

Module 4. Cultural Competence - Topic 4. Culturally competent needs assessment

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1. INTRODUCTION

Adult vaccination rates are extremely low. Most adults are not aware that they need vaccines. Recommendation from their healthcare professional is the strongest predictor of whether patients get vaccinated. There are many missed opportunities for vaccination because many healthcare professionals are not routinely assessing vaccination status.

Effective needs' assessment contributes to increasing vaccination rates and reducing missed opportunities for vaccination, which improves the quality of care for patients.

2. AIMS

This tool aims to increase vaccination rates and improve the quality of care for patients by enhancing practical skills of health care professionals for culturally competent needs assessment related to immunization.

3. LEARNING OUTCOMES

At the end of this training, the participants will be able to:

- To understand the importance of needs assessment in relation to the provision of quality health and social care.
- To enhance knowledge and skills for culturally competent needs assessment related to immunization in health and social care settings.

4. THEORETICAL FRAMEWORK

4.1. Concepts and definitions

Needs Assessment

Assessment checks if there are special needs, reasons or indications that a person should be vaccinated (Vaccinating Adults: A Step-by-Step Guide, 2017).

Assessment is the critical first step in ensuring that adult patients get the vaccines they need for their protection against serious vaccine-preventable diseases.

Screening

Screening aims to establish contraindications and precautions, the reasons that a person should not be vaccinated. Screening is made before every vaccine helps prevent adverse reactions such as anaphylaxis (Vaccinating Adults: A Step-by-Step Guide, 2017).

Vaccine contraindications

Contraindications (conditions in a recipient that increase the risk for a serious adverse reaction) to vaccination are conditions under which vaccines should not be administered. Because the majority of contraindications are temporary, vaccinations often can be administered later when the condition leading to a contraindication no longer exists. A vaccine should not be administered when a contraindication is present. Certain conditions are commonly misperceived as contraindications, i.e., are not valid reasons to defer vaccination (Kroger *et al.*, 2022).

Vaccine precautions

A precaution is a condition in a recipient that might increase the risk for a serious adverse reaction, might cause diagnostic confusion, or might compromise the ability of the vaccine to produce immunity (e.g., administering measles vaccine to a person with passive immunity to measles from a blood transfusion administered up to 7 months prior). A person might experience a more severe reaction to the vaccine than would have otherwise been expected. In general, vaccinations should be deferred when a precaution is present. However, a vaccination might be indicated in the presence of a precaution if the benefit of protection from the vaccine outweighs the risk for an adverse reaction (Kroger et al., 2022).

4.2. What the research says on the topic

1. Standards for Practice Adult Vaccine Needs Assessment | Centres for Disease Control and Prevention's (CDC). (2022, June 3). <https://www.cdc.gov/vaccines/hcp/adults/for-practice/standards/assessment.html>

Assessment is the critical step in ensuring that adult patients get the vaccines they need for protection against serious vaccine-preventable diseases. Patients' vaccination needs will change over time based on factors such as age, health conditions, lifestyle, travel, occupation.

Some tips and resources for improving vaccine assessment in practice.

- Stay informed.

At <https://www.cdc.gov/vaccines/vpd/index.htm>, you may find descriptions of the Vaccines by diseases and Vaccines recommended for infants, children, teenagers and adults of certain ages.

- Get the latest vaccine schedule/program for immunization of adults.

See examples of See **Immunization Schedules** at <https://www.cdc.gov/vaccines/schedules/index.html>

- Educate your patients about diseases for which they may be at risk and the vaccines that can prevent them. Inform the patients about vaccines and make sure he/she understands the risks and benefits of the vaccine(s).

See examples of **Vaccine Information Statements (VISs)** produced by Centres for Disease Control and Prevention (CDC) at <https://www.immunize.org/vis/>

- Implement standing orders or protocols. Identify roles of key and supportive staff for vaccine needs assessment.

Standing orders are written protocols approved by a physician or other authorized practitioner which establish who in your practice:

- Is eligible under state law (RNs, pharmacists, others?) to assess a patient's vaccination needs and provide vaccinations using the standing orders protocols.
- Can help determine the need for a patient to be vaccinated. (For example, the receptionist or the person who rooms patients can inquire if they have had their influenza vaccine yet this season).
- Will check the patient's chart to find out if they need vaccinations.
- Will provide screening checklists for contraindications and precautions to patients, and who will review the patients' answers.

