



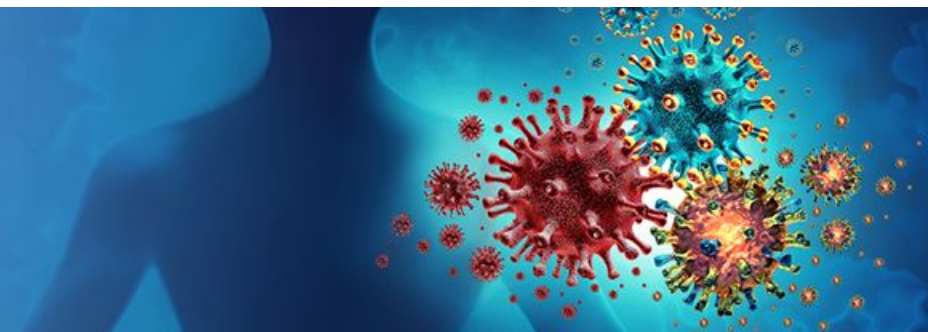
10:55 am

Vaccination errors: your go-to guide

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Declarations



Advisory Board Member – Seqirus, Pfizer, GSK, Sanofi, MSD, Moderna

Honoraria received from the mentioned companies

Immunisation Coalition - Member

Immunisation Coordinator - Adelaide PHN

Learning Objectives



At the end of the session, participants will be able to:

1. Explain the steps to take when a vaccine program error occurs
2. Implement strategies to reduce the risk of vaccination errors

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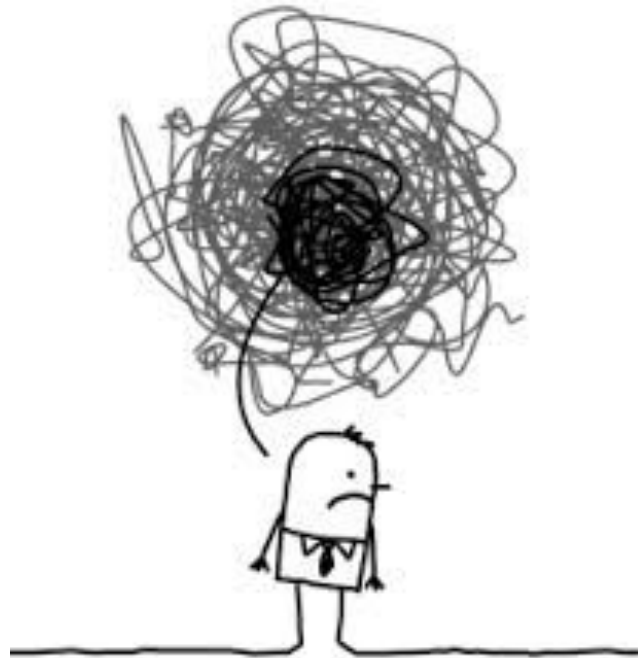
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Why do vaccination errors occur?

**I'M NOT A
ROBOT**



**I'M
HUMAN**



**Sound Alike
Look Alike**

Infanrix
Infanrix hexa
Infanrix IPV

HIB and HepB
HIB and influenza
HPV and HIV

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What are the most common vaccination errors?

1. Skipping parts of the pre-vaccination process:

- The patient was not adequately identified
- The pre-vaccination checklist was not undertaken
- Risk and benefits were not explained
- VALID consent was not obtained
- The AIR was not checked, and other previous vaccination evidence was not sought



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How to reduce the risk

- Ask the patient their full name
- Complete the pre-vaccination checklist and ask about medical conditions, allergies, pregnancy
- Ensure they know about possible adverse events, how to look for fever and manage fever in a child, how to report an AEFI
- Follow valid consenting steps:
 - It must be given by a person with legal capacity, and of sufficient intellectual capacity to understand the implications of receiving a vaccine.
 - It must be given voluntarily in the absence of undue pressure, coercion or manipulation.
 - It must cover the specific procedure that is to be performed.
 - It can only be given after the potential risks and benefits of the relevant vaccine, the risks of not having it, and any alternative options have been explained to the person.

