

# Practical Guidance when Providing a Pharmacy Vaccination Service during the COVID-19 Pandemic

August 2020  
Version 1

## Background

This guidance should be read in conjunction with the PSI's [Guidance on the Provision of Vaccination Services by Pharmacists in Retail Pharmacy Businesses](#), (PSI Vaccination Guidance) which sets out the legal and professional requirements which need to be fulfilled in order to safely provide a vaccination service.

PSI has also produced [Guidance on the Provision of an Influenza Vaccination Service for Children Aged 6 Months and Older](#) which must be read and considered by all pharmacy owners, superintendent pharmacists and supervising pharmacists who wish to provide an influenza vaccination service to children.

In addition, all vaccination services carried out during the pandemic, must be provided in line with the PSI's [COVID-19 Operational Standards for Pharmacies](#).

## The importance of providing a vaccination service during the COVID-19 pandemic

The World Health Organisation (WHO) and Health Service Executive (HSE) have emphasised the importance of providing safe administration of vaccines, as far as possible, during the COVID-19<sup>1</sup> pandemic to help reduce the risk of vaccine preventable diseases. Pharmacists and pharmacy teams play an important role in providing vaccination services, in delivering the national immunisation programme, and providing reliable advice on vaccinations to the public.

The way that vaccination services are provided will need to be adapted to ensure recommended public health measures are in place to help protect patients and staff, and minimise the risk of exposure to, and transmission of, COVID-19.

Key principles to prevent the spread of COVID-19 include;

- Ensuring measures are in place to minimise the chance for exposure
- Adhering to social distancing, respiratory hygiene, cough etiquette and hand hygiene
- Environmental cleaning

## Purpose of this guidance

The aim of this document is to give practical guidance which will enable policies and procedures to be put in place for the continuation of safe and effective vaccination services in pharmacies during the COVID-19 pandemic.

<sup>1</sup> The virus is called Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) and the disease that it causes is called Coronavirus Disease 2019 (COVID-19). For ease of reference throughout the document COVID-19 will be used interchangeably to refer to both the virus and the disease.

Whilst this guidance can be read and used by all vaccinating pharmacists, it is intended to be used primarily by those who have governance responsibilities for pharmacies, i.e., pharmacy owners, superintendent pharmacists and supervising pharmacists.

When 'you' is referenced throughout the guidance, this refers to pharmacy owners, superintendent pharmacists and supervising pharmacists.

Given the fast-evolving nature of the national response to the pandemic, there is more emphasis than ever on the need for leadership among those in governance roles in pharmacy. Your professionalism and commitment towards meeting patients' needs and in maintaining continuity of services in these challenging times continues to be extremely important and valued.

This guidance should not replace individual professional judgement and local risk assessment carried out in your pharmacy.

### Keeping up-to-date

This document will be updated as needed to remain current. However, as advice and recommendations about COVID-19 is continuously evolving, the content of this document may be out of date at certain points in time. As well as guidance issued by the PSI, all pharmacists and pharmacy owners must keep up-to-date with guidance issued by the Government and Department of Health, including recommendations from the Health Protection Surveillance Centre (HPSC) and the HSE.

Policies and procedures should be regularly reviewed and updated in line with this public health advice and staff kept up-to-date and trained on any changes. All vaccination services must also be provided in line with guidance from the National Immunisation Office (NIO) and the National Immunisation Advisory Committee (NIAC)'s Immunisation Guidelines for Ireland<sup>2</sup>.

### Considerations for providing a vaccination service

When deciding whether to provide a vaccination service during the COVID-19 pandemic, you should consider [PSI/HSE guidance on business continuity planning](#) and carry out a risk assessment for this service in your pharmacy.

We would encourage you to contact the local GP surgeries and other local healthcare professionals, as relevant, to inform them of the measures that you have put in place to provide this service safely and to share examples of good practice where possible. If you are unable to provide a vaccination service, but usually would, you should refer those patients who would expect to avail of this service to an alternative service provider in good time. This applies, in particular, to the provision of an influenza vaccination service.

