

**2019/20**  
**Seasonal Influenza Vaccination (SIV)**  
**School Outreach**

**Roles and Responsibilities of VSS Doctors  
in Outreach Vaccination**



# Content

- Doctors' Responsibilities
- Handling Emergency Situations
- Preparing for Vaccination
- Clinical Waste Management



# Doctors' Responsibilities



# Doctors' Responsibilities

- Code of Professional Conduct – Clause 21.1



## CODE OF PROFESSIONAL CONDUCT

FOR THE GUIDANCE OF REGISTERED  
MEDICAL PRACTITIONERS

MEDICAL COUNCIL OF HONG KONG  
(Revised in January 2016)

011/12/15

## 21. Covering or improper delegation of medical duties to non-qualified persons

21.1 A doctor who improperly delegates to a person who is not a registered medical practitioner duties or functions in connection with the medical treatment of a patient for whom the doctor is responsible or who assists such a person to treat patients as though that person were a registered medical practitioner, is liable to disciplinary proceedings. The proper training of medical and other bona fide students or the proper employment of nurses, midwives and other persons trained to perform specialized functions relevant to medicine is entirely acceptable provided that the doctor concerned exercises effective personal supervision over any persons so employed and retains personal responsibility for the treatment of the patients.



# Doctors' Responsibilities

- The enrolled doctor is **overall held responsible** for the vaccination activity and vaccine recipients
- Vaccines should be **prescribed by the doctor**
- **Qualified and trained** health care personnel to administer the vaccines

**Onsite doctor is highly preferred to be present  
at the vaccination activity**



# Doctors' Responsibilities

- **Supervise** the vaccination activity:
  - a) Exercise effective supervision over the trained personnel who cover his duty and;
  - b) Retain personal responsibility for treatment of patients/ vaccine recipients
- Ensure sufficient number of **qualified and trained** health care personnel
- Personally and physically **accessible** in case of emergency



# Handling Emergency Situations



# Preparation for Emergency Equipment

- Keep a **written protocol** for emergency situations for reference
  - Must be made **available to all vaccination staff**
  - Made available for **EVERY** vaccination activity



- 1x Bag-valve Mask (*suitable size*)
- 1x BP monitor
- 1 x Adrenaline Auto-injector (*suitable dosage for target group*)

\*Make sure the medication is not expired



# Preparing Personnel to Handle Emergency Situations

- Must have **at least ONE** trained personnel in emergency management present at the venue for the entire duration of the vaccination activity
- **Onsite doctor is highly preferred to be present**
- Personally and physically **accessible** in case of emergency e.g. the doctor cannot be overseas during the vaccination activity
- Educate vaccination staff on **how to identify and handle** emergency situations
- Educate vaccination staff on **how to use** emergency equipment e.g. Adrenaline auto-injector and correct dosage



# Identifying Emergency Situations

- Severe allergic reactions, Anaphylactic shock
  - Shortness of breath, difficulty breathing
  - Wheezing
  - Generalized itching
  - Hives, swelling
  - Fainting



# Preparing for Vaccination



# Preparing Your Vaccination Team

- **Sufficient number** of qualified/trained healthcare personnel to provide service
- **For Primary Schools:** Complete **1<sup>st</sup> dose** vaccination **within 2 days** and **2<sup>nd</sup> dose** within **1 day**
- Sufficient **administrative support** for handling of consent forms, vaccination cards, other tasks
- Appropriate **staff to student ratio**
- Suggested manpower (*reference only*)

**PRIMARY SCHOOLS:** For one grade with 6 classes of students (approx. 240)

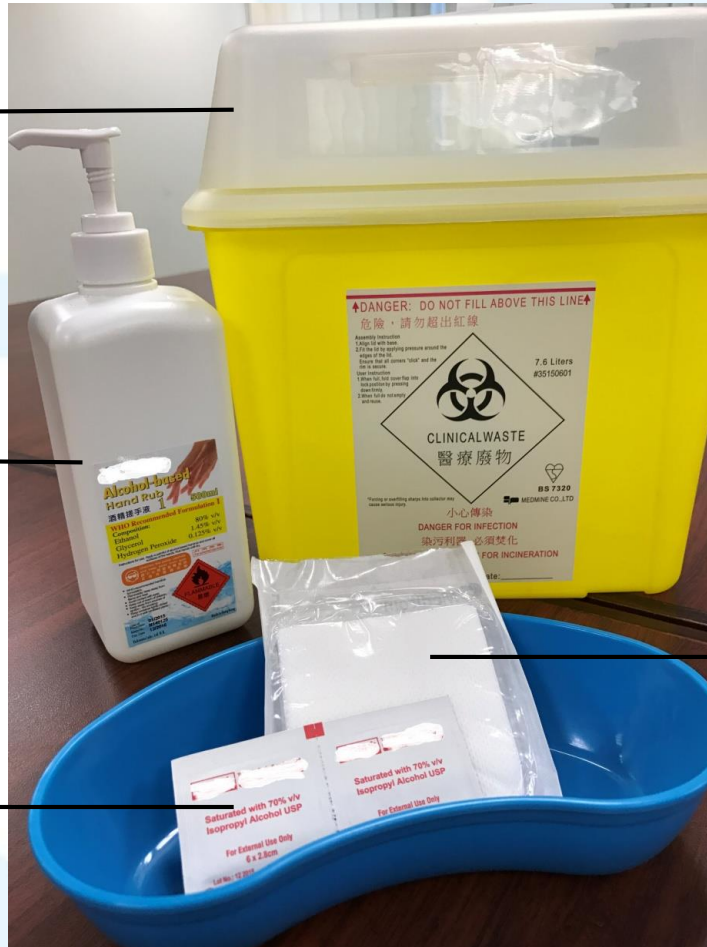
6 injection staff (incl. 1 team leader [doctor/nurse] + 1 with first aid training)