See the Fact sheet " **10 Steps to Implementing Standing Orders for Immunization in Your Practice Setting**" available at <https://www.immunize.org/catg.d/p3067.pdf>

- Make vaccine assessment and vaccination a routine part of patient office visits.

Adults need different vaccines based on their health, age, lifestyle, and occupational factors – unlike most children, who need vaccines based on age alone. In deciding whom to vaccinate, you will need to assess individuals who comes into clinic setting.

Give patients a vaccine questionnaire to complete at check-in, which help you to identify vaccines your patients may need based on factors, such as upcoming travel or changes in medical conditions.

See examples of questionnaire at <https://www.cdc.gov/vaccines/hcp/adults/downloads/patient-intake-form.pdf> at <https://www.immunize.org/handouts/>

- Check the patient’s charts, immunization registries to find out patients that need vaccinations.

A template for Vaccine Administration Record for Adults (4 pages) is available at <https://www.immunize.org/catg.d/p2023.pdf>

- Use reminders of needed vaccines. Generate reminders using a computer system (electronic health record), immunization registries, or make a note of needed vaccines on a patient’s vaccination chart.

See also the info sheet **Tips and Resources for Improving Vaccine Assessment in Your Practice**, and <https://www.cdc.gov/vaccines/hcp/adults/downloads/standards-immz-practice-assessment.pdf>

2. Vaccinating Adults: A Step-by-Step Guide. (2017). Immunization Action Coalition (IAC). Retrieved 12 February 2023, from <https://www.immunize.org/guide/>

Before administering the vaccine, it is obligatory the screening for contraindications and precautions to vaccines in order to prevent the adverse reactions such as anaphylaxis.

- Determine the patient’s previous vaccination history based on the medical records.

Immunization histories can be found in medical records, personal vaccination cards, and immunization information systems or registries. Immunization providers may encounter persons who do not have documentation of the vaccines they have received. Vaccinations should not be postponed if records are not available, but providers should attempt to locate missing records by contacting the patient’s previous health care providers and/or the immunization program at the state or local health department, reviewing state or local IIS data, and asking patients to search for a personal vaccination record.

- **Screen for contraindications and precautions to the vaccines.**

Examples of **Screening Checklists** adapted for each vaccine including COVID-19 Vaccine by checklists by Centres for Disease Control and Prevention (CDC) are available at www.immunize.org/handouts/screening-vaccines.asp

- Determine if the person should be vaccinated or not, based on the vaccine history and contraindications and screening.
- Advise the patient, parents or legal representatives should be vaccinated and explain both the benefits and risks of the vaccine.

After administering vaccines, assess the medical care needs:

- Put in practice the emergency plan. Prepare and watch for an allergic reaction (anaphylaxis) after vaccination and, when they occur, you take immediate action. Anaphylaxis is life threatening.
- Monitor the patient systemic symptoms, such as generalized mild rash or low-grade fever, a week or two after vaccination.

See the fact sheet **Medical Management of Vaccine Reactions in a Community Setting** by Adults Immunization Action Coalition (IAC), available at www.immunize.org/catg.d/p3082.pdf,

3. Kroger, A., Bahta, L. & Hunter, P. (2022). General Best Practice Guidelines for Immunization. *Best Practices Guidance of the Advisory Committee on Immunization Practices (ACIP)*. Retrieved 12 February 2023, from www.cdc.gov/vaccines/hcp/acip-recs/general-recs/downloads/general-recs.pdf

Persons who administer vaccines should screen patients for contraindications and precautions to the vaccine before each dose of vaccine is administered. Screening is facilitated by consistent use of screening questionnaires.

The Guide contains the list of descriptions of valid Contraindications and precautions established by the USA Advisory Committee on Immunization Practices (ACIP)

- (a) To commonly used vaccines (Table 4.1, page 45).
- (b) Conditions incorrectly perceived as contraindications or precautions to vaccination, i.e., vaccines may be given under these conditions (Table 4.2, page 62).