<sup>2</sup> Immunisation Guidelines for Ireland: <http://bit.ly/NIACGuideline>

Many patients may be nervous about accessing pharmacy services at this time. To improve the uptake of vaccinations it is important that you actively communicate to the public the importance of continuing to get recommended vaccinations. It is also important that you provide reassurance to patients by communicating the new procedures that you have put in place in the pharmacy in order to minimise the risk of exposure to, and transmission of, COVID-19.

Providing a vaccination service under these circumstances is new for everyone. Therefore, we would encourage you to ask patients and staff for feedback and share any learnings with other pharmacies to continuously improve the service.

**Patients should be informed in advance that they are NOT to attend for their vaccination appointment, or enter the pharmacy, if they have COVID-19 symptoms, have been recently diagnosed with COVID-19, or are awaiting testing or test results, if they are a close contact of a confirmed case of COVID-19, or have been advised to self-isolate.**

### **Format of this guidance**

We have identified three key areas to consider when providing a pharmacy vaccination service while COVID-19 prevention measures are in place:

1. Training requirements
2. Preparing the pharmacy premises and vaccination services area
3. Minimising face-to-face contact time

Where the guidance refers to 'the patient being vaccinated' this should include the parent/guardian where the patient being vaccinated is under the age of 16.

## 1. Training Requirements

### 1.1 Training for vaccinating pharmacists

The PSI, in collaboration with the Irish Institute of Pharmacy (IIOOP), has adapted pharmacist training modalities for the supply and administration of vaccinations, from blended to online training programmes. This means that those pharmacists who wish to provide this service for the first time, or need to carry out additional training to meet PSI requirements to provide a vaccination service, can do so online. Information on the current requirements to provide a vaccination service, and to administer emergency medicines (including epinephrine), is available on the [PSI website](#). A [self-declaration form](#) has also been developed, which can help pharmacists to review the requirements for a vaccination service and determine their competency to deliver this service.

Pharmacists can enrol onto online training programmes via the IIOOP website, and they can enrol onto the Parenteral Medicines Training Programme by contacting the training provider directly. Further details are available on the [IIOOP website](#).

With regards to CPR training, pharmacists should contact the training providers who are accredited by the Pre-Hospital Emergency Care Council (PHECC) and/or Irish Heart Foundation (IHF) for guidance on available training and validity of certification at this time. Details of accredited providers are available directly from [PHECC](#) and [IHF](#).

#### Additional Resources

- [COVID-19: HSE advice on performing CPR cardiopulmonary resuscitation \(CPR\) in the community](#)
- [CPR Guidance for confirmed or suspected COVID 19 in community assessment hubs](#)

Infographic: [Confirmed/Suspected COVID-19; Guidance on CPR in community assessment hubs](#)

### 1.2 Staff training

All staff members should be trained on the pharmacy's vaccination policies and procedures once they have been updated to reflect COVID-19 infection prevention and control (IPC) measures. This should include training on hand hygiene, use of personal protective equipment (for example, surgical mask and glove use), environmental cleaning, respiratory hygiene and cough etiquette and social distancing to minimise the risk of infection in the pharmacy. The training should enable all staff to play their part in helping to ensure a safe and effective service. Training should also equip staff with the knowledge to

inform patients and members of the public about the new procedures and the reasons that these are in place.

Staff should be encouraged to provide feedback on the additional COVID-19 measures to ensure there are no practical difficulties on implementation. All concerns or queries should be addressed, and the superintendent pharmacist should ensure that relevant procedures are regularly reviewed and updated following feedback from staff and patients, to continually improve the quality and safety of the service.

## 2. Preparing the Pharmacy Premises and Vaccination Services Area

There are a number of steps you can take to help protect your patients attending for vaccination, as well as your staff.

Prior to providing vaccination services, effective IPC measures must be in place in the pharmacy to prevent the risk of spread of COVID-19, including policies and procedures on frequent cleaning and disinfection, hand hygiene, and donning and doffing surgical face masks. Vaccinating pharmacists should be trained and feel confident in using IPC measures. Policies and procedures should be regularly reviewed in accordance with the latest recommendations/evidence and staff kept up-to-date and trained on any changes.

