COVID-19 Vaccination Program

Culturally and Linguistically Diverse Communities Implementation Plan –

# Introduction

The [*Australian COVID-19 Vaccination Policy*](https://www.health.gov.au/news/covid-19-vaccination-policy-endorsement), endorsed by the National Cabinet on 13 November 2020, sets out key principles for the COVID-19 Vaccination Program (Program) roll-out, such as that COVID-19 vaccines will be made available for free to every person in Australia. Further, it outlines how COVID-19 vaccines will be accessible on a rolling basis, dependent on vaccine delivery schedules and the identification of groups for most urgent vaccination.

# Status of this document

This Plan has been developed by the Australian Government, in consultation with relevant peak bodies and State and Territory Governments.

It should be read in conjunction with [*Australia’s COVID-19 Vaccine National Rollout Strategy*](https://www.health.gov.au/news/australias-covid-19-vaccine-national-rollout-strategy) released on 7 January 2021 and state and territory implementation plans.

This Plan will be brought forward to the National Cabinet for information. It will be iterative, and will be updated as further information becomes available, including in relation to:

* Which vaccines purchased by the Australian Government have been registered by the Therapeutic Goods Administration (TGA), when, and what populations these vaccines are registered as suitable for.
* The final delivery schedules for purchased vaccines, including quantities and delivery locations.
* The distribution and logistics model developed by the Australian Government’s procured partners to support delivery to vaccination sites.
* Details on the methods and requirements around data reporting to support program-level data consolidation.
* Ongoing information on the roll-out of vaccines that may require adjustment to the approach.

# Culturally, ethnically and linguistically diverse communities in Australia

Australia is a diverse nation, and this is reflected in the diversity of religion, spirituality, sexuality, culture, gender, socio-economic background, migration pathways, geographic spread, medical and care needs, and personal experiences of the population.

The Australian Government is committed to ensuring that every person in Australia (including citizens, permanent residents, temporary residents, refugees, temporary migrants, people in immigration detention centres and people without valid visas) can access information and services that are appropriate for their individual characteristics and life experiences. The Australian Government has established the Culturally and Linguistically Diverse Communities COVID-19 Health Advisory Group to provide expert advice on the COVID-19 response, including on the delivery the COVID-19 Vaccination Program.

# Culturally, ethnically and linguistically diverse communities and the COVID-19 vaccination program

To be successful, high uptake of COVID-19 vaccination will be required across all people in Australia. Therefore, the COVID-19 Vaccination Program will need to meet the requirements of all individuals and communities, including those from culturally, ethnically and linguistically diversity communities in Australia. It is important to recognise that people from culturally, ethnically and linguistically diverse communities are a significant part of the health, aged care, childcare and disability workforce and will be among the first people in Australia to receive vaccinations. It is imperative that the COVID-19 Vaccination Program is designed and delivered in a manner which is accessible and culturally safe for those from culturally, ethnically and linguistically diverse backgrounds. This includes ensuring that communications are developed that draw on the expertise and knowledge of the culturally and linguistically diverse communities and that information and services are delivered in appropriate languages and formats and within appropriate facilities and locations.

Key considerations should include:

* Ensuring that the easy to read information on the vaccine and the National Booking System is available and distributed widely in multiple formats including audio, electronic and written, multiple digital channels and in a variety of community languages.
* Ensuring that there are channels available to culturally, ethnically and linguistically diverse communities to ask questions related to distributed information related to the vaccine and the National Booking System. Accessibility of the National Booking System and availability of appropriate supports for those unable to directly access the National Booking System. For example, the National Booking System should be electronic and available by telephone, accessible via mobile phone, not required to be linked to MyGov ensuring there are other entry points and should include appointment reminders in the preferred language.
* The need to work with community leaders and other community representatives to ensure vaccination delivery sites are situated in areas physically accessible and acceptable to culturally and linguistically diverse communities, and providing in-reach services where required.
* The need to organise administration of clinics to support culturally safe and appropriate practices, including provision of information in appropriate languages.
* Ensuring the vaccination workforce has capabilities in working with culturally and linguistically diverse people, encouraging workforce diversity, and ensuring that a professional interpreter workforce is embedded in clinical services, including for screening and obtaining informed consent.
* Ensuring that the vaccine is available at no cost to everyone in Australia including those who may not have Medicare eligibility.
* Recognition that people from culturally, ethnically and linguistically diverse backgrounds may also identify as Aboriginal and/or Torres Strait Islander, or live with disability, and therefore communications and services need to be both culturally appropriate, and disability appropriate.
* Considerations for vaccine communications and delivery should include the groups within the culturally, ethnically and linguistically diverse communities who are prioritised for early vaccine delivery, including the elderly, those living with comorbidities, and people working in the aged care, disability and health sectors.

