Infection Prevention and Control Practices for Immunization Clinics

Personal protective equipment (PPE) considerations

- Conduct a point-of-care risk assessment (PCRA) to determine if PPE is needed and follow any PPE guidance and/or requirements of the specific facility.
- PPE can include medical masks/N95 (or equivalent), eye protection (face shield, goggles or some safety glasses), gowns and gloves.
- In most cases, gloves or gowns are not needed, but should be available if there is the potential for contact with blood or body fluids, broken skin or use of disinfectants/chemicals.
- If gloves are worn per PCRA, remove and dispose of immediately following the procedure and perform hand hygiene. When gloves are worn they must be changed for each procedure.
- Ensure medical masks are available for those who choose to continue masking as a personal decision.

Safe injection practices

- Perform hand hygiene before vaccine preparation and between immunizations. Alcohol-Based Hand Rub (ABHR) is the preferred method of hand hygiene unless hands are visibly soiled.
- Scrub the access diaphragm of the vial using friction and 70% alcohol. Allow to dry before inserting a new needle and new syringe into the vial.
- Use a sterile syringe and needle when entering a vial. Never re-enter a vial with a used needle OR used syringe.
- All needles and syringes are single use only.
- Do not reuse single dose vials. Enter the vial once and then immediately discard it.
- Before immunization, clean the injection site with a skin antiseptic such as 70% isopropyl alcohol or 2% chlorhexidine and allow to air dry (i.e., don't wipe the antiseptic off the arm).
- Do not re-cap needles after administration and always engage any safety-engineered features.
- Discard used needles and syringes immediately after use into a Canadian Standards Association (CSA) approved sharps container, which is to be accessible at point-of-use.
- Dispose of empty vaccine vials into the sharps container or according to local waste management legislation.

Safe use of multidose vials

The following recommendations must be followed each time they are used:

- Adhere to aseptic technique when accessing multidose vials. Multidose vials should be accessed on a surface that is clean and where no dirty, used or potentially contaminated equipment is placed or stored.
- Scrub the access diaphragm of the vial using friction and 70% alcohol. Allow to dry before inserting
 a new needle and new syringe into the vial.
- Once the vaccine is drawn up, the needle should be immediately withdrawn from the vial. A needle should never be left in a vial to be attached to a new syringe.
- Mark the multidose vial with the date it was first used and ensure that it is used and discarded within the time indicated in the product monograph.
- Discard the multidose vial immediately if sterility is questioned or compromised, if the vial is not marked with the original entry date or if the vial is past the expiry date/time.

Training and resources

Public Health Ontario has resources that can assist with any training needs related to hand hygiene, PPE, cleaning and disinfection of the environment or equipment, sharps and waste management.

- <u>Infection Prevention and Control Online Learning</u>: All online modules for health care workers (10-15 minutes each) are recommended to be completed.
- PPE Videos (1-2 minutes each) from Routine Practices and Additional Precautions webpage.
- Environmental Cleaning: Environmental Cleaning Toolkit
- Immunization Technique for Intramuscular (IM) Injections Deltoid Muscle
- Interim IPAC measures based on respiratory virus transmission risks in health care settings
- CSA Z316.6:20: Sharps

Sources

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The information in this document is current as of October 2023.

For more information, please visit <u>publichealthontario.ca</u>.

