



<p>Team Name: Regional Infection Prevention and Control Team</p> <p>Team Lead: Regional Director - Staff Development, Infection Prevention and Control</p> <p>Approved by: VP – Human Resources</p>	<p>Reference Number: CLI.8011.PL.013</p> <p>Program Area: Infection Prevention and Control</p> <p>Policy Section: Infection Prevention and Control</p>
<p>Issue Date: August 29, 2018</p> <p>Revision Date: October 5, 2020</p>	<p>Subject: Pneumococcal Vaccine Administration to Residents in Personal Care Homes</p>

Use of pre-printed documents: Users are to refer to the electronic version of this document located on the Southern Health-Santé Sud Health Provider Site to ensure the most current document is consulted.

POLICY SUBJECT:

Pneumococcal vaccine administration to residents in personal care homes (PCHs)

PURPOSE:

To reduce morbidity and mortality from pneumococcal disease through timely and appropriate administration of the pneumococcal vaccine to residents of PCHs.

BOARD POLICY REFERENCE:

Executive Limitation (EL-2) Treatment of Clients
 Executive Limitation (EL-7) Corporate Risk

POLICY:

Nurses and other eligible health care professionals (e.g. pharmacists) shall assess the resident’s need for pneumococcal polysaccharide vaccine (Pneu-P-23) as outlined in the current Manitoba Health, Seniors and Active Living (MHSAL) Pneumococcal Polysaccharide Vaccine (Pneu-P-23) Public Health Fact Sheet.

Each resident noted to be unvaccinated shall be offered vaccine provided the resident /substitute decision maker has given informed consent.

In the event that the resident has an anaphylactic reaction to the pneumococcal vaccine the nurse shall follow the MHSAL Protocol for Management of Suspected Anaphylactic Shock.

DEFINITIONS:

Anaphylaxis: An immediate and severe allergic reaction to a substance (e.g. food or drugs). Symptoms of anaphylaxis include breathing difficulties, loss of consciousness and a drop in blood pressure. This condition can be fatal and requires immediate medical attention.

Inactivated vaccine: A vaccine made from viruses and bacteria that have been killed through physical or chemical processes. These killed organisms cannot cause disease.

Public Health Information Management System (PHIMS): An immunization registry used for all residents of Manitoba.

Pneumococcal disease: A serious and sometimes fatal bacterial infection caused by *Streptococcus pneumoniae*. It can lead to pneumonia, bacteremia and meningitis.

Pneumococcal vaccine: An inactivated (killed bacteria) vaccine that provides protection against most of the serious infections caused by 23 types of pneumococcal bacteria. There are two types of pneumococcal vaccine. The Pneumococcal Polysaccharide Vaccine (Pneu-P-23 or PPV23) is the vaccine recommended for people over the age of two that are at risk for pneumococcal disease, including adults with chronic health conditions.

Substitute decision maker: A third party identified to participate in decision making on behalf of a person who lacks decision-making capacity concerning immunization. The task of a substitute decision-maker is to faithfully represent the known preference and/or the interests of the incapable person. A substitute decision maker may be legally appointed (Public Trustee, Committee, Advance Health Directive Proxy) or informal (family member, next of kin).

Vaccination: The physical act of administering any vaccine or toxoid.

Vaccine: A suspension of live (usually attenuated) or inactivated microorganisms (e.g. bacteria or viruses) or fractions thereof administered to induce immunity and prevent infectious diseases and their sequelae.

IMPORTANT POINTS TO CONSIDER:

- Pneumococcal infection can cause serious and sometimes fatal disease, including pneumonia, bacteremia and meningitis.
- Immunization is the best way to protect against pneumococcal infection.
- The Pneumococcal Polysaccharide Vaccine (Pneu-P-23) vaccine protects against 23 types of pneumococcal bacteria.
- Seniors aged 65 years or older and anyone living in personal care home are at increased risk of pneumococcal disease and should receive the Pneu-P-23 vaccine.
- Pneumococcal Vaccine booster administration information can be found on the Provincial Vaccine Eligibility webpage at

<https://www.gov.mb.ca/health/publichealth/cdc/vaccineeligibility.html>

PROCEDURE:

1. Assess Residents Need for Pneumococcal Vaccination.

- Pneu-P-23 is recommended for **all previously unvaccinated** adults ages 65 years or older and anyone living in a personal care home as per the Provincial Vaccine Eligibility webpage <https://www.gov.mb.ca/health/publichealth/cdc/vaccineeligibility.html>
- If vaccination history is unknown, request the resident's vaccine history from the Portage la Prairie or Steinbach Public Health Panorama data entry clerk.

2. Obtain Order for Vaccine

Obtain order by attending physician/prescriber for Pneu-P-23 vaccine administration.

3. Provide Vaccine Information Fact Sheet

Provide residents and/or substitute decision makers with a copy of the most current MHSAL Pneumococcal Polysaccharide (Pneu-P-23) Vaccine Public Health Fact Sheet. Available at <https://www.gov.mb.ca/health/publichealth>.

