

## AMA Queensland Summary Feedback

### Amendments to certain Extended Practice Authority regarding COVID and Influenza Vaccinations and Age Limits

**Organisation:** Australian Medical Association Queensland

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AMA Queensland thanks Queensland Health for meeting to discuss its request for feedback on the proposed amendments to certain Extended Practice Authorities (EPAs) regarding the COVID-19 and influenza vaccines on 7 December 2022.

Noting Queensland Health's urgency to progress the proposed amendments in a short timeframe, AMA Queensland provides the following summary feedback, noting it does not constitute a comprehensive, considered submission on all aspects of the proposed amendments.

- AMA Queensland members are concerned that the conditions, qualifications and training requirements under many of the EPAs are not being monitored or enforced.
  - Doctors reported they had been made aware of inadequacies in training, patient information provision and consent, treatment recording, private consulting areas and resuscitation and anaphylaxis management under some of the existing EPAs.
  - Medical practitioners were reluctant to support any extension to the EPAs until these reported deficiencies were reviewed and addressed and adequate monitoring safeguards implemented.
  - Some also noted that allied health practitioners should be required to hold independent medico-legal insurance as a requirement of practicing under the relevant EPA as is the case for medical practitioners.
- Medical practitioners were in-principle supportive of amendments for registered nurses, midwives, Indigenous health workers and Aboriginal and Torres Strait Islander health practitioners to administer the COVID-19 and influenza vaccines as proposed by Queensland Health since these practitioners usually operate within a multidisciplinary health setting.
  - Doctors were more concerned about extending this practice in community pharmacy where practitioners were more likely to be practicing in isolation without adequate support and collaboration from other health professionals.

- Medical practitioners were particularly concerned about the proposed amendments to remove all age limitations on administering the vaccines to children in the community pharmacy setting. Doctors noted that vaccinations of children:
  - presented an opportunity to review childhood development outside of standard and routine health assessments; and
  - contained inherent safety risks and clinical complexity, particularly for children under 12 years of age.
- AMA Queensland submits that any extended practice should occur with medical governance and not in isolated practice settings.
- AMA Queensland members also stated that best practice models of care that ensure patient safety with extended scope had the following key factors:
  - practitioners operated as part of a multidisciplinary team;
  - those teams were doctor-led and preferably collocated within general practice; and
  - all teams had strong leadership, management and information coordination.
- Medical practitioners also queried the justification and community need for the proposed EPA amendments given the fact:
  - the COVID-19 Public Health Emergency Declaration has been lifted;
  - the community demand for COVID-19 vaccines has diminished;
  - general practitioners have adequate capacity to meet the demand for influenza vaccines as they have always done, both during and prior to the pandemic; and
  - many communities in regional, rural and remote Queensland do not have access to pharmacists but do have good access to general practitioners, meaning the amendments will be ineffective in increasing vaccine access in these areas.
- Finally, AMA Queensland submits that Queensland Health alter its consultation processes to ensure stakeholders are able to provide considered and comprehensive feedback. This would include:
  - Providing transparent, comprehensive and consistent consultation documents which clearly set out:
    - the reasons and justification for the proposed amendments;
    - the process used and matters considered (including any prescribed under relevant legislation) by Queensland Health in determining that the amendments are appropriate;
    - the precise wording and nature of the proposed amendments against the wording and nature of the existing provisions; and
    - the name, title, work unit and contact details for the most appropriate person in Queensland Health for stakeholders to direct enquiries and an alternate contact in their absence.

- Issuing requests for feedback after consideration of related feedback requests, including whether a coordinated and consolidated approach would better facilitate quality stakeholder consultation over ad-hoc, limited-timeframe requests.
- Providing sufficient time for all stakeholders to submit considered feedback, including small organisations and individuals who voluntarily participate in consultation processes on an unpaid basis and in addition to their professional and personal obligations.