

WRHA Immunization Services (Critical Path) 2023-2024

This guideline outlines the staff roles and responsibilities related to the Immunization Program.

**Italicized responsibilities listed in the Public Health Clerk column identify tasks that other administrative staff could assist with if needed.*

GENERAL ROLES AND RESPONSIBILITIES						
Managers of Facility and Support Services (MFSS) &/or Team Managers (TMs)	Centralized CD & PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
Pre-campaigns: <ul style="list-style-type: none"> Facilitate communication with private schools regarding request for and transfer of class lists as per protocol. Facilitate acquisition of appropriate clinic space. Manage volunteer process for community area clinic. Provide guidance regarding use of available resources (i.e. # of staff needed). Monitor casual staff hours and budget tracking ensuring expenditures including casual nurse requests do not exceed budget.. Ensure casual nurse hours are submitted by NOON every Thursday. 	Pre-campaigns: <ul style="list-style-type: none"> Centrally coordinate request for class lists from school divisions. Scheduling Admin schedules part-time and casual nurses. CD Admin receives formats, deposits class lists in shared central folder then notifies clerks of readiness of class lists for template upload into PHIMS. Update program recommendations as required. Provide CA teams with estimated annual birth cohort in PHIMS. Ongoing: <ul style="list-style-type: none"> Communicate program updates to PHNs, casual nurses, immunization clerks and managers. 	Pre-campaigns: <ul style="list-style-type: none"> Hold a valid immunization competency certificate and completed PHIMS training. Work with clerk to develop the clinic schedules and associated staffing, volunteers and therapy dog requests as permitted. Schedule community office catch-up clinics. Determine the # of staff needed in consultation with team manager. <i>See Appendix A: re: Casual Nurse Breaks</i> <ul style="list-style-type: none"> Ensure integrity of vaccine schedules (i.e. interval between doses). Involved in planning 	Pre-campaigns: <ul style="list-style-type: none"> Hold a valid immunization competency certificate and completed PHIMS training. Communicate with assigned schools re: immunization services to be offered in the school year. Request volunteers as required. If a clinic date needs to be negotiated this is done by the school PHN. Monitor consent return and provide interventions to increase return rate as necessary. Review all school-based resources in Regional Immunization Manual for upcoming school year. Pre-clinics: <ul style="list-style-type: none"> Review all consents and 	Pre- campaigns: <ul style="list-style-type: none"> Review all school based and influenza resources in Regional Immunization Manual for upcoming year. Clinic Day: <ul style="list-style-type: none"> Assist set-up of clinic. Ensure clinic set up and operations follow the Provincial PPE requirements for outpatient settings/community clinics. Refer to PPE resources - Shared Health (sharedhealthmb.ca) <ul style="list-style-type: none"> Ensure clinic set-up and operations follow established 	Pre- campaigns: <ul style="list-style-type: none"> Works with the Team Manager and CA Lead PHN for the request and transfer of class lists from private schools as per protocol. <ul style="list-style-type: none"> <i>Creates Mass Immunization Events for Influenza and School immunization programs.</i> <ul style="list-style-type: none"> Refer to each Program's Instructions tab within the spreadsheet on the 'R' drive [Immunization Schedules]. Forwards the final schedule to CDC unit for staffing with part time or casual immunization nurses, volunteers and therapy dogs. Checks stock status report monthly ensuring vaccines are current. Upon CD Unit direction, order printing (from HSC printshop), clerical and immunization supplies, including needles and vaccines based on previous year's cohort numbers. Order factsheets from MDA as needed. 	Pre-campaigns: <ul style="list-style-type: none"> Attend Volunteer orientation provided by Volunteer Services as necessary <ul style="list-style-type: none"> may include Hand Hygiene Auditing of PH clinic staff Clinic Day- School-Based: <ul style="list-style-type: none"> Report to lead PHN to determine role for the clinic Roles could include: <ul style="list-style-type: none"> Assisting with clinic set up. Bringing students from their classrooms Assisting with crowd control Observing students Handing out consent forms Observing students post-immunization Advising student when their observation time is

