

Vaccination Subsidy Scheme (VSS)
Guidelines for Organisers to Arrange Vaccination Activity
at Non-Clinic Settings

Introduction

As vaccination is invasive in nature, the organiser and the doctor in-charge of the arrangement (the doctor) should give due consideration to safety and liability issues when organising vaccination service at non-clinic settings. Organisers should stay clear of associating with any improper financial transactions with the doctor.

(I) Select a Doctor to be in-charge of the Arrangement

Organiser can select any private doctor for the vaccination activity. However, if the vaccine recipients want to use Government subsidy, the organiser must select a private doctor who has enrolled to the Vaccination Subsidy Scheme (VSS) and will provide outreaching vaccination service at non-clinic settings.

Information of enrolled doctors is uploaded to the Centre for Health Protection website (http://www.chp.gov.hk/en/view_content/17980.html). Alternatively, the organiser can contact the Vaccination Office at 2125 2125 for assistance.



Read carefully the terms of services provided by the doctor, including the doctor's liability, service fees, the arrangement for those absent for vaccination and 2nd dose vaccination for children.

(Note: children under the age of 9 who have never received any seasonal influenza vaccination before need to receive 2 doses, at least 4 weeks apart. If required, the organiser should liaise with the doctor on arrangement for vaccination of 2nd dose.)

(I) Select a Doctor to be in-charge of the Arrangement (Cont'd)



Follow up with the doctor to arrange the vaccination and make sure the doctor will provide the following services:

- Provide safe and quality vaccination service to vaccine recipients.
- The doctor should (a) exercise effective supervision over the trained personnel who cover his duty and (b) retain personal responsibility for the treatment of the patients.
- The Department of Health recommends that on-site doctors should be available.
- Arrange sufficient number of qualified / trained healthcare personnel to provide service and medical support. The personnel should be trained in emergency management of severe immediate reactions and equipped to do so.
- Arrange health care professionals to assess the recipients for his suitability to receive vaccination.
- For PCV13 vaccination, the doctor should pre-arrange health assessments to confirm whether the elderly has high-risk condition and complete and sign on relevant parts of the “Consent To Use Vaccination Subsidy” form.
- The doctor should give personal supervision to trained personnel or arrange qualified health care professionals to administer the vaccination.
- Properly handle clinical wastes (e.g., needles and blood-stained cotton wool balls, etc.).
- Ensure all personnel comply with infection control guidelines.

Some organisations and schools indicated that they may consider tendering when needed. The *Reference Information on the Service Requirements for Arrangement of Vaccination Activity at Non-Clinic Settings* in Appendix 1 and 1(A) are prepared for reference if necessary.

(Once confirmed the plan, remind the doctor to submit the completed *Notification on Vaccination Activity at Non-Clinic Settings* form to the Department of Health **at least two weeks prior** to the vaccination activity. The Vaccination Office would notify Environmental Protection Department (EPD) about the time and venue of the vaccination activity at non-clinic setting using the form.)

(II) Before Vaccination



Venue Arrangement

The vaccination venue should be well lit, ventilated and clean. Adequate and separate areas should be arranged for the vaccine recipients (1) to wait and register, (2) to receive vaccination, (3) to stay and remain under observation after vaccination, and (4) to receive first aid treatment if necessary.

The vaccination venue should be able to provide a suitable place for temporarily storage of the clinical waste which cannot be collected immediately after the vaccination activities. Please refer to the “*Guideline for Temporary Storage of Clinical Waste Generated in Outreach Vaccination Activities*” in Appendix 2.



