Safety and Quality Processes for COVID-19 Vaccination in SG

51.

VACC[®]NATION^{®®}

IMSN Vaccine Safety Interest Group (6 May)



Outline



Scheduling & Screening

Ensuring timely doses and accurate triaging



Vaccine Preparation Reducing storage and dilution errors



Vaccinator Training Administering vaccines safely



SAE and Incident Management

Monitoring and managing patients post-vaccination

Internationally, there have been reports of vaccination errors occurring at different stages of the workflow



Scheduling & Screening

- a. Administer vaccine to contraindicated groups (e.g. pregnant women, patients who are severely immunocompromised)
- b. Book second dose too early or too late



Vaccine Preparation

- a. Compromised cold chains
- b. Incorrect volume of diluent or undiluted vaccine
- c. Expired vaccines
- d. Mix-up of similar looking vials (e.g. Moderna COVID-19 vaccine vs. Regeneron's monoclonal antibody)

 Background
 Sched. & Screen.
 Vaccine Prep
 Vaccinator Training
 SAE/Incidents

 Scheduling and screening errors are reduced by requiring individuals

1. Receive booking link

C Va	COVID-19 accination Registration	
	REGISTER FOR THE VACCINE	
\mathbf{i}	Registration code	
	Enter the 10-character code sent to you via SMS	
	NRIC/FIN	
	GET STARTED	
	Sestimated 10 mins to complete	

2.Complete questionnaire

Gender

O Yes

O No

Female O Male Your Medical Status IMMUNOCOMPROMISE Do you have any medical conditions causing severe immunocompromise? For example: Recent transplant in the past 3 months On cancer treatment (immunotherapy / chemotherapy / radiotherapy) less than 3 months ago OR planned in the next 2 months Immunotherapy for non-cancer conditions (e.g. rituximab, etc) HIV, with CD4 count less than 200 O Yes O No ALLERGIES Have you ever had any life-threatening allergic reactions? (to vaccines, medications, insect stings, food, etc.) O Yes O No Have you ever been prescribed with an Epi-Pen? (self-injected epinephrine for severe allergy) O Yes O No Have you ever had severe skin rash AND mouth/genital ulcers/red eves/liver injury due to medications? (TEN/SJS/DRESS/DiHS) O Yes O No PREGNANCY & RELATED QUESTION (FOR FEMALES ONLY) Are you currently pregnant, or suspect that you are pregnant?

3.Book appointment

Print Booking Details

All set!

∧ Name

1st appointment

10:30 AM

10:30 AM

2nd appointment

09 May 2021, Sunday

30 May 2021, Sunday

Important Reminders

Bring your NRIC or FIN for both appointments

To ensure that we can serve you:

NRIC

Clementi Community Centre

220 Clementi Ave 4, Singapore 129880

BackgroundSched. & Screen.Vaccine PrepVaccinator TrainingSAE/IncidentsO1At the vaccination site, the staff is then required to conduct another
eligibility screening and verify the date of the 1st dose (where
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4. Complete on-site screening

MOH COVID-19 VACCINATION FORM - FORM 1
TO BE COMPLETED BY PATIENT (please approach our staff if you need help)
卫生部2019冠病疫苗接种表格 - 表格 1
此表格由病患填写(如需协助,请向我们的职员求助)

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Gender: 性别: □ Male 男 □ Female 女	Date of Birth (dd/mm/yyyy): 出生日期(日/月/年):	Age: 年龄:	Ethnic Group 种族: Chinese 华族 Malay 马来族	p: □Indian 印族 □Others 其他	Residential Status 居民身份: □ Citizen 公民 □ Permanent Resi 永久居民	∷ □Lo 长 ident □Ot 其	ng term 期准证 her 他	持有者
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	Pe	ostal Code 邮政编号			Email Address*: 电邮地址*:			
PART B: MED B部分: 医疗	ICAL INFORMATION 信息						Waitin	g Area 等候区
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Have you had 你最近是否有	a fever or any vaccination re 有发烧或接种过任何疫苗?	cently?						
 Fever (T 在过去) 	emperature≥37.5°C) in the 24小时内发烧(体温达37.5°	past 24 h C)?	ours?					
• Any vac 在过去:	cination in the past 14 days? 14天内接种过任何疫苗?							
<u>PART B2</u> : IMIN <u>B2部分</u> : 免務	MUNOCOMPROMISE 变功能低下						NO 否	YES 是
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5. Receive vaccine



6. Stay for observation



Vaccination providers are required to adhere to strict storage and labelling protocols to minimise mix-ups

1. Storage

- Undiluted vaccine vials should be stored in the fridge with a. temp between 2 and 8 degrees Celsius, and must be monitored (either use temperature data logger or record temperature twice daily)
- b. SMS alert trigger system to at least 3 personnel is needed when vaccine refrigeration is running on Uninterrupted Power Supply (UPS) or if temperature deviates from range
- Vaccine vials should be protected from light C.
- Pre-filled dosing syringes must be stored with their corresponding vial (e.g. in a kidney dish) and labelled with date and time of dilution, extraction, and expiry d.
- Back-up Power Supply Plan is required e.

