

# Child Safety POLICY

---

**Title:** Immunisation of children in care

**Policy No:** 638-6

---

## Policy Statement:

The Department of Child Safety, Seniors and Disability Services (Child Safety) considers childhood immunisation an essential part of a child's health care needs and is committed to all children who are in need of protection and subject to a child protection care agreement or a child protection order granting custody or guardianship to the chief executive, receiving scheduled, and available and recommended vaccines, unless a health practitioner advises there is a medical reason for not proceeding.

This policy supports the Queensland Government commitment to immunisation of children in accordance with the National Immunisation Program Schedule and in accordance with the advice of a health practitioner.

The Queensland Immunisation Schedule reflects the national schedule and recognises the particular needs of Aboriginal and Torres Strait Islander children. Immunisation is one of the most effective ways to protect children against harmful diseases which can cause serious complications, including death.

Children and young people, under the age of 18 years, are able to consent to their own immunisation and health care where a health practitioner determines they have sufficient capacity to do so. The views of a child in care who does not want to receive a vaccination will be respected, taking into account their decision-making capacity.


Child Safety is committed to respecting, protecting and promoting human rights. Under the *Human Rights Act 2019*, Child Safety has an obligation to act and make decisions in a way that is compatible with human rights and, when making decisions about the immunisation of children, to give proper consideration to the right to life, the right to protection of families and children and the right to health services.

The safe care and connection of Aboriginal and Torres Strait Islander children with family, community, culture and country will be a key consideration when considering immunisation decisions for an Aboriginal and Torres Strait Islander child.

## Principles:

- The child's safety, wellbeing and best interests, both throughout childhood and for the rest of the child's life, are paramount.
- Child Safety has a responsibility to meet the health needs of children in care.



- 
- Providing children with vaccines is a safe and effective way of immunising them against vaccine-preventable diseases.
  - Child Safety staff will act and make decisions in a way that is compatible with human rights and obligations under the *Human Rights Act 2019*.
  - Decisions relating to a child in care will be made in a timely way to facilitate the prompt receipt of services to the child to enhance their safety and wellbeing.
  - Parents have the right to be consulted and appropriately involved in the medical treatment of their child.
  - Children and young people have a right to participate in making decisions that affect them, with due regard to their age, maturity and capacity to understand.
  - The five elements of the Aboriginal and Torres Strait Islander child placement principle (prevention, partnership, placement, participation and connection) under the *Child Protection Act 1999* (the Act), section 5C, apply to the standard of active efforts to all processes, decisions and actions taken for an Aboriginal or Torres Strait Islander child.

## **Objectives:**

This policy aims to ensure that children in care receive vaccines in accordance with the recommended immunisation schedule, as well as other vaccines that may be available and recommended by a health practitioner, to ensure they receive the health benefits resulting from immunisation.

It also aims to ensure a child is not vaccinated if a health practitioner advises there is a medical reason for not proceeding with the immunisation.

Where the parent of a child in the custody of the chief executive is unable to be located, vaccinations will occur in line with medical advice from a health practitioner. Where parental consent for immunisations is refused, parents will be provided with an opportunity to explain their reasons for not consenting and to provide relevant medical information, such as past reaction to a vaccination. Child Safety will provide this information to the health practitioner for consideration about exercising their authority under section 97 of the Act, to vaccinate the child.

Where a child is in the custody of the chief executive and a parent's consent cannot be obtained, or in an emergency situation, Child Safety may request a health practitioner to administer the relevant vaccination by exercising their authority under section 97 of the Act.

## **Scope:**

This policy refers to all children who are subject to both ongoing intervention and in the custody or guardianship of the chief executive.

The child's immunisation schedule will be continued and maintained while the child is in care unless the health practitioner advises there is a medical reason for not proceeding with the immunisation. The immunisation status of infants under 12 months of age will be followed up as a matter of priority due to their particular vulnerability.

Aboriginal or Torres Strait Islander children will receive medically recommended additional vaccines to prevent them from being placed at a greater risk of disease in their early lives, as medically recommended.

Children will be supported to receive other vaccines that are made available and recommended by a health practitioner to protect them from health risks.



## Roles and Responsibilities:

- The roles and responsibilities of Child Safety staff regarding health decisions for a child in care are outlined in the Child Safety Practice Manual, Support a Child in Care.
- Carers are required to advise Child Safety staff when the child has received a vaccine, and to tell Child Safety about any matter of significance identified by the immunisation provider during the immunisation process.
- The guardians of children subject to a Child Protection Order granting long-term guardianship to a suitable person or a Permanent Care Order are responsible for consenting and making immunisation arrangements for the child.

## Authority:

*Child Protection Act 1999*, sections 5A, 5B, 5D, 5E, 7, 11, 12, 13, 51B-D, 73, 74, 75, 82, 83A, 84, 97, 122, 159A-159H, 159M

## Delegations:

Refer to instruments of delegation for delegations relevant to the immunisation of children in care.

---

### Records File No.: Not applicable

**Date of approval:** 16 October 2024

**Date of operation:** 16 October 2024

**Date to be reviewed:** 16 October 2027

---

**Office:** Office of the Chief Practitioner

**Help Contact:** Child Protection Practice

---

### Links:

#### Procedures

Child Safety Practice Manual

#### Related Legislation

*Child Protection Act 1999*

*Human Rights Act 2019*

#### Related Policies

Care agreements (415)

Case planning (263)



Decisions about Aboriginal and Torres Strait Islander children (641)

Information sharing for service delivery co-ordination (403)

Participation by children and young people in decision-making (369)

Delegating authority for Aboriginal and Torres Strait Islander children (647)

**Rescinded Policies**

Immunisation of children in care (638-4)

---

Deidre Mulkerin

Director-General