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<ul style="list-style-type: none"> Provide guidance regarding use of available resources. 	<ul style="list-style-type: none"> Provide consultation and support to PHNs regarding immunization issues. Advise Team Managers re: staff competency certificates. Review and update the Regional Immunization Manual as needed. Scheduling Admin: update PHN and PHC of any last-minute nurse cancellations day before/ morning of clinic. Update by phone and email. Scheduling Admin does not need to update a nurse cancellation if shift that was cancelled is a week before. PHC to be looking at schedule to review. *CD Coordinators to run biannual School Epi Reports January 15 and July 15 <p>Post-campaign:</p> <ul style="list-style-type: none"> Year-end evaluation. 	<p>and coordination of activities where resources are shared between CA's.</p> <p>Ongoing:</p> <ul style="list-style-type: none"> Ensure program updates are relayed to CA staff. Keep track of casual clerk/nurse hrs. <p>Post-campaign:</p> <ul style="list-style-type: none"> Compile recommendations from clinic and review forms to inform any changes in the future. 	<p>enter consents in PHIMS; if consent is questionable contact legal decision-maker for clarification.</p> <ul style="list-style-type: none"> Add warnings and special considerations in PHIMS. Provide clerk with list of vaccines required for the clinics. Ensure that the forecaster is run as close to the clinic as possible (i.e. 1-2 days), so the Lead PHN can review for any changes in the forecast. Review the Event Worksheet and also investigate all 'not forecasted' clients. Print Event Worksheet to bring to clinic for <u>each</u> immunizer. All immunizers are to cross-reference the Worksheet with the Consent Form pre-immunization. Shred after clinic. School Lead PHN or PHC- one week prior to each clinic, to contact schools to ensure the distribution of Immunization 	<p>clinical practice guidelines (CPG) to minimize chance of administration errors.</p> <p>Refer to <i>Appendix B Immunization Station set-up for multiple-injection clinics</i> in this document.</p> <ul style="list-style-type: none"> Review anaphylaxis management protocol and confirm role. Cross-reference the Event Worksheet with the Consent Form pre-immunization Pre - immunization assessment of client Immunize as per CPG Vaccine Administration Practices Document on consent form. Add additional notes as necessary. Advise Lead PHN of anything of note. 	<p>School-Based:</p> <ul style="list-style-type: none"> *When notified by the CD Unit, access class lists from shared central folder, upload lists into PHIMS, manage rejected files and update Mass Immunization Events. Manage student transfer-in / -out process for school based program. <p>Pre-Clinics (School-Based and Influenza):</p> <ul style="list-style-type: none"> Arrange delivery and pick up of consents. Alphabetize the consents, organize by classroom, and separate by yes and no's. Confirm vaccines required for event with PHN. Update Mass Immunization Events (vaccine lot #'s & staff). Work with the PHN to prepare and pack immunization clinic supplies including vaccines. Use courier services as required to transport supplies to and from the clinic according to WRHA policy. School Lead PHN or PHC- one week prior to each clinic, to contact schools to ensure the distribution of Immunization Reminder notes 	<p>over and advising they can return to class.</p> <ul style="list-style-type: none"> Encouraging the students to take the 'Record of Immunization' form home to their parent/legal guardian. Handing out snacks/beverages if available. Escorting students back to their classroom where required. Hand Hygiene Auditing of Public Health clinic staff as required. <p>Recovery Period- School-Based:</p> <ul style="list-style-type: none"> Once the child is immunized by the immunizer they will be handed their Immunization Record Form. The Immunizer will have indicated on the form the time that the child can return to class. Usual recovery time is 15 min unless otherwise

