

SA Health Workplace Immunisation Risk Matrix – Individual HCW or Role Risk Assessment

A risk-based immunisation program is intended to protect members of the workforce and consumers/clients from vaccine preventable diseases (VPDs). The risks for vaccine preventable diseases may differ between work groups or departments within the same organisation. This assessment is to identify appropriate actions to manage risk arising from VPDs or tuberculosis (TB).

When completing this risk assessment refer to:

* [SA Health Addressing vaccine preventable disease: Occupational assessment, screening, and vaccination Policy](https://www.sahealth.sa.gov.au/wps/wcm/connect/Public+Content/SA+Health+Internet/Clinical+Resources/Clinical+Programs+and+Practice+Guidelines/Immunisation+for+health+professionals/Health+care+worker+immunisation+and+screening+requirements)

For further guidance:

* [National Safety and Quality Health Service Standards Risk Management Approach guide](https://www.safetyandquality.gov.au/publications-and-resources/resource-library/nsqhs-standards-risk-management-approach)
* [National Safety and Quality Health Service Workforce Immunisation Risk Matrix](https://www.safetyandquality.gov.au/publications-and-resources/resource-library/nsqhs-standards-workforce-immunisation-risk-matrix)
* [The Australian Guidelines for the Prevention and Control of Infection in Healthcare](https://www.safetyandquality.gov.au/publications-and-resources/resource-library/australian-guidelines-prevention-and-control-infection-healthcare)
* [The Australian Immunisation Handbook](https://immunisationhandbook.health.gov.au/), online edition
* Organisational procedures and guidelines related to vaccine-preventable diseases and infections.

# Individual HCW Risk Assessment

To be completed by Area Manager (can seek assistance from appropriately trained assessor).

## Date of risk assessment

**Area Manager Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Contact No.: |  |
| Area worked: |  | Email: |  |

**Health Care Worker (HCW) Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Contact No.: |  |
| Payroll No.: |  | Position: |  |
| Area worked: |  | Direct Line Manager: |  |

## General information

Indicate the vaccine preventable disease (VPD) where risks are to be managed:

🞎 Diphtheria/Tetanus/Pertussis (dTpa)

🞎 Hepatitis B

🞎 Measles/Mumps/Rubella (MMR)

🞎 Varicella (Chickenpox)

🞎 Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where applicable is the HCW Immunisation and Health Screening Declination Form signed?  YES  NO

(Please attach)

|  |
| --- |
| Reason HCW has provided for declination: |



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# Risk assessment

## Risk factors

The following risk factors all need to be considered when calculating risk:

**1. Evidence of immunity to vaccine preventable diseases**

Is the HCW considered immune to the listed VPDs according to specified risk category?

🞎 Yes

🞎 No

|  |
| --- |
| Comment: |

**2. Stage in workforce employment**

🞎 Pre-employment

🞎 Current employee

**3. Opportunity for exposure – risk category role**

Refer to [Mandatory Instruction 1: Risk Assessment, screening and vaccination](https://www.sahealth.sa.gov.au/wps/wcm/connect/Public+Content/SA+Health+Internet/Clinical+Resources/Clinical+Programs+and+Practice+Guidelines/Immunisation+for+health+professionals/Health+care+worker+immunisation+and+screening+requirements) for category definition

Identify the potential opportunity for exposure to VPDs according to specified risk category.

|  |  |
| --- | --- |
| **Category A** |  |
| **Category B** |  |
| **Category C** |  |

**3. Opportunity for exposure – risk category role**

|  |
| --- |
| **a. Area worked:** |
| **b. Work activities:** |
| **c. Population care for in work area:** |

## Risk calculator

Calculate the three scores for each of the four risk factors above using the following risk matrix.