Section 2.4.2 of the PSI's Vaccination Guidance outlines the *Requirements for a Vaccination Services Area*. Remember: a vaccination service area may be the patient consultation area or another suitable part of the pharmacy. You should carefully assess the layout of your pharmacy premises and decide how best to use the space to reduce the risk of exposure to, and transmission of, COVID-19 for both patients and staff.

Below are some practical solutions you may wish to put in place in your pharmacy:

- Considering the space available to you in your pharmacy, create a one-way system for movement of all patients and members of the public around the premises, to reduce the risk of cross contamination, or cordon-off an area to separate people entering the pharmacy for vaccinations. Arrow signs can be used to help direct patients and members of the public.
- Leave doors open and light switches on to avoid having to touch them.
- Leave windows open to increase ventilation, or use mechanical ventilation, depending on the setting.
- Create a designated waiting area for vaccination patients to use both before being called in for vaccination, if needed, and after they have had their vaccine and are being observed for adverse reactions. This area must allow for the recommended social distancing. Consider using tape or other signage to alert others to this spacing.

- Remove any unnecessary furniture and non-essential items from the vaccination services area, and ensure it is clutter-free to make cleaning and disinfection as easy as possible.
- If practical, the patient's chair could be placed 1 metre away from surfaces such as table tops and shelves to avoid touching.
- Provide no-touch bins (for example, pedal bins) and tissues where practical to facilitate good respiratory etiquette.
- Provide adequate hand hygiene facilities (i.e. alcohol-based hand sanitiser or soap and water) for all staff at various locations around the pharmacy.
- Provide alcohol-based hand sanitiser for patients when they enter and leave the pharmacy, as well as when they enter the vaccination services area, and actively encourage proper hand rub technique through appropriate signage. The World Health Organisation's<sup>3</sup> website provides useful posters on how to effectively hand-rub and hand-wash.
- Encourage all staff to adhere to the facilitators of good hand hygiene to ensure hands can be thoroughly cleaned i.e. wear short sleeves or roll up sleeves, no hand/arm jewellery apart from 1 plain ring – no wristwatches, wrist pedometers, bracelets, rings with stones etc., keep nails short and unadorned – no nail polish, gel nails or acrylic nails. Staff should be advised to try to avoid touching their face as much as possible, in particular, their nose, mouth or eyes.
- Avoid sharing pens where possible. Pharmacists and staff members should try to keep a pen for their personal use, and disinfect any pens shared with patients between visits.
- Inform patients and members of the public about how the pharmacy will provide vaccination services during COVID-19, and any relevant changes to normal service. This can be done, for example, using posters or messaging in the pharmacy (in languages appropriate to the community) and on the pharmacy's website and social media channels, where possible, to increase awareness.

*The examples detailed above are not an exhaustive list but are there to assist you when planning for your vaccination service and offer some practical solutions you may wish to put in place in your pharmacy.*

### 3. Minimise face-to-face contact time

The risk of contracting COVID-19 from someone who is infected is greatest for close contacts. You should consider ways to minimise time spent face-to-face with the patient in an enclosed space, while maintaining a good clinical standard.

The vaccination service should allow for recommended social distancing between the patient being vaccinated and the pharmacist, as well as other people in the pharmacy, as much as possible before and after vaccination.

<sup>3</sup> World Health Organisation; Clean Care is Safer Care; [www.who.int/gpsc/5may/background/5moments/en/](http://www.who.int/gpsc/5may/background/5moments/en/)

To minimise the time spent in an enclosed space (for example, the vaccination services area/consultation room) we recommend that you read the PSI's Vaccination Guidance and consider what requirements for the service could be safely carried out either remotely before the patient arrives into the pharmacy, or in an area of the pharmacy where recommended physical separation can be maintained; for example, the pre-vaccination consultation and obtaining informed consent for administration.

Where close contact is necessary, for example, to administer the vaccine, this should be for the shortest possible period of time.

When making adaptations to your service, including those to facilitate social distancing, you must consider the patient's privacy and dignity and ensure that confidential and personal information cannot be overheard by others.

