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IX0300: Pneumococcal Vaccine for Residential Care

EFFECTIVE DATE: June 2009

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December 2012

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1.0 PURPOSE:

All persons being admitted to an Extended or Intermediate Care Facility are to be assessed for their status of having received a pneumococcal vaccine in the past and this information will be recorded on the resident's chart. If they have not had a pneumococcal vaccine, they will be offered the vaccine upon admission to the facility and this information will be recorded on the resident's chart.

2.0 GUIDING PRINCIPLES:

- 2.1** Streptococcus pneumoniae (pneumococcus) can cause serious invasive disease including bacteremia, meningitis and pneumonia in people with high-risk medical conditions and the elderly. Pneumococcal infection is spread by droplet/contact from one person to another by coughing, sneezing, close face-to-face contact and direct contact through saliva.
- 2.2** The pneumococcal polysaccharide vaccine is offered free to seniors 65 years and older and to persons 2 years of age and older with certain medical conditions including those who have no spleen or a spleen that is not functioning properly*, sickle-cell disease*, immune systems weakened by disease or medical treatment*, chronic liver disease including cirrhosis*, chronic hepatitis B or hepatitis C*, chronic kidney disease*, chronic heart or lung disease, transplant patients, diabetes, cystic fibrosis, chronic cerebrospinal fluid leak, cochlear implant candidate or recipient, alcohol dependency, homelessness and/or illicit drug use.* People in these groups should receive a second dose of vaccine five years after the first dose and this requires a physician order.
- 2.3** Residents of any age living in residential care are considered an at risk population for suffering complications from pneumococcal disease and should receive the vaccine upon admission to the facility if they have not already had the vaccine previously.
- 2.4** Contraindications for the vaccine include anaphylaxis reaction to the vaccine or component of the vaccine in the past. Possible reactions to the vaccine may include soreness, redness and swelling at the site of injection. Headache and mild fever may also occur. These reactions are mild and generally last 1 to 2 days.

3.0 PROCEDURE

- 3.1** All Residential Care facilities should have pre-printed physician orders for "pneumococcal vaccine on admission if resident has not been immunized in the past". Upon admission, staff is to seek out and document information about the resident's pneumococcal immunization

status by asking the resident and/or family, the resident's physician (contact office) and/or the Public Health office. Document information according to facility guidelines.

- 3.2 Residents who do not have a record of pneumococcal immunization with Public Health or their family physician require immunization by the facility – this should be done within two weeks of admission.
- 3.3 **Do not delay immunization if proof of prior immunization is not available within this two week time frame - when in doubt, with no documented proof: IMMUNIZE.**
- 3.4 It is recommended that facilities carry out yearly audits to ensure the procedure for administering and documenting pneumococcal vaccination in Residential Care Facilities is being implemented appropriately with the target being at least a 90% vaccination coverage compliance rate.

4.0 REFERENCE

- 4.1 **Public Health Agency of Canada.** Seventh Edition Canadian Immunization Guide 2006.
- 4.2 **BC Centre for Disease Control.** *Communicable Disease Control Immunization Program, Section VII – Biological Products, January 2010.*
- 4.3 **Required Organizational Practices 2012.** Accreditation Canada; pg 52.