

Vaccine Account Number (VAN) toolkit

Application process

VAN application overview

What is a VAN?

A Vaccine Account Number (VAN) allows providers access to National Immunisation Program (NIP) and NSW state funded vaccines.

Who can apply for a VAN?

General practitioner, Pharmacy, Aged Care facility, Aboriginal Medical Service

VAN application: Process & timelines

	Process	Timeframe
Step 1	Applicant to complete the online VAN application form through the State Vaccine Centre (SVC).	
Step 2	Applicants will receive an email from Public Health Unit (PHU) outlining: documents to submit and required knowledge for VAN approval.	PHU will send email within two business days of application.
Step 3	Applicant to submit required documents to PHU via email within one month of application.	Applicants must submit documents
Step 4	If documents submitted are complete/correct, PHU will review documents and organise a one-hour site visit to conduct a site and knowledge assessment. <i>Where document submission is incomplete or incorrect, the PHU will advise applicant to review and resubmit documents.</i>	PHU will arrange visit within two weeks of document submission. <i>Applicants must resubmit documents within one week of request.</i>
Step 5	<i>In cases where remedial actions arise from the site visit, the PHU will request applicant to address and submit evidence of remedial action via email.</i>	<i>Applicant must submit evidence within one week of request.</i>
Step 6	PHU will submit successful applications to Health Protection NSW (HPNSW) to approve new VAN application.	PHU will submit within two business days of successful site visit (or successful completion of remedial actions).
Step 6	HPNSW will email successful applicants with details of their new Vaccine Account Number and login details for the State Vaccine Centre ordering portal.	HPNSW will send email within one week of receiving application.
Step 7	Applicants can log into the NSW Vaccine Centre portal to place vaccine orders.	

Rejected VAN applications

The PHU will reject and/or close VAN applications in the following circumstances:

- VAN application status is **pending** or **incomplete** three months after initial application.
- Required documents (Step 3) are not submitted within the required timeframe (one month).
- Document re-submission (Step 4) is incomplete or incorrect or not submitted within the required timeframe (one week).
- Remedial actions (Step 5) are not addressed and submitted within the required timeframe (one week).

Applicants who remain interested in pursuing a VAN following a failed application are required to re-apply once they are adequately prepared by completing the online [VAN application form](#).

Site visit and knowledge assessment

During the site visit, the PHU will assess equipment, documents, and knowledge on the topics outlined in the following pages of this document. Some examples of questions that you may be asked by your PHU assessor can be found in Strive for 5, page 80 – [Appendix 4: Frequently asked questions](#).

Need help?

- Contact the Immunisation team at Central and Eastern Sydney PHN for assistance with your VAN application process by emailing immunisation@cesphn.com.au. The PHN immunisation team can provide you with education, information and resources required to complete your VAN application.
- Contact the South Eastern Sydney Local Health District (SESLHD) PHU for assistance by emailing SESLHD-PublicHealthUnit-IMMTeam@health.nsw.gov.au or calling 9382 8333 (option 2) to speak to the PHU immunisation team.
- Contact the Sydney Local Health District (SLHD) PHU for assistance by emailing SLHD-Immunisation@health.nsw.gov.au or calling 9515 9420 to speak to the PHU immunisation team.

Moving address?

Following a change of address the fridge must be stabilised and 24 hours of stable data logging submitted to the local public health unit before vaccine orders will be accepted by the NSW Vaccine Centre.

See [opening, closing or moving premises information sheet](#) for further details.

Key documents and websites

Action:

- ☐ Save the following websites and links to favourites bar in your internet browser – you will need to frequently refer to these references.
- ☐ You will be asked to find information from the relevant sites to answer questions for the PHU knowledge test component of your site assessment.