|  |  |  |  |
| --- | --- | --- | --- |
| **HCW immunisation** | | | |
| 1. **Evidence of immunity to vaccine preventable diseases** | | | |
| **Stage in workplace employment** | **Has provided acceptable evidence of immunity to VPD** | **Partial evidence of immunity to VPD** | **Non-immune to VPD** |
| On commencement of work | 1 = Low | 3 = High | 4 = Very High |
| Existing worker | 1 = Low | 3 = High | 4 = Very High |

|  |  |  |
| --- | --- | --- |
| 1. **Opportunity for exposure in the workplace – Category of role** | | |
| **Category C** | **Category B** | **Category A** |
| No duties performed in an area (of the health care service) where patients and/or clients receive health care services unless:   * At times of essential need; and * There is no alternative; or * There is appropriate risk mitigation in place. | No direct physical contact with:   * Patients and/or clients * Deceased persons and/or body parts * Blood, body substances, infectious material or surfaces or equipment which might contain these; and * Do not perform exposure prone procedures | Direct physical contact with:   * Patients and/or clients * Deceased persons and/or body parts * Blood, body substances, infectious material or surfaces or equipment which might contain these; and/or * Perform exposure prone procedures |
| No direct physical contact with:   * patients and/or clients * deceased persons and/or body parts   blood, body substances, infectious material or surfaces or equipment which might contain these. | Exposure which may allow transmission or acquisition of diseases spread by airborne or droplet routes (respiratory means) | Exposure which may allow transmission or acquisition of diseases spread by airborne or droplet routes (respiratory means) |
| 1 = Low | 2 = Medium | 3 = High |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Consequences of exposure to a VPD or TB** | | | | |
| **No increased risk of exposure to disease or infection associated with working in the health service organisation** | **HCW has a risk of exposure to vaccine-preventable disease due to the nature of their role** | **Hospital-based outbreak of vaccine-preventable disease (no evidence of community transmission)** | **Community-wide outbreak of a vaccine-preventable disease** | **Disease with no available vaccine** |
| 1 = Low | 2 = Medium | 2 = Medium | 3 = High | 4 = Very High |

## Risk score

Add the three risk scores to determine the total risk score:

|  |  |
| --- | --- |
| **Risk factors** | **Score** |
| 1. Evidence of immunity to vaccine preventable diseases |  |
| 1. Opportunity for exposure in the workplace – Category of role |  |
| 1. Consequences of exposure to a VPD or TB |  |
| **TOTAL RISK SCORE** |  |



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## Overall risk rating

Use the total risk score to determine the overall risk rating:

|  |  |  |
| --- | --- | --- |
| **Risk factors** | **Score** |  |
| Low risk | 3-4 | Risk is managed by routine procedures. There is minimal risk of harm or injury from the risk. |
| Medium | 5-8 | Risk is managed by specific monitoring or audit procedures. There is potential for harm or injury from the risk. |
| High | 9-10 | There is a serious risk that must be addressed immediately. Consequences to individuals and the organisation are high due to a high potential for harm or injury. |
| Very high | 11 | There is a serious risk that must be addressed immediately. The magnitude of the consequences to the individual and organisation of an event, should it occur, are considered very high with potentially significant harm or injury. |

## Recommended actions based on risk rating (without limiting management options):

For management approach for screening and/or vaccine refusal refer to [Mandatory Instruction 2: Vaccination management (refusal, non-responder, exemptions including medical contraindications)](https://www.sahealth.sa.gov.au/wps/wcm/connect/Public+Content/SA+Health+Internet/Clinical+Resources/Clinical+Programs+and+Practice+Guidelines/Immunisation+for+health+professionals/Health+care+worker+immunisation+and+screening+requirements).

🞎 HCW directed to participate in VPD or TB screening/assessment and provide proof of required vaccination

🞎 HCW directed to comply with the mandatory vaccination requirements contained in the Policy applicable to their role within a reasonable time frame

🞎 HCW to be transferred to other duties

🞎 HCW to be transferred to an alternative area/workplace

🞎 HCW directed to comply with work restrictions and/or safety measures

🞎 HCW directed to attend for duty

🞎 HCW directed away from the workplace

🞎 Request Local Panel review

|  |
| --- |
| Explain: |

Risk assessment conducted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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