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2. Vaccine administration errors:

- The wrong vaccine was selected
- The vaccine had expired
- The vaccine was given for the wrong reason (Tetanus vaccine)
- The vaccine was given at the wrong time (seasonal, pregnancy gestation)
- The minimum interval between vaccines was not observed
- The vaccine was not reconstituted, or the incorrect diluent was used
- The incorrect vaccine for their age as administered (DTPa or dTpa, paed Hep B/adult Hep B)
- The wrong dose was administered (COVID vaccines and multidose vials)
- The vaccine was administered via the wrong route....oral, sub-cut, IM
- The patient was not checked for immediate AEFI and was not recommend to wait 15-minutes post vaccination
- Poor documentation: Insufficient information in clinical record, not recorded on the AIR, take home record was not provided

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How to reduce the risk?

- You have the right vaccine for the right reason, at the right time, and with the right interval (dTpa vaccine, pregnancy, at 20 weeks)
- The vaccine is not expired
- You reconstitute the vaccine if required using the correct diluent
- You have the right vaccine for their age (DTPa or dTpa, paed Hep B/adult Hep B, MMR or MMRV)
- You give the right dose (COVID vaccines and multidose vials)
- You administer via the right route....oral, sub-cut, IM
- You check for immediate AEFI and recommend 15-minute wait post vaccination
- You document correctly: Clinical record, AIR, take home record



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3. Administering an inappropriately stored vaccine

- Temperatures not checked and recorded twice daily, and data logger not downloaded weekly
- Vaccines stored outside the manufacturer's recommended temperature range (usually +2°C to +8°C) and appropriate action not taken
 - Signage on the fridge: **“Possible cold chain breach: Do not use vaccines until further notice”**
 - Isolate affected vaccines (do not discard them and keep them refrigerated between +2°C to +8°C)
 - Download the fridge logger
 - Investigate cause (power failure, door left ajar, mechanical failure)
 - Notify State/Territory Health Department/Vaccine supplier and seek advice

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How do I reduce the risk?

- Ensure all staff, clinical and non-clinical, have received vaccine cold chain training
- Ensure vaccine fridge is in good working order – regular servicing
- Read temperatures twice daily, morning and night.....document the readings on the temperature chart
- Download the logger weekly, or whenever there is suspicion of a cold chain excursion
- Protect the power supply to the fridge
- Seek advice if unsure
 - State and Territory Health Departments if NIP vaccines
 - Pharmaceutical manufacturer if non-NIP vaccines



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Immediate actions to take if an error is made:

- Admit it!
- Inform the patient (or the parent) and apologize
- If the wrong vaccine was administered – explain risks and benefits of the vaccine
- If an expired vaccine, or a vaccine stored outside recommended temperature range was administered – seek advice:
 - NIP vaccines – State and Territory Health Department
 - non-NIP vaccines – vaccine manufacturer
- Advise State and Territory Health Department
- DOCUMENT, DOCUMENT, DOCUMENT



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Follow-up actions to take if an error is) made:

- Contact the patient (or the parent) in 24 hours and assess if an adverse event has occurred – if it has, assist them with reporting the event
- Meet with your team – discuss the event, examine why the error happened, develop and implement strategies to reduce the risk of recurrence
- Contact the patient (or the parent)
 - check they are OK
 - apologize again
 - inform them that strategies have been implemented to prevent reoccurrence

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Take home messages:

- Vaccine administration has become more complicated due to new vaccines, combination vaccines, and the increasing complexity of the immunisation schedule.
- Know your limitations and never assume you know everything about vaccine administration. Know your own limitations and your profession's scope of practice.
- Don't feel obligated to perform functions (including administering different vaccines) if you are not skilled and knowledgeable enough to do so safely.
- If you do make a vaccine administration error, follow the immediate and follow-up process, inform your State or Territory Health Department, and learn from it so that you don't repeat it

