

SETTLEMENT ENGAGEMENT AND TRANSITION SUPPORT COMMUNITY OF PRACTICE – INFORMATION SESSION

Thursday 21 October 2021

On 21 October 2021, the National COVID Vaccine Taskforce (the Taskforce), in partnership with Migration Council Australia, held an information session with approximately 38 members of the Settlement Engagement and Transition Support Community of Practice (SETSCoP). The purpose was to share information about the COVID-19 vaccine and hear from participants how the Taskforce can better support migrant and refugee communities during the COVID-19 pandemic and vaccine roll-out.

The Taskforce provided participants with an update on the COVID-19 Vaccine Program, including changes in vaccine eligibility, the current availability of AstraZeneca, Pfizer and Moderna vaccines, the expansion of the rollout through community pharmacies, and updated advice from the Australian Technical Advisory Group on Immunisation (ATAGI). As at 19 October 2021, approximately 33.2 million vaccinations had been administered across Australia since the beginning of the roll-out.

On 27 September 2021, Minister Hunt announced that individuals aged 60 and over would be able to access mRNA vaccines at all sites. This means that individuals aged 12 and over can access mRNA vaccines (Comirnaty (Pfizer) and Spikevax (Moderna)); and individuals aged 18 and over can access all COVID-19 vaccines (Pfizer, Moderna and Vaxzevria (AstraZeneca)). On 8 October 2021, the Australian Technical Advisory Group on Immunisation (ATAGI) released a statement recommending a third dose of COVID-19 vaccine as part of the primary course in individuals who are severely immunocompromised.

The multicultural component of the National Vaccines Campaign includes advertising translated in 32 languages across television, radio, out of home, print and social media. A substantial range of in-language communication resources with critical information on COVID-19 vaccines for multicultural communities has been developed in up to 63 languages.

Summary of discussions

A high-level summary of the issues discussed at the roundtable is presented below:

1. Vaccines

Vaccination after testing positive for COVID-19

ATAGI has reviewed its advice on vaccinating people who have had COVID-19: <https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/advice-for-providers/clinical-considerations>. People who have had COVID-19 can be vaccinated with a COVID-19 vaccine. Vaccination can be deferred for up to 6 months as past infection reduces the chance of reinfection for at least this amount of time. **There is no requirement to delay vaccination.**

People might choose to be vaccinated if they:

- are significantly immunocompromised and may be at greater risk of getting COVID-19 again
- have a job that requires them to be vaccinated
- have a job that puts them at greater risk of being exposed to COVID-19.

People should not be vaccinated until they have recovered from the acute illness.

If a patient tests positive for COVID-19 between their first and second doses, the patient should not receive their second dose until they have recovered from the acute illness.

People with prolonged symptoms from COVID-19 beyond 6 months should be vaccinated on a case by case basis. You can seek further advice from a [specialist immunisation service](#) if required.

How can someone who has had COVID-19 get a short-term vaccination exemption?

Vaccinations may reasonably be temporarily deferred for individuals with some acute major medical conditions (e.g. undergoing major surgery or hospital admission for a serious illness). Typically, these are time-limited conditions (or the medical treatment for them is time limited) and therefore temporary exemptions are considered appropriate. These exemptions are only to be given where a suitable alternative COVID-19 vaccine is not readily available for the individual; all COVID-19 brands must be selected on the medical exemption (IM011) form.

Temporary exemptions for longer than 6 months are NOT recommended in the first instance, as they should be reviewed as the individual recovers from their acute major medical illness. This time limitation will allow individuals who can safely be vaccinated to be protected against COVID-19 in a timely way.

Further advice about exemptions can be found on the ATAGI [website](#).

How can people without Medicare or an Individual Healthcare Identifier (IHI) get proof of COVID-19 vaccination?

The Immunisation History Statement shows all the immunisations an individual has had in Australia that are on the Australian Immunisation Register. You can also get a COVID-19 digital certificate which only shows your COVID-19 vaccinations. You will be able to see your digital certificate after you have had all required doses of an approved COVID-19 vaccine. Both are proof of COVID-19 vaccination.

If you're not eligible for Medicare and want to get proof online, you will need an Individual Health Identifier (IHI). You can get your immunisation history statement or COVID-19 digital certificate through the Individual Healthcare Identifiers (IHI) service in [myGov](#).

If you do not have an IHI and cannot get proof of your COVID-19 vaccination online through myGov, you can ask your vaccination provider to print a copy of your [Immunisation History Statement](#) for you or you can call the [Australian Immunisation Register](#) to have an Immunisation History Statement sent in the post. It can take up to 14 days to arrive. Information about [how to get proof of your COVID-19 vaccinations](#) is available on the Services Australia website.

