



## WRHA Immunization Program Clinical Practice Guidelines

**TITLE: Infection Control for Immunization Clinics**

CODE

APPROVED BY:

June 7,  
2022

PAGE

Program	Date	Program	Date
<input checked="" type="checkbox"/> Population and Public Health	Oct.6,20 10	<input type="checkbox"/> Primary Care	
<input type="checkbox"/> Occupational Health		<input type="checkbox"/> Home Care	
<input checked="" type="checkbox"/> Infection Prevention and Control		<input type="checkbox"/> Personal Care Home	
<input type="checkbox"/> Community Health Services Leadership Team		<input type="checkbox"/> Pharmacy	

### 1.0 PURPOSE

1.1 The purpose of this guideline is to provide guidance on infection prevention and control practices for organizers and practitioners working in an immunization clinic environment.

### 2.0 SCOPE & GOAL

2.1 This practice guideline is applicable to all immunization providers within programs/facilities directly owned or funded by the Winnipeg Regional Health Authority (WRHA).

### 3.0 PROCEDURE

3.1 Routine Practices: Refer to: [Routine Practices \(wrha.mb.ca\)](http://wrha.mb.ca)

**3.1.1** Point of Care Risk Assessment (PCRA) Prior to every interaction with the person receiving care (the patient, resident or client – patient/resident/client); all Healthcare staff are responsible to assess the infectious risk to themselves, those receiving care, visitors, and staff made by the patient/resident/client, the situation or task.

**3.1.2** Staff must adhere to guidelines regarding the use of Personal Protective Equipment (PPE). Immunization clinics are considered a “green zone” and therefore PPE is used for the entire shift. Refer to [PPE in Outpatient/Community Settings](#)

**3.1.3** All staff working in the clinic shall follow Routine Practices and perform hand hygiene according to the four moments of hand hygiene.



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### 3.2 Signage

**3.2.1** Alcohol Based Hand Sanitizer & Respiratory Etiquette signage shall be placed at clinic entrance(s). [Prevent the Spread of Germs- Poster](#)

**3.2.2** All people entering the clinic will be directed to use alcohol-based hand sanitizer that is listed in the current WRHA contract

### 3.3 Covid-19 or Influenza-Like Symptoms or Other Illnesses

**3.3.1** Actively screen clients for symptoms compatible with Covid 19 or Influenza like symptoms at the entrance to the clinic. Refer to the following: [Covid-19 Generic Screening Checklist \(gov.mb.ca\)](#)

**3.3.2** Ensure that a separation of two meters is maintained between patients/clients and HCWs prior to determining the client is free from symptoms and does not have any precaution/contraindication to immunization due to acute illness.

**3.3.3** If patients/clients with symptoms that are a precaution/contraindication to immunization are identified:

- Put on a mask (if deemed appropriate) – educate regarding respiratory etiquette.
- Cancel/postpone the client's visit to the clinic.
- Redirect clients who need medical assessment for symptoms to their primary care provider. If appropriate, call 911 for emergency care.

## 4.0 IMMUNIZATION STATION SUPPLIES AND PHYSICAL SET UP

**4.1** Tissues shall be available for individuals to cover their cough or sneeze.

**4.2** Hand Sanitizer should be available for staff and clients at point of care

**4.3** Facility approved disinfectant wipes should be available for staff to use for cleaning of areas of client contact. Use disinfectant wipe(s) to clean area prior to setting up clean supplies, if immunization space becomes contaminated and at the end of the clinic.



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- 4.4 Immunization stations require tables that have a wipeable, nonporous surface.
- 4.5 Set up work flow and space to maintain separate zones:  
Create clean zone for clean supplies (syringe, needle, alcohol swab, gauze and band aids). On other side of table create space for non-clean items (i.e. vaccination forms or health cards)
- 4.6 Sharps containers for needle disposal shall be available at point of use.
- 4.7 Garbage cans shall be in a location that allows staff access without reaching in front of clients.
- 4.8 Do not provide toys or magazines in the clinic.
- 4.9 Gloves should be available for staff who have open skin lesions on their hands or have an allergy.

### 5.0 PHARMACY CONSIDERATIONS

- 5.1 Maintain cold chain through proper vaccine handling and storage. Refer to [Storage and Handling of Vaccines – Clinical Practice Guideline](#)
- 5.2 Horizontal surfaces in the medication preparation areas must be cleaned and disinfected prior to beginning medication preparation and when visibly soiled.
- 5.4 Syringes should be removed from the outer wrap just prior to drawing up doses. Vaccine should be drawn up into the syringe within **15 minutes** of removing the outer wrap.

### 6.0 ENVIRONMENTAL CLEANING

- 6.1 Surfaces shall be cleaned and disinfected with facility approved cleaner/disinfectant, following manufacturer's instructions.
- 6.2 Facility approved disinfectant wipes are recommended, particularly if staff other than housekeepers are performing cleaning/disinfecting.
- 6.3 Horizontal surfaces in all other areas of the clinic must be cleaned and disinfected prior to beginning clinic, when visibly soiled and every six hours.



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**6.4** Gloves shall be made available for individuals to practice Routine Practices for environmental cleaning as well for skin contact with facility approved disinfectant.

### 7.0 VALIDATION

7.1 Content developed by WRHA Infection Prevention and Control Program

### 8.0 RECOMMENDED READING

8.1 [WRHA Community Infection Prevention and Control Manual](#)

8.2 [Routine Practices | Infection Prevention & Control | WRHA Insite](#)