

Safe. Effective. Free.

HINTS AND TIPS FOR PLANNING AND DELIVERING RACF COVID VACCINATION CLINICS

The following checklist provides some hints and tips for residential aged care facilities to assist in planning and delivering a safe and efficient COVID-19 vaccination clinic. It is recommended service providers start planning early as some activities will take time to organise.

Planning

	Yes / No	Person responsible	Completion
Identify the RN Clinical Lead, and make contact with your Primary Health Network (PHN), identify PHN support person.			
Make sure you are across all COVID vaccine guidance material, and relevant public health orders.			
Ensure that key people on site have contact details for the organisation that will be supplying the vaccine workforce to your facility, and your PHN support person.			
Consider which residents will need the engagement of a supported decision maker and/or their substitute decision maker.			
Allow plenty of time for vaccination information pack to be provided to all residents, family and representatives, prior to discussion of consent.			



Logistics

	Yes / No	Person responsible	Completion
<p>Plan out the physical clinic set up (refer checklist), ensuring appropriate physical distancing, an area for post-vaccination monitoring, and the flow of residents through the clinic.</p> <ul style="list-style-type: none"> • Talk to your PHN support person if you have any concerns about the clinic meeting the physical environment requirements. 			
<p>Identify which residents may need to be vaccinated in their room; and consider if they should be vaccinated at the start or the end of the clinic. They will each need to be monitored directly for 15 mins post vaccine.</p>			
<p>Provide mechanisms for residents and families to ask questions around clinical suitability prior to and during vaccination clinics, including with nominated GPs</p>			
<p>Make sure you have plenty of hand sanitiser and antibacterial wipes in stock.</p>			
<p>Make sure you have equipment for basic diagnostic capability for monitoring residents post vaccination.</p>			
<p>Make sure you have a means of identification of residents, especially those who may not be able to state their own name and date of birth reliably in English for any reason.</p>			



Staffing

	Yes / No	Person responsible	Completion
Identify if you need to roster on additional skills sets (eg RNs) or staff (eg PCAs) to support residents and efficiently operate the clinic on the day.			
Ensure you have enough staff to support residents who may need extra reassurance, assistance and oversight.			
Make sure roles and responsibilities on the day are clear for everyone.			
Share information with staff about how the clinic will operate on the day.			
Have contingencies in place if staff experience side effects after their vaccination and are not able to attend work.			
Consider timing of staff vaccination in relation to their shifts.			
Ensure that staff understand potential side effects so they can review and support residents, and give simple analgesia if required.			
Lock in additional staff early, to reduce uncertainty.			



Communication

	Yes / No	Person responsible	Completion
Talk to your residents and staff, distribute the 'what to expect' document, and encourage people find out more information, including translated information on the Department of Health's COVID-19 vaccines website .			
Consider how you can support and engage with your residents, families and staff to encourage vaccination uptake.			
Enable people who would like more information or discussion to talk to their GP or other professional.			
Consider how you will communicate with families post vaccination visit to provide reassurance about wellbeing.			
Engage with OPAN (via 1800 700 600 or open.com.au) and connect residents or families with concerns with their local seniors right advocates.			



Consent

	Yes / No	Person responsible	Completion
Start giving residents and staff access to information early, including discussions with GP where required or desired.			
Consider mechanisms to encourage substitute decision making approaches to vaccination. Support information and discussion with residents and substitute decision makers to align decisions with the resident's known or likely wishes and preferences			
Note the COVID vaccine does not need to be prescribed by a GP for residents and workers.			
Organise consent early if possible. Some people need a long time to weigh up information and decide.			
You will need evidence of consent available for the vaccine workforce team to view.			
Plan how you can support individuals who request vaccination at the last minute, to be accommodated as far as possible.			



Supporting residents on the day

	Yes / No	Person responsible	Completion
Work with families and carers to ensure a support person will be present to assist those residents that would benefit on the day, eg to translate information, calm nerves, or provide reassurance.			
Plan to use wrist bands (or similar) to identify residents. This will help in the monitoring of residents to understand if a change in condition might be vaccine related (those not vaccinated will not be wearing a wrist band). <ul style="list-style-type: none"> A small hole punch can be used to clip each band after the first vaccine is administered and this could potentially be kept in situ, and a second clip at the second vaccination. 			
Plan to celebrate residents' participation (like morning tea in the lounge room) to engage residents.			
Plan and develop processes and protocols for how you will monitor residents after the clinic, understanding the possible side effects and how they might impact individual residents.			

GPs and Allied Health

	Yes / No	Person responsible	Completion
Provide GPs and allied health workers with early notice of your scheduled date for vaccination clinic.			
Make sure you will have access to GPs on the day of the clinic in case you need GP assessment of resident suitability to receive the vaccine if something changes.			