Immunisation websites

[CESPHN Immunisation website](#)

[NSW Health Immunisation programs website](#)

[Public Health Unit immunisation website \(SESLHD\)](#) or [SLHD PHU](#)

[Department of Health Immunisation website](#)

Cold chain resources

[National Vaccine Storage Guidelines – Strive for 5](#)

[NSW Health Cold Chain Toolkit for Immunisation Providers](#)

[NSW Health Vaccine Storage and Cold Chain Management website](#)

Clinical tools & resources

[The Australian Immunisation Handbook](#)

[The National Centre for Immunisation Research and Surveillance \(NCIRS\)](#)

[Catch Up Calculator](#)

[Pneumococcal Vaccination Tool](#)

[Sharing Knowledge About Immunisation](#) (SKAI)

[NSW Health Immunisation Toolkit for General Practices](#)

[NSW Health Influenza Vaccination Toolkit](#) (updated annually)

[No Jab No Play, No Jab No Pay](#)

Checklist: VAN application requirements

Cold Chain Management (CCM)

	Information	Actions	Assessment
Guidelines	All government funded NIP vaccines are required to be stored according to the National Vaccine Storage Guidelines – Strive for 5. Compliance with these guidelines is essential to ensure potent and effective vaccines are administered to patients. NSW Health has developed a Cold Chain Toolkit to support immunisation providers.	Read both the Guidelines and Toolkit to understand storage requirements for government funded vaccines. Complete the Safe Vaccine Storage Checklist. Have a documented protocol for vaccine management.	During site visit: Demonstrate vaccine storage knowledge and access to guidelines and protocols. PHU will review vaccine management protocol document.
Training	Vaccine management is the responsibility of ALL staff ordering and handling vaccines. Immunisation providers are responsible for ensuring all staff are trained. The NSW Health Vaccine Storage and Cold Chain Management online training module was developed to facilitate education to effectively manage cold chain.	It is recommended and noted as best practice that all staff complete the training module. <i>(A minimum of two staff members who manage vaccines must successfully complete the training module).</i>	Email to PHU: Certificate of Completion for all staff members.
Fridge	NIP vaccines MUST be stored in a purpose-built vaccine refrigerator (PBVR). PBVRs are specifically designed to maintain stable temperatures. Domestic refrigerators and bar fridges must not be used for vaccine storage. The Strive for 5 – Appendix 10 (page 98) provides information on considerations when choosing a purpose-built vaccine refrigerator.	Purchase a PBVR and ensure temperature stability over a 72-hour data logging period. If using an existing PBVR, it must have been serviced within the last 12 months. Ensure fridge alarm activates when the temperatures are below 2°C and over 8°C. Label fridge electricity plug: “DO NOT turn off power or disconnect this refrigerator”, order stickers here.	Email to PHU: Photos of fridge including front and side view. Photo of fridge power point with sticker. Fridge service report/s if using an existing PBVR. During site visit: Demonstrate fridge alarm. Demonstrate fridge door closes automatically.

Min/max thermometer	The vaccine fridge must be monitored twice a day with a min/max thermometer either – inbuilt or external (portable). A min/max thermometer (inbuilt or portable) should have a clear digital display. All staff should be trained to record twice daily temperatures. Recommended chart to use: Strive for 5: Vaccine fridge temperature chart	Check if fridge has an inbuilt min/max thermometer. Purchase portable min/max thermometer if required. Record fridge temperatures twice daily on vaccine fridge temperature chart. Have a documented protocol for monitoring twice daily min/max temperature.	Email to PHU: Photos of min/max thermometer. Copy of temperature chart (current and previous two months if available). During site visit: Demonstrate temperature monitoring process – PHU will assess each staff member. PHU will review min/max protocol document.
Data logger	Data loggers are devices that continuously measure and record temperatures at set time intervals. All vaccine refrigerators must have a permanent data logger, and data must be downloaded at least weekly, in addition to twice-daily minimum/maximum recordings. Data loggers confirm if cold chain has been maintained and provides information on the duration of a cold chain breach. Wireless data loggers are automated and can provide real-time temperature readings and alerts.	Purchase a data logger and configure to record temperatures at 5-minute intervals. Train relevant staff on how to operate data logger. Download, save and review data logger report weekly, to ensure temperatures have stayed within range. Document all temperature readings outside of 2°C to 8°C on the Vaccine storage troubleshooting on the second page of Appendix 5.	Email to PHU: Photos of data logger. Data logger report (minimum 72 hours of data). Include graph <i>and</i> 5-minute temperature data. During site visit: Demonstrate process for data logger download and review – PHU will assess each staff member.
Vaccine storage baskets	It is best practice to store vaccines in their original boxes in baskets (specifically open-weave plastic containers). The basket should be clearly labelled with the name/s of the vaccine/s.	Purchase open-weave baskets to store NIP vaccines. Follow guidance on how to organise vaccine fridge. Label each basket clearly (order form for basket labels).	Email to PHU: Photos of labelled vaccine baskets in fridge.
Self-audit	Immunisation providers are required to carry out a Vaccine storage self-audit at least once every 12 months.	Save link to self-audit.	During site visit: Understand self-audit requirements.

