent access for consumers.
- Practices are encouraged to accept bookings from all eligible people where supply allows and demand exists.
- Healthdirect will work directly with your online booking provider to link your booking systems with the Vaccine Clinic Finder.

The Department will provide:

- COVID-19 vaccine stock and consumables required for vaccine administration (25G needles, syringes and sharps containers);
- An onboarding pack containing detailed advice on program operations, requirements and reporting;
- Access to an online booking system if you do not have one already in use; and
- Technical support through the Vaccine Operations Centre.

## Lodgement of EOI

To bring on practices as soon as possible, this expression of interest is only open for a limited period, opening **2pm EST Thursday 27 May 2021**, and closing **Midday (AEST) Monday 31 May 2021**.

Practices wishing to express their interest can submit the requested data at the [EOI portal](#).

## Timeline

General practices will be on boarded through this process in two groups. For those commencing in the week of 21 June 2021 (first group), the light blue dates below apply. For those starting in the week of 28 June 2021 (second group), the dark blue dates below apply.

Date	Milestone
27 May 2021, 2pm AEST	EOI portal opens
31 May 2021, 12pm AEST	EOI portal closes
Week of 31 May 2021	Respondents notified of outcome and provided guidance.
Week of 31 May 2021	First group will be invited to register their practice within the vaccine ordering system
4 June 2021, 11:59pm local time	First group - orders due
8/9 June 2021	Second group will be invited to register their practice within the vaccine ordering system.
11 June 2021, 11:59 pm local time	Second group - orders due

## Attachment A: Site requirements

The following site readiness requirements for COVID-19 vaccination clinics have been developed by the Australian Government in consultation with expert advice from the Australian Technical Advisory Group on Immunisation (ATAGI) and standards outlined in the Australian Immunisation Handbook. Identified sites must confirm compliance with the minimum requirements outlined below prior to delivery of vaccine doses.

### 1.0 Physical environment

- 1.1 Access to toilets for patients and staff

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- 1.2 Have adequate space for patients waiting to be vaccinated that is not congested, observes physical distancing requirements, and is sheltered from weather elements.

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- 1.3 Have a private space for consultation with patients and vaccinator (including obtaining informed consent, answering patient questions and assessment of any conditions that may preclude vaccination or require further assessment and administration of vaccine).

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- 1.4 Have a dedicated, clean, well-lit space for administration of the vaccine to patients, including a desk and chairs for patients and vaccinator(s).

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- 1.5 Have adequate space for patients to wait and be observed post-vaccination that observes physical distancing requirements (note this may be the same as the waiting area however will still require sufficient physical distancing, and post-vaccine observation cannot take place with patients in cars).

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- 1.6 Have safe, risk free and directed access in clinical areas to allow movement of staff between areas while minimising the risk of workplace incidents (e.g. moving doses from preparation area to patient administration area, accessing vaccine refrigerators or cool boxes, etc.).

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- 1.7 Adequate handwashing facilities for staff, and antimicrobial hand sanitisers available.

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- 1.8 Have visual reminders and cues in place to reduce the risk of errors.

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- 1.9 Have a process in place to safely dispose of unused vaccines, in accordance with TGA and other regulatory requirements.

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- 1.10 Have adequate sharps disposal bins, appropriate for the volume of patients, and securely placed and spaced to mitigate the risk of needle stick injuries.

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- 1.11 Appropriate security provisions to ensure no unauthorised access to vaccine doses.

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- 1.12 Have ready access to appropriate emergency equipment, including adrenaline, oxygen and defibrillator.

## 2.0 Physical location

- 2.1 Close proximity to sufficient car parking.
- 2.2 Close proximity to public transport (where relevant).
- 2.3 Accessible by other patient transport services (including ambulance).

## 3.0 Infrastructure

- 3.1 Reliable water and electricity supply.
- 3.2 Access to telephone and computer networks and internet.
- 3.3 Ability to maintain room temperatures between 19 – 25 degrees.

## 4.0 Workforce requirements

- 4.1 Adequate number of appropriately trained staff to ensure clinical safety including:
  - 4.1.1 Vaccinators to prepare and administer vaccines
    - 4.1.2 Authorised immunisation provider (e.g. medical officer or fully trained immunisation registered nurse/nurse practitioner to assess patients and authorise other appropriately trained clinical staff (vaccinator) to administer the vaccine)
  - 4.1.3 Concierge or team leader (to direct clinic flow)
  - 4.1.4 Clerical staff
  - 4.1.5 First aid staff, additional to vaccinating staff as per jurisdictional requirements
  - 4.1.6 Security staff (if/when required)
  - 4.1.7 Medical officer (may be the same as the authorised immunisation provider)
- 4.2 Note that everyone administering vaccines must have appropriate training and/or qualifications in line with jurisdictional requirements, and have received adequate specific training in AZ's COVID-19 vaccination, including regarding the use of multi-dose vials and, to the extent relevant, low-dead volume syringes.
- 4.3 Have documented procedure for managing and recording training of staff handling vaccine doses.