4. Obtain Resident's Consent

- Obtain resident's/substitute decision maker's written consent prior to administering the Pneu-P-23 vaccine using the MHSAL Seasonal Influenza and Pneumococcal Vaccine Consent Form CLI.8011.PL.007.FORM.03.
- MHSAL Seasonal Influenza and Pneumococcal Vaccine Consent Form:
 - Nurse to complete the following before sending:
 - Section A – Client addressograph
 - Section B – Except question #1
 - Section C – Reason for Immunization
 - Section D – Check off Seasonal Influenza Vaccine (and Pneumococcal Vaccine if applicable)

Resident/substitute decision maker completes:

- Section D
- Informed written consent is preferred however verbal consent is acceptable provided informed consent guidelines for immunization are followed and the consent form is completed as appropriate. The MHSAL Informed Consent Guidelines for Immunization are available at www.gov.mb.ca/health.
- The signed consent form is valid for up to one year.

5. Order Vaccine:

- This may be done while ordering influenza vaccine annually in August. See Influenza Preparation Timeline Checklist for Personal Care Homes CLI.8011.PL.007.FORM.01.

- PCHs that use regional pharmacy services - order the vaccine from your closest regional pharmacy.
- PCHs that do NOT use regional pharmacy services—order the vaccine directly from the MHSAL vaccine warehouse using the MHSAL Influenza and Pneumococcal Vaccine Order Form available from a Regional Infection Prevention and Control Coordinator. Enter the facility client ID number.

6. Maintain Vaccine Cold Chain

Store and handle the vaccine according to MHSAL’s Cold Chain Protocol – Vaccines and Biologics at <http://www.gov.mb.ca/health/publichealth/cdc/coldchain/protocol.html>.

- The vaccine must be stored in a refrigerator between +2 and +8 degrees Celsius.
- If the temperature of the fridge falls outside of the required temperature range, the nurse shall quarantine the affected vaccine in a fridge at the required temperature and report a cold chain break to the facility infection control practitioner/designate as soon as possible.

7. Screen for Contraindications and Precautions

- Consult the monograph supplied with the vaccine to ensure that the vaccine is not contraindicated for the resident.
- In the case of moderate or severe acute illness with or without fever, postpone administration of the vaccine.

8. Be Prepared to Manage Medical Emergencies

Be prepared for management of a medical emergency related to the administration of the Pneu-P-23 vaccine by having:

- A copy of the Early vaccine reactions including anaphylaxis: Government of Canada Canadian Immunization Guide readily available. See <https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-2-vaccine-safety/page-4-early-vaccine-reactions-including-anaphylaxis.html#p2c3a4>
- An anaphylactic kit assembled as per above protocol and readily available. Orders for administering emergency medications are in the PCH Medication Standing Orders.

9. Administer Pneumococcal Vaccine

Administer 0.5 mL of injectable Pneu-P-23 vaccine intramuscularly into the deltoid muscle. Monitor the resident for adverse reactions for a minimum of 15 minutes.

10. Document Vaccination

Document each resident’s vaccine administration information in:

- **MHSAL Seasonal Influenza and Pneumococcal Vaccine Consent Form:**
 - **Section A** – Enter **Date** at top of page

- **Section B** – Answer question 1 of **Health History of Client**
 - **Bottom Section** – Check off the five interventions
 - Complete bottom section of **Seasonal Influenza and Pneumococcal Vaccine Consent Form** by entering **Date, Lot #, Manufacturer, Dose, Route, Site** and **Signature**.
 - Document specific name of the vaccine in the “Seasonal Influenza” area
- **Medication Administration Record:**
- Sticker labels will be distributed annually by Staff Development/Infection Prevention and Control. Affix the label to the resident’s MAR and complete the following information:
 - Name of vaccine
 - Vaccination site and route
 - Expiry date
 - Manufacturer
 - Lot number
- Ensure that the date of administration and provider’s signature is documented on the MAR.
- **Integrated Progress Notes**
- Document that there were no contraindications to the resident receiving the vaccine and that the resident was well enough today to receive the vaccine.
 - Any adverse reactions if applicable
 - If vaccine was not administered, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, resident and/or substitute decision maker refusal).
- **Public Health Information Management System (PHIMS):**
- Submit documentation of pneumococcal immunizations for entering into PHIMS before the end of December.
- Fax copies of completed consent forms to Public Health Healthy Living Central Intake Fax # 204-428-2734.

11. Report All Adverse Events to MHSAL

Report all adverse events following immunization to MHSAL by completing and submitting the MHSAL Report of Adverse Events Following Immunization (AEFI) form available at http://www.gov.mb.ca/health/publichealth/cdc/docs/aefi_form.pdf

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<https://professionals.wrha.mb.ca/old/extranet/ipc/files/manuals/ltc/immunization.pdf>