Provide sufficient information to vaccine recipients or parents/guardians of vaccine recipients who are under the age of 18 / mentally incapacitated

- Assist the doctor to distribute essential information on the vaccines and VSS to them. Information leaflet can be downloaded from the Centre for Health Protection website (http://www.chp.gov.hk/en/view_content/17980.html) or obtained from the Vaccination Office (Tel. 2125 2125).
- Inform them if service fee is required by the doctor.
- Ensure they understand that participation in the Government’s vaccination subsidy scheme is voluntary.
- Allow sufficient time for them to consider if they should join VSS or refuse to accept Government subsidy.
- Inform them that the Department of Health may contact randomly selected recipients or their parents / guardians for information verification.

(III) Documentation



Before Vaccination

- Ensure vaccine recipients and parents / guardians acting on behalf of vaccine recipients who are under the age of 18 / mentally incapacitated must :
 - Complete legibly a Consent to Use Vaccination Subsidy form for the recipient.
 - Produce documentary proof of Hong Kong resident status and the document for certifying the eligibility as necessary.
 - Produce the vaccination cards, if any.
- Assist the doctor :
 - Distribute and collect the health assessment form. A sample of the health assessment form is uploaded to the website of the Centre for Health Protection.
(http://www.chp.gov.hk/en/view_content/17980.html)
 - Collect the duly signed and completed Consent to Use Vaccination Subsidy form so that the doctor could verify the vaccine recipient's eligibility for the subsidy and check vaccination record at the eHealth System (Subsidies) to prevent duplicated dose.



On the day of Vaccination

- Assist in arranging those who have provided the duly signed and completed Consent to Use Vaccination Subsidy form to receive vaccination.
- For those walk-in persons, please refer them to the doctor to handle.

(III) Documentation (Cont'd)



After Vaccination

- Ensure the healthcare personnel have recorded the vaccine information at the Vaccination Record Card and have returned the Vaccination Record Card to the vaccine recipients or their parents / guardians.
- The organiser should also keep a record clearly if a recipient named in the *Consent to Use Vaccination Subsidy* form has actually received the vaccination on the scheduled day for future inspection.
- Properly package, store and dispose of their clinical waste generated in the vaccination activities according to the Environmental Protection Department's *Code of Practice for the Management of Clinical Waste - Small Clinical Waste Producers* (http://www.epd.gov.hk/epd/clinicalwaste/file/doc06_en.pdf) and "*Guideline for Temporary Storage of Clinical Waste Generated in Outreach Vaccination Activities*" (Appendix 2).
- Remind the parents about the second dose arrangement for children under the age of 9 who have never received any seasonal influenza vaccination

The above notes are by no means exhaustive. Please refer to Centre for Health Protection website (http://www.chp.gov.hk/tc/view_content/17980.html) for more information regarding the use of VSS.

Department of Health
Sept 2017

**Reference Information on the Service Requirements
for the Arrangement of Vaccination Activity at Non-Clinic Settings**

(Some organisations and schools indicated that they may consider tendering when needed. The information in this appendix is prepared for reference if necessary.)

As vaccination is invasive in nature, the organiser and the doctor in-charge of the arrangement (the doctor) should give due consideration to safety and liability issues when organising vaccination service at non-clinic settings.

Organisers may take this reference when preparing the quotation documents for vaccination activity at non-clinic settings. The content of this Reference is not meant to be exhaustive. The organisers should add their own requirements, amend and delete the inappropriate clauses as necessary. The Department of Health will not have or accept any liability, obligation or responsibility whatsoever for any loss, destruction or damage (including without limitation consequential loss, destruction or damage) however arising from any use / misuse of or reliance on this Reference.

