



Dear Student / Parent / Guardian,

Students working within the healthcare setting are required to provide immunisation and health screening records to

- Ensure contractual obligations to Ballarat Health Services, and
- Protect students from acquiring vaccine preventable diseases and from transmitting infections to vulnerable contacts.

The checklist on page 2 outlines the necessary immunisation and health screening requirements prior to placement at Ballarat Health Services and is consistent with the National Immunisation Program (NIP) as published in the Australian Immunisation Handbook, 10th Edition, (2020 update), and the National Health and Medical Research Council (NHMRC) Guidelines.

Your assistance is greatly appreciated.

Sue Flockhart
Manager – Infection Prevention and Control / Workforce Immunisations
Ballarat Health Services

ACCEPTABLE FORMS OF EVIDENCE:

1. Statements from Immunisation suppliers (nurse immunisers or medical practitioners)
2. Australian - Immunisation History Statement

You can get your **Immunisation History Statement** from the 'Australian Immunisation Register' a national register where vaccinations are recorded by using either:

- Your [Medicare online account](#) through [myGov](#)
- [Medicare mobile app](#).

BALLARAT HEALTH SERVICES

MANDATORY PRE- WORK EXPERIENCE QUESTIONNAIRE



Ensuring the health and safety of our patients and staff is at the heart of everything we do.

As part of this commitment, it is a condition of your placement that evidence of the vaccination have been met

prior to your commencement. Failure to meet these requirements may result in a delay of the progress of your application for placement at Ballarat Health Services

Complete and return this form with your vaccination records attached.

ALL (Yes / No) fields require an answer.

Name:	Date of Birth:
Address:	Mobile No:
Email:	

For those persons without a Medicare card get your immunisation history statement, by linking your [Individual Healthcare Identifier \(IHI\)](#) to your myGov account. If you don't have one, find out [how to get an IHI](#).

Infection Prevention & Control Unit Ph: 03 5320 4780

Email: workforceimmunisation@bhs.org.au

Please enter Medicare card number including the position on card (in the last square)

Position on card

Medicare Number															
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IPaC Use Requirement Met?	VACCINATION REQUIREMENTS	Vaccination records		
		YES	NO	
	Hepatitis B: Vaccination			
	MMR (Measles, Mumps, Rubella): If born after 1965 - Vaccination/Serology			
	Varicella (Chickenpox): Vaccination/Serology			Position on card
	dTpa Vaccination: Diphtheria/Tetanus/Pertussis (Whooping Cough) within the last 10 years			
	Influenza Vaccination: Required annually (Attach evidence of most recent)			
	COVID-19 Vaccination: MANDATORY for all (Attach evidence)	Dose 1 date	Dose 2 date	Dose 3 date
ASSESSMENT OF TUBERCULOSIS (TB) RISK (to identify past TB exposure)				Yes / No
Have you had a Quantiferon Gold blood test to check for past exposure to TB within the last 12 months? If Yes, provide evidence.				
Were you born outside Australia? If Yes, country of birth :				
Have you lived or travelled overseas for more than 3 months at a time? If Yes, specify country & amount of time lived/travelled :				
Have you ever had contact with a person known to have TB without wearing appropriate personal protective equipment (mask etc)?				

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Declaration:

I, the undersigned declare that I have provided all available immunisation evidence, and if further vaccinations are requested, that these will be done prior to placement and my own expense.

- ☐ I have attached copies of the evidence of all required vaccination records as indicated.
(e.g. Current Immunisation History Statement from your **Medicare** online account or via your myGov)

Signature: _____ Date: _____

For Infection Prevention & Control use only:									
Manager		Received		Start Date		Cleared		C21	