# Accessing vaccines

People from culturally, ethnically and linguistically diverse communities should be able to access culturally safe and accessible vaccine hubs or medical facilities to receive their COVID-19 vaccination. To enhance community trust and access, consideration will be given to embedding clinics within organisations which already serve culturally, ethnically and linguistically diverse communities.

Clinical governance and vaccination site management will be the responsibility of the vaccination provider. Providers will need to demonstrate that they are working with community organisations and leaders in their region to ensure that their clinic is operating in a culturally safe way. Having a diverse workforce, bilingual workers, and interpreters available at vaccine encounters and using these engagements to impart health information, ensure that people are aware of the requirement to receive a second dose of the vaccine and refer to further services where needed will be an important value add of any encounter.

# Summary of responsibilities for COVID-19 vaccination

The Australian Government will be responsible for leading the implementation of the COVID-19 Vaccination Program, in consultation with relevant peak bodies and state and territory governments.

Clear lines of responsibility are required to ensure that this complex process is well managed, and accountabilities are well understood at each stage of the process.

The following articulates the respective roles and responsibilities of all parties in relation to COVID‑19 vaccination.

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|  | **Responsibilities** |
| **Australian Government** | * select and procure COVID-19 vaccines
* formally accept vaccines from suppliers and ensure they meet the required standards
* safely transport vaccine doses to storage and administration sites within each state and territory, and between these sites and vaccination locations where it determines necessary
* establish and manage a system to track and trace vaccine doses
* specify priority populations, drawing from advice from ATAGI
* establish overarching principles for immunisation scheduling
* specify minimum training requirements for the immunisation workforce
* specify types of and minimum requirements for vaccination locations
* establish clinical governance requirements
* develop and deliver a national communications campaign, including materials about the vaccination program for culturally, ethnically and linguistically diverse communities
* set data collection and reporting requirements, including adverse event monitoring via the TGA
* further strengthen the capabilities of the current national active safety surveillance system, known as AusVaxSafety
* establish and maintain a National Booking System that is available to all people, including those without access to MyGov and those without Medicare eligibility
* continue to support and receive advice from the Culturally and Linguistically Diverse Communities Covid-19 Health Advisory Group.
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| **Vaccination providers**  | * provide support for all aspects of administration (principally including workforce management, eligibility checking, scheduling of appointments to manage supply and demand, reporting, refrigerated storage capacity and management, physical security, and follow-up for second dose)
* meet accreditation standards as per their relative health professional qualification and registrations and ensure they meet Commonwealth, state and territory legislative requirements to provide authorised immunisers to the deployed location
* provide vaccination to consumers in a culturally appropriate and safe way
* manage and comply with cold-chain management requirements as per the [*National Vaccine Storage Guidelines ‘Strive for 5’*](https://www.health.gov.au/resources/publications/national-vaccine-storage-guidelines-strive-for-5) and other requirements specified by the Commonwealth
* record all vaccinations in the Australian Immunisation Register and provide the option for individuals to have a separate vaccination record
* ensure the confidentiality and integrity of any systems or data through conformance with *Australian Government IT Security Standards* as published by the Australian Cyber Security Centre, including but not limited to the [*Australian Government Information Security Manual*](https://www.cyber.gov.au/acsc/view-all-content/ism).
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# Workforce and training requirements

People administering vaccinations should be trained to work with people from culturally, ethnically and linguistically diverse communities to ensure that services are delivered in a culturally appropriate and safe way, with the assistance of interpreters where needed.

### Training

The immunisation workforce identified as delivering COVID-19 vaccination, including clerical staff where appropriate, will be required to have undertaken the relevant training, including:

1. General requirements for any authorised immuniser in their jurisdiction, including at a minimum completion of a training course that meets the requirements of the [National Immunisation Education Framework for Health Professionals](https://www.health.gov.au/sites/default/files/nat-immun-education-framework-health-profess.pdf).
2. Training on the use of multi-dose vials, infection control, wastage, and adverse event reporting – to be identified by the Australian Government in cooperation with ATAGI and other identified organisations such as Health Education Services Australia.
3. Specific training on each vaccine, including cold storage and handling requirements – to be identified and provided by the Australian Government in cooperation with vaccine developers and manufacturers.
4. Training on reporting requirements, including appropriate systems and processes and use of the Australian Immunisation Register (AIR) – to be identified and provided by the Australian Government.
5. Training on working with interpreters, and inclusion of language services and bicultural workers into program delivery where relevant.
6. Training on working with people with cognitive impairment, including ensuring consent has been appropriately given on behalf of aged care recipients who are unable to consent themselves.

