

NEW VACCINE ACCOUNT APPROVAL FORM

For PUBLIC HEALTH UNIT use only

Submit the approval form and required attachments to the online vaccine ordering system.

Practice Details				
Practice Name				
Number of GPs in practice				
Nominated AHPRA				
practitioner				
AHPRA number and expiry as registered on				
website:				
http://www.ahpra.gov.au/regist				
practitioners.aspx Practice Address				
Plactice Address				
Telephone		Fax		
Email				
Opening hours for delivery (specify days)				
	PHU Assessme	ent		
Performed by		Date		
Are you satisfied the practice meets the requirement for new VAN approval?*		🗌 Yes 🗌 No		
Purpose built vaccine refrigerator type* (specify)				
Data logger*	🗌 Yes 🗌 No	Date of purchase:		
Inbuilt min/max thermometer*	🗌 Yes 🗌 No	Date of purchase:		
Battery operated min/max thermometer*	🗌 Yes 🗌 No	Date of purchase:		
Is there a designated person and back up person responsible for vaccine storage and implementation of protocols		🗌 Yes 🗌 No		
Have all persons responsible for vaccine management completed the NSW Health online vaccine storage and cold chain management online training module?		🗌 Yes 🗌 No		
Required attachments				
New VAN checklist				
☐ 72 hours stable data logging and corresponding twice daily min/max temps				
NSW Health cold chain training module certificate of completion (at least one person in the practice must complete the module)				



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New VAN approval checklist

Provider details:				
Requirements	Yes	No		
Premises				
Is the facility appropriate to conduct immunisation clinics?				
Equipment				
Is the fridge a vaccine specific fridge?	_			
Is there a permanent data logger for each fridge?				
Is there a battery operated Min/Max? (required if the fridge does not have battery back-up)				
Is there an inbuilt Min/Max?				
Fridge alarm and parameters set?				
Door lock/fridge front tilted back slightly to ensure door closes easily?				
Is there a separate power circuit?				
Is the plug labelled "Do not unplug"?				
Cooler (as per salvage plan)?				
Icebricks (as per salvage plan)?				
Anaphylaxis kit to manage adverse events?				
Key documents				
Strive for 5 & The Australian Immunisation Handbook				
(current editions) available/accessible online				
NSW Health Immunisation website				
NSW Health Cold Chain Toolkit for Immunisation Providers				
Reporting				
Does the practice have access to the AIR to submit vaccination records?				
Does the practice know how to manage and report Adverse Events Following Immunisation?				
Cold Chain Management				
Are only vaccines and medications stored in the fridge (i.e. no food or drink)?				
Have all staff responsible for cold chain management completed the 'Vaccine Storage and Cold Chain Management' online training module? (Certificates of completion are required as evidence)				
Responsible staff demonstrate knowledge of:				
- ordering vaccines				
- receiving vaccines				
 twice daily checking of the fridge/staff ability to read and reset min/max and actions required to be taken in the event of a breach 				
- downloading the data logger and actions required in the event of a breach				
- power outages (planned and unplanned)				
- Equipment maintenance plan (fridge maintenance, data logger calibration,	+			
data logger battery change, min/max battery change, and ice slurry test)				
- Reporting and managing cold chain breaches				
Contact Details				
Are the principal doctor's AHPRA details current?				
Are the PHU and PHN contact details easily accessible for all staff?				



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Actions Required by Practice Manager/Principal Doctor		Completed?	
PHIL Pacammandation for approv			
PHU Recommendation for approv	di.		
Name:			
Signature:			
Date:	Position:		