WHO’s guidance on Infection prevention and control procedures for COVID-19 vaccination activities

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WHO guidance for safe COVID-19 vaccination


https://apps.who.int/iris/handle/10665/33871
Key infection prevention and control principles for safe COVID–19 vaccination

- **Standard precautions** to be applied during any vaccination activity are also valid for COVID-19 vaccine delivery.
- **Additional IPC precautions** are necessary in the context of the COVID-19 pandemic to reduce the risk of SARS-CoV-2 transmission (e.g. mask use)
- Critical to provide with **specific training for** health workers and targeted information for the public regarding IPC measures for safe COVID-19 vaccine delivery
- **A clean, hygienic and well ventilated environment**, appropriate waste management and adequate spaces that facilitate best IPC practices (e.g. physical distancing) are necessary for COVID-19 vaccination activities.
- **National guidance and protocols** for IPC measures including those related to COVID-19, should be consulted and adhered to.
Phases for the implementation of COVID-19 vaccination

**Preparation and planning phase:**
- Staffing considerations
- Development of local IPC guidance and standard operating procedures
- Environmental considerations and engineering controls
- IPC supplies

**Operational phase - implementation of key IPC measures and environmental controls**
- Hand hygiene
- Appropriate use of PPE
- Injection safety
- Environmental cleaning and disinfection, and waste management
Develop local IPC guidance and Standard Operating Procedures (SOPs) including:

- **screening policies** for COVID-19 signs and symptoms of staff and individuals arriving for vaccination
- **key IPC measures**
  - to be taken by anyone in the vaccination area or clinic
  - for safely administering COVID-19 vaccines
- **cleaning and disinfection** of the environment;
- appropriate **waste management**, including environmentally friendly treatment methodologies and solutions to minimize both general and medical waste
- **visual reminders**
- **training materials** for relevant staff and **educational and informational materials** for the public
Ensure availability of IPC supplies

- **Ensure adequate supplies of medical masks** for vaccinators and for individuals to be vaccinated who may come without a mask;
- **Ensure sufficient supplies of other PPE** (eye protection/gloves/gowns) in case health workers need to use them
- **Other supplies:**
  - soap, clean water, Veronica Buckets (if sinks are not available) and disposable or clean towels
  - alcohol-based hand rub products
  - thermo-scans for temperature screening
  - tissues
  - waste bins/waste bags
  - safety boxes, preferably puncture-and leak-proof
  - cleaning and disinfection equipment and products
  - visual reminders and signage/floor markers
  - physical barriers to aid spatial separation;
- **Identify suitable areas for storage**
Setting up vaccination sites: environmental & engineering controls

Vaccination sites should be held in a clean and hygienic environment that facilitates IPC practices, including:

- Separate entry and exit points, and one way flow of patients
- Adequate screening area
- Physical spacing of participants and health workers
- Vaccination stations at least 1 metre apart
- Adequate ventilation (mechanical, natural or hybrid) of all areas
- Adequate hand hygiene stations
- Adequate space for vaccine storage and preparation
- Signage including reminders about reporting COVID-19 signs and symptoms, mask wearing, hand and respiratory hygiene, physical distancing.
- Adequate cleanability of all areas and equipment
- Appropriate system for waste management, including safe disposal of sharps
Administrative and engineering controls
Standard Infection Prevention Control strategies for vaccination sessions

For more information on infection prevention and control,

Aide memoire: Infection prevention and control (IPC) principles and procedures for COVID-19 vaccination activities

https://apps.who.int/iris/handle/10665/338715

Infection Prevention and Control (IPC) for COVID-19

https://openwho.org/courses/COVID-19-IPC-EN

Hand hygiene

https://openwho.org/courses/IPC-HH-en

Safe Injection practices

https://openwho.org/courses/IPC-IS-EN

- **Hand hygiene**: use alcohol-based hand rub or clean water and soap
- **PPE**: wear a medical mask.
- **Environmental cleaning and disinfection**: maintain a clean environment, especially high-touch surfaces (e.g. chairs, tables, door handles).
- **Apply safe injection practices** and **safe disposal of waste**.
The type of PPE used will vary based on the health service provided, the individual risk-assessment, and additional transmission-based precautions needed.

For delivering COVID-19 vaccines, the following PPE is recommended:

- Medical masks – for the health worker
- Medical or fabric mask – for the person receiving the vaccine

Note: Gloves are **NOT** indicated for intramuscular injections unless there is skin breakdown or body fluid exposure is anticipated.

The following PPE items should be promptly available to be used when dealing with vaccine adverse events, to prevent exposure of non-intact skin to blood or body fluids or if a suspected case of COVID-19 is identified during the screening process:

- gown;
- gloves;
- medical mask
- eye protection: face shield or goggles.