Cold Chain Breach (CCB)

	Information	Actions	Assessment
Cold chain breach (CCB)	A cold chain breach occurs when vaccine storage temperatures have been outside of the recommended range of 2°C to 8°C, excluding temperature deviations between 8-12°C for 15 minutes or less. All cold chain breaches must be reported to the PHU. The NSW Health Managing a cold chain breach flowchart outlines steps to take when managing a CCB.	Understand definition of a cold chain breach, and the effect on vaccine potency. Order cold chain breach sticker labels. Print and display Managing a cold chain breach poster on vaccine fridge. Have a documented protocol for the management of CCBs.	During site visit: Demonstrate thorough understanding for CCB identification and management. PHU will review protocol document.
Reporting a CCB South Eastern Sydney LHD	Practices located in SESLHD must report all CCBs to the Public Health Unit by completing the online survey available on the SESLHD website.	Review steps for reporting a CCB as outlined on SESLHD website. Save links to website and online survey.	During site visit: Demonstrate process for reporting a CCB using online survey.
Reporting a CCB Sydney LHD	Practices located in SLHD must report all CCBs to the PHU by completing the PDF reporting form and emailing to SLHD-Immunisation@health.nsw.gov.au	Save link to PDF reporting form and PHU email.	During site visit: Demonstrate process for reporting a CCB using PDF form.
Temperature deviations	Temperature deviations are excursions in which the temperature reaches a maximum of 12°C for 15 minutes or less. All temperature deviations must documented on the Vaccine storage troubleshooting (Appendix 5). Any excursion below 2°C is a cold chain breach and must be reported.	Locate vaccine storage troubleshooting on the back page of the Strive for 5 – Vaccine fridge temperature chart.	During site visit: Demonstrate understanding of the difference between temperature deviation and a CCB. Demonstrate use of the Vaccine storage troubleshooting.
Light exposure breach	Vaccines may lose potency if exposed to direct sunlight, ultraviolet (UV) light, or fluorescent light. Light exposure constitutes a breach reportable to PHU. Vaccines exposed to a light exposure breach may become less effective and revaccination may be required.	Store all vaccines in their original cardboard packaging, ensuring all staff are educated. Have a documented protocol for managing a light exposure breach.	During site visit: Demonstrate knowledge of how light exposure affects vaccines. PHU will review protocol document.

