

INFECTION PREVENTION AND CONTROL IN COVID-19 VACCINATION CLINICS

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GUIDANCE

This guidance is to inform all Health Care Workers (HCWs) in the COVID-19 Vaccination Clinics about the recommended Infection Prevention and Control (IPC) measures including Injection Safety, Environmental Cleaning and Waste Management. Based on this guidance countries or ministries could develop their own Standard Operating Procedures based on their own standard practices, resources and what is appropriate for their context.

Injection safety, waste management and environmental cleaning

Consider these key points when establishing COVID-19 vaccination services:

Principle

- Standard precautions should be applied during COVID-19 vaccination activities.
- The vaccination clinic should be clean, have adequate natural/artificial lighting, have access to safe, adequate and functional water, sanitation and hygiene facilities (including healthcare waste management facilities).
- The vaccination area should be well ventilated with adequate space to facilitate physical distancing. If possible, ensure adequate natural ventilation.
- Adequate and functional hand hygiene facilities must be made available at the entrance and exit areas at each vaccination clinic and at the points of care and within 5 meters of latrines.
- Gloves may not be necessary, depending on each setting and the local protocols. If gloves are used, they must be removed and disposed of after each vaccination, and hand hygiene performed before a new pair of gloves are put on prior to the next vaccination.
- Ensure hand hygiene is performed between clients.
- Ensure adequate supplies of IPC consumables and equipment.
- To ensure physical distancing, 1 metre lines can be clearly marked on the floor throughout the vaccination clinic with tape, paint, stickers or a thick permanent pen. Clinics should also have marked one-way foot traffic flow with clearly marked entry and exit areas.
- Ensure having a medically equipped post-vaccination observation area for dealing with possible vaccine adverse reactions.

IPC materials required

In settings with no COVID-19 cases, standard IPC measures should be followed at vaccination clinics, although clinics should always be as prepared as possible for community cases.

In settings where there are known COVID-19 cases, vaccination clinics should consider:

- Personal protective equipment (PPE) should be made readily available: medical mask for health workers and individuals to be vaccinated.
- Provide access to hand hygiene supplies such as (alcohol-based hand rub containing between 60 – 80% alcohol), liquid soap, running clean water, single use paper or cloth towels).
- Colour coded waste bins/waste bags marked with 'INFECTIOUS WASTE' can be used for medical waste. Avoid using green and black bags for infectious waste as this is associated with general waste.
- Puncture and leak proof Safety boxes or *Sharps* container
- 0.5 ml AD syringes and needles (gauge 23- gauge x 1 inch), alcohol wipes.
- Cleaning equipment, detergent for cleaning and disinfection solution e.g. alcohol 70%, 0.1% sodium hypochlorite (is recommended for COVID-19 virus).

Recommended IPC actions during vaccination procedure

Hand hygiene:

- Ensure hand hygiene posters are available in the clinics.
- Adequate and functioning hygiene facilities should be available at the entrance and exit points of the clinic and at points of care in the clinic.
- All staff should perform hand hygiene with either alcohol-based hand rub for 20–30 seconds or wash with soap and water for 40–60 seconds at the start and end of their shift and between client vaccinations.
- Perform hand hygiene before putting on and after removing PPE such as mask and gloves after handling waste.
- Hand hygiene should also be available for clients to use.

Injection Safety Procedures:

HCWs should:

- Perform hand hygiene before preparing injection for vaccination.
- Check that the contents of the vial are not frozen and check the expiration date. Record the vaccine lot number (or scan the QR code on the vial or carton).
- Wipe the diaphragm (septum) of the vaccination vial with a single use swab or cotton ball containing 70% alcohol and allow to dry before piercing the vial with a sterile needle.
 - syringe for vaccine injections must be sterile and disposable.
 - separate needle and syringe should be used for each injection.
- If multidose vials are used, ensure the following measures are followed to avoid contamination of the vial:
 - Prepare the vaccine (to inject) just before the injection
 - Use a sterile needle every time the multi-dose vial septum is pierced. Do not leave a needle in the stopper of the vial.
 - Label the multi dose vial with date and time it was first opened and used and discard at the required time. Discard at the end of the immunization session, or within 6 hours of opening.
 - Discard the multidose vial immediately if sterility is questioned, compromised or if not properly labelled with date when opened. Do NOT refreeze thawed vaccine
 - For skin preparation at the site of injection, follow your national policies.
 - Do not mix vaccine/solution from different vials. E.g. If left over from a vial, do not combine with the vaccine from another vial (if quantity is not sufficient for a vaccine dose, discard the left over).

Environmental Cleaning:

- The procedures for environmental cleaning in the context of COVID-19 should be followed. This involves a 2-step clean:
 - First, use a solution of water/neutral detergent to clean all hard surfaces and all frequently touched surfaces (e.g. benches, door handles, furniture, light switches). Rinse and let it dry.
 - Second, disinfect with disinfectant (0.1 % hypochlorite solution) all hard surfaces and all frequently touched surfaces.
- Wipe small environmental surfaces such as vaccination preparation benches with 70% alcohol.
- Perform cleaning and disinfection of the vaccination clinic at least twice a day and follow-up cleaning of the environment when necessary.

Waste management:

- Consider the use of safety syringe with auto-retractable needle. Used syringes and needles must be disposed directly into a safety boxes to avoid needle stick injuries.
- Do not recap needles, discard directly into a safety box.
- Seal off safety boxes once they reach $\frac{3}{4}$ full and store in a safe place to await collection for final disposal.
- Place used empty vaccination vials into an infectious waste bag or waste containers. The infectious waste bag/container must be labelled 'INFECTIOUS WASTE'.
- Place all used PPE into a separate infectious waste bag or container, waste bags/containers must be labelled 'INFECTIOUS WASTE'.
- Any infectious waste bag should be sealed once it is $\frac{3}{4}$ full, before transporting it to the waste treatment site.
- Medical waste should not be mixed with the general waste. In the situation when they are mixed, the general waste should be considered as medical waste.

References

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This document has been developed in accordance with global guidance and contextualized to the Pacific context by SPC, and WHO from the COVID-19 Pacific Joint Incident Management Team.



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