**KINDERGARTENS:** 2 injection staff for 1 student (1 for providing vaccination + 1 for positioning of child)



# Vaccination Equipment

Sharps  
Box



Alcohol-  
based  
Handrub

Sterile  
Alcohol  
Preps



Dry  
Sterile  
Gauze

Thermometer

# Ordering the Vaccines

## under KG/CCC Pilot and VSS Outreach

- Doctors are **entirely responsible** for ensuring sufficient quantity of vaccines for the recipients
- Obtain an **accurate** estimate and **pre-order** vaccines ahead of time directly from the drug companies
  - Approximately **June – July every year**
- Vaccines must **only** be received by **designated staff**
- When receiving vaccines, staff must cross-check the purchase order as well as inspect vaccines for any leak/damage



# Storing the Vaccines

- Importance of **cold chain maintenance**
- Stored at temperature between 2-8°C with **regular temperature checking by a MAX/MIN thermometer**
- Storage of vaccines under *KG/CCC Pilot and VSS Outreach*
  - ❑ Purpose-built vaccine refrigerators (PBVR) are preferable
  - ❑ If PBVR is not available, domestic fridge may be used **with MAX/MIN THERMOMETER**
  - ❑ Bar fridge is **NOT acceptable**

(Ref: *Hong Kong Reference Framework for Preventive Care for Children in Primary Care Settings – Module on Immunisation at*

[http://www.pco.gov.hk/english/resource/files/Module\\_on\\_Immunisation\\_Children.pdf](http://www.pco.gov.hk/english/resource/files/Module_on_Immunisation_Children.pdf))

# Delivering the Vaccines

## under KG/CCC Pilot and VSS Outreach

- Cold boxes should be equipped with:
  - **ICE PACKS**
  - **MAX/MIN THERMOMETER**
  - **INSULATING MATERIALS**
- Educate staff on **HOW** to pack the cold box, including measures such as:
  - Keeping cold boxes properly closed and avoid frequent opening
  - Importance of **cold chain maintenance**, regular checking with max/min thermometer recommend **at least twice daily**
  - Keep vaccines in **original packaging** prior to vaccination
  - Scheduling a trial session on packing the cold box



# Documentation and Record Keeping

- Code of Professional Conduct – Clause 1.1.3



## CODE OF PROFESSIONAL CONDUCT

FOR THE GUIDANCE OF REGISTERED  
MEDICAL PRACTITIONERS

MEDICAL COUNCIL OF HONG KONG  
(Revised in January 2016)

011/12/16

1.1.3 All doctors have the responsibility to maintain systematic, true, adequate, clear, and contemporaneous medical records. Material alterations to a medical record can only be made with justifiable reason which must be clearly documented.



# Documentation and Record Keeping

- Must document all vaccination clearly in the **vaccination record** and recipient's **vaccination card**:
  - *Name of recipient*
  - *Name of vaccination provider*
  - *Date of vaccination*
  - *Name of vaccine*
  - *Lot no. (should be documented in vaccination record)*
- Must provide a vaccination card to the vaccine recipient



