

STANDARDS FOR CHILD & ADOLESCENT IMMUNIZATION PRACTICES

Standard 1: Immunization services are readily available.

-Vaccination services are readily available; the times immunization services are provided should be in keeping with the schedules of today's working parents, as well as the needs of parents who are at home full- or part-time.

-Vaccinations are coordinated with other child health services such as WIC and offered at non-traditional times, such as weekends, evenings, early mornings, and lunch-hours.

-Providers should keep an adequate stock of vaccines on hand, to prevent missed immunizations or the need for return visits.

Standard 2: No barriers or unnecessary prerequisites to receive vaccines.

- "By appointment only" systems are barriers; walk-in services are suggested.

-Implementing standing orders rather than written orders or referrals.

Standard 3: Immunization services are available free or for a minimal fee.

-No child should miss immunizations because the parents cannot afford the fee.

Standard 4: Providers utilize all clinical encounters to screen and, when indicated, immunize children.

-Every health care worker should know the child's immunization status, even in an emergency room or specialist office.

-If immunizations are not up-to-date, immunization should be made available during visit or child should be referred back to primary provider for services.

Standard 5: Providers educate parents and guardians about immunization in general terms.

-Present terms that are easily understood, including in other languages if necessary.

-Discuss reasons why immunizations are so important, the diseases they prevent, the immunization schedules and why it is important for immunizations to be given at the right age.

-Discuss questions and concerns raised and provide materials parents can take home to read and refresh their understanding.

Standard 6: Providers should assess for contraindications and inform parents about risks and benefits of immunizations before vaccinating.

-Provider is required to review and give parents a Vaccine Information Statement (VIS) prior to.

Standard 7: Providers follow only true contraindications.

-Providers should exercise informed, good judgment before withholding an immunization using the guidelines published by the Advisory Committee on Immunization Practices, the Committee on Infectious Diseases of the American Academy of Pediatrics, and the American Academy of Family Physicians

Standard 8: Providers administer simultaneously all vaccines doses for which a child is eligible at the time of visit.

-Available evidence suggests that simultaneous administration of childhood immunizations is safe and effective

Standard 9: Providers use accurate and complete recording procedures.

-This standard specifies the orderly approach that should be taken to ensure accurate record-keeping, so needed vaccinations will not be missed, and unnecessary vaccinations will not be given

-Providers are required by law to record what vaccine was given, the date vaccine was given (month, day, year), name of manufacturer, lot number, the signature and title of provider who gave vaccine, and the address where vaccine was given

-Parent of guardian should be given a permanent record to keep and carry to office visits for updates

Standard 10: Providers co-schedule immunization appointments in conjunction with appointments for other child health services

-This standard recommends efficient use of the parent's and child's time, as well as an opportunity to provide immunizations that might otherwise be missed

Standard 11: Providers report adverse events following immunization promptly, accurately, and completely.

-Providers should encourage parents to report any adverse event that are or appear to be associated with a vaccination

-Providers should record the event fully in the medical record and promptly report any such event that are clinically significant to the national Vaccine Adverse Event Reporting System (VAERS), regardless of whether the event is believed to be related to the vaccine

Standard 12: Providers operate a tracking system.

-Providers are responsible for keeping accurate, up-to-date records of child's immunizations and alerting parents when an immunization is due

-State immunization information systems are used to remind parents/guardians, patients, and providers when immunizations are due and to recall patients who are overdue

Standard 13: Providers adhere to appropriate procedures for vaccine management.

-To keep their potency, vaccines must be handled and stored appropriately, according to manufacturer's package inserts

-Providers should have a qualified primary and back-up individual with the responsibility for monitoring the vaccine supplies

Standard 14: Providers conduct audits to assess immunization coverage levels and review immunization records.

-Office or clinic-based patient record reviews and vaccination coverage assessments should be performed annually

Standard 15: Providers maintain up-to-date, easily retrievable medical protocols at all locations where vaccines are administered.

-Providers must have technical information at hand, either in a computer database or in printed "handbook" form that can be used by both experienced and new staff

Standard 16: Providers operate with patient-oriented and community-based approaches.

-Providers in the public are obligated to look to the community to be sure that their services are reaching everyone, not just the people who come in routinely.

-Providers should use a variety of methods to inform the public about immunizations and should be publicizing the places and times that these are available

Standard 17 &18: Vaccines administered by properly trained individuals who receive ongoing education and training on current immunization recommendations.

-Vaccines, immunizations techniques, and vaccination schedules change periodically, and the provider should be up to date on this and other changes in immunization recommendations.