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			<p>Reminder notes either via email or paper copies.</p> <ul style="list-style-type: none"> Work with the clerk to prepare and pack immunization clinic supplies, including vaccines that are to be packed and transported as per the cold chain policy. Check Casual & Volunteer staffing schedules for any last-minute changes and communicate with the Scheduling Admin accordingly. <p>Clinic Day:</p> <ul style="list-style-type: none"> Use courier service as required to transport supplies according to WRHA policy. Ensure clinic set up and operations follow the Provincial PPE requirements for outpatient settings/community clinics. <p>Refer to PPE resources - Shared Health (sharedhealthmb.ca)</p>	<ul style="list-style-type: none"> Monitor post-immunization area. Return supplies to CA office as necessary. Participate in clinic review 	<p>either via email or paper copies.</p> <p>Clinics:</p> <ul style="list-style-type: none"> Attend clinics as determined by CA requirements. Look over assigned nurse Master Schedule week before, day before and morning of clinic to ensure all staff are assigned for clinic. This helps to see if there were any last-minute changes to the schedule. <p>Post-Clinics / School-Based:</p> <ul style="list-style-type: none"> Organize lists of names for school catch up clinics. Refer to Instructions tab within the spreadsheet on the 'R' drive [Immunization Schedules]. <i>Upon receipt of school file from PHN, Clerk ensures data entry is completed</i> and closes the Event in PHIMS within three weeks of the clinic date (*must be <u>before</u> Jan. 15 and *<u>before</u> July 15 of each school year). Do not create new Events until notified by the CD Unit. Ensure Casual Timesheets are sent to: wrhacasualtimesheets@wrha.mb.ca <p>Post-Clinics / Influenza:</p> <ul style="list-style-type: none"> Following the receipt of completed 	<p>stated/directed by the School PHN Clinic Lead.</p> <ul style="list-style-type: none"> If the child appears to be needing urgent medical attention please call the School PHN Clinic Lead immediately. The Immunization Record Form is to be left with the student at all times and <i>not</i> to be collected by the volunteer or other staff. <ul style="list-style-type: none"> The form should be placed on the table in front of the child. Rationale: This process change will facilitate and eliminate the error of the wrong Immunization Record Form being distributed to the wrong child, will eliminate multiple handlings of the form, and will assist in an emergency response if 911 is called on a student

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			<ul style="list-style-type: none"> Ensure clinic set-up and operations follow established clinical practice guidelines (CPG) to minimize chance of administration errors. <p>Refer to <i>Appendix B Immunization Station set-up for multiple-injection clinics</i> in this document.</p> <ul style="list-style-type: none"> Prior to start of clinic; review roles and responsibilities of all staff including casual staff & volunteers. Discuss emergency response plan with team prior to each clinic. Verify that all supplies are present (including anaphylaxis kits) prior to starting clinic. Immunize as per CPG Vaccine Administration Practices If an event occurs at the clinic the Lead PHN would take the lead and direct staff as necessary. Monitor post–immunization area. 		<p>Casual Immunization Nurse documentation, proceed with PHIMS Immunization data entry. Should data entry support be required (i.e. a Central Admin Clerk to attend the community area to assist vs. couriering the consents to 490 Hargrave St.), a request must be completed and submitted by the Team Manager (of the affected community area) to the CD-Immunization Manager. Approval may not be guaranteed.</p> <ul style="list-style-type: none"> Ensure Casual Timesheets are sent to: wrhacasualtimesheets@wrha.mb.ca 	<p>and immediate identification of the student is required.</p> <p>Clinic Day- Influenza:</p> <ul style="list-style-type: none"> Report to Lead PHN or other Lead designate <p>Roles could include:</p> <ul style="list-style-type: none"> Greeter Registration area Usher Post Immunization Area <p>Post Clinics (School-Based and Influenza):</p> <ul style="list-style-type: none"> Participate in debrief at clinic Provide feedback to Volunteer Services

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			<ul style="list-style-type: none"> Follow up adverse events. <p>Post-clinic:</p> <ul style="list-style-type: none"> Immunization documentation completed in PHIMS the same day as the clinic or within 24 hours of clinic completion. Complete clinic review form and provide recommendations. Update event status in PHIMS within 24 hrs of clinic completion. After ensuring documentation of clinic is complete and ensuring the event status is updated; the event report is printed for school file and given to clerk within one week of the clinic. 			