Mandatory vaccinations for COVID-19

Depending on your industry and where you live, it may be mandatory for you to be vaccinated against COVID-19. This is a decision for your state or territory government or your organisation. Safe Work Australia has published model WHS laws for employers, small businesses and workers about their obligations in regards to COVID-19 vaccination: <https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/general-industry-information/vaccination>

The states and territories have mandated COVID-19 vaccinations in certain industries. You can find state and territory information on their respective websites:

- [NSW](#)
- [Victoria](#)
- [Tasmania](#)
- [Queensland](#)
- [Western Australia](#)
- [South Australia](#)
- [Australian Capital Territory](#)
- [Northern Territory](#)

On 17 September 2021, COVID-19 vaccination became a mandatory condition of employment for residential aged care workers. The requirement is based on the expert medical advice of the [Australian Health Protection Principal Committee](#) (AHPPC) and agreed by National Cabinet on [28 June 2021](#). Workers who are subject to public health orders mandating COVID-19 vaccination may be required to provide evidence of their COVID-19 vaccination status, or of an authorised exemption to vaccination.

Which vaccines are recognised for incoming travellers from overseas?

Individuals who have received vaccinations overseas can have the details reported to the AIR upon their return to Australia. The overseas vaccination/s can be reported to the AIR by a recognised vaccination provider in Australia, with the patient present (to confirm/validate vaccination history and revaccinate if required). The records must be in English (original or translated).

Currently only COVID-19 vaccines registered by the TGA can be reported to the AIR. This includes AstraZeneca, Pfizer, Moderna, and Janssen-Cilag COVID Vaccine (also known as Johnson and Johnson), administered on or after 1 October 2020.

On [1 October 2021, the TGA announced](#) that Coronavac (Sinovac) and Covishield (AstraZeneca) vaccines be considered 'recognised vaccines' for incoming international travellers to be regarded as appropriately vaccinated. The Department of Health is working with Services Australia on enhancements to allow these vaccines to be reported to the AIR.

Individuals who have received a complete course of a Coronavac (Sinovac) or Covishield (AstraZeneca) will be able to access vaccination evidence such as a COVID-19 Digital Certificate and/or IHS.

2. Communication

What resources are there to help people find clinics and book appointments?

The national [Vaccine Clinic Finder](#) is a complete list of all clinics in Australia. Details of over 10,000 vaccination clinics and participating pharmacies are available. It is the best way to compare clinics, check availability and book an appointment in one place. New clinics are added all the time.

[The COVID-19 Vaccine Clinic Finder](#) is translated for assistance in-language to check eligibility and make bookings.

A priority service was implemented on 31 August 2021 to support people with culturally and linguistically diverse backgrounds able to contact Translating and Interpreting Services (TIS National) on 131 450, with priority connection through to the National Coronavirus Helpline.

The service is accessed by TIS interpreters via a priority phone number that is not available to members of the public. The average waiting time on the priority line is less than one minute, with average call duration between two and three times that of the general line (10 to 16 minutes). The service supports people with culturally and linguistically diverse backgrounds to access relevant information or obtain assistance with finding vaccine appointments.

Call takers provide COVID-19 information and support callers to book their vaccination appointment by providing step by step assistance. Callers requiring clinical information are escalated to priority clinical agents who will speak to callers via the TIS interpreters. Translated resources can be sent to callers after the call by SMS in their language if they wish to receive further information (included via SMS containing links to jurisdictional translated materials).

What in-language information is available about COVID-19 vaccines?

The Department of Health's website has in-language pages in 63 languages with information on booking appointments, doses, and eligibility. The in-language pages can be found at www.health.gov.au/covid19-vaccines-languages.

A range of in-language communication resources, including radio and print editorials, videos, social media resources, posters and fact sheets are also available on the Department of Health website with this information.

Will the Vaccine Clinic Finder be available in more languages?

The Vaccine Clinic Finder is currently translated in 15 languages, plus English. There is a lot of work to update the Vaccine Clinic Finder and translations each time there is a content or policy change.

The reason these languages have been chosen is a combination of the highest number of people who speak the languages in Australia with lowest English proficiency. Additional languages were included based on advice from the NSW Ministry of Health to support the outbreak in NSW.

The Taskforce is investigating additional languages for the Vaccine Clinic Finder and welcomes suggestions as to which languages they should be.

Are there in-language materials for those seeking access to their proof of vaccination?

Services Australia's website includes translated information about accessing proof of vaccination: <https://www.servicesaustralia.gov.au/individuals/subjects/getting-help-during-coronavirus-covid-19/covid-19-vaccinations/how-get-proof>.

Is there a WhatsApp group or other message service that people can subscribe to in order to access audio information about COVID-19 and vaccinations?

The Taskforce has investigated using WhatsApp to engage with multicultural communities, however, we have been unable to utilise this as a communication channel as WhatsApp is a closed network and relies on people sharing information between their own communities and groups. Advertising or direct marketing is also not possible on WhatsApp.

The [Department of Health's website](#) has a range of in-language audio and video files that can be shared on WhatsApp and other social media platforms, and we encourage everyone to share these within their groups on WhatsApp.

Can the Commonwealth send in-language audio messages through text to CALD communities?

Due to privacy limitations around individuals' phone numbers, the Department of Health is unable to direct message people via SMS.