

ABSTRACT

COVID-19 - Health and Family Welfare department - Protocol for Setting up and Conducting COVID-19 Vaccination Sessions - Orders - Issued.

HEALTH AND FAMILY WELFARE (P1) DEPARTMENT

G.O.(Ms).No.343

Dated: 06.08.2021 Pilava, Aadi - 21 Thiruvalluvar Aandu – 2052

Read:

- 1. G.O.(Ms).No.319, Health and Family Welfare (P1) Department dated: 31.08.2020.
- 2. G.O.(Ms).No.88, Health and Family Welfare (P1) Department dated: 24.02.2021.
- 3. Mail received from the Director of Public Health and Preventive Medicine, dated:01.08.2021.

ORDER:-

In Government order first read above, the Government have issued comprehensive guidelines for COVID-19. In Government order second read above, modified comprehensive guidelines have been issued for COVID-19 testing strategy, guidelines for home isolation, demarcation of containment zone, categorization of patients and discharge policy for Covid-19 patients.

- 2. The Director of Public Health and Preventive Medicine has sent a draft Protocol for Setting up and Conducting COVID-19 Vaccination Sessions for approval of the Government.
- 3. The Government have examined and accept the draft Protocol for Setting up and Conducting COVID-19 Vaccination Sessions and issue the following Protocol for Setting up and Conducting COVID-19 Vaccination Sessions:

Protocol for Setting up and Conducting COVID-19 Vaccination Sessions

1. Identification of Session Site

1.1. Fixed Site

- Fixed sites are to be planned in places where people are likely to come on daily basis
- To be identified by the DDHS / Health Officer concerned
- Fixed sites for vaccination
 - ✓ Government Health Facilities
 - ✓ Private Health Facilities
- Will include schools, community halls and any other spacious facility
- If vaccination site planned at health facility, it should be preferably separate from patient care area where there is no chance for the patients and people for vaccination are getting mingled with each other.

1.2. Outreach Vaccination Sessions

- Outreach sessions may be conducted in villages, industrial locations, Government / Private office establishments etc.
- Number of beneficiaries should be listed well in advance and informed
- Number of sessions and teams should be planned based on total number of beneficiaries
- Targeted Outreach Vaccination Sessions may focus on vulnerable workers namely Newspaper boys, Milk vendors/distributors, Street vendors, Staff working in Pharmacies and Groceries, Auto drivers, Taxi drivers, Bus driver/conductors, EB staff, Local body employees, workers in E-commerce, Essential Industries, Construction Workers, Migrant labourers, COVID-19 volunteers, Seafarers working in Shipping industries, Airport employees, Pregnant and feeding mothers and Birth companions, Differently Abled Persons, Transgenders and other vulnerable people.

2. Issue of tokens to beneficiaries for vaccination at the health facility

- Tokens may be given serially to all those who wait in the queue and tokens to be issued every day in each of the fixed vaccination centre but the serial number should be continued in order
- They may be asked to come the next day or the day after, based on the availability of vaccines. During the days of vaccination, the serial number or token number up to which vaccine will be administered may be displayed in the notice board.
- The vaccination centres may display in board showing the vaccine availability and token serial numbers (from-to-numbers) on the days when vaccine is administered, so that the availability is clearly known to the people and others need not wait on that day.
- Persons who require second dose, pregnant mothers, lactating mothers and very senior citizens may be given priority.

3. Setting up a Vaccination Site

- Designate a separate entry and exit if possible
- Open windows and doors for ventilation
- The session sites should be clean, tidy and away from dusty environment

- Designate three separate rooms or areas
 - √ Waiting room/ area (can be an open space also)
 - √ Vaccination Room
 - ✓ Observation Room
- Ensure adequate physical distance between chairs/ seats in waiting rooms
- Avoid criss-cross movement of beneficiaries at session site
 - ✓ Make arrow marks/foot step marks to show directions

3.1. Waiting Area

- Facility for hand washing/ sanitization at the entrance
- Seating arrangement to ensure physical distancing of 2 meters (6-7 feet)
- Only one person to enter vaccination room at a time
- Communication materials on COVID appropriate behaviour (hand hygiene, use of mask, physical distancing, ventilation, social distancing) to be displayed

3.2. Vaccination Room

- Only one beneficiary to enter vaccination room at a time to ensure privacy
- Logistics to be made available
 - ✓ 2 vaccine carriers with 4 conditioned ice packs each
 - ✓ Adequate COVID-19 vaccine vials in one of the vaccine carriers
 - √ Adequate numbers of AD syringes
 - ✓ Hand sanitizer and masks
 - √ Vaccine Vial Opener
 - ✓ Hub Cutter
 - ✓ Partition Screen
 - ✓ AEFI/Anaphylaxis Management Kit
 - Red and yellow bags, blue puncture proof container, bag for municipal waste