TIMELINE						
MAY TO AUGUST 2023						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
Influenza: <ul style="list-style-type: none"> Team Managers to work with CA regarding Influenza clinics; staffing templates. 	Influenza: <ul style="list-style-type: none"> Prepare & email blank template for booking influenza clinics/staffing. Review proposed clinic dates across the region. Ensure there are no major conflicts with clinic dates. Revise consent forms, letters & forms as necessary. Scheduling Admin schedules part-time and casual nurses. Update resources in Regional Immunization Manual (i.e. NACI statement, Quick Reference Guides (QRG's) in preparation for Influenza campaign 	Influenza: <ul style="list-style-type: none"> Community Area teams to identify sites for Influenza clinics. Influenza clinics will be held between November to December Influenza clinics are targeted clinics in each community area that can be appointment based <p>Influenza clinics should focus on populations that are:</p> <ul style="list-style-type: none"> Vulnerable to health inequity due to factors affecting their ability to access immunization services and who would not otherwise seek immunization. AND are <ul style="list-style-type: none"> At highest risk of influenza-related complications or hospitalization; or capable of transmitting influenza to those at high risk 	Influenza: <ul style="list-style-type: none"> Community Area teams to identify sites for Influenza clinics. 		Influenza: <ul style="list-style-type: none"> Community Area team develops Influenza immunization clinic schedules in collaboration with CA Flu Lead. Forward Influenza immunization clinic schedules & all schedules (nursing & volunteer) staffing requests to: immunizationschedules@wrha.mb.ca Create separate Mass Immunization Events for Influenza clinics. Order resources for Influenza clinics (posters, fact sheets, consents). 	

<p>School-Based: Managers of Facility & Support Services (MFSS).</p> <ul style="list-style-type: none"> • Authorize expenses for printing costs of consent packages. 	<p>School-Based:</p> <ul style="list-style-type: none"> • Class lists requested from school divisions (SD). • *CD Coordinators to run biannual School Epi Reports July 15 (and January 15) • Prepare and notify staff of blank template for booking clinics/staffing in 'R' drive. • Revise consent forms, letters and forms as necessary and post. • Scheduling Admin schedules part-time and casual nurses. • Communicate updated resources for school and Influenza programs to the Casual pool. 	<ul style="list-style-type: none"> • Work with the Team Managers and /or Clerk in the development of the immunization clinic schedule to identify nursing resources for central scheduling. <p>School-Based:</p> <ul style="list-style-type: none"> • Work with clerk in development of immunization clinic schedule to identify nursing resources for central scheduling. • Community Area team develops initial immunization clinic schedule for dose # 1 including the catch-up clinics. 	<p>School-Based:</p> <ul style="list-style-type: none"> • PHN's to communicate with their schools to explain their role with the schools for upcoming year. • Identify the school contact person related to scheduling clinic dates. 		<p>School-Based:</p> <ul style="list-style-type: none"> • Send Dose # 1 staffing requests to: immunizationschedules@wrh.a.mb.ca • *When notified by CD Unit, <i>create separate Mass Immunization Events for each grade / agent / dose #, pick-ups at each school and catch-up clinics after each dose.</i> • By the end of June all school clinics are scheduled. Clerk to populate template in "R" Drive with dose 1 schedule and related staffing requests. • <i>Prepare consent packages per school based on previous years; for Gr 6 & 8. Include the letter to administrator and place in envelope with school name and address.</i> • Consent packages to include: <ul style="list-style-type: none"> ○ Consent Form 	
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					<ul style="list-style-type: none"> Tracking Tool <ul style="list-style-type: none"> Letter to parent Consent form Fact sheet(s) Arrange for consent packages to be sent to the school by end of August. Manage class lists from private schools for uploading into PHIMS. 	
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TIMELINE						
SEPTEMBER 2023						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
	School Based: <ul style="list-style-type: none"> Class lists formatted into spreadsheet templates upon receipt from school divisions. 		School-Based: <ul style="list-style-type: none"> Consent return rate should be monitored for all school-based immunization programs, interventions adjusted and strategies utilized using an equity based approach. Implementation of Grade 6 dose #1 clinics (HPV, Men Quad & HBV). Grade 8 Tdap / Tdap-IPV clinics in the fall or spring- at Community Area discretion. Review all school-based resources in the Regional Immunization Manual. 	School-Based: <ul style="list-style-type: none"> Refer to General Roles & Responsibilities section. 	School-Based: <ul style="list-style-type: none"> Refer to General Roles & Responsibilities section. 	

