


Government of Western Australia
WA Country Health Service

Management of a meningococcal ACWY vaccination program using an Incident Command System



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HEALTHIER COUNTRY COMMUNITIES THROUGH PARTNERSHIPS AND INNOVATION
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ACNOWLEDGEMENTS

Many people from multiple organisations involved in the response:

- WACHS Public Health Units (PHU) in Goldfields, Pilbara, Midwest and Kimberley regions
- WA Country Health Service (WACHS), Central Office
- WA Country Health Service (WACHS), Disaster and Emergency Management
- WACHS and Department of Health (DoH) Communications Directorates
- Aboriginal Health Council of Western Australia (AHCWA) and Aboriginal Medical Services
- DoH Disaster Preparedness and Management Unit (DPMU)
- DoH WA Communicable Disease Control Directorate (CDCD)




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PREVIOUS LEARNINGS

Job need for disease spike



MenACWY vaccination program 2016 – over 4,000 children and teenagers vaccinated

Main issues identified in debrief:



- Lack of clarity for decision making and structure
- Lack of process for internal and external communications
- Incident Command System (ICS) could be used in future outbreak responses

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INCIDENT COMMAND SYSTEM (ICS)

- Developed in the 1970s in California in response to catastrophic wildfire season
- Has been, and is being used widely in many countries
- In Australia, mainly used by fire services
- Australian Inter-service Incident Management System (AIIMS)

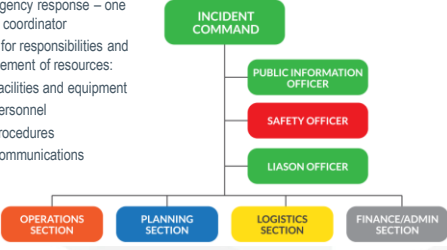



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INCIDENT COMMAND SYSTEM

- Clear command structure for multi-agency response – one central coordinator
- Clarity for responsibilities and management of resources:
 - Facilities and equipment
 - Personnel
 - Procedures
 - Communications



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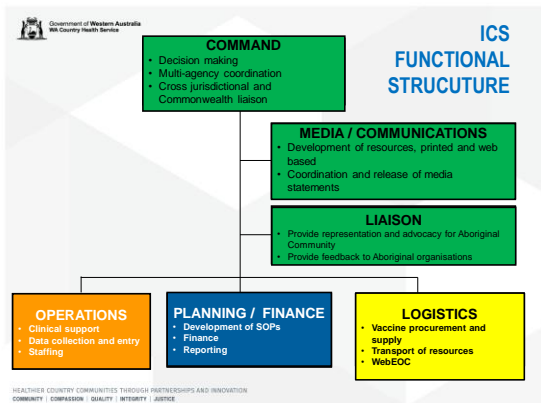
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2017 INCIDENT

- September 2017- WA received alert from Northern Territory CDC
- 6 October 2017- one meningococcal W case in the Ngaanyatjarra Lands, in the east of Western Australia
- Response team formed on 9 October 2017



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COMMUNICATIONS

- Internal Communications
 - Web EOC (Web-based Crisis Information Management System)
 - Regular briefings at 8:30 am
 - SitReps after every meeting
- External Communications
 - Coordinated approach for media and briefings
 - Weekly communiques to external stakeholders

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VACCINATION PROGRAM - STAGE 1

- MenACWY vaccination, offered to all people older than 2 months of age, living in communities of the Goldfields, Pilbara and Kimberley with strong cultural links to the Central Australian communities affected by the outbreak.
- The vaccination program delivered through partnership between WACHS services and local Aboriginal Medical Services.

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VACCINATION PROGRAM - STAGE 2

- November 2017: Following 4 more cases outside the target area, program extended to additional towns and communities
- All Aboriginal people aged 2 months to 19 years, and non-Aboriginal people in this age group in communities with >50% Aboriginal population

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OUTCOMES

- Program finished on 31 March 2018
- Stage 1:
3,352 doses administered, 96% coverage of target population
- Stage 2:
2,589 doses administered, 70% of target population

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CONCLUSIONS

- ICS provided clear framework for response
- Command structure helped with rapid decision making
- Modular functionality clarified roles
- Communication process was clear
- Debrief still to come – further learnings

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THANK YOU



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