Proposed Service Requirements for the Arrangement of Vaccination Activity at Non-Clinic Settings

1. The Service Provider is required to arrange an activity for seasonal influenza vaccination and/ or pneumococcal vaccination (for elderly) with the following particulars: (The organiser should specify the particulars)
 - (i) Target group
 - (ii) Number of estimated recipients
 - (iii) Age range of the recipients
 - (iv) Venue of the activity
 - (v) Address of the venue
 - (vi) Proposed date and timing of the activity
2. The Service Provider shall be / arrange a private doctor (the doctor in-charge) who has been enrolled in the Vaccination Subsidy Scheme (VSS) to take charge of the whole activity and provide the following services:

A) Vaccination arrangement

- (i) Provide the name of the type of vaccine which they would provide, e.g. trivalent seasonal influenza vaccine and/ or quadrivalent seasonal influenza vaccine, 23-valent pneumococcal vaccine (for elderly) and/ or 13-valent pneumococcal vaccine (for elderly with high-risk conditions); and ensure the composition of the vaccine is under the coverage of the VSS.
- (ii) Strictly follow the vaccine manufacturers' recommendation on storage of individual vaccines. Purpose-built vaccine refrigerators (PBVR) are the preferred means of storage for vaccines in clinic. Cold boxes, equipped with ice packs, maximum-minimum temperature thermometers, insulating materials, etc. should be used for transport of vaccines to the vaccination venue. The temperature of the vaccines should be checked regularly by the thermometer to maintain cold chain at 2-8°C during transport and administration of vaccines.
- (iii) Provide safe and quality vaccination service to vaccine recipients.
- (iv) Exercise effective supervision over the trained personnel who cover his duty and retain personal responsibility for the treatment of the patients.
- (v) Make on-site doctor available is preferred.
- (vi) Arrange sufficient number of qualified / trained healthcare personnel to provide service. The personnel should be trained in emergency management of severe immediate reactions and equipped to do so.

B) Administration of Vaccination

- (i) Arrange health care professionals to assess the suitability of the recipients for vaccination before vaccination by checking pre-filled health assessment form and body temperature.
- (ii) For PCV13 vaccination for elderly, pre-arrange health assessment, confirm the presence of high-risk conditions, complete and sign on relevant parts of the "Consent To Use Vaccination Subsidy" form.
- (iii) Give supervision to trained personnel or arrange qualified health care professionals to administer the vaccination. As basic requirement, 3 checks (check when taking out the vaccine from the storage; check before preparing the vaccine; check before administering the vaccine) and 5 rights (right person; right drug; right dose; right time; right route) for vaccine administration should be properly followed.
- (iv) Keep vaccinated persons under observation in the vicinity of the place of vaccination for at least 15 minutes to ensure that they do not experience an immediate adverse event before leaving.

- (v) Properly package, store and dispose of their clinical waste generated in the vaccination activities according to the Environmental Protection Department's Code of Practice (CoP) for the Management of Clinical Waste (Small Clinical Waste Producers) (http://www.epd.gov.hk/epd/clinicalwaste/file/doc06_tc.pdf) and the guideline for temporary storage provided by the Environmental Protection Department in Appendix 2.
- (vi) Ensure all personnel comply with infection control guide. Hand hygiene protocol must be strictly followed before and after administering vaccination to a vaccine recipient.
- (vii) For eligible children under the age of 9 who have never received any seasonal influenza vaccination before, arrange vaccination of a 2nd dose at least four weeks later.

C) Provide sufficient information to vaccine recipients or parents / guardians of vaccine recipients who are under the age of 18/ mentally incapacitated

- (i) Provide them with essential information on the vaccines and the VSS and it is preferable to provide health talks to them about the relevant vaccination.
- (ii) Inform them if service fee is required by the doctor.
- (iii) Ensure they understand that participation in the Government's vaccination subsidy schemes is voluntary.
- (iv) Allow sufficient time for them to consider if they would join VSS and accept Government subsidy.
- (v) Inform them that the Department of Health may contact randomly selected recipients or their parents / guardians for information verification.

D) Provide proper documentations for the vaccination

- (i) Document all vaccinations clearly on a vaccination record and issue vaccination card to the vaccine recipient or their parents / guardians.
- (ii) Document all vaccinations given, including the name of vaccine, lot number and expiry date, name of personnel who administered the injection and doctor responsible on a vaccination record which should be kept in a database for record traceability.
- (iii) Provide a telephone number to vaccine recipients or their parents / guardians for enquiries concerning vaccination.

