



Vaccination and Screening Requirements

Health and Safety
People and Culture

D23/59229 Version 01 Draft A – 3 July 2023

Contents

1	Purpose	3
2	Scope and application	3
3	Legal and policy framework	3
4	Community First Responders	4
5	Natural disaster and humanitarian operations	4
6	Policy principles	4
7	Employment categories	5
8	Vaccination requirements for employment categories	6
9	Vaccination schedule	7
10	Vaccination for specific or local risks	9
	10.1 Q Fever	9
11	Medical contraindications	9
12	Vaccine non-responders	9
13	Monitoring and review	9
14	Further information	10
15	Document information	10
	15.1 Document control	10
	15.2 Revision history	10

1 Purpose

This policy states Fire and Rescue NSW's (FRNSW) vaccination requirements to provide a safe work environment for our people and to maintain capability and capacity for service delivery to the community.

2 Scope and application

This policy applies to all FRNSW workers including:

- Firefighters
- Administrative and trades staff
- Community Fire Unit volunteers
- Consultants and contractors.

3 Legal and policy framework

FRNSW follows advice from the NSW and Federal Governments, NSW Health and the Australian Department of Health and Aged Care in relation to vaccinations.

Work Health and Safety Act

As an employer, FRNSW must comply with [Section 19](#) of the NSW *Work Health and Safety Act 2011* which places a primary duty of care on FRNSW to ensure, so far as is reasonably practicable, the health and safety of workers, and other persons affected by FRNSW work.

[Section 28](#) of the Act places duties on workers while at work to:

- take reasonable care for their own health and safety, and
- take reasonable care that their acts or omissions do not adversely affect the health and safety of other persons, and
- comply, so far as the worker is reasonably able, with any reasonable instruction that is given to enable compliance with the Act, and
- co-operate with any reasonable policy or procedure relating to health or safety at the workplace.

Australian Immunisation Handbook

The [Australian Immunisation Handbook](#) recommends emergency workers receive vaccines against:

- hepatitis B
- influenza
- tetanus (dT or dTpa).

Department of Premier and Cabinet Circular 2022-04

The Department of Premier and Cabinet Circular 2022-04, [Guidance for Government Sector Agencies regarding COVID-19 Vaccinations for their Employees](#) (7 June 2022) states:

As employers, NSW Government agencies are responsible for keeping all employees safe.

For the safety of employees and all citizens who interact with employees, the NSW Government strongly encourages government sector employees who can safely be vaccinated to remain up-to-date with COVID-19 vaccinations, as recommended by the Australian Technical Advisory Group on Immunisation (ATAGI) in their clinical guidance for the use of COVID-19 vaccines.

4 Community First Responders

In accordance with the [Community First Responder Program](#) policy, Community First Responders must be vaccinated in accordance with the NSW Health policy on [Occupational assessment, screening and vaccination against specified infectious diseases](#).

5 Natural disaster and humanitarian operations

FRNSW workers who wish to participate in interstate or international natural disaster or humanitarian response operations are required to meet the vaccination requirements for the deployment, as set by the Australian Department of Foreign Affairs and Trade, the National Resource Sharing Centre and/or requesting governments, agencies or organisations.

6 Policy principles

All FRNSW workers are recommended to be up to date with routinely recommended vaccines for adults.

FRNSW workers are exposed to varying levels of risk depending on the duties they undertake.

FRNSW's vaccination requirements and recommendations are based on the risk relating to each category of worker.

All workers must be aware of and comply with all FRNSW's infection prevention and control measures, of which this policy is a part.

7 Employment categories

Table 1 sets out the employment categories that apply to this policy.

Note that a worker may have duties that fall into more than one category, in which case all recommendations and requirements for all relevant categories apply.

Table 1: Employment categories

Category	Description	Exposure profile
1	Administrative and trades staff Community Fire Unit volunteers Contractors and consultants	Exposure consistent with background community risk of acquiring infection or individual risks determined by usual treating health professional
2	Permanent and retained (on call) firefighters	Direct physical contact with: <ul style="list-style-type: none"> patients deceased persons, body parts blood, body substances, infectious material or surfaces or equipment that might contain these (e.g. syringes)
3	Water-based flood rescue technicians	Contact that would allow the acquisition or transmission of hepatitis A through ingestion of contaminated water
4	Community First Responders	Increased frequency of direct physical contact with: <ul style="list-style-type: none"> patients deceased persons, body parts blood, body substances, infectious material or surfaces or equipment that might contain these (eg syringes)
5	Disaster Assistance Response Team members	Deployment to local, regional or overseas locations that have a high risk of exposure to endemic infectious diseases

8 Vaccination requirements for employment categories

Table 2 sets out FRNSW's vaccination requirements and recommendations for each employment category.

Table 2: Vaccination requirements

Vaccine	Category 1	Category 2	Category 3	Category 4	Category 5
Seasonal influenza	Recommended	Recommended	Recommended	Required	Required
COVID-19	Recommended	Recommended	Recommended	Required (schedule defined by NSW Health)	Required (schedule defined by DFAT)
Hepatitis B		Recommended	Recommended	Required	Required
Diphtheria, tetanus, pertussis (dTpa or dT) combined vaccine		Recommended	Recommended	Required	Required
Measles, mumps, rubella (MMR)				Required	Required
Varicella (Chicken pox)				Required	Required
Hepatitis A			Recommended	Required	Required
Typhoid					Required
Meningococcal ACWY					Required
Polio					Required
Japanese Encephalitis					If necessary based on risk
Rabies					If necessary based on risk
Yellow fever					If necessary based on risk
Cholera					If necessary based on risk
Other					If necessary based on risk

9 Vaccination schedule

Table 3 sets out the vaccination doses and schedules for the vaccines in Table 2.

