

1.0	IMMUNIZATION PROVIDER RESPONSIBILITY	.1
1.1	AUTHORIZATION TO IMMUNIZE	1
1.2	Provision of Publicly Funded Immunizations by Registered Nurses Employed by Organization Other than Public Health	
1.3	Provision of Publicly Funded Immunizations by Community Vaccine Providers that are not Registered Nurses	. 1
1.4	NATIONAL ADVISORY COMMITTEE ON IMMUNIZATION (NACI GUIDELINES)	2
2.0	IMMUNIZATION COMPETENCY	3
2.1	Immunization Competencies Education Program	3
2.2	REGIONAL/JURISDICTIONAL IMMUNIZATION COMPETENCY POLICY	3
3.0	REFERENCES	4
4.0	APPENDICES	5
	ENDIX 2.1: REGIONAL AUTHORIZATION TO IMMUNIZE	
Аррі	ENDIX 2.2: REGIONAL IMMUNIZATION COMPETENCY POLICY	. 6

THIS CHAPTER MEETS THE FOLLOWING IMMUNIZATION COMPETENCIES FOR HEALTH PROFESSIONAL (PHAC, 2008): http://www.phac-aspc.gc.ca/im/pdf/ichp-cips-eng.pdf

14: Legal and Ethical Aspects of Immunization

♦ Competency: Acts in accordance with legal and high ethical standards in all aspects of immunization practice.



1.0 IMMUNIZATION PROVIDER RESPONSIBILITY

1.1 Authorization to Immunize

- The Athabasca Health Authority (AHA), the Saskatchewan Health Authority (SHA) and First Nations
 Jurisdictions (FNJs), as employers, are responsible for determining who can immunize and under
 what circumstances. They are also responsible for ensuring safe immunization practices.
- These decisions must be in keeping with requirements of the respective professional regulatory bodies such at the Saskatchewan Registered Nurses Association.
- The designated AHA, SHA or FNJ Medical Health Officer, Public Health Nurse Manager and Communicable Disease/Immunization Coordinator are in the best position to advise and manage these issues.
- It is advisable that regions insert their policy into <u>Appendix 2.1: Regional Authorization to Immunize Policy.</u>

1.2 Provision of Publicly Funded Immunizations by Registered Nurses Employed by Organizations Other than Public Health

Registered nurses that do not work in public health and oversee or provide immunization services must do so in keeping with the requirements outlined in documents developed by the *Saskatchewan Registered Nurses Association* (SRNA):

- Medication Management for RNs: A Patient Centred Decision-Making Framework. (September 2015). Available at:
 http://www.srna.org/images/stories/Nursing Practice/Resources/Medication Management for RNs FINAL 2015 09 03 Rev 2015 09 30 Web.pdf
- Ask a Practice Advisor. Influenza Season is Right Around the Corner Are you Prepared? (2016)
 Fidyk, M. and Cooke, D. Available at:
 http://www.srna.org/images/stories/Nursing Practice/Resources/AAPA NB2016Summer.pdf

1.3 Provision of Publicly Funded Immunizations by Community Vaccine Providers that are not Registered Nurses

Community vaccine providers may include physicians, pharmacists, licensed practical nurses and emergency medical technicians (paramedics) who work within their legislated professional scope of practice.

Community vaccine providers will:

- Follow the SIM guidelines for immunization.
- Ensure that vaccines maintain their potency (optimal transportation, storage, handling, and conservation), and report any cold chain breaks to the local health unit within 1 working day.
- Meet regional reporting requirements related to clients being immunized with publicly-funded vaccines.
- Report all adverse events following immunization to the local health unit according to provincial legislation. For more information, refer to SIM, <u>Chapter 11</u>, <u>Adverse Events Following</u> <u>Immunization</u>.



1.4 National Advisory Committee on Immunization (NACI Guidelines)

The Saskatchewan Immunization Manual is primarily based on the recommendations of the National Advisory Committee on Immunization (NACI), as stated in the online Canadian Immunization Guide (CIG) (Canada Communicable Disease Reports (CCDR), and the Saskatchewan Communicable Disease Control Manual. CIG provides the basis for immunization programs in Canada. It is available on-line at: http://www.phac-aspc.gc.ca/publicat/cig-gci/index-eng.php.

Saskatchewan publicly funded immunization programs may differ from the NACI guidelines. In such cases, SIM policies will be used to direct publicly-funded immunization programs in Saskatchewan.

- 1. NACI publishes licensed vaccine statements in the CCDR. These statements supersede the related guidelines in the current CIG and are available from http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/index-eng.php
- 2. Immunization providers should have access to SIM and follow the outlined policies and publicly funded immunization program parameters.



2.0 IMMUNIZATION COMPETENCY

2.1 Immunization Competencies Education Program

The national *Immunization Competencies Education Program* was developed by the Canadian Paediatric Society (CPS) in association with the Public Health Agency of Canada (PHAC) and Health Canada (HC), and provides participants with an in depth review of the *Immunization Competencies for Health Professionals* (PHAC, 2008), a national consensus on the education and training required by immunization providers. It is available on-line at: http://www.advancingpractice.com/p-68-immunization-competencies-education-program.aspx.

The *Immunization Competency Education Program* assists all health professionals who provide immunization to be knowledgeable vaccine providers, educators, and advocates for immunization. A vaccine provider should demonstrate the attitudes, knowledge, and clinical skills necessary to provide safe and effective immunization programs. Mirroring the reality of frontline providers, 14 modules have been developed and reviewed by an interdisciplinary team of physicians, nurses and pharmacists.

Upon successful completion of this continuing education course, the health professional will be better able to:

- Understand the importance of the key principles of the Immunization Competencies for Health Professionals when integrating immunization into their practice setting.
- Counsel patients regarding many of the key immunization issues.
- Increase the public's confidence in vaccines.
- Promote safe and competent immunization practices.
- Work collaboratively with other professionals to promote cooperation on important public health issues such as immunization.

2.2 Regional/Jurisdictional Immunization Competency Policy

Health regions and First Nations jurisdictions may implement their own immunization competencies procedure if a provincial procedure is not available. These may be inserted into <u>Appendix 2.2:</u> <u>Regional Immunization Competency Policy.</u>



3.0 REFERENCES

Canadian Pediatric Society. (No date). *Immunization Competencies Education Program.* Available at: http://www.advancingpractice.com/p-68-immunization-competencies-education-program.aspx

Public Health Agency of Canada. *Canadian Immunization Guide*. (Evergreen Ed.)Ottawa, On: Available at: http://www.phac-aspc.gc.ca/publicat/cig-gci/index-eng.php

Public Health Agency of Canada. *Canadian Communicable Disease Reports*. Available at: http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/index-eng.php

Public Health Agency of Canada (2008). *National Immunization Competencies for Health Professionals*. Ottawa, ON: Author. Available at http://www.phac-aspc.gc.ca/im/pdf/ichp-cips-eng.pdf

Saskatchewan Registered Nurses Association (2003). Guidelines for Immunization Administration and Immunization Programs. Regina, SK. Available at: http://www.srna.org/images/stories/pdfs/nurse-resources/immune-admin-2003.pdf

Saskatchewan Registered Nurses Association (2007). *Medication Administration Guidelines for Registered Nurses. Regina, SK.* Available at: http://www.srna.org/images/stories/pdfs/nurse-resources/medication-admin.pdf



4.0 APPENDICES

Appendix 2.1: Regional Authorization to Immunize Policy (Insert Regional/Jurisdictional Policy)



Appendix 2.2: Regional Immunization Competency Policy (Insert Regional/Jurisdictional Policy)