## 5.0 Cold chain management

- 5.1 Have adequate number and capacity of vaccine refrigerators to store vaccines, with vaccine refrigerators to be maintained and monitored at 2 – 8 degrees Celsius.
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- 5.2 Have appropriate vaccine refrigerators and opaque containers to store vaccine syringes that have been prepared for administration under appropriate temperature conditions and protected from light from the time they are prepared until the time they are administered.
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- 5.3 Have specific procedures in place associated with receipt of vaccine doses including unloading, acceptance, temperature checks, inspection, unpacking and storage to ensure compliance with the AstraZeneca Vaccine Acceptance Checklist.
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- 5.4 Sites must be able to adhere to the [Strive for 5 guidelines](#)<sup>1</sup> and will need to have or be able to develop policies for cold chain management including:
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- 5.4.1 Able to monitor the temperatures of the refrigerator(s) where vaccines are stored
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- 5.4.2 Have an appropriate policy and protocol in place to respond to temperature breaches, including relocating vials to another vaccine refrigerator and responding at times where the AZ vaccine site may not have any staff present.

## 6.0 Technology and Record Keeping

- 6.1 Access to patient management system and Australian Immunisation Register (via Provider Digital Access (PRODA) or appropriate software integration)
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- 6.2 Linkage with the COVID-19 Vaccine Information and Location Service.
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- 6.3 Ability to meet mandatory requirements regarding reporting of all vaccine administration into AIR within 48 hours.
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- 6.4 Have a process of obtaining and recording informed consent.
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- 6.5 Be able to develop policies and procedures for:
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- 6.5.1 Identifying individual vaccine recipients, checking to confirm any record of previous receipt of any COVID-19 vaccine doses (including date and brand of product received), and recording immunisation encounters (electronic records are preferable).
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- 6.5.2 Labelling syringes when they are drawn up from multi-dose vials, including date and time of preparation and of expiry.
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- 6.5.3 Recording and reporting of vaccines used and stock on hand and any doses discarded, including reasons for discarding, and vaccine wastage.
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- 6.6 Ability to monitor, manage and report adverse events following immunisation, including anaphylaxis.

## 7.0 Waste disposal

- 7.1 Facilities to dispose of all waste, including sharps and unused vaccine appropriately in accordance with local requirements for disposal of Schedule 4 medication, the Product Information and Safety Data Sheet for the AZ Vaccine and any other instructions given by the Australian Government.

## 8.0 Personal protective and other equipment

- 8.1 Appropriate PPE, as per requirements in the Australian Immunisation Handbook and jurisdictional requirements.
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- 8.2 Adequate supplies of other medical equipment e.g. stethoscopes, examination tables, diagnostic testing equipment.
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- 8.3 Labels for syringes (if filling in advance).
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- 8.4 Antimicrobial /disinfectant wipes to clean stations between patients.
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- 8.5 Sanitation equipment for administration site

## 9.0 Accreditation and other regulatory requirements

- 9.1 Able to claim MBS item numbers for billing (as relevant)
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- 9.2 Have the appropriate accreditation where required for the relevant clinic or practice, as advised by the Commonwealth (noting that accreditation will inform funding arrangements).
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- 9.3 Willingness to comply with compulsory infection control training and external quality assurance procedures.
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- 9.4 All immunisers to be authorised under the relevant state or territory's Public Health Act to provide vaccines.



## 10.0 Accessibility and cultural safety

10.1 Ability to develop policies and procedures for ensuring services are culturally safe for Aboriginal and Torres Strait Islander peoples

Ability to develop arrangements for identification of and assistance for those with additional or specific needs, including:

- 10.2
- Ensuring culturally appropriate policies and procedures for multicultural communities
  - Qualified interpreters available when needed
  - Translations to languages other than English

10.3 Ability to develop arrangements to provide accessibility to those with Disability (including intellectual disability)

## 11.0 Management of the clinic

11.1 Standardised screening process to exclude patients who display symptoms of COVID-19, and refer for appropriate assessment for COVID-19 or other conditions (as per guidance provided in the ATAGI Guiding Principles for Maintaining Immunisation Services During the COVID-19 Pandemic)

11.2 Standardised screening process for contraindications, receipt of previous doses of COVID-19 vaccines and/or receipt of other vaccines (observing any interval requirements).

11.3 Clear assignment of duties and responsibilities of all staff and clear plan of workflow, particularly regarding drawing up from a multi-dose vial and administering individual vaccine doses drawn from a particular vial for each clinic session.

11.4 Incident management in place, with staff knowledgeable about relevant procedures and able to report any clinical incident (e.g. injury in workplace) to the appropriate health authorities.

11.5 Has process in place to any adverse reaction to administration of a vaccine.

11.6 Process in place to prevent and manage violence or aggression in the clinic.

## 12.0 Vaccine administration equipment requirements for each patient vaccination

- 12.1 Sterile 1mL, 2mL or 3mL syringes (provided by Commonwealth)

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- 12.2 Sterile syringes with 0.1mL graduation

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- 12.3 21 gauge bevel or narrower

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- 12.4 Sterile drawing up needle (19 or 21 gauge recommended to reduce risk of coring)

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- 12.5 Sterile administration needle (22-25 gauge), 25mm for adults, 38mm for very large or obese person (provided by Commonwealth)

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- 12.6 Alcohol wipe (for vials)

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- 12.7 Cotton wool ball

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- 12.8 Hypoallergenic tape or latex free band aid

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- 12.9 Dish for drawn up vaccine (kidney dish)

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- 12.10 Sharps containers (provided by Commonwealth)

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- 12.11 Containers for disposal of biohazardous waste

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- 12.12 Saline

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- 12.13 Adrenaline 1:1000

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- 12.14 1mL 'single use only' syringes, with 23 gauge needle

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- 12.15 Paediatric and adult size Guedel airways

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