



## INFO SHEET

# IMMUNIZATION REGULATION DUTIES

The legislative mandate of the College of Licensed Practical Nurses of Alberta (CLPNA) is to serve and protect the public by ensuring its members deliver safe, competent and ethical nursing care. An Info Sheet informs membership on relevant nursing topics or the CLPNA's processes.

This document is linked to legislation:	<a href="#">Health Professions Act</a>	<a href="#">Licensed Practical Nurses Profession Regulation</a>	<a href="#">Immunization Regulation</a>
This document is linked to other documents that direct expectations of professional behavior and requirements for practice:	<a href="#">Standards of Practice</a>	<a href="#">Code of Ethics</a>	<a href="#">Competency Profile</a>
This document is linked to related supportive documents:	<a href="#">Adverse Events Following Immunization (AEFI) Policy for Alberta Immunization Providers</a>	<a href="#">Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine</a>	<a href="#">Immunization Data Submission and Response Guidelines</a>

**INTRODUCTION** In November 2016, the Government of Alberta announced changes to the *Public Health Act*, aimed at increasing immunization rates, improving capacity to manage outbreaks, and increasing the quality of immunization services.

To help meet these goals, in October 2018, the Government of Alberta established the new *Immunization Regulation* (Alta. Reg. 182/2018). The *Immunization Regulation* increases responsibilities for health professionals, including ALL Licensed Practical Nurses (LPNs).

### As of December 17, 2018:

- All LPNs** are required to report adverse events following immunization whether or not the individual LPN administered the vaccine.
- LPNs who administer vaccines** must follow the requirements related to storing, handling, and transporting of vaccines as outlined in the *Immunization Regulation*. LPNs providing public funded vaccines (i.e. employed with Alberta Health Services) must also follow parameters outlined in the *Alberta Vaccine*

### *Storage and Handling Policy for Provincially Funded Vaccine.*

#### As of January 1, 2021:

- (i)** If an LPN recommends an immunization but does not receive consent, or the LPN determines that the immunization is contraindicated, an assessment report must be submitted electronically to the Chief Medical Officer (CMO) of Health no later than 7 days after the assessment.
- (ii)** An LPN who administers a vaccine will be required to report the immunization electronically to Alberta Health's CMO no later than 7 days after the immunization.
- (iii)** An LPN who receives a written record about a past unreported immunization shall ensure that a report about the unreported immunization is submitted to the CMO.



## 1. Reporting Adverse Events

As of December 17, 2018, ALL LPNs are required to report adverse events following immunization (AEFI). Section 1(2) of the *Immunization Regulation* sets out what unfavorable health occurrences are considered as an AEFI.

Information on when and what to report involving an adverse event following immunization are included in the Alberta Health document *Adverse Events Following Immunization (AEFI) Policy for Alberta Immunization Providers*.

New reporting requirements for all health practitioners include:

- reporting an AEFI to Alberta Health Services (AHS) within 3 days from determining that an AEFI has occurred as defined in section 1(2) of the Immunization Regulation.

### Call-in Reporting

The AHS Central AEFI Reporting Line at 1-855-444-2324 (1-855-444-CDCI) manages all reports of AEFIs as part of the AHS Province-wide Immunization Program. AHS will provide specific direction for LPNs employed by AHS Public Health.

Immunization providers including LPNs employed outside the AHS health care system are also required to report an AEFI by the AHS Central AEFI Reporting Line call-in number.

Please visit the [AHS website](#) for further information.

## 2. Alberta Vaccine Cold Chain Policy

Vaccines may become less effective or destroyed when exposed to temperatures outside the recommended range or from inappropriate exposure to light. “Cold Chain” refers to the processes and procedures that maintain optimal temperature and light conditions during the transport, storage, and handling of vaccines.<sup>1</sup>

All LPNs with training in immunization must have a thorough knowledge of the vaccine storage and handling procedures. In addition, LPNs must follow

the requirements set out in Part 3 of the *Immunization Regulation*. Those providing publicly funded vaccines must follow the parameters set out in the *Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine*.

