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

#10: Documentation

- Competency: Documents information relevant to each immunization encounter in accordance with national guidelines for immunization practices and jurisdictional health information processes.

#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 DOCUMENTATION OF IMMUNIZATION

1.1 Role and Importance of Documented Immunization Records

All immunization providers shall confer with the individual or the individual's parent/guardian/caregiver to verify the completeness of the presented immunization record, in an attempt to ensure the individual's record is up to date and to prevent immunization errors.

Immunization records are permanent records and serve three important roles:

- To provide quality public health services, assist with disease diagnosis and treatment, and control the spread of vaccine-preventable diseases.
- To measure and assess the effectiveness and coverage of provincial immunization programs.
- To ensure that all immunizations are accurately and completely recorded, and available to health care providers and individual clients.

1.2 Panorama

1. To ensure that a complete immunization record is maintained, every immunization administered to an individual will be documented by Public Health into the electronic provincial immunization registry, known as Panorama.
2. Client immunization records may:
   a. Be shared with health care professionals in order to provide public health services;
   b. Assist with diagnosis and treatment; and,
   c. Assist to control the spread of vaccine preventable diseases.
3. Panorama is a secure electronic system used in Saskatchewan to record and manage immunization records and the health information related to immunization for all Saskatchewan residents. The information entered in Panorama will be used to:
   a. Manage client immunization records;
   b. Notify clients if they or their child needs an immunization; and
   c. Monitor how well vaccines work in preventing vaccine preventable diseases.
4. Only authorized users will have access to Panorama as designated by eHealth, the Ministry of Health and regional/jurisdictional health authorities.
5. Prior to persons gaining access to Panorama, an "Account Authorization Form" must be submitted for them.
   a. A designate from each health jurisdiction (e.g., Manager of Public Health Nursing) shall determine which staff members require access to Panorama and their level of access.
   b. All authorized staff will have their own Panorama account and password.
   c. The account authorization form can be obtained from the Panorama home page, and completed on-line http://www.ehealthsask.ca/services/panorama/immun/Pages/TrainingTOC.aspx
   d. The eHealth service desk will contact the user and provide them with a password to access Panorama.

6. The Panorama documentation manual can be accessed on the Panorama home page and should be referred to for further information: http://www.ehealthsask.ca/services/panorama/immun/Pages/TrainingTOC.aspx
7. For technical concerns, contact the eHealth service desk toll-free at 1-888-316-7446 or by email at: servicedesk@ehealthsask.ca
8. Non-technical questions should be directed to the regional/jurisdictional Public Health Nurse Manager or Panorama Key User.

2.0 PROVINCIAL IMMUNIZATION RECORD GUIDELINES

2.1 Immunization Record Confidentiality and Security

1. Immunization records are confidential personal health information and part of the client's health record. Electronic and paper record must be kept secure and paper records should be stored in a designated "staff only" area. Do not leave records in an unsecured area where they could be accessed by unauthorized individuals.
2. Clients or their caregivers should be informed that their immunization records may be shared with public health officials in other jurisdictions for the purposes of providing continuous public health services, assisting with disease diagnosis and treatment, and to control the spread of vaccine-preventable diseases.
3. Immunization information shall be accessed by authorized persons who require it in order to deliver health services.
4. Immunization information should be sent only to known confidential agency fax numbers. The correct fax number and the person who will be receiving the information should be confirmed before information is transmitted.
5. Emailing immunization records is prohibited because of unknown internet security risks.

