

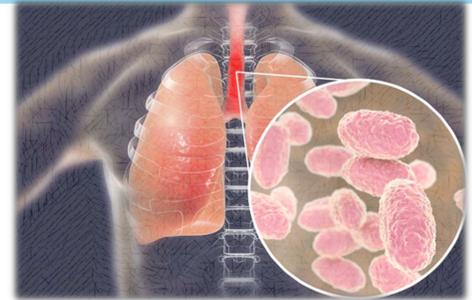


## Reshaping the landscape of Pharmacist Vaccinations: Delivering dTpa Vaccines in a Maternity Outpatient Clinic

Kim Ta<sup>1</sup>, Noor Aladhami<sup>1</sup>, Stephanie Hoy<sup>1</sup>, Claudia Barkeij<sup>1</sup>, Andrew Hale<sup>1</sup>, Lisa Nissen<sup>2</sup>, Ian Coombes<sup>1</sup>  
1. RBWH Pharmacy Department, 2. Queensland University of Technology,

### Background

Pertussis causes on average 1 death and 200 hospitalisations in infants <6 months old annually. Whooping cough (dTpa) vaccination during pregnancy reduces risk of pertussis in infants by 90% and is recommended for each pregnancy between 20 and 32 weeks. Despite this, only 34% of women take up recommended vaccinations in pregnancy.

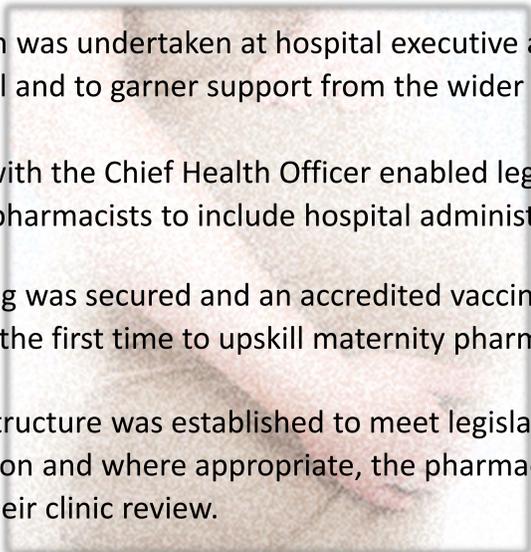


### Aims

An established pharmacist outpatient clinic in maternity, identified an unmet scope for dTpa administration in pregnant women. Pharmacist-administered vaccinations were provided opportunistically in antenatal clinic with a view to increasing access to dTpa vaccines.

### Actions

- Consultation was undertaken at hospital executive and service line level for communication of the proposal and to garner support from the wider multidisciplinary team.
- A meeting with the Chief Health Officer enabled legislative changes to allow this in scope activity for pharmacists to include hospital administration.
- Local funding was secured and an accredited vaccination training program was delivered in hospital for the first time to upskill maternity pharmacists to become suitably trained.
- Clinic infrastructure was established to meet legislative requirements for safe vaccine administration and where appropriate, the pharmacist opportunistically offered dTpa vaccines as part of their clinic review.



### Evaluation

- From November 2020 to August 2022, 304 pharmacist-administered dTpa vaccines were administered in Maternity Outpatients.
- Prior to implementation, no vaccinations were offered in clinic leaving vulnerable groups without access to vaccines.
- The vaccination rate peaked at 17 pharmacist-administered doses per month. No adverse events were experienced.



### Discussion

An unmet scope and opportunity to improve patient outcomes in an unvaccinated and vulnerable patient cohort was identified. We implemented a safe and sustainable model of care which resulted in a large number of pregnant women accessing dTpa vaccinations during their antenatal appointments, many of whom may not have been vaccinated without this service. This is the first hospital-based pharmacist-vaccination model offering dTpa vaccines.

### Contact us

Kim Ta  
Senior Pharmacist, Infectious Diseases  
[Kim.ta@health.qld.gov.au](mailto:Kim.ta@health.qld.gov.au)