Below are some practical solutions you may wish to put in place in your pharmacy:

### 3.1 Appointments or walk-in clinic

- Where possible, provide each patient with an appointment time for their vaccination and consider the use of an online or telephone appointment booking system.
- When making their appointment, patients should be informed of the new procedures for vaccinations and the reason for these changes, including the requirement to bring a face covering, in line with current Government advice<sup>4</sup>.
- Schedule each appointment to take account of the time needed to clean and disinfect the vaccination services area between each vaccination and to allow patients to adhere to current social distancing recommendations.
- Consider prioritising appointments for vulnerable patients (for example, patients who are in the HSE 'at-risk' groups) at times when the pharmacy is likely to be quieter, to reduce the likelihood of contact with other people.
- If walk-in appointments are provided, procedures must be in place to ensure adequate social distancing recommendations can be met, and clear signage should be provided so that the patient knows where to go.

<sup>4</sup> Government guidance on safe use of face coverings: [www.gov.ie/en/publication/aac74c-guidance-on-safe-use-of-face-coverings/](https://www.gov.ie/en/publication/aac74c-guidance-on-safe-use-of-face-coverings/)



### 3.2 Patient consultation prior to vaccination

- Where possible, carry out patient consultations for vaccinations by telephone, online or using other eHealth measures such as video consultation<sup>5</sup>. It is important that non face-to-face patient consultations are effective and still meet the requirements set out in Section 2.6 (Patient Consultation) of the PSI's Vaccination Guidance to assess a patient's suitability for vaccination.
- If this is not possible, this assessment should be carried out in an area of the pharmacy where social distancing can be ensured while still maintaining patient confidentiality.
- You should explain to the patient in advance the requirements for post vaccination observation (i.e. to ensure there are no adverse reactions) and the arrangements that have been put in place for this, for example, where the patient will wait and whether they should bring an accompanying adult with them (see Section 3.6 below).

### 3.3 Consent for vaccine administration

PSI Vaccination Guidance specifies that the pharmacist must document that voluntary informed consent is obtained both for the vaccination and the recording and keeping of data and that this should include a consent form with the patient's (or parent/legal guardian's) signature.

- It is also acceptable for the pharmacist to document verbal consent on the consent form from the patient (or parent/legal guardian if the person being vaccinated is under the age of 16 years old).
- Alternatively, some patients may be able to provide their consent prior to vaccination using an online form<sup>6</sup>. A copy of the online consent form should be retained in the pharmacy.
- Where consent has been provided online, when the patient attends for vaccination, the pharmacist should confirm that the patient has read the relevant information provided to them (to ensure informed consent), give them the opportunity to ask any questions, and ask them to confirm consent for the vaccine verbally, prior to vaccination.
- Where a consent form is completed by a patient in person, any pens provided for patient use should be disinfected before and after use.

### 3.4 Screening for symptoms of COVID-19 prior to arrival

- Consider the best system for screening the patient for any potential symptoms of COVID-19, or recent contact with a confirmed case of COVID-19, before they come to the pharmacy for their appointment. This should be carried out as close to the appointment as possible.

<sup>5</sup> You should exercise your professional judgement in providing care and advice to patients remotely. You should weigh the benefits of using available technology platforms against the risks to patient confidentiality and privacy.

<sup>6</sup> Publications are available from the National Adult Literacy Agency about clear language use for forms and public notices, including language around COVID-19; [www.nala.ie/publications/?category=plain-english-resources](http://www.nala.ie/publications/?category=plain-english-resources)

For example this could be done using an electronic form, text message or phone call to the patient.

- Patients should be informed in advance that they must NOT attend for their appointment if they have COVID-19 symptoms, have been recently diagnosed with COVID-19, are awaiting testing or test results, are a close contact of a confirmed case of COVID-19, or have been advised to self-isolate.
- Before providing a walk-in service, screen the patient, as above, at a safe physical distance.