**Training accessibility for administrators delivering vaccines to culturally, ethnically and linguistically diverse communities**

The training outlined above needs to be accessible for individuals from culturally, ethnically and linguistically diverse backgrounds, and needs to include training on cultural safety for culturally and linguistically diverse groups.

# Monitoring stock, minimising wastage and reporting on uptake

### National Booking System for COVID-19 Vaccination Program

The Australian Government will procure and establish a nationally consistent booking system to facilitate participation in the COVID-19 Vaccination Program. All identified vaccination locations must participate and utilise this system for facilitating access to vaccination.

The National Booking System will reflect the needs of culturally, ethnically and linguistically diverse populations. This includes ensuring that booking information is available in languages other than English (including any reminders for bookings) and that different modes of booking are available for those who are unable to access the internet.

### Mechanisms to facilitate proof of COVID-19 vaccination

All providers participating in the COVID-19 Vaccination Program will be required to enter patient records for all COVID‑19 vaccinations administered at any location in to the AIR. Information will be provided to culturally, ethnically and linguistically diverse recipients that includes how to access their vaccine status. This information will be accurate and clear and accessible in all main languages.

All those who are administered a COVID-19 vaccine through the COVID-19 Vaccination Program will be able to access proof of this vaccination through at least one of three options:

* My Health Record
* Immunisation History Statement (accessed through the Medicare app or online)
* Certificate printed in hard copy at the time of vaccination, followed by an electronic copy record via email.

# Coordinating of safety monitoring and surveillance of adverse events

The Australian Government will require appropriate safety signalling and adverse events monitoring and scenario planning to be in place as COVID-19 vaccination is implemented.

As Australia’s regulator of medicines, vaccines, medical devices and all other therapeutic products, the Therapeutic Goods Administration (TGA) has rigorous safety standards. These well-established processes will be crucial in ensuring that any COVID-19 vaccine used in Australia is safe and effective.

The TGA already undertakes a range of safety monitoring activities for all medicines and vaccines supplied in Australia. These robust procedures, collectively known as pharmacovigilance, enable us to quickly detect, investigate and respond to any potential safety issues when they arise.

While the Australian Government is making every effort to expedite the availability of one or more vaccines to protect against COVID-19, these standards will not be compromised. Rather, the TGA is strengthening the normal surveillance processes for collecting and analysing reports of adverse events relating to these products.

The Australian Government is working to expand and enhance the national, active safety surveillance system known as AusVaxSafety. This includes investigating opportunities to identify adverse events following vaccination if they occur in individuals belonging to culturally, ethnically and linguistically diverse groups through the use of demographic information. This will enable safety signals specific to these demographic groups to be flagged for further analysis.

The key considerations for culturally, ethnically and linguistically diverse populations in relation to safety monitoring and surveillance of adverse events include:

* providing accessible information about how the safety of COVID-19 vaccines is monitored and what people should do if they think they may be experiencing an adverse event following immunisation (AEFI)
* encouraging all health professionals and consumers to report suspected AEFI with COVID-19 vaccines
* facilitating the reporting of AEFI with COVID-19 vaccines through the use of translated materials, accessible reporting mechanisms and interpreting services where required.

# Communication

A national communication strategy will be developed by the Australian Government, in consultation with culturally, ethnically and linguistically diverse communities. It will focus on the strategic communication approach for the development and deployment of public information for a COVID-19 Vaccination Program. This strategy will be supported by a communication action plan for culturally, ethnically and linguistically diverse populations.

The Culturally and Linguistically Diverse Communities COVID-19 Health Advisory Group has stated that an effective communication plan will include the following elements:

**Supporting service delivery**

* Clear messaging that the COVID-19 Vaccination Program is inclusive and directed to all people in Australia.
* An interpreter workforce must be part of clinical service delivery, including screening and testing.
* Culturally and language appropriate resources (audio, electronic and written) should be available to assist primary health services to connect with communities, avoiding delays in disseminating translated materials.
* A trained bilingual health educator workforce must be deployed to engage communities and distribute culturally appropriate information about the vaccine.
* The allied health service system and the mental health system should have access to language services to support culturally, ethnically and linguistically diverse communities to access these elements of the COVID‑19 response.

**Supporting communities**

* Community leaders and young people, and multicultural community organisations are a gateway into culturally, ethnically and linguistically diverse communities, are a voice for their community and can advise governments and services on their community’s needs.
* Communication, messaging and information channels should be tested with communities and community members paid to provide feedback.

**Clear, tailored messaging**

* Behavioural messaging focused on ‘why’ and Australia’s inclusive approach to COVID-19 vaccination will build community confidence. This requires simple and clear messaging in written, electronic and audio formats that is tailored for specific cohorts, and focuses on core issues, including that vaccines are safe and they prevent diseases.
* Determine the specific language groups to be targeted in the first phase of the vaccine communications.

