



Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



Infection Prevention and Control Guidance for Community Immunization Clinics

This guidance outlines the infection prevention and control measures required for the set-up and safe operation of immunization clinics in community settings (e.g., community pharmacies, public health units, schools, community centres, arenas).



Note: For immunization in health-care facilities, follow the [infection control guidance](#) for the most relevant setting, including the [mask use in health-care facilities policy](#).

COVID-19 & communicable respiratory illness check



Screen all individuals for symptoms and risk factors associated with COVID-19 and communicable respiratory illness at the point of entry.

See the [COVID-19 entrance screening tool for health-care facilities](#). Direct individuals with symptoms to the [BCCDC website](#) to determine eligibility for testing and where to get tested.

Instruct clients to clean their hands upon entry and wear a mask that fully covers their mouth and nose. Provide masks in a hygienic manner (e.g., using tongs) to clients who do not have a mask. For immunization in community settings, clients can continue wearing their own masks and are not required to change to medical masks.



Clinic layout and supplies

Set up the clinic as follows:

- Provide hand hygiene stations at entrances/exit points, registration desk, immunization stations, after care area and for general use.
- Set up communicable respiratory illness and COVID-19 screening station(s) for all individuals entering the clinic at each designated entry point.
- Have a separate area for processing people who require extra support (e.g., a person who is unable to wear a mask because of a physical, behavioural or cognitive impairment or health condition).
- Use [signs and posters](#) to promote masking, respiratory etiquette and hand hygiene.
- Maintain existing physical barrier(s) installed during the COVID-19 pandemic if they do not impede normal operations.
- Respect personal space. Physical distancing or maintaining a distance of two metres between two or more people is no longer required.
- Capacity limits for higher occupancy waiting rooms/areas are no longer required but avoid overcrowding.



Respect personal space

Ensure sufficient equipment is available:

- Alcohol-based hand rub (ABHR) with 70% alcohol content.
- Cleaning and disinfection wipes that have a drug identification number (DIN) from [Health Canada's approved list of hard-surface disinfectants](#).
- Sharps containers at immunization stations.
- Medical masks for staff and for clients arriving without a mask.
- Other personal protective equipment (PPE) (e.g., gloves, eye protection), as required.
- Tables and chairs with cleanable surfaces (e.g., non-porous and smooth, free of cracks and crevices, can withstand frequent cleaning and disinfection).



Staff safety

Self-check for symptoms and risk factors associated with COVID-19 and communicable respiratory illness before each shift, in accordance with employer communicable disease plans. Do not come to work if feeling sick. Follow measures outlined in the [COVID-19 health-care worker self-check and safety checklist](#).



Hand hygiene: Perform frequent hand hygiene using soap and water or ABHR. See the [hand hygiene poster](#) for instructions. **Perform hand hygiene between every client interaction**, between breaks, before wearing PPE, in between each step when removing PPE, after using the restroom and any other time hands are potentially contaminated.

PPE for staff:

- Immunizers, screeners and other client or public-facing roles must wear a medical mask.
- Immunizers should wear gloves when administering intranasal influenza vaccine.
 - Conduct a [point-of-care risk assessment \(PCRA\)](#) to determine if any additional PPE is needed, such as gloves or eye protection.
- For non-client-facing roles (e.g., custodial or administrative), wear a medical mask and additional PPE as identified by the PCRA.
- Keep your medical mask on in between client interactions, unless PPE is damaged or visibly soiled. If gloves are worn, they should be changed in between each client, with hands cleaned after removal.
- Review the information on appropriate use of [PPE](#), including [how to wear a face mask](#) and proper [wearing](#) and [removing](#) of PPE.



Cleaning and disinfection

Ensure proper cleaning and disinfection of surfaces.

- Clean and disinfect immediate work and client area after each client leaves the immunization station.
 - Use a two-step process (e.g., clean with first wipe, then disinfect with a second wipe). Use friction action and move from clean to dirty areas.
- Clean and disinfect commonly touched surfaces twice a day.
- Clean and disinfect public washrooms twice a day and as needed.
- At the end of the day:
 - Clean and disinfect:
 - Tables and chairs
 - All other horizontal surfaces or commonly touched surfaces
 - Physical barriers (e.g., dividers or screens, if used)
 - Transport coolers and equipment
 - Ensure biomedical waste is picked up.
- See the [environmental cleaning and disinfection for clinic settings](#) poster for more information.



Resources

BC Centre for Disease Control. "[Guidance for Influenza Vaccine Delivery in the Presence of COVID-19](#)".

Government of Canada. "[Hard-surface disinfectants and hand sanitizers \(COVID-19\): List of disinfectants with evidence for use against COVID-19](#)".

Government of Canada. "[Planning guidance for immunization clinics for COVID-19 vaccines](#)".

US Centers for Disease Control and Prevention. "[Guidance for Planning Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations](#)".

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