Power outage management

	Information	Actions	Assessment
Power failure	Alternative vaccine storage is required in the event of a power failure. This will allow vaccines to continue to be stored between 2°C and 8°C, thereby minimising vaccine loss and disruption to vaccination services. Strive for 5, Chapter 8: Managing a power failure (page 55) outlines different options for alternative storage in the event of a power failure.	Have a documented protocol for managing vaccines in a power failure. Review Strive for 5, Appendix 9: Checklist for managing a power failure. Practise implementing power outage plan, including packing the cooler to achieve temperatures between 2°C and 8°C.	During site visit: Demonstrate understanding of power outage management. PHU will review protocol document.
Equipment for power outage	A cooler is an insulated container that is either: - solid-walled with a tightly fitting lid or - a vaccine-specific soft-walled cooler. Cooler must be large enough to accommodate all NIP vaccines, loosely packed with ice packs/sheets and insulating material. Cooler temperatures must be monitored and manually recorded on the Vaccine cooler temperature chart using a portable min/max thermometer: - every 15 minutes for the first hour, then hourly (if temperatures are stable) if ice packs have been conditioned and cooler has been pre-chilled - every 5 minutes for the first 30 mins then every 15 minutes for the second 30 mins then hourly (provided the temperatures are stable) if the ice packs have not been conditioned and the cooler has not been pre-chilled. See Conditioning ice pack (page 63).	Review Strive for 5, Chapter 9: Coolers (page 60). Purchase cooler/s with sufficient space – multiple coolers may be required. Purchase ice packs/sheets and ensure there is a freezer onsite. Purchase bubble-wrap or other insulating material. Purchase portable min/max thermometer/s for each cooler. Print copies of the vaccine cooler temperature chart and store inside cooler/s.	Email to PHU: Photos of equipment for power outage: - Cooler/s - Ice packs/sheets - Insulating material - Portable min/max thermometer/s - Vaccine cooler temperature chart/s During site visit: PHU will review power outage equipment.

Anaphylaxis

	Information	Actions	Assessment
Anaphylaxis training	The ASCIA Anaphylaxis e-training for health professionals 2024 has been developed to provide evidence-based training for health professionals to identify and manage allergic reactions and anaphylaxis. The Managing anaphylaxis after vaccination poster provides clear instructions to manage anaphylaxis.	Complete anaphylaxis e-training course. Print and display Managing anaphylaxis poster in every treatment room. Read and understand Clinical features that may help differentiate between a vasovagal episode and anaphylaxis.	During site visit: PHU will assess knowledge of anaphylaxis management.
Anaphylaxis response kit	An anaphylaxis response kit contains all the equipment, medicines and protocols required to manage anaphylaxis. An anaphylaxis response kit must be available in every treatment room, and contents must be checked regularly to ensure they are up to date and not expired.	Prepare anaphylaxis response kits for every treatment room – each room where vaccines are administered must have an anaphylaxis kit. Note that adrenaline is light sensitive and must be protected from light.	Email to PHU: Photos of anaphylaxis kit in each treatment room: • Adrenaline (at least 3 ampoules) – clearly mark expiry date • 3x 1mL syringe • 3x drawing up needles • 3x 25mm needles for IM injection • Adrenaline dosing chart for anaphylaxis • Recognition and treatment of anaphylaxis • Cotton wool, pen and paper During site visit: PHU will review anaphylaxis equipment.

Vaccination room

	Information	Actions	Assessment
Vaccination room	The space used for administering vaccinations must be a dedicated space or room appropriate for the purpose of providing vaccination services. Overall, the room/s should maintain patient privacy, have sufficient lighting, be clean and large enough to fit at least two people and allow for emergency services to enter the room in case of an emergency.	Ensure that the room being used to administer vaccines is appropriate and professional. Read and understand the requirements below for guidance on what is considered an acceptable vaccination room. GP providers: RACGP General Practice toolkit: your practice premises layout RACGP standards for general practice Criterion GP5.1 Pharmacist providers: NSW pharmacist immuniser standards - Section D	Email to PHU: Photos of the space to be used for vaccinations.

Adverse events following immunisation (AEFI)

	Information	Actions	Assessment
AEFI	An adverse event following immunisation (AEFIs) is any negative reaction that follows vaccination. It does not necessarily have a causal relationship with the vaccine. All AEFI notifications are required to be reported to: - the Therapeutic Goods Administration (TGA) using the Adverse event reporting form, and - the Public Health Unit by calling 1300 066 055. Patients should be provided with an information sheet on common reactions after vaccination.	Understand that an AEFI is a notifiable condition under the NSW Public Health Act and all suspected AEFIs must be reported to TGA and PHU. Save link to access Adverse event reporting form. Order Following vaccination— what to expect and what to do patient resource.	During site visit: Demonstrate knowledge of AEFIs and process for reporting.

