Background

There is significant evidence regarding immunisation and its effectiveness to reduce or eliminate harmful diseases. Immunisation is a simple, safe and effective way of protecting individuals and communities against certain communicable diseases (World Health Organisation (WHO), 2010; Immunise Australia Program, 2008, 2009; International Council of Nurses (ICN), 2009).

Immunisation reduces the spread of disease and the World Health Organisation has documented that greater than 2 million deaths averted annually and it is expected that the death rate will reduce by a further 2.5 million per annum by 2015. (WHO, 2010). Okwo-Bele (2010) states "There is no doubt that immunization represents good value for money and the next decade will provide opportunities to maximize the potential of vaccines in saving and improving lives."

Vaccines provide a high level of protection although they are not 100% effective in terms of preventable disease or risk free however modern vaccines are far safer than the risks of the disease they prevent. Serious adverse reactions are rare (ICN, 2009). The challenge is to maintain community confidence both with the continuance of successful immunisation programs and with the introduction of new vaccines. New vaccines are continually being developed and remain the most effective health intervention to the community.

In Australia, the Immunise Australia Program is an initiative of the Australian, State and Territory Governments with the aim to increase the national immunisation rates for vaccine preventable diseases. Immunise Australia implements the National Immunisation Program (NIP) that includes vaccines for 16 diseases that have been recommended by the Australian Technical Advisory Group on Immunisation (ATAGI). These recommendations have been endorsed by the National Health and Medical Research Council (NHMRC). The NIP provides free access to an agreed range of vaccines designated as 'essential' for the population-level disease prevention using a predetermined schedule. The ATAGI also oversees the vaccines available through the Pharmaceutical Benefit Scheme (PBS) that provide vaccines at a reduced rate. There is also access privately at full cost.

Australia has an excellent record of disease prevention through immunisation to date. The Commonwealth Government is currently working on a National Immunisation Strategy that has the aim of broadening the scope of immunisation via the NIP which will protect individuals and the population from vaccine-preventable diseases (Commonwealth Department of Health and Ageing, 2010).

Nurses and midwives as the largest health care professional groups have a presence in a large variety of health settings who can influence immunisation uptake. Nurses are also well positioned to undertake further education as immunisers to improve accessibility to the community for immunisation (ICN, 2009).

Rationale

The personal, social and economic costs of contracting a vaccine-preventable disease can be avoided through the protection immunisation provides.

Immunisation provides the safest and most certain protection against infection where risk of exposure is unknown.

Immunisation reduces the risk of individuals becoming carriers of disease from casual contact with infected people.

Nurses have access to a broad community base, which presents opportunities for education about immunisation and vaccine-preventable diseases.

Nurses have a professional responsibility to be reliably informed about immunisation and vaccine-preventable diseases and to convey information to individuals when appropriate.

Nurses are positioned professionally to assess the immunisation status of individuals and implement health promotion and disease prevention strategies.

Royal College of Nursing, Australia recommends that:

The Immunise Australia Program represent a national approach to the provision of immunisation programs/schedules;

Providers of immunisation services enact the relevant national immunisation programs/schedules;

Employers / governments provide professional education for health care providers to inform them of current immunisation schedules, and any changes in these schedules;

Employers / governments encourage health care providers to routinely review the immunological status of individuals when undertaking health assessments and encourage them to implement recommendations on immunisation;

"At risk" the population such as older people, children and immunocompromised individuals be provided with free immunisations in order to minimise the spread of vaccine-preventable diseases in these vulnerable groups; and

Employers/governments provide education using a range of media sources to inform people of the reasons for immunisations, current immunisation schedules, and changes in schedules.

Royal College of Nursing, Australia resolves to:

Promote this statement to all RCNA members and seek their support in encouraging nurses to:

- Promote the role of nursing in immunisation in appropriate forums.
- Be aware of their own immuno-prophylactic status and to maintain it at optimal levels in order to provide a level of protection for the consumers with whom they work. Many nurses would be classified as "at risk" as a function of their occupational role;
- Continue to maintain up-to-date knowledge/education about immunisation and vaccine-preventable diseases;
- Provide consumers with up-to-date information about immunisation;
- Provide parents and guardians of children with up-to-date information about ways to reduce pain associated with immunisation in children
- Continue to advocate for the professional preparation of nurses for immunisation practice; and
- Contribute to the development of the National Immunisation Strategy 2011-2015.

References

Australian Government. (2010). A National health and Hospitals Network for Australia's Future: Delivering better health and better hospitals. Canberra: Commonwealth of Australia.

Commonwealth Department of Health and Ageing. (2010, December). *Towards a National Immunisation Strategy*. Issues Paper prepared for a national forum convened by the Department of Health and Ageing, Canberra, Australia.

Immunise Australia Program. (2008). *Immunisation Myths and Realities: Responding to arguments against immunisation* (4th ed.). Retrieved March 7, 2011 and available from http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/uci-myths-quideprov

Immunise Australia Program. (2009). *About the Program*. Retrieved March 1, 2011 from http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/about-the-program

Department of Health and Ageing (Australia) and National Health and Medical Research Council (Australia). (2008). *The Australian Immunisation Handbook* (9th ed.). Retrieved March 1, 2011 and available from

http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook-intro

International Council of Nurses. (2004). *Scope of Nursing and Midwifery Practice Statement* [Position Statement]. Retrieved March 10, 2011 from http://www.icn.ch/psscope.htm/

International Council of Nurses. (2009). *Adult and Childhood Immunisation: An update from ICN*. Retrieved March 10, 2011 and available from http://www.icn.ch/publications/free-publications/

Okwo-Bele, Dr Jean-Marie. World Health Organization. (2010). Forward. *Immunization Highlights: 2008-2009*. Retrieved March 7, 2011 and available from http://www.who.int/immunization/documents/WHO_IVB_10.11/en/index.html

World Health Organization. (2010). *Immunization Highlights: 2008-2009*. Retrieved March 7, 2011 and available from http://www.who.int/immunization/documents/WHO_IVB_10.11/en/index.html