

SECTION 3:
RESIDENTIAL CARE AND
ASSISTED LIVING FACILITY
IMMUNIZATION
PROCEDURES



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FACILITY IMMUNIZATION PROCEDURES

In the assisted living and residential care environment, the structure and committees that are a part of nursing facilities often do not exist. In addition, many facilities do not have staff nurses to administer the vaccines to the residents. These differences create a need for a modified approach to immunization in this setting.

Step 1: Develop a mechanism for on-site administration of immunizations.

Because assisted living and residential care facilities may not have staff members who are qualified to administer immunizations, it may be necessary to make arrangements for an outside provider to come to the facility periodically to administer vaccines. The outside provider may be a home health agency or a contract nurse. In Oregon, pharmacists are also permitted to administer vaccines and may be available to assist with this task. Some residents may have their own physician administer immunizations at the physician's office.

For newly admitted residents, arrangements should be made for vaccinations as soon as is feasible after admission per pre-print or standing orders. In the fall of each year, influenza vaccine should be offered to all residents and administered on-site to those who accept. The immunization provider should be responsible for billing Medicare for the cost of the vaccines and vaccine administration.

Immunization of staff is increasingly being recognized as an important part of protecting long-term care residents from infectious diseases, especially influenza. Facilities should strongly encourage staff to receive annual influenza immunizations.

Step 2: Educate residents about vaccine-preventable diseases and the benefits and risks of immunization.

Educate current residents and newly admitted residents about the benefits and risks of immunization against influenza and pneumococcal disease.

Posters and other consumer-oriented educational materials are available for use. See Section 8 for a list of resource materials that are available for order.

After the resident or responsible party has received information about immunizations, he or she should provide consent for any needed immunizations either upon admission or at any time in the future. This will preclude the need to get a separate consent form each time an annual influenza vaccine, or other needed immunization, is given. If pre-printed orders are used, the prescribing health care provider should update and sign them annually.

Step 3: Immunize current residents and new arrivals.

Establish a date and make arrangements for immunizations for residents. Put up posters and distribute reminders to the residents prior to the day of the immunization service. Resource materials to support these activities are listed in Section 8 of the manual.

Establish a regular immunization day in the facility (perhaps once or twice per month) to immunize new arrivals for pneumococcal disease as needed. During the influenza season, influenza vaccine should also be made available.

Step 4: Evaluate the Immunization Program.

It is important to periodically evaluate the effectiveness of the immunization program. The percent of residents immunized with the two key vaccines (influenza and pneumococcal) should be continually monitored. The Healthy People 2010 goal for both pneumonia and influenza immunization rates for nursing home residents is 90%. If a significant number of residents are not immunized, what are the barriers? Are the facility procedures being followed? Are residents frequently refusing the vaccines? If so, why are they refusing?

If the staff determines that the immunization program is less than fully effective, the procedures should be reviewed. Also, review the process for educating residents and responsible parties about immunization issues. What improvements can be made to increase immunizations?

Computer software that tracks the immunization status of residents and employees has been developed by OMPRO. For information, call (503) 279-0100.



Sample Immunization Policy and Procedures for Assisted Living and Residential Care Facilities

IMMUNIZATION POLICY:

All residents will be immunized against vaccine-preventable diseases that may be encountered in this facility. These vaccines will be provided to all persons upon admission, unless medically contraindicated or unless the resident or his or her responsible party refuses.

Upon admission:

1. Obtain residents' vaccination status.
2. Advise residents on the benefits and adverse effects of each vaccine prior to administration of the vaccines.
3. If resident or responsible party consents to immunizations:
 - ❖ obtain/verify physician's order unless standing orders are being used;
 - ❖ administer immunizing agents per manufacturer guidelines, ideally within 72 hours of admission;
 - ❖ monitor for any adverse reactions for 15-20 minutes after giving the vaccine;
 - ❖ document the immunization in the resident's Immunization Record;
 - ❖ document any adverse reactions in the medical record and in the resident's Immunization Record and notify the attending physician.
4. If resident or responsible party refuses an immunizing agent included in these orders:
 - ❖ document refusal and the reason(s) on the immunization record.
5. Track the immunization status of individuals who are not immunized for any reason using the "Immunization Status Tracking Form" on pages 27 and 28. Immunize all residents who consent to immunization when vaccines are available.

Document immunization refusal in the immunization record.