3. All bidders are required to fill in the information as attached in the Appendix 1(A).

Appendix 1(A)

The bidders are required to fill in the following information:

Item	Information to be provided																				
Particular of the doctor in charge	Name : _____ Medical Organisation : _____																				
Particular of the vaccines and service fees	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Name</th><th style="width: 20%;">Expiry Date</th><th style="width: 20%;">Service Fees (using subsidy)</th><th style="width: 30%;">Service Fee (no subsidy)</th></tr> </thead> <tbody> <tr> <td>QIV (Quadrivalent)</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>TIV (Trivalent)</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>Pneumococcal (23vPPV) (for elderly)</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>Pneumococcal (PCV13) (for elderly with high-risk conditions)</td><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>	Name	Expiry Date	Service Fees (using subsidy)	Service Fee (no subsidy)	QIV (Quadrivalent)	_____	_____	_____	TIV (Trivalent)	_____	_____	_____	Pneumococcal (23vPPV) (for elderly)	_____	_____	_____	Pneumococcal (PCV13) (for elderly with high-risk conditions)	_____	_____	_____
Name	Expiry Date	Service Fees (using subsidy)	Service Fee (no subsidy)																		
QIV (Quadrivalent)	_____	_____	_____																		
TIV (Trivalent)	_____	_____	_____																		
Pneumococcal (23vPPV) (for elderly)	_____	_____	_____																		
Pneumococcal (PCV13) (for elderly with high-risk conditions)	_____	_____	_____																		
Storage of vaccine (put a ✓ as appropriate)	<input type="checkbox"/> Stored in purpose-built vaccine refrigerators <input type="checkbox"/> Stored in domestic refrigerator with regular checking of temperature <input type="checkbox"/> Transported in cold boxes with regular checking of temperature																				
Number of the on-site staff provided on the day of vaccination (e.g. doctor/ registered nurse/ enrolled nurse / supportive staff)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">Qualification of the on-site staff</th><th style="width: 30%;">Number</th></tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr> <td style="text-align: right;">Total</td><td> </td></tr> </tbody> </table>	Qualification of the on-site staff	Number											Total							
Qualification of the on-site staff	Number																				
Total																					
Provide Health Talk(s) (put a ✓ as appropriate)	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> (Qualification of the speaker: _____)																				
Provide Enquiry Hotline (put a ✓ as appropriate)	<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> (Hotline No. : _____) (Operating hours of the hotline : _____)																				

Vaccination Subsidy Scheme
Guideline for Temporary Storage of Clinical Waste Generated in
Outreach Vaccination Activities
(Provided by the Environmental Protection Department)

1. Preamble

- 1.1 The aim of this guideline is to provide guidance to healthcare workers, organisers and the designated person of the venue amongst outreach vaccination activities, for proper and safe handling and temporary storage of clinical waste generated in outreach vaccination activities.

2. Responsibilities of Healthcare Workers, Organisers and Designated Person of the Venue

- 2.1 According to the Waste Disposal (Clinical Waste) (General) Regulation (the Regulation), healthcare workers, organisers and designated person of the venue involving in outreach vaccination activities should handle the clinical waste properly. They shall take all necessary precautions to prevent danger to public health and safety, pollution to the environment and nuisance to the neighbouring area. Appendix 2(A) illustrates different ways to handle clinical waste generated in the outreach vaccination activities.
- 2.2 Before the outreach vaccination activities, healthcare workers and organisers should pre-arrange with licensed clinical waste collectors* to collect the clinical waste on the same day of the activities. Healthcare workers could also choose to self-deliver their clinical waste to the Chemical Waste Treatment Centre at Tsing Yi by private car on the same day after the event. A note on self-delivery can be found in Appendix 2(B).
- 2.3 In case the clinical waste could not be collected on the same day (e.g. outreach vaccination activities conducted in the evening or public holidays), healthcare workers and organisers should pre-arrange with designated person of the venue to store the clinical waste temporarily at the venues for the licensed collectors to collect on the following working day. If no suitable storage area could be provided, healthcare workers and organisers should identify another suitable venue for outreach vaccination activities.