Australian Immunisation Register (AIR)

	Information	Actions	Assessment
AIR	The Australian Immunisation Register (AIR) is a national register that records vaccines given to all people in Australia. Recognised vaccination providers should record all vaccines given to patients on AIR. It is mandatory for all vaccination providers to report the administration of all vaccines to the AIR, under the Australian Immunisation Register Act 2015. The Services Australia webpage provides information about the AIR, how to record vaccinations and generate reports.	Understand mandatory AIR reporting requirements. Ensure all immunisation providers have access to AIR via HPOS through PRODA. Understand how to use functionalities within AIR. Ensure clinical software is integrated to AIR. Pharmacist applicants: Complete the NSW Pharmacist Immuniser Declaration to apply for an AIR Provider number.	During site visit: Demonstrate access to AIR via PRODA. Demonstrate various AIR functionalities, including downloading of Immunisation History Statements. Demonstrate AIR integration in clinical software.

Commonwealth & State funded vaccines

	Information	Actions	Assessment
NIP funded vaccines	The National Immunisation Program (NIP) is funded by the Commonwealth and provides free vaccines to eligible people. The NIP Schedule is a series of immunisations given at specific schedule points ranging from birth through to adulthood. The NSW Health Immunisation Toolkit for General Practice been developed to support general practices to implement the NSW Immunisation Program.	Understand eligibility criteria to access NIP vaccines. Print and display the latest NSW Immunisation Schedule poster. Read the NSW Health Immunisation Toolkit.	During site visit: Demonstrate understanding of schedule and eligibility for NIP vaccines.
NSW state funded vaccines	In addition to NIP funded vaccines, there are vaccines funded by NSW Health for specific eligibility groups.	Understand eligibility criteria to access State funded vaccines in NSW. Save link to NSW funded vaccines.	During site visit: Demonstrate understanding of eligibility for NSW funded vaccines.
Catch up vaccines	Catch-up vaccines are available under the NIP for eligible people who did not receive them as children. The National Immunisation Catch-up Calculator (NICC) helps health professionals provide a catch-up schedule for people who have missed any NIP vaccines.	Understand eligibility criteria to access catch-up vaccines funded by the Commonwealth. Save link to funded catch-up vaccines and eligibility. Save link to Catch-up Calculator.	During site visit: Demonstrate understanding of eligibility for funded catch up vaccines. Demonstrate use of catch-up calculator.
Non-funded vaccines	The NCIRS immunisation schedules summarise recommendations in accordance with the Australian Immunisation Handbook and include vaccines that are not funded.	Understand which vaccines are recommended but are not funded by State or Commonwealth programs.	During site visit: Demonstrate understanding of the difference between funded and private vaccines.

Ordering, receiving & disposal of vaccines

	Information	Actions	Assessment
State Vaccine Centre	The NSW Vaccine Centre is an online ordering portal to access NIP and state funded vaccines. Successful applicants will be given a Vaccine Account Number to log in to the State Vaccine Centre ordering portal.	Read NSW Vaccine Centre: User guide for immunisation providers document. Save phone number and link to NSW Vaccine Centre website.	During site visit: Demonstrate understanding of use and functions within the NSW Vaccine Centre ordering portal.
Vaccine ordering	Immunisation providers are responsible for ordering vaccines and maintaining appropriate levels of stock. Immunisation providers should aim for one routine vaccine order per practice per month.	Immunisation providers to read Ordering vaccines guidelines.	During site visit: Demonstrate understanding of best practice vaccine ordering, including frequency and quantity.
Receiving vaccines	Vaccine deliveries are required to be checked and placed in fridge as a priority. The heat monitor and cold monitor must be checked immediately upon opening the vaccine delivery.	Reception staff and immunisation providers to read Receiving a vaccine delivery guidelines.	During site visit: Demonstrate process for receipt of vaccine deliveries (including reception staff).
Vaccine disposal	Expired vaccine should be disposed of in a clinical waste bin in accordance with local requirements. Minimise vaccine wastage by managing stock levels and rotating existing stock.	Ensure expired stock is reported in the NSW Vaccine Centre portal. Have a documented process for vaccine rotation and disposal.	During site visit: Demonstrate process for minimising vaccine wastage and process for disposal.