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**Mask use in the context of COVID-19**

Interim guidance, 1 December 2020

[https://apps.who.int/iris/handle/10665/337199](https://apps.who.int/iris/handle/10665/337199)
Hand hygiene

Vaccinators should always perform hand hygiene, preferably using alcohol-based hand rubs given their setting:

- before putting on and removing PPE (e.g. mask)
- before preparing the vaccine (especially when multi-dose vials are used) and
- between each person/vaccine administration
Hand hygiene

Alcohol-based hand rub dispensers or hand-washing stations.
Gloves

- Gloves are **NOT indicated** for intramuscular or intradermic injections.
- Single-use gloves are indicated if there is any skin breakdown.
- If used, they do not replace the need for performing hand hygiene between each vaccine administration and for other indications.
- Applying alcohol-based hand rubs on gloved hands is strongly discouraged.

The seven steps to safe injections

1. Clean workspace
2. Hand hygiene
3. Sterile safety-engineered (auto-disabled - AD) syringe*
4. Sterile vial of vaccine and diluent
5. Skin cleaning
6. Appropriate collection of sharps waste
7. Appropriate waste management

*auto-disabled syringes, ideally with a sharps injury protection feature. If these are not available, sterile single-use syringes and needles should be used.

WHO guideline on the use of safety-engineered syringes for intramuscular, intradermal and subcutaneous injections in health care settings (2016).
https://apps.who.int/iris/handle/10665/250144
Safe waste disposal at health facility and in outreach/campaign

- Drop the used AD syringe needle end down into a safety box immediately after use.
- Never recap the needle.
- When the safety box is full (¾ of the box), keep in a secure place until proper disposal.
- Dispose of empty vaccine vials and other waste in a separate container or a waste bag.
- If for any reason PPE is contaminated, it should be disposed of as infectious waste in a separate container or a waste bag as all other hazardous waste.
Environmental cleaning

- Ensure that cleaning and disinfection procedures are followed consistently and correctly according to WHO guidance.
  - Cleaning should be performed frequently; at least twice daily with special attention to high-touch surfaces (e.g. screening/triage areas)
- Minimize clutter to aid cleaning.

Resources

Refer to vaccine explainers for vaccine-specific information

  - IPC Aide Memoire – to be released soon (link when available)
- Infection Prevention and Control core documents
  https://www.who.int/health-topics/infection-prevention-and-control#tab=tab_1
- Infection Prevention and Control COVID-19 technical guidance documents
- OpenWHO IPC Channel – with additional trainings
  https://openwho.org/channels/ipc
- Mask use in the context of COVID-19 (Interim guidance 1 December 2020):
- WHO guide to local production – WHO recommended handrub formulations
  https://www.who.int/gpsc/5may/Guide_to_Local_Production.pdf?ua=1
### Suite of health service capacity assessments in the context of the COVID-19 pandemic

#### Hospital readiness and case management capacity for COVID-19

<table>
<thead>
<tr>
<th>No.</th>
<th>Module</th>
<th>Purpose</th>
<th>Status</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Rapid hospital readiness checklist</td>
<td>To assess the overall readiness of hospitals and to identify a set of priority actions to prepare for, be ready for and respond to COVID-19</td>
<td>Published</td>
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<tr>
<td>2</td>
<td>Diagnostics, therapeutics, vaccine readiness, and other health products for COVID-19</td>
<td>To assess present and surge capacities for the treatment of COVID-19 in health facilities with a focus on availability of diagnostics, therapeutics and other health products as well as vaccine readiness, availability of beds and space capacities</td>
<td>Published</td>
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<tr>
<td>3</td>
<td>Biomedical equipment for COVID-19 case management – inventory tool</td>
<td>To conduct a facility inventory of biomedical equipment re-allocation, procurement and planning measures for COVID-19 case management</td>
<td>Published</td>
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<td>4</td>
<td>Ensuring a safe environment for patients and staff in COVID-19 health-care facilities</td>
<td>To assess the structural capacities of health facilities to allow safe COVID-19 case management, maintain the delivery of essential services and enable surge capacity planning</td>
<td>Published</td>
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<tr>
<td>5</td>
<td>Infection prevention and control health care facility response for COVID-19</td>
<td>To assess infection prevention and control capacities to respond to COVID-19 in health facilities</td>
<td>Published</td>
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#### Continuity of essential health services in the context of the COVID-19 pandemic

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<tr>
<td>1</td>
<td>Continuity of essential health services: Facility assessment tool</td>
<td>- To assess the capacity of health facilities to maintain the provision of essential health services during the COVID-19 outbreak&lt;br&gt;- To assess workforce capacity during the outbreak, availability, absences, COVID-19 infections, support and training</td>
<td>Published</td>
</tr>
<tr>
<td>2</td>
<td>Continuity of essential health services: Community demand side tool</td>
<td>To conduct a rapid pulse survey on community needs and perceptions around access to essential health services and community resilience during the COVID-19 outbreak</td>
<td>In preparation</td>
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