* List of licensed clinical waste collectors : <http://epic.epd.gov.hk/EPICDI/clinicalwaste/list/>

- 2.4 The healthcare workers should affix a label on each clinical waste container requiring temporary storage (see [Appendix 2\(C\)](#)). The label should clearly display (1) the name of the responsible healthcare worker, (2) name of his/her organisation, (3) emergency contact number, (4) address of waste generation (i.e. the venue address) and (5) the date of sealing. After the sealed container is handed to the venue for temporary storage, it is the responsibility of the designated person of the venue to store the clinical waste properly before collection by licensed collector.
- 2.5 When the licensed collector comes to collect clinical waste on the following working day, the designated person of the venue should sign the trip ticket and forward the pink copy of the trip ticket to the healthcare worker for record.
- 2.6 According to the Regulation, except to the Chemical Waste Treatment Centre direct, delivery of clinical waste to any other places by healthcare workers (including to their own clinics) is not permitted.

3. Requirements of Temporary Storage Area

- 3.1 The temporary storage area of clinical waste should meet with following requirements and specifications:
- (a) the storage area should be an independent lockable storage cabinet, locker or drawer, and keep away from the area of food preparation and storage;
 - (b) a warning sign and a label comprising (1) the name of the responsible healthcare worker, (2) name of his/her organisation and (3) emergency contact number should be affixed on the door of the storage area (see [Appendix 2\(C\)](#)). The warning sign could be obtained from the Environmental Protection Department free of charge;
 - (c) the storage area should only be used for storage of clinical waste; and
 - (d) any unauthorised access to the temporary storage area should be prohibited.