# Clinical Waste Management

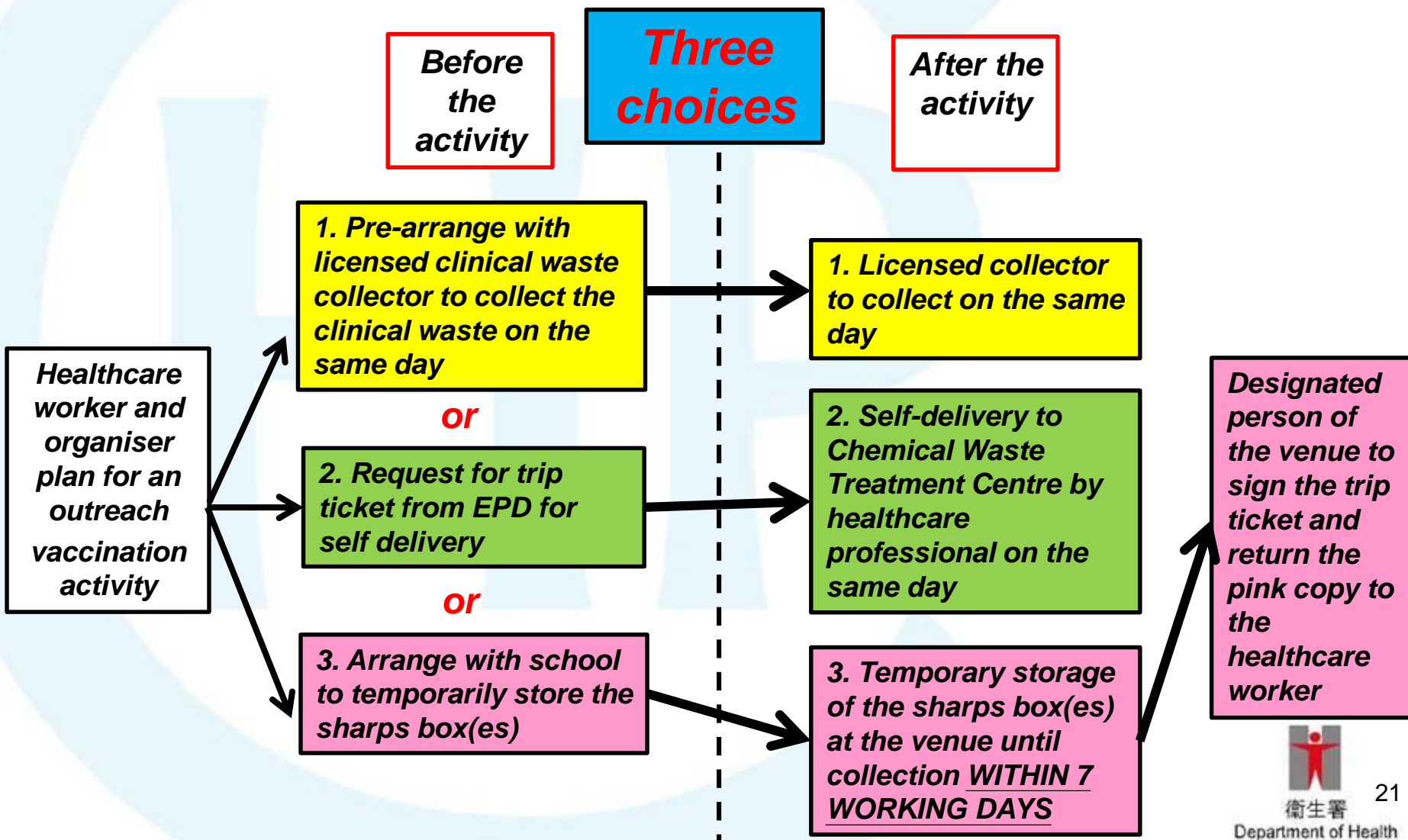


# Environmental Protection Department's Guideline on Handling Clinical Wastes

- Handle and dispose sharps and waste properly
- For details, please refer to:
  - Code of Practice (COP) for the Management of Clinical Waste (Small Clinical Waste Producers)  
([http://www.epd.gov.hk/epd/clinicalwaste/file/doc06\\_tc.pdf](http://www.epd.gov.hk/epd/clinicalwaste/file/doc06_tc.pdf)); and
  - Clinical Waste Web Guide  
(<http://www.epd.gov.hk/epd/clinicalwaste>)



# Disposing of Clinical Waste



# Preparing Proper Clinical Waste Containers

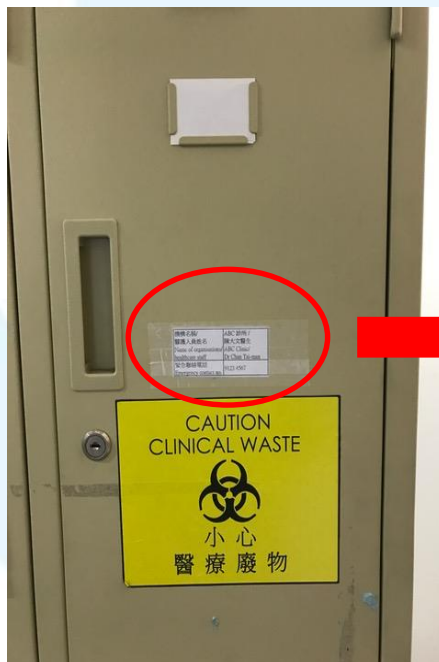
## Example of a Labelled Clinical Waste Container



Name of organisation/ healthcare worker	ABC Clinic/ Dr Chan Tai-man
Emergency contact no.	9123 4567
Address of clinical waste generation	DEF Elderly Centre, G/F, XX House, XX Estate
Date of sealing	25/11/2017

# Preparing Temporary Storage

- Store clinical waste in a **locked** and **labelled** cabinet
- Proper sanitary conditions
- Prevention of unauthorized access
- Arrange collection **within 7 working days** by designated person to sign trip ticket and return pink copy



## Example of Warning Sign and Label

Name of organisation/ healthcare worker	ABC Clinic/ Dr Chan Tai-man
Emergency contact no.	9123 4567



**Thank you!**