2.2 Agency-Held Immunization Records

- All immunization providers or their respective agencies must maintain permanent immunization records for all clients. An agency paper record shall be maintained by the health care provider for a minimum length of time as specified by agency policy.
- All immunization services must be immediately and accurately documented by designated staff at the point of service (e.g., consent form), and within 24 hours of administration on the appropriate forms (e.g., individuals' health record, immunization card and /or notice of immunization) when possible.
- Agency-held permanent client immunization records should contain the following information for every vaccine administered:
  - Informed consent for immunization documented as per regional/jurisdictional policy;
  - The agent standard abbreviation
  - The agent trade name;
  - The manufacturer;
  - The date given
  - The time given;
  - The dose number;
  - The anatomical site;
  - The dosage given;
  - The route of administration;
  - The lot number. Lot numbers are important to record as they are required in some situations (e.g., when a vaccine batch is recalled or has documented immunogenic failure);
  - The reason for biological products not administered (e.g., philosophical objection, previous disease, contraindication);
  - The name and title of the person administering the biological product; and,
  - Any reactions following immunization (e.g., fainting, adverse events following immunization (AEFI) and related MHO recommendations).

- At minimum for historical immunization entry into Panorama, the following should be documented:
  - The agent standard abbreviation.
  - The date given.
    - Dates showing month/year only are to documented as follows:
      i. The first of a month is documented by default as a standard practice, unless that day is prior to the child's actual date of birth (e.g., for vaccines given a birth).
      ii. Estimating dates to calculate valid minimum intervals is not recommended as a standard practice, but up to the nurse's discretion.
- When available, client information such as serologic results of immunity (e.g., rubella, hepatitis B), previous diseases (e.g., varicella) should be documented as *Special Considerations* on the client's Panorama immunization record; **do not** documented actual titre values into Panorama. Tuberculin skin test results are documented as negative or positive, with measurement if available.
- Written immunization records shall be legible and recorded in permanent ink, in accordance with regional/jurisdictional documentation standards.

2.3 Client-Held Immunization Records

1. A printout of the Panorama immunization summary page should be provided to the client/caregiver at the end of each immunization appointment.
2. For clients who have a paper immunization record, document the required information on both the agency and client immunization record for each immunization appointment.
3. Immunization providers should:
   - Instruct parents/caregivers and clients to keep all immunization records in a safe place for future reference (e.g., post-secondary or work entry), and bring them to each immunization visit.
   - For accuracy and completeness, encourage clients who have received non-publicly-funded immunizations to bring these records for documentation on their Panorama or paper immunization record.
4. **Client immunization records that are held by the client on applications such as Immunize.ca should not be accepted as accurate or formal immunization records as they are entered by the client into the application.**

3.0 OBTAINING IMMUNIZATION RECORDS

3.1 Immunization Record Requests and Transfers

1. Immunization information may be shared on a need to know basis within the circle of care of the client, for purposes of providing continuous health services. Information may be shared with those outside the circle of care if the appropriate agreements, process, and record keeping is followed or the legal basis upon which sharing will occur has been confirmed and documented. **Refer to regional/jurisdictional policies pertaining to the release of client information.**
2. Client immunization records may be provided to next-of-kin or designated guardianship upon request as per regional/jurisdictional policies pertaining to the release of client information.

4.0 ERRORS

4.1 Immunization Administration Errors

Immunization administration errors may compromise client safety, and should be monitored and rectified.

1. All known or discovered immunization errors must be immediately reported to the immunization supervisor, according to agency policy.
2. Immunization administration error reports should be accurate, concise, factual, and objectively written by the staff person who administered the vaccine and/or by the person who discovered the error.

4.2 Immunization Documentation Errors

Uncorrected immunization documentation errors may impact future clinical decisions related to future immunizations, potentially compromising the client's protection against vaccine-preventable diseases.

1. All known or discovered immunization documentation errors must be immediately reported to the immunization supervisor, according to agency policy.
2. On paper immunization records, corrections should be made in pen, by drawing a straight line through the error and initialling it. The corrected documentation must include the date and the writer's signature.

5.0 REFERENCES

Public Health Agency of Canada. (2012). *Canadian Immunization Guide*. (*Evergreen Ed*.). Available at: http://www.phac-aspc.gc.ca/publicat/cig-gci/index-eng.php

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

Panorama Gateway: http://www.ehealthsask.ca/services/panorama/immun/Pages/TrainingTOC.aspx

6.0 APPENDIX

Appendix 4.1: Regional/Jurisdictional Documentation Policy (Insert policy)