3.3. Observation Room

- Will require more space with adequate ventilation as beneficiaries will wait for 30 minutes after vaccination
- Seating arrangement to ensure physical distancing of 6-7 feet
- Communication materials on COVID appropriate behaviour to be displayed
- Drinking water and toilet facility should be available
- Health Education materials should be displayed at appropriate places

4. Composition of a Vaccination Team

- One Medical Officer
- One or two volunteers
- Two or three VHN/ANM/ Staff Nurses

5. Conduct of Vaccination

5.1. At the entrance

- A volunteer/staff to be stationed at the entry gate
- Will identify the beneficiary based on available list and message received by beneficiary
- Ask beneficiary to wash hands with soap and water or sanitize hands before entry
- Advise beneficiaries to follow COVID appropriate behaviour

- ✓ Wear mask/ face cover
- ✓ Maintain physical distance from each other
- Be aware of cultural sensitivities: Take need based support from female teammates
- Ensure COVID Vaccine IEC are displayed at the site
- Ensure beneficiaries are mobilized in staggered way to avoid overcrowding at the session site

5.2. In the Vaccination Room

- Medical Officer, nurses and volunteer to be available in the vaccination room
- A volunteer/staff will verify the identity of the beneficiary through
 - ✓ Aadhaar Card
 - ✓ Other Government photo ID
 - ✓ Service ID/ Proof of employment of healthcare worker
- BP to be recorded before vaccination by a nurse
- Ask whether the individual had breakfast/food
- Ensure privacy of beneficiary
 - o Allow only one beneficiary at a time in the vaccination room
 - Use a partition screen
 - Ensure a female attendant if a male vaccinator is vaccinating a female beneficiary
- Vaccination to be done by VHN/ANM/Staff Nurse in the presence of Medical Officer
- Ensure safe injection practices
- Reporting vaccination in Co-WIN app on the same day
- Manage injection waste as per guidelines
- Key messages to beneficiary to be explained
 - ✓ Details of the COVID vaccine given
 - ✓ Contact numbers of the area VHN, Health Inspector, and PHC Medical officers to be given to the beneficiary for any support post vaccination
 - ✓ Information about the message containing the date and venue for second dose through SMS
 - ✓ Follow COVID appropriate behavior even after vaccination

5.3. Observation Room

- Nurse to be available in the observation room
- Ask beneficiaries to wait for 30 minutes in observation room.
- Ensure that each beneficiary is under observation for 30 minutes
- Inform the doctor in case any beneficiary has adverse event
- Manage and report AEFIs, if any.
- Transfer to designated AEFI Management Centre if required

Giving a safe injection

- Wash hands with soap and water before and after the session
- Avoid giving injections at the injection site where there is local skin lesion, cut or dermatitis
- Always use AD syringes for COVID-19 vaccination
- Use a new sterile packed AD syringe for each injection for each beneficiary

- Discard AD syringes that have damaged packaging, or have passed the manufacturer expiry date
- Do not pre-fill syringes
- Sanitize your hands before vaccinating each beneficiary

7. Waste Management at Session Site

- Cut the hub of the syringe after giving the injection
- Store broken vials in the blue puncture proof container
- Segregate and store the plastic portion of the cut syringes in the red bag
- Cotton swabs soiled with blood will go in the yellow bag
- All other non-infectious wastes will be collected as municipal waste in a separate bag
- Immunization waste to be collected by designated person for safe disposal at the end of the day

(BY ORDER OF THE GOVERNOR)

J.RADHAKRISHNAN, PRINCIPAL SECRETARY TO GOVERNMENT.

To

The Principal Secretary / Commissioner, Greater Chennal Corporation, Chennal – 600 003.

The Director of Public Health and Preventive Medicine, Chennai – 600 006.

The Director of Medical Education, Chennai - 600 010.

The Director of Medical and Rural Health Services, Chennai - 600 006.

All Deans of the Medical Colleges (through the Director of Medical Education, Chennai - 600 010) All District Collectors.

Copy to:-

The Senior Personal Assistant to Hon'ble Minister (Medical and Family Welfare), Chennai – 600 C The Principal Private Secretary to Chief Secretary, Chennai – 600 009. Stock File / Spare Copy / Data Cell.

// FORWARDED BY ORDER //

SECTION OFFICER

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