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19 June 2009



AMA

The Hon Nicola Roxon MP  
Minister for Health and Ageing  
Parliament House  
CANBERRA ACT 2600



THE ROYAL AUSTRALIAN  
COLLEGE OF  
GENERAL PRACTITIONERS

Dear Minister

**Re: H1N1 Influenza virus vaccine**

United General Practice Australia (UGPA) and the National Aboriginal Community Controlled Health Organisation (NACCHO) seeks your support for a further strengthening of the partnership between government, general practice and Aboriginal Community Controlled Health Services (ACCHSs) in combating the spread of H1N1 influenza.



UGPA is the collective voice of general practice in Australia and includes the Australian Medical Association, Australian General Practice Network, the Royal Australian College of General Practitioners, the Rural Doctors Association of Australia, the Australian College of Rural and Remote Medicine and General Practice Registrars Australia. NACCHO is the national peak Aboriginal health body representing ACCHSs throughout Australia.



UGPA and NACCHO welcome the Government's recent decision to approve the purchase of H1N1 vaccine from CSL, with initial supplies to target those most at risk of complications from the virus. This move will help to reassure the community that the Government is responding effectively to the virus and taking appropriate steps to limit its impact.



With the decision having been made to purchase the vaccine, the Government must quickly turn its mind to the effective roll-out of the vaccine. We understand that the vaccine is about to enter clinical trials and is likely to become available in the next few months. This provides the Government with a very short window of opportunity to work with stakeholders to ensure that the vaccine quickly reaches targeted populations once it becomes available.

General practice and ACCHSs are the best vehicle to implement a H1N1 vaccine program and UGPA and NACCHO stand ready to work with the Government to make this happen in an efficient and effective way. With more than 7,300 general practices, over 140 ACCHSs, 23,000 GPs and 7,500 GP practice nurses across the country – general practice and ACCHSs are best placed to provide patients with access to the vaccine at the local level and in a timely fashion.



GPs will assess patients and ensure that the vaccine is utilised in a clinically effective way and focused on target populations including through home and aged care visits. ACCHSs, through culturally appropriate and accepted services, are able to target the 'hard to reach' and the broader high-risk Aboriginal community. Utilising these primary care services to roll out the vaccine program will ensure that the frail, elderly and other vulnerable groups will not miss out.



General practice and ACCHSs have in place the required infrastructure to support the roll-out of the vaccine. Most practices already have the required IT, vaccine fridges and appropriate cold chain systems. These resources have been developed with Commonwealth investment and support over many years and it makes a great deal of sense to effectively utilise a well developed infrastructure in times such as these.

If GPs and ACCHSs are to hit the ground running once the vaccine becomes available, then over the coming weeks effective distribution networks, clinical protocols, relevant information and the like will need to be put in place. This means that the Government must start working with GP groups and NACCHO now, otherwise there will be the risk of delay and consequent frustration within general practice and the broader community.

There is no doubt that we have all learned a great deal during the response to the H1N1 virus so far – including the importance of effective consultation and engagement with front-line primary care services. With this in mind, UGPA and NACCHO believe that the Government must recognise the central role that general practice and ACCHSs will have in the implementation of a H1N1 vaccine program and move immediately to establish a high-level expert implementation committee, which includes the major GP organisations and NACCHO, to assist with the planning and roll-out of the vaccine program over coming months.

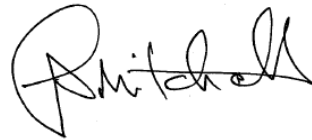
Four of the members of UGPA are members of the National Immunisation Committee, which advises on the implementation of the National Immunisation Program. UGPA is firmly of the view that, once the vaccine is approved, it should be distributed through the normal NIP channels ie. from CSL to jurisdictions and from them on to general practices and ACCHSs. It is essential that the vital role of general practice and ACCHSs in the vaccination chain are recognised in this process.

The H1N1 influenza virus has caused significant concern in the community. By involving GP groups and ACCHSs in the way that we have proposed, UGPA and NACCHO believe that this will further build community confidence in the Government's response arrangements and ensure that we are all working together to deliver the best possible outcomes for our patients.

Yours sincerely



Dr Steve Hambleton, Vice President  
AMA



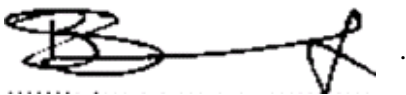
Dr Chris Mitchell, President  
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Dr Belinda Guest, Chair  
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Assoc Prof Denis Pashen, President  
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