Handling and dilution 2.

- First-in-first-out system is required when retrieving vials a. from fridge
- b. Vials are labelled with date and time of dilution and expiry
- Diluted vials must be clearly visually differentiated from undiluted vials, and placed separately to prevent mix-ups C.

Staff are also given visual guides to help distinguish between the vaccines*



Diameter 13mm

MODERNA



- Larger vial
- Dimension: Height 50mm
 - Diameter 24mm

Both are multidose vials (min 5 for Pfizer, min 10 for Moderna) - Pfizer needs to be diluted with saline while Moderna does not

During vaccine prep, safeguards are in place to prevent handling, dilution and administration errors

2. Handling and dilution (continued)

- a. Staff should not be distracted during vaccine preparation
- b. When handing over duties, a handover checklist indicating date/time of dilution, dilution status, and preadministration verification of patient and vaccine info may be employed
- c. Physically separate areas for dilution and administration are required
- d. Vaccinators must visually inspect vials for discolouration or particulates before/after dilution and before each syringe is filled

3. Administration

- a. Staff should not be distracted when administering
- b. Mandatory hand hygiene and aseptic technique
- c. Must check each dosing syringe for final volume, particulates and discolouration, air bubbles
- d. Vaccinators must perform Five Rights of Medication Administration before administering each dose (Right patient, Right drug, Right dose, Right route, Right time)

4. Role Designation

- a. Staff should not multitask and must have access to adequate rest time if performing critical functions
- b. Cross-deployment of staff who are assigned to perform critical functions should be minimised
- c. Quality & Safety Officer who is healthcare-trained should be contactable and present at all times

UDE Vaccinators are required to complete a Vaccinator Training Course (VTC) and competency assessment*

MOH's Vaccinator Training Toolkit

Toolkit for Training of Vaccinators

To help vaccination providers ensure the competency of their vaccinators, this toolkit has been assembled to provide information on the COVID-19 vaccines that are currently in use and baseline training requirements for persons assuming the role of vaccinators at their centres.

Competency Assessment

Part 1: Off-site Training	
Theoretical component:	4 hours (include theory assessment)
	Mode of learning may be via e-learning for the training hours
Practical component:	6 hours (include simulated practice and assessment for the required skills)
Total:	10 hours
Part 2: On-site Training	
On-The-Job (OJT) Clinical component:	The OJT practice and assessment will require the learner to demonstrate the following skills competently:
	 <u>3</u> successful vaccine reconstitutions, and <u>5</u> successful administration of vaccines

*Some medical professions may be exempt from the training requirements In addition, MOH maintains tight communication channels with the vaccination sites to gather issues faced on the ground, suggest improvements, and disseminate updated guidance and workflows

End-to-End Guidance for Vaccination Providers

- Clinical guidance for screening
- Storage and handling of vaccines
- Dosage and administration
- Management of vaccine errors
- Reporting requirements

Other means of ground communication & feedback

- **Regular ops instructions** to vaccination sites containing updated workflows
- Ad hoc site inspections by MOH to identify lapses in safety or quality protocols
- System for vaccination sites to submit incident reports to MOH (e.g. vaccine errors, supply chain problems, IT issues, service delivery issues)
- Briefing sessions to share best practices and areas for improvement

Background

SAE/Incidents

In addition to the mandatory post-vaccination observation period of 30 minutes, all vaccination sites are required to be staffed and equipped to deal with medical emergencies

Licensing Requirements for handling medical emergencies

- Vaccination providers are required to have adequate and appropriate emergency drugs and facilities* which are fit for use (i.e. drugs must not be expired, and equipment must be serviced in accordance to the vendor's recommendation for preventive maintenance)
- Vaccination providers must also ensure that a suitably qualified doctor or nurse is available for the assessment and management of emergencies (e.g. anaphylaxis) in accordance with MOH's guidelines

anaphylaxis and severe allergic reactions MINISTRY OF HEALTH SINGAPORE MOH Circular No. 30/2021 MH 34:24/8 15 March 202 All Medical Practitioners REVISED GUIDELINES ON THE MANAGEMENT OF ANAPHYLAXIS AND SEVERE ALLERGIC REACTIONS AFTER COVID-19 VACCINATION IN ADULTS This Circular sets out the revised guidelines on the management of anaphylaxis after COVID-19 vaccination in adults and supersedes MOH Circular No. 19/2021 with immediate effect. Amendments are italicised and highlighted Anaphylactic reactions to vaccines (including COVID-19 vaccines) are rare but potentially life-threatening. These immunoglobulin E (IgE)-mediated reactions are commonly due to vaccine constituents as opposed to microbial products. Underrecognition of anaphylaxis is common, hence rapid identification is vital. These guidelines inform all medical practitioners on the recognition and management of anaphylaxis and severe allergic reactions post-vaccination. RECOGNITION OF ANAPHYLAXIS 2. All persons who receive COVID-19 vaccines have to be seated and should be observed for 30 minutes after vaccination1,2. When anaphylaxis occurs after the administration of vaccine, patients generally develop symptoms within 30 minutes, although the onset may rarely be delayed for up to several hours. 3. Medical practitioners are advised to provide treatment for anaphylaxis in patients with two out of three of the following sets of symptoms* Acute onset mucocutaneous symptoms (flushing, pruritus, urticaria, angioedema - look out especially for swelling of lips, tongue and uvula); Respiratory symptoms and signs (wheezing, stridor, hypoxia, shortness of breath, sensation of throat tightness and hoarse voice); Symptoms and signs of hypotension (fainting, dizziness, confusion, a drop in systolic blood pressure (BP) to <90mmHg or diastolic blood pressure <60mmHq within minutes to several hours post-vaccination); The Center for Disease Control (CDC), United States, found that 71% of persons who experienced