Table 3: Vaccination schedule

Vaccine	Doses	Primary Dose	Booster dose
Seasonal influenza	1	Single dose	Annual
COVID-19	2	Two doses	<ul style="list-style-type: none"> As recommended by the Australian Technical Advisory Group on Immunisation (ATAGI) As required by NSW Ambulance for Community First Responders As required by relevant agency or organisation for Category 5 workers
Hepatitis B	3	3 doses at 0, 1 and 4-6 months	None but confirmation of immunity via serology required then additional doses accordingly
Diphtheria, tetanus, pertussis (dTpa or dT) combined vaccine	1	Single dose	Booster doses every 10 years unless exposed then one given prophylactically if not vaccinated within 5 years
Measles, mumps, rubella (MMR)	2	2 doses minimum 1 month apart or born before 1966	None
Varicella (Chicken pox)	2	2 doses minimum 1 month apart or serological evidence	None
Hepatitis A	2	2 doses at 0 and 6 months	None but confirmation of immunity via serology required
Typhoid	1	Single dose	Booster dose every 3 years
Meningococcal ACWY	1	Single dose	5 years (conjugate ACWY)
Polio	1	Single dose	Booster doses every 10 years
Japanese Encephalitis	1	Single dose	The need for and timing of booster doses has not yet been determined. Current information indicates at least 10 years protection following initial dose
Rabies	3	Pre-exposure 3 doses at days 0, 7 and 21-28	Dependent on risk assessment - post exposure prophylaxis 4 doses, 0, 3 and 14 days apart in the event of a rabies-prone wound Additional immediate immunoglobulin highly recommended orchestrated by Public Health. Routine boosting not necessary.
Yellow fever	1	Single dose	Current regulations require booster dose every 10 years to maintain valid certification for travel to identified countries

Vaccine	Doses	Primary Dose	Booster dose
Cholera	2	2 oral doses, 1 – 6 weeks between each dose	If there is an ongoing risk of cholera, a single booster dose is recommended up to 2 years after finishing the primary course.

10 Vaccination for specific or local risks

Based on risk, FRNSW may at any time recommend or require vaccination in response to specific or local risks not covered in Sections 7 and 8, such as:

- Outbreaks of disease not normally present in the community
- Epidemics and pandemics
- Local risks.

10.1 Example - Q Fever

Firefighters may be at risk of exposure to Q fever when doing pre-incident planning, drills or attending incidents at:

- Abattoirs, tanneries, or meat processors
- Farms
- Stockyards
- Animal transport premises
- Laboratories

Q fever vaccination is recommended for anyone who has the potential for breathing in infected aerosols or dust. People must be screened and tested before they are vaccinated against Q fever. Firefighters should speak to their Zone Management regarding this.

For more information see the [Q Fever](#) toolkit on the intranet.

11 Medical contraindications

Workers with medical conditions that prevent them from having a required vaccination must provide a fully completed [Immunisation Medical Exemption Form](#) to the Health and Safety Branch. Health and Safety, in consultation with relevant commanders and managers, will undertake risk assessments on a case-by case basis. Where the medical contraindication relates to Category 3 (CFR) or Category 5 (DART) requirements, FRNSW will liaise with NSW Ambulance or DFAT relating to the risk assessment.

12 Vaccine non-responders

Health and Safety Branch, in consultation with relevant commanders and managers, will risk assess workers who do not show the usual serological response to a course of vaccination on a case-by-case basis. Where the case relates to Category 3 (CFR) or Category 5 (DART) requirements, FRNSW will liaise with NSW Ambulance or DFAT relating to the risk assessment.

13 Monitoring and review

Health and Safety Branch will monitor vaccination advice from the NSW and Federal Governments, NSW Health and the Australian Department of Health and Aged Care.

The effectiveness of this policy will be monitored through the NIIENMS and worker's compensation systems.

14 Further information

For further information on infection prevention and control, infectious diseases and vaccinations, see the [Infection Prevention and Control](#) toolkit on the intranet.

For advice on vaccinations, contact the Health and Safety Branch on HealthandSafety@fire.nsw.gov.au or 02 9265 2800.

15 Document information

15.1 Document control

Policy Manager	Director Health and Safety
Contact Officer	Team Leader Health and Medical
Contact No	02 2965 2800
Document type	Policy
Applies to	<input checked="" type="checkbox"/> Firefighters <input checked="" type="checkbox"/> Community Fire Unit Members <input checked="" type="checkbox"/> Administrative and Trades Staff <input checked="" type="checkbox"/> Contractors and Consultants
Status	Draft
Security	Unclassified
File Reference	FRN23/2233
Review Date	3 years from date of issue
Rescinds	COVID-19 vaccination requirements policy (Version 02) Commissioner's Orders 2021-24, COVID-19 vaccination requirements policy (Version 02)
Copyright	© State of New South Wales through Fire and Rescue NSW

15.2 Revision history

Version	Date	Status	Reference	
01 Draft A	3 July 2023	Draft	D23/59229	