TIMELINE						
SEPTEMBER 2023						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
			<ul style="list-style-type: none"> Refer to General Roles & Responsibilities section. <p>Influenza:</p> <ul style="list-style-type: none"> Review resources in Regional Immunization Manual (i.e. NACI statement, Quick Reference Guides (QRG's) in preparation for influenza campaign. 			
OCTOBER						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
			<p>Influenza:</p> <ul style="list-style-type: none"> Implementation of Influenza immunization clinics. Ensure that the clinic review form is complete for all clinics with input from all staff and volunteers at clinics. 	<p>Influenza:</p> <ul style="list-style-type: none"> Participate in scheduled influenza clinics. 	<p>Influenza:</p> <ul style="list-style-type: none"> Participate in scheduled influenza clinics. 	

TIMELINE						
OCTOBER 2023						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
			School-Based: Continuation of dose #1 clinics. <ul style="list-style-type: none"> Refer to General Roles & Responsibilities section. 	School-Based: <ul style="list-style-type: none"> Refer to General Roles & Responsibilities section. 	School-Based: <ul style="list-style-type: none"> Refer to General Roles & Responsibilities section. 	

NOVEMBER						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
Influenza: Immunization Team Manager <ul style="list-style-type: none"> Schedules Influenza & school de-brief. 	School-Based: <ul style="list-style-type: none"> Update and post Kindergarten reminder letter. 		Influenza: <ul style="list-style-type: none"> Accommodate requests for Flu/Pneumo/Covid-19 vaccines in CA offices, including 2nd dose Flu for children. School-Based: Continued participation in Dose #1 clinics.		School-Based: <ul style="list-style-type: none"> Kindergarten letter to be printed. 	

TIMELINE						
DECEMBER 2023						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
Influenza: Immunization Team Manager <ul style="list-style-type: none"> Schedules Influenza & school de-brief. 					School-Based: <ul style="list-style-type: none"> Kindergarten letter to be printed. 	
JANUARY 2024						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
	<ul style="list-style-type: none"> CD Coordinators to run biannual School Epi Reports January 15 (and July 15) 				School-Based: <ul style="list-style-type: none"> Kindergarten letter to be distributed to schools for inclusion in school registration packages. 	
FEBRUARY						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
	School-Based: <ul style="list-style-type: none"> Scheduling Admin schedules part-time and casual nurses for spring clinics. Receive electronic version Home School list from MHSAL. Sort list by CA and store in 	School-Based: <ul style="list-style-type: none"> Liaise with the clerk for scheduling Dose # 2 clinics. 	School-Based: <ul style="list-style-type: none"> Refer to General roles and responsibilities section. 		School-Based: <ul style="list-style-type: none"> Schedules Dose # 2 clinics; all related staffing requests to CD unit at: immunizationschedules@wrha.mb.ca Refer to General roles and responsibilities section. Home School letters to be 	

TIMELINE						
FEBRUARY 2024						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
	<ul style="list-style-type: none"> R: drive. Notify CA clerk when list is ready. 				<ul style="list-style-type: none"> sent to each student in the applicable grade cohort by the CA PH Clerk. 	

APRIL						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
Influenza: <ul style="list-style-type: none"> Work with Influenza planning committee in planning influenza immunization clinics. 	Influenza: <ul style="list-style-type: none"> Start date for fall Influenza clinics to be communicated to Community Areas. Work with Influenza planning committee in planning Influenza immunization clinics. 					

TIMELINE						
MAY & JUNE 2024						
MFSS &/or TMs	Centralized CD and PPH Surveillance Team	Community Area Lead Role for Influenza & / or School Programs	PHNs (Includes designated Lead role PHN for Influenza / School clinics)	Casual Immunization Nurses	Public Health Clerks	Volunteers
			School-Based: <ul style="list-style-type: none"> Implementation of dose #2 clinics (HPV & HBV) & Tdap / Tdap-IPV clinics (if being held in the spring). Refer to General roles and responsibilities section. 	School-Based: <ul style="list-style-type: none"> Refer to General roles and responsibilities section. 	School-Based: <ul style="list-style-type: none"> Refer to General roles and responsibilities section. 	

