## **ELECTIVE (SSC5c) REPORT (Up to 1200 words)**

A report that addresses the above four objectives should be written below. Your Elective supervisor will assess this.

Objective 1: Describe the pattern of disease/illness of interest in the population with which you will be working and discuss this in the context of global health: Compare the immunisation schedules for both countries.

As both paediatric populations are fairly similar, it could be thought that the immunisation schedules for both locations would also be similar. Looking into both vaccination programmes at a glance appears to be true, however there do appear to be a few minor differences between them. The Hepatitis B vaccination is given to all babies compared to the only the at-risk groups, and everyone has a Human Papilloma Virus (types 6, 11, 16, 18) vaccine in Australia opposed to just young females in the UK. Australia also considers Aboriginal people to be a high risk group and as a consequence offers them influenza and pneumococcal vaccines. The only vaccine the UK offers that is not on the Australian list is the shingles vaccination at the age of 70.

The vaccination programmes are listed below:

Age	Australian (NSW) vaccination	UK national vaccination
	programme for:	programme for:
Birth	Hepatitis B	-
2 months	Diphtheria, tetanus, pertussis, Hib,	Diphtheria, tetanus, pertussis, Hib,
	Polio, Hep B	polio
	Pneumococcal	Pneumococcal
	Rotavirus	Rotavirus
3 months	-	Diphtheria, tetanus, pertussis, Hib,
		polio
		Meningococcal C
		Rotavirus
4 months	Diphtheria, tetanus, pertussis, Hib,	Diphtheria, tetanus, pertussis, Hib,
	Polio, Hep B	polio
	Pneumococcal	Pneumococcal
	Rotavirus	
6 months	Diphtheria, tetanus, pertussis, Hib,	-
	Polio, Hep B	
	Pneumococcal	
12 months	Hib	Hib/Men C
	Meningococcal C	Pneumococcal
	MMR	MMR
18 months	MMR + Varicella	-
~3 and a half years	Diphtheria, tetanus, pertussis,	Diphtheria, tetanus, pertussis,
	polio	polio
	MMR (if not had 2 doses)	MMR
11-12 years (year 7)	Diphtheria, tetanus, pertussis	-
	HPV	
	Varicella (catch up only)	
FEMALES 12-13 years	-	HPV
14 years	-	Tetanus, diphtheria, polio
		MenC

65 years	-	Pneumococcal
>65 years		Influenza (annual)
70 years		Shingles
At risk groups:		
>6 months with medical risk factors/Aboriginal >15 years/>65 years/pregnant	Influenza	<del>-</del>
>65 years/Aboriginal >50 years/ Aboriginal 15-49 with medical risk factors	Pneumococcal	
In high risk groups:		
At birth	-	ТВ/Нер В
>6months- 65 years		Influenza (annual)
2-65 years		Pneumococcal

## Objective 2: Describe the pattern of health provision in relation to the country which you will be working and contrast this with other countries, or with the UK:

Australia has an interesting healthcare system that appears to be a mixture of national and private input. The national aspect is known as Medicare where a large proportion of costs are paid by the government and there is a 1.5% tax on income. Level of subsidisation is calculated based on the type of service the patient requires, their requirement of benefits or eligibility to concessions and whether the patient has exceeded the maximum level of subsidisation they are entitled to for the year. There is an increased tax to 2.5% for those who do not have additional private cover, which is in theory supposed to encourage those who are able to afford insurance to choose that coverage to ease the pressures on the national service.

This is different to the UK, where the whole service is covered except those services that are not provided by the NHS as they are deemed not cost effective. Both health services do not completely cover dentistry or optometry so the patients have to pay a small cost to use those services.

## Objective 3 - Health related objective: To describe the differences in the vaccination programme in Australia to that of the UK, including the possible reasons behind this.

The differences in the vaccination programme are described in objective 1.

Interestingly the Human Papilloma Virus vaccine is available to everyone in Australia compared to just the females in the UK. In the UK it has been considered only important to protect those who are susceptible to cervical cancer and so they have chosen to only vaccinate the females as a cost cutting measure. However in Australia this is not the case. It does make more sense to protect the whole population from HPV to at least get the 'her immunity' aspect of a vaccination programme which will protect those who are unable or ineligible to have the vaccine. In addition, Gardasil also has an element of protection against genital warts which in theory should cut costs in the longer term with reduction of the need to treat it.

There does not appear to be a vaccination for TB as standard in the national vaccination programme in Australia, so it could be thought that TB is a low risk disease in Australia. On entry to the country, one of the conditions for gaining a visa includes declaring not being exposed to TB, which could also allow an extra level of protection for the public so introduction of a vaccine in the long term might not be cost effective due to the low risk of acquiring TB.

Shingles is a new vaccine in the UK, and although it is not currently on the vaccination programme, it may be introduced later on depending on the prevalence of shingles in the elderly population.

Objective 4: Personal/professional development goals: To be able to explore a different type of healthcare system and any particularly different health issues that may be more specific to Australia

Exploring healthcare in Australia has been an interesting experience, as it appears to have a more privatised healthcare system similar to that of the United States opposed to the National Health Service in the United Kingdom. What struck me most in this system is how the patients appear to be categorised into the different class of payment, even on the handover lists which until this point I would never have considered as a possibility. With regards to the health issues, even though Australia and the UK are so far apart, it is fascinating how similar the paediatric populations are and so there does not appear to be any particular health issues that is specific to Australia.