National Disability Services Webinar: Safer and Stronger accessible slides



Document in English language

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## National Disability Services: Safer and Stronger – Disability Services and Covid-19 Vaccine webinar

Friday 26th February 2021, 10:00am – 11:00am (AEDT)

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## Welcome and Introductions

Sarah Fordyce – Victorian State Manager, National Disability Services

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## Agenda

### Victorian Department of Health: Vaccine Efficacy

Professor Ben Cowie, Executive Director, Covid-19 Response, State Department of Health

### Health and Community Services Union Update

Paul Healey, Branch Secretary, H.A.C.S.U.

### Commonwealth Department of Health: Implementation and Communications Plan

Maddison Behringer, Simon De Sousa, Paula Nesci. Vaccine Taskforce, Commonwealth Department of Health

### Office of the Public Advocate: Decision Making Capacity and Consent

Sonia Gardiner, Senior Medical Treatment Decision Officer, Office of the Public Advocate

### Provider Perspective

Rohan Braddy, C.E.O., Mambourin

### Q&A

Facilitated by Sarah Fordyce, N.D.S.

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**Victorian Department of Health**

# Prof. Ben Cowie

# Executive Director, Covid-19 response

# State Department of Health

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## Health and Community Services Union

**Paul Healey**

Branch Secretary

H.A.C.S.U.

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**Commonwealth Department of Health**

**Simon De Sousa, Maddison Behringer, Paula Nesci**

Vaccine Taskforce

Commonwealth Department of Health

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**Office of the Public Advocate**

**Sonia Gardiner**

Senior Medical Treatment Decision Officer

Office of the Public Advocate

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## Consent (or refusal) for the vaccine

* if a person has decision-making capacity, they consent to or refuse the vaccine
* if they are assessed as lacking capacity (by a health practitioner, such as a G.P. or registered nurse), and there is no advance care directive, their medical treatment decision maker can consent or refuse
  + the consent or refusal must be based on the person’s preferences and values
  + if the person's values and preferences can’t be determined, the decision must be based on what best promotes their personal and social wellbeing
* if there is no medical treatment decision maker, a health practitioner needs to decide if the vaccine administration is **significant** or **routine** treatment
  + if **routine treatment**, the health practitioner can make the decision but must record the details in their notes
  + if **significant treatment**, for example if the injection will cause the person distress or there is a risk of significant side effects, the health practitioner must request the Public Advocate to make the decision (by completing the [s.63 for COVID-19 vaccine online form](https://www.cognitoforms.com/OPA9/S63FormForCOVID19Vaccine))

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## Consent (or refusal) for the vaccine

For more information or advice:

[**Public Advocate webpage**](http://www.publicadvocate.vic.gov.au/)

* Guideline on the administration of the Covid-19 vaccine
* ‘Medical decisions’ tab
* s.63 forms

Telephone Advice Service

1300 309 337

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**Provider Perspective**

**Rohan Braddy**

C.E.O.

Mambourin

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## The vaccine rollout in Victoria: a provider perspective

Rohan Braddy

Chief Executive Officer



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## The position we took

Q: Will the vaccine be made mandatory for Mambourin staff (or customers)?

A: No. (unless)

* Mambourin will not unilaterally make any vaccine mandatory\*. Our position will be the vaccine is strongly encouraged.
* \*We would be obliged to follow any government direction.



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## The position we took

Explained to staff:

* We respect any person’s fundamental human right to make their own choices about their health care including what is put into their bodies
* Subject to government directive and customer choice, health profile and/or capacity for infection control methods to be effective, we may not be able to allow an unvaccinated staff member to do some work they are currently doing
* Consequence of this might be redeployment or, where that is not possible, reduction in hours or redundancy



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## National Disability Services’ position

The Board endorsed an Industry Policy on Covid-19 Vaccination:

* mandated via Public Health Orders of T.G.A. approved vaccines
* for disability support workers providing face to face support to people with disability
* subject to legislated exemptions
* with a strong public education campaign to promote universal uptake of the Covid-19 vaccines in the sector

**N.D.S. is advocating for these outcomes to all Australian Governments, their departments and agencies**



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## One provider’s experience so far

* 24 vaccinations at one site in one day
* Consents obtained prior by the service provider
* Vaccinated person observed for 15 minutes
* Total time per person around 20 minutes
* Staff administering the vaccine stay for half an hour after last person vaccinated to monitor for reactions/adverse side effects
* Similar to having the flu vaccine

A picture of a smiling person holding an orange ball



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## Issues we need to grapple with

* Need clear definition of the ‘disability sector’
* A multitude of workforce issues
* Timely advice regarding when vaccines to be allocated to specific sector groups
* Need communication in appropriate formats for sector participants
* Logistical challenge: vaccine that requires two doses/visits, increased workload
* Need general vaccines information



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## Q&A

Questions from Q&A box and those submitted in advance to N.D.S.

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## Thank you



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