The *Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine* sets out cold chain practices in Alberta and defines the roles and responsibilities of all those involved in managing the storage and handling of publicly funded vaccines, such as community providers including LPNs and AHS.

## 3. Electronic Reporting of Immunizations and Immunization Assessments to Alberta Health

The *Immunization Regulation* introduces another new requirement:

- health practitioners, including LPNs, will be required to report immunizations and immunization assessments electronically to Alberta Health within seven days. These electronic reporting requirements will take effect on January 1, 2021.

AHS Public Health is currently able to meet this requirement.

The *Immunization Data Submission and Response Guidelines* describe specific requirements for reporting electronically.

## Other Considerations

### First Nations and Inuit Health

First Nations and Inuit Health is within the jurisdiction of Health Canada. LPNs employed by the First Nations and Inuit Health Branch (FNIHB) will continue to report AEFIs as well as continue to follow the vaccine cold chain policy and reporting pathways as currently provided by the FNIHB. LPNs must consult with FNIHB employers and follow FNIHB policies and procedures.



## Immunization Programs Outside of AHS

LPNs whose roles involve administering vaccines outside of the AHS system (i.e., in industry, clinics or private institutions) must ensure they adhere to the *Immunization Regulation* requirements.

### Administering Immunizations as an LPN

To administer immunizations as an LPN:

- you must have training in immunization, either from base program or the CLPNA learning module;
- the recipient of the immunization must be 5 years of age or older;
- you must follow any employer requirements; and
- you must ensure there is a complete client specific order from an authorized prescriber or follow the appropriate immunization schedule.

For more information about the requirements and expectations of administering immunizations as an LPN please see the *Standards of Practice on Restricted Activities*.

### Want More Information?

For further information on Alberta's immunization programs and policies, all current Alberta Immunization Policy documents can be found on the Alberta Health website.

### Examples of Reporting Adverse Events Following Immunization

As presented above, LPNs will be responsible for reporting adverse events following immunization. Information on when and what to report involving an adverse event following immunization are included in the Alberta Health document *Adverse*

### *Events Following Immunization (AEFI) Policy for Alberta Immunization Providers.*

The following are just two possible examples that require an LPN to look into the need to report an immunization reaction.

**Scenario #1:** A young child is seen in an emergency department with a red, swollen upper arm. The LPN assesses the child and places the child and parents in the observation room to wait for the physician. The physician's diagnosis is "cellulitis temporally related to MMR vaccine" which was administered 2 days ago. A health care professional, who may include the LPN, must report the adverse event to AHS within 3 days. If the LPN was unsure whether the adverse event should be reported, the LPN should consult with the AHS Central AEFI Reporting Line to make that determination.

**Scenario #2:** An LPN who works in a private travel clinic meets with a new client who has requested immunizations in preparation for her trip to Costa Rica. The LPN refers the client to the travel clinic physician, who writes a prescription for tetanus and hepatitis vaccines. The LPN administers the vaccines in accordance with the physician order. Two days later, the client returns to the travel clinic with a generalized rash. The physician diagnoses an allergic reaction temporally related to the vaccine. Although this is a private travel clinic (not funded by AHS) either the physician or the LPN must report the adverse event to AHS within 3 days. Detailed information on adverse events following immunization can be found in the *Adverse Events Following Immunization (AEFI) Policy for Alberta Immunization Providers*. As noted in scenario #1, if the LPN is unsure whether the adverse event should be reported to AHS, the LPN should phone the AHS Central AEFI Reporting Line for a consultation.



## REFERENCES

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<sup>1</sup> Government of Alberta, Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine (2019), <https://open.alberta.ca/publications/alberta-vaccine-storage-and-handling-policy-for-provincially-funded-vaccine>.

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