These elements will be taken into account in the communications strategy to be developed by the Department of Health. In addition, the Department of Health has engaged the services of a culturally, ethnically and linguistically diverse specialised public relations agency to develop a comprehensive public relations strategy to communicate with culturally, ethnically and linguistically diverse populations.

The strategy will recognise that communication for culturally, ethnically and linguistically diverse populations must be tailored, and consider the different needs of these populations, and cohorts within these, including:

* the wide range of culturally, ethnically and linguistically diverse communities in Australia with different communication needs and preferences
* one in five people in Australia speak a language other than English
* culturally, ethnically and linguistically diverse audiences may be difficult to reach and may not have the same access to mainstream health information
* utilising a diversity of channels acknowledges the diverse platforms, and preferences amongst cohorts, and is an important strategy for broader reach
* culturally, ethnically and linguistically diverse audiences may not know about the Translating Interpreting Services communication line.

The communication action plan will identify key vulnerable populations and key sensitivities among culturally, ethnically and linguistically diverse communities.

Communications will aim to:

* create understanding about the approval processes and safety of COVID-19 vaccines
* create confidence and trust in the vaccine approval and safety monitoring processes
* encourage culturally, ethnically and linguistically diverse communities to get vaccinated once a vaccine is available
* encourage culturally, ethnically and linguistically diverse communities to report suspected AEFI with COVID-19 vaccines
* address safety concerns within specific cultural groups if they arise to maintain confidence in the vaccination program
* explain the vaccination program as it evolves.

The overall communication for the vaccine will be delivered in the following phases:

* Phase one (pre-approval phase)
* Phase two (priority groups roll-out)
* Phase three (general public)

*Key messages for phase one include*:

* A COVID-19 vaccine is the best way to protect the community.
* The Australian Government is working to access and deliver safe and effective COVID-19 vaccines for everyone in Australia.
* Before a COVID-19 vaccine is approved for use in Australia it must pass the Therapeutic Goods Administration’s (TGA) rigorous assessment and approval processes to ensure it is effective and safe for use.
* The TGA has rigorous safety standards and monitors the safety of all vaccines once they are supplied in Australia. We have robust procedures to quickly detect, investigate and respond to any potential safety issues if they arise.
* COVID-19 vaccines will be made available for free to everyone in Australia.
* The COVID-19 vaccine will be voluntary.
* Visit [www.health.gov.au/covid-19-vaccines](http://www.health.gov.au/covid-19-vaccines) to stay up-to-date with the latest, reputable information and to opt-in to the COVID-19 vaccines update.
* Call the Coronavirus Helpline on 1800 020 080 or the translating and interpreting service on 131 450.

*Key messages for phase two:*

* A vaccine, or vaccines, are now available to the identified priority groups.
* Information on how the vaccine will be rolled out, including on the dosage requirements.
* Continued messaging around the safety and efficacy of the approved vaccine and the TGA post-registration monitoring process, including information about the regulatory actions undertaken by the TGA in response to any specific safety issues if they arise.
* Encourage health professionals and consumers to report suspected AEFI and provide information about how to report.

*Key messages for phase three:*

* As more doses are made available, roll-out will begin to the general public.
* Information on the dosage requirements, and where people can go to be vaccinated.
* Continued messaging around the safety and efficacy of the approved vaccine and the TGA post-registration monitoring process to encourage uptake.
* Encourage health professionals and consumers to report suspected AEFI and provide information about how to report.
* Provide information about the regulatory actions undertaken by the TGA in response to specific safety issues if they arise

These messages are/will be adapted and refined for culturally, ethnically and linguistically diverse audiences, taking into account not only cultural and language differences, but also those due to gender, age, sexuality, religion, socio-economic background, geographic spread, medical and care needs. Further refinement will occur once a vaccine/vaccines has/have been approved and details can be determined for priority groups and roll-out.

Communications will be delivered through the Department of Health’s existing channels alongside other channels and recommendations from the public relations agency and those identified through consultation with community leaders and organisations. These will include communications to community organisations and health care providers who are trusted sources and can disseminate and discuss with communities. Communication products will be translated, tailored and widely dispersed to ensure they are easily accessible and understood for culturally and linguistically diverse populations, with the intention of releasing English and other language versions simultaneously.

The Commonwealth Department of Health will work closely with advisory groups such as the Culturally and Linguistically Diverse Communities COVID-19 Health Advisory Group, other Commonwealth departments as required, peak organisations, state and territory health department communication and media units, public relations agencies, and other stakeholders to keep the healthcare providers and communities informed.

Media regarding the Australian Government activities related to delivery and roll-out of a COVID-19 vaccine will be coordinated by the Public Information Branch in the Office of Health Protection and Response Division in the Department of Health. They will work closely across all levels of government.