4. *Implementation guide for vaccination of health workers. (2022). World Health Organization (WHO)*. Retrieved 12 February 2023, from <https://apps.who.int/iris/rest/bitstreams/1453340/retrieve>

Healthcare personnel (HCP) are at increased risk of exposure to vaccine-preventable diseases by virtue of their occupation. Likewise, HCP with a vaccine-preventable disease pose a grave risk to their patients, who often have other medical issues. It is the ethical obligation of HCP to assure they are immune to vaccine-preventable diseases to protect themselves and to avoid being a vector for transmitting those diseases to their patients.

This guide outlines the policy framework for health workers vaccination and the importance of integrating health workers vaccination into existing national OHS policies and programs as well as into the management practices of health facilities.

The World Health Organization has issued specific recommendations for vaccines of particular importance to health workers, against vaccine-preventable diseases (VPDs) for which there is a higher risk of transmission within health-care settings.

Vaccinations for health workers fall into three general categories:

- I. Routine immunizations which all health workers should receive, ideally prior to entering the health workforce or beginning clinical contact;
- II. Annual or periodic vaccinations (e.g., seasonal influenza vaccine);
- III. Exceptional or emergency vaccinations for which health workers are a priority group (e.g., pandemic influenza and Ebola vaccine).

5. LEARNING ACTIVITIES

Activity 1. Case-study: Screening for Contraindications to Inactivated Injectable Influenza Vaccination (duration: 40 minutes):

A person of 65 years old is going to take the Injectable Influenza Vaccine (IIV4 or RIV4).

Before vaccination, you do the screen for Contraindications and precautions using the *Screening Checklist for Contraindications to Inactivated Injectable Influenza Vaccination* (download it at <https://www.immunize.org/catg.d/p4066.pdf>).

This person tells you that she/he is sick today.

1. In order to decide if there is any reason you should not give inactivated injectable influenza vaccination today, formulate additional questions (symptoms, fever, medication, etc) and evaluate if there is a minor, moderate or severe illness.
2. Read the Information for Healthcare Professionals of the Screening Checklist (**page 2**) and take a decision about giving to her/him the inactivated injectable influenza vaccination.

For more documentation, you may go to the ACIP vaccine recommendation at the following website: www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/flu.htm

3. Describe your case-study on the dedicate forum and tell your colleagues about your evaluation of the illness and your decision about giving to her/him the inactivated injectable influenza vaccination.
4. Comment the decisions of the other peers.

Examples of Resources to be used for the module learning activities:

No.	Title and description of the resource	Type	Language of resource	Learning, training, assessment and evaluation activities	Access URL / download
1.	Screening Checklist for Contraindications to Inactivated Injectable Influenza Vaccination	Tool Checklist	English	Individual learning Self-reflection	https://www.immunize.org/catg.d/p4066.pdf
2.	Vaccine Recommendations and Guidelines of the ACIP	Website	English	Individual learning	www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/flu.html

6. ASSESSMENT ACTIVITIES

Self-assessment - Fill in blank (duration: 5 minutes):

Put in blanks the appropriate words from the list. If you need, you may review the Learning Tool **4.3 Culturally competent needs assessment** available at <https://iene11.eu/learning-tools/>.

1. is an intervention that checks if the person should be vaccinated and to identify the vaccines may need.
2. is made before each vaccination to see the vaccine contraindications and precautions.
3. The vaccine should not be administered when a is present.
4. Vaccination might be indicated in the presence of a, if the benefit of protection from the vaccine outweighs the risk for an adverse reaction.
5. The vaccine provider explains to the patient the benefits and risks of the vaccine as well as any may have after vaccination.

(screening, assessment, adverse reactions, contraindication, precaution)

7. REFERENCES

- ACIP Vaccine Recommendations | Centres for Disease Control and Prevention's (CDC).* (2022, January 18). Retrieved 12 February 2023, from <https://www.cdc.gov/vaccines/hcp/acip-recs/index.html>
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Vaccine questionnaire. (n.d.). Immunization Action Coalition (IAC). Retrieved 12 February 2023, from <https://www.immunize.org/handouts/>