Summary of documents to be submitted to PHU

IMPORTANT: all documents must be submitted to your PHU in a **single email**.

South Eastern Sydney LHD: SESLHD-PublicHealthUnit-IMMTeam@health.nsw.gov.au

Sydney LHD: slhd-immunisation@health.nsw.gov.au

Document checklist

- ☐ NSW Health cold chain module Certificate of Completion for all staff members
- ☐ Photos of fridge: front view & side view
- ☐ Photo of labelled vaccine baskets in fridge
- ☐ Photo of fridge power point with sticker "DO NOT turn off power or disconnect this refrigerator"
- ☐ Fridge service report (unless fridge purchased <12 months ago)
- ☐ Completed Vaccine storage self-audit (unless fridge purchased <12 months ago)
- ☐ Photo of fridge min/max thermometer (inbuilt or portable)
- ☐ Fridge min/max temperature chart – current month **and** previous 2 months (unless fridge is <3 months old)
- ☐ Photo of data logger device
- ☐ Data logger report – 5 minutely temperature data (minimum 72 hours of data)
- ☐ Data logger graph (minimum 72 hours of data)
- ☐ Photo of power outage equipment: cooler, portable min/max thermometer, insulating material, ice packs, printed 'cooler temperature chart'
- ☐ Photo/s of anaphylaxis kit/s in each treatment room (with adrenaline expiry clearly visible)
- ☐ Photo/s of room used for vaccine administration

VAN site visit and knowledge assessment

Assessment date:	Comments
Clinic:	
Min/max recording process – who, when, how often, why	
Min/max temperature chart – temperatures, plotted graph	
Min/max thermometer reading demonstration	
Fridge service frequency	
Fridge alarm demonstration	
Fridge power point sticker	
Fridge door – demonstrate automatic close	
Vaccine baskets – open weave and labelled	
Data logger process – who, when, how often, why	
Data logger – review weekly records	
Data logger – demonstrate download	
Data logger configuration – 5-minute interval	
Cold chain breach – definition	
Cold chain breach identification	
Cold chain breach – scenario assessment	
Cold chain breach reporting form	
Temperature deviation – definition & documentation	
Light exposure breach – definition & reporting	
Power failure process – who, how, why	
Power failure equipment – cooler, ice packs (frozen), insulation, portable min/max, cooler temperature chart	
Anaphylaxis kit – adrenaline (expiry), syringe, needles, dose chart,	

recognition, wool, pen, paper	
Anaphylaxis management process	
Anaphylaxis scenario assessment	
Vaccination room – private clinical space, bench space, 2 chairs, sufficient first aid area, no access to medications, hand sanitise/washing, sharps container	
Adverse event following immunisation (AEFI) reporting	
Vaccine administration errors (VAE) reporting	
AIR access & reporting	
AIR demonstration – via AIR site & clinical software	
NIP funding eligibility – scenario assessment	
NSW funding eligibility	
Catch up vaccines – funding eligibility & age groups	
Catch up calculator demonstration	
Non-funded recommended vaccines discussion	
SVC vaccine ordering frequency & quantity (routine & flu)	
SVC reporting expired vaccines	
Receiving vaccine delivery process – reception staff knowledge	
Vaccine disposal	
Vaccine stock rotation & expiry check process	
Self-audit – who, when, how often, why	