anaphylaxis showed symptoms within 15 minutes post-vaccine administration. ² Closer monitoring (of up to an hour) may be warranted for the elderly. Check blood pressure and

ensure that they are well before discharge

MOH's guidelines on management of

*The emergency drugs and facilities required are Adrenaline, Hydrocortisone, Antihistamine, IV drip set, IV cannula, IV fluids, manual bag valve resuscitator and oropharyngeal airway (at least of two different sizes). Optional resuscitation facilities may include the bronchodilator, pulse oximeter, oxygen, intubation kit, and defibrillator/automated external defibrillator.

Background

SAE/Incidents

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For vaccine safety monitoring and situational awareness, MOH and HSA require healthcare professionals to report any Serious Adverse Events (SAE) within specified timeframes and via designated systems

A) Patient experiences SAE at vaccination site, during 30-mins observation period

Is the patient in serious or lifethreatening/fatal condition?

Submit incident report to MOH within 3 hrs. <u>No need to establish</u> <u>causality yet when reporting.</u>



• Report within 48 hours for all other SAEs

From 30 Dec 20 to 18 Apr 21, 0.004% of vaccine doses administered have been accompanied with a suspected SAE report

- The Pfizer-BioNTech COVID-19 vaccine was rolled out for use on 30 December 2020, followed by the Moderna COVID-19 vaccine on 12 March 2021
- As Pfizer-BioNTech vaccine comprised 92% of the doses administered in our population, most of the AEs reported were associated with the Pfizer-BioNTech COVID-19 vaccine
- Based on a total of about 2.2 million doses of the vaccines administered, HSA received 2,796 suspected AE reports (0.13% of doses administered)

	COVID-19 Vaccines
	(Pfizer-BioNTech and Moderna)
No. of persons who have received first dose	1,364,124
No. of persons who completed full vaccination regimen*	849,764
No. of doses administered	2,213,888
No. of suspected AE reports	2,796
	(0.13% of doses administered)
- No. of suspected serious AE reports	95
	(0.004% of doses administered)

* The full vaccination regimen for Pfizer-BioNTech and Moderna COVID-19 vaccines comprises 2 doses. All rights reserved, Health Sciences Authority



Vaccination Certificates

Those who have completed their vaccination regime will receive a physical vaccination card and can access their vaccination status via apps which can exempt them from pre-event testing in local settings

1. Vaccination Card

The COVID-19 vaccine you have received consists of two doses. The second dose must be completed to achieve the best possible protection, and for the protection to be as long-lasting as possible. ININISTRY OF HEALTH SINUARINE The vaccine has been assessed to be safe for use. However, just like other vaccines, you may experience some side effects such as headache, body aches, tiredness and soreness at the injection site, or fever. These usually get better after 1-3 days and may be a sign that your immune system is making a protective response against COVID-19. COVID-19 VACCINATION CA Name: Name: Name: NAME/ PLANTING AND	The COVID-19 vaccine you have received consists of two dorses. The second dose must be completed to achieve the best possible protection at the sale of or the protection to be as long-lasting as possible. The vaccine has been assessed to be safe for use. However, just like other vaccines, you may experience some side effects such as headache, body aches, tiredness and soreness at the injection site, or fever. These usually get better after 1-3 days and may be a sign that your immune system is making a protective response against COVID-19.
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2. TraceTogether



3.HealthHub



Vaccination Certificates

For overseas settings, MOH also issues vaccination certificates for those who are vaccinated locally and require proof for travel

- The process for requesting and receiving the digital vaccination certificate is similar to the request for endorsement of digital pre-departure certificates
- The digital vaccination certificate is available at the Government Notarise website and is currently tagged to the individual's passport number
- <u>https://www.notarise.gov.sg/</u>

PFIZER-BIONTECH COVID-19 Vaccine [Tozinameran] Injection

Completed Vaccination Date: 2021-03-02



VACCINATION CERTIFICATE

Name of Person:

NRIC/FIN Number:

Passport/Travel Document Number:

Nationality/Citizenship: Singaporean

Date of Birth:

Dose 1:

Manufacturer/Vaccination Name/Brand/Type: PFIZER-BIONTECH COVID-19 Vaccine [Tozinameran] Injection

Clinic/Vaccination Centre: Vaccination site approved by Ministry of Health (MOH),

Date of Vaccination: 8 February 2021

Batch Number: EK4245

Country of Vaccination: Singapore

Health Worker: Designated vaccinator by MOH-approved vaccination site