Appendix A: Casual Nurse Breaks

Please use the following table when scheduling casual immunization nurses’ coffee breaks as the break they are entitled to is dependent on the length of the shift they are working:

Shift Length	Coffee break (15 min paid break)	Lunch break (30 min unpaid)
Less than 3 hours	n/a	n/a
3 hours	1	n/a
Greater than 3 hours up to 5 hours	1	n/a
Greater than 5 hours less than 7.75 hours	1	1
7.75 hours	2	1

Note: The coffee break MUST be scheduled during the shift and CANNOT be at the end of the shift.

In circumstances where a clinic is 3 hours in the morning and a further 3 hours in the afternoon, it is an acceptable practice to post it as two separate shifts if desired. You are not required to post it as one continuous shift.

Appendix B: Immunization Station Set-Up for Multiple-Injection Clinics

For Public Health Immunization Providers at multiple-injectable vaccine clinic settings, the following best practice guidelines were developed by the *Nursing Practice Council’s Immunization Working Group* and are supported by the *Canadian Immunization Guide*:

- I. The Lead PHN will ensure that prior to commencing a clinic, a brief overview or “huddle” will be provided to all relevant staff to review clinic logistics and clinic expectations.
- II. The immunization provider is to draw-up the required vaccine(s) prior to immunizing each client. It is reasonable for the consent form to be provided to the immunizer either in advance of, or once the client is at the immunization station- dependent upon what the clinic logistics allow for. It is the immunization provider’s responsibility to ensure that the appropriate vaccine(s) are administered to the client. Pre-drawing of vaccine(s) for multiple students will *not* occur.
- III. Safety-engineered needles are to be labelled following the draw-up of vaccine and prior to administration.
- IV. The order of vaccine administration and site distribution as outlined below is to ensure maximum volume per site is not exceeded and the most painful vaccine (HPV) is provided last
 - In *first* Deltoid muscle:
 - i) Hepatitis B vaccine
 - In *second* Deltoid muscle:
 - ii) Men-C-ACYW-135 (Meningococcal Quadrivalent)
 - iii) HPV (Human Papilloma Virus)

The following recommendations have been developed to support consistent practice in both school and catch-up clinic settings:

- 1. The color coding utilized on consent forms will be the same at all clinics throughout *all* community areas:

Hep B=	yellow
Men Quad=	orange
HPV=	pink
Tdap=	green
Tdap-IPV=	blue

Appendix B: Immunization Station Set-Up for Multiple-Injection Clinics continued

2. Labels are permitted and will include **only**:
 - a. name of the vaccine
 - b. manufacturer
 - c. Staff are to use the labels to identify their vaccine(s) as they draw up and have the option to affix to the consent form once the vaccine has been administered. It is the responsibility of the immunizer to ensure that the label is correct prior to affixing to the syringe or the consent form.
3. Syringe size (1 cc or 3 cc) and the station layout can be *left to the discretion* of each immunizer
4. The laminated and color-coded placemat will be brought to clinics for *optional use* by the immunization provider.

Eg.



For additional information refer to the WRHA Regional Immunization Manual Competency #8: *Administration of Immunizing Agents* which includes the following pertinent resources: Vaccine Administration Clinical Practice Guidelines, Multiple Intramuscular Injections Resource, and Vaccine Administration Video. [Competency #8: Administration of Immunizing Agents - WRHA Professionals](#)

Additional References:

<https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-1-key-immunization-information/page-8-vaccine-administration-practices.html#p1c7a3>
http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%20-%20-%20Imms/Appendix_B_Administration.pdf
<https://www.cdc.gov/vaccines/hcp/admin/administer-vaccines.html#multiple-injections>
<https://immunize.ca/immunization-pain-management-clinician>