### 3.5 Arrival at the pharmacy

Depending on the size of the pharmacy, and patient access at the time you will be providing the vaccination service, the following should be considered:

- Ideally, patients should be asked not to enter the pharmacy until the vaccination services area is set up and the pharmacist is ready. Consider asking the patient to wait in their car if this is practical. Consider using a text message alert system or asking patients to phone when they have arrived.
- Use clear markings to show where the patient can safely wait outside (while maintaining social distancing) and appropriate signage at the pharmacy entrance to direct patients where to go.
- If walk-in appointments are provided, procedures must be in place to ensure that patients can wait safely and that adequate social distancing between patients can be met.
- Patients should be asked to use an alcohol-based hand sanitiser when they arrive into the pharmacy and/or on entering the vaccination services area.
- Patients should follow current Government guidance<sup>7</sup> on the use of face coverings. Consider providing face masks to patients where necessary.
- Keep a log of those who have been vaccinated (and anyone accompanying them, for example, parent/guardian or carer), what time they attended, and ideally how long they were in the pharmacy, to assist in the event that someone tests positive for COVID-19 and contact tracing is required.

### 3.6 Administration

- Limit the number of people in the vaccination services area to only the pharmacist and patient, and one parent/guardian or carer where applicable.
- The vaccinating pharmacist must wash their hands with alcohol-based hand sanitiser or soap and water before and after administering each vaccination. The pharmacist may decide to wear gloves for vaccination, however, this should not replace hand hygiene.

<sup>7</sup> Government guidance on safe use of face coverings: [www.gov.uk/government/publications/aac74c-guidance-on-safe-use-of-face-coverings/](https://www.gov.uk/government/publications/aac74c-guidance-on-safe-use-of-face-coverings/)

- The HPSC [Guidance on the use of surgical masks when healthcare is being provided in the context of the COVID-19 pandemic](#) provides information on the safe use and disposal of surgical masks. In line with HPSC guidance, surgical masks should be worn by the pharmacist while they are within 2 metres of the patient and when administering the vaccination. HPSC guidance advises that if there is no specific known risk of COVID-19, surgical masks can be discarded as regular domestic waste.
- Hand hygiene should be performed before surgical masks and gloves are put on and after they are removed.
- As outlined above, patients should be advised to wear a face covering in line with current Government guidance.
- Ensure the vaccination services area is cleaned and disinfected after every vaccination (using household detergents/disinfectants) and on a regular basis, including table tops, backs of chairs and door handles.

### 3.7 Post-vaccination observation and counselling

PSI Vaccination Guidance recommends that following administration of a vaccine, the patient should remain in the pharmacy for at least 15 minutes in case they have an allergic reaction and need urgent medical care. This applies after any child or adult vaccination because of the very rare possibility of anaphylaxis. In addition, syncope may occur, with most cases occurring less than 5 minutes after vaccine administration.

- It is important to carefully consider where the patient can wait for observation while maintaining the recommended social distancing. You should consider this when scheduling appointments, especially if the patient will be waiting in the consultation room/vaccinating area, which will then need to be disinfected before being used again.
- If, having considered the above, it is not possible for a patient to remain on the premises for the full 15 minutes, due to potential risk of exposure to COVID-19:
  - The person may be advised that they should remain on the pharmacy premises for at least the first 5 minutes after vaccination, as this is the time that the majority of adverse reactions occur.
  - The person can then leave the premises and remain in the vicinity<sup>8</sup> for the remaining minutes.
  - The person who has been vaccinated (or the parent/ guardian if it is a child) must be given clear post-vaccination advice (for example, information on the signs of an adverse reaction including anaphylaxis), and they should be accompanied by an adult who can assist them and re-enter the pharmacy in the event of a problem.

<sup>8</sup> Chapter *Anaphylaxis*; Immunisation Guidelines for Ireland; *When possible, patients should remain in the vicinity for up to 15 minutes after vaccination*; <http://bit.ly/NIACGuideline>.

- Where possible, records for the administration of the vaccine (set out in Section 2.8.1 of the PSI Vaccination Guidance) should be made away from the patient to minimise the time spent in close contact. Consider how the information required for these records can be obtained from the patient during the remote patient consultation, for example, by telephone, online or using other eHealth measures such as video consultation.
- Before they leave the pharmacy, the patient should still receive the Patient Leaflet from the vaccine and any applicable information provided by the HSE as set out in the PSI Vaccination Guidance.



**Issue Date:** August 2020

**Questions or queries on this Guidance?**

If you have questions or queries on this Guidance, please contact us at [Info@PSI.ie](mailto:Info@PSI.ie)