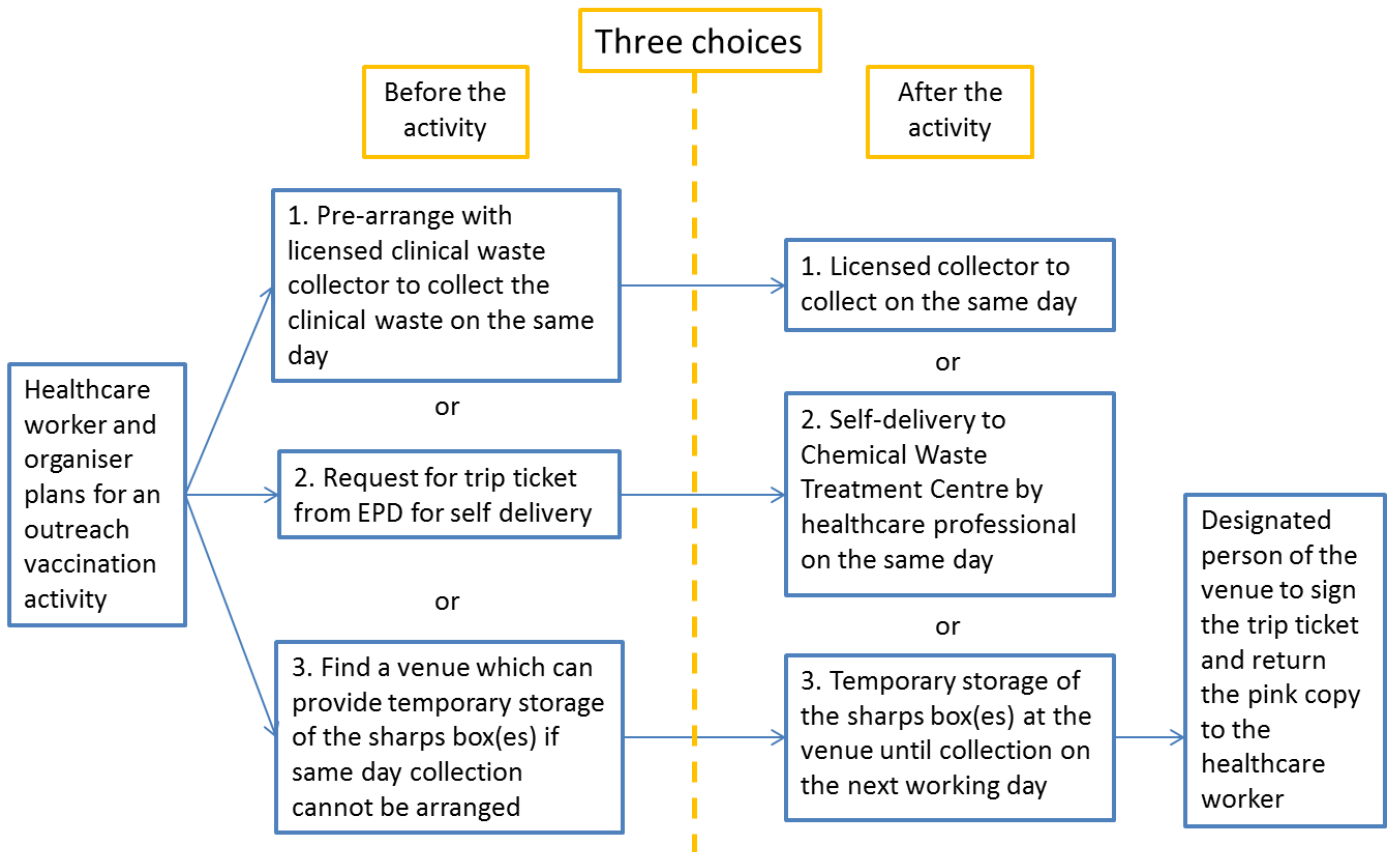
4. Further Enquiry

- 4.1 For any enquiries, please contact Mr Lam of the Environmental Protection Department at 3107 2980.

Environmental Protection Department
September 2017

Different ways of handling clinical waste generated in the outreach vaccination activities

Outreach Vaccination Activities Clinical Waste Management



**Notes to Healthcare Professionals on the
Delivery of Clinical Waste to the
Chemical Waste Treatment Centre (CWTC)**

A healthcare professional (HCP)¹ may directly deliver clinical waste to the CWTC² for disposal but his/her liabilities under the Waste Disposal (Clinical Waste) (General) Regulation (the Regulation) will not be discharged unless the delivery of clinical waste is completed safely and properly. This includes:

- Clinical waste carried is not more than 5 kg and is not Group 4 waste;
- Clinical waste is packaged in an appropriate type of container, sealed and labelled properly;
- Only private car is used for the delivery.

The full requirements are stated in Section 4 of the Regulation and Section 6 of the Codes of Practice. The HCP must provide a clinical waste trip ticket filled with relevant information, such as the name of the HCP, his/her HCP body registration number and the assigned premises code of the clinical waste producer, and show his/her identity and registration proof at the CWTC.

A charge at \$2,715 per 1,000 kg (or \$2.715 per kg)³ will be levied on the clinical waste as received and treated at the CWTC. The amount to be paid depends upon the weight of clinical waste received and only cash is accepted.

The reception hours for receiving clinical waste delivered by HCP at the CWTC are 9:00 a.m. - 12:00 noon and 1:00 p.m. - 4:30 p.m. on Monday to Friday (except for public holiday).

For any enquiries, please contact Mr Lam of the Environmental Protection Department at 3107 2980 or visit the webpage <http://www.epd.gov.hk/epd/clinicalwaste>.

¹ Healthcare professionals include registered medical practitioners, dentists and veterinary surgeons, registered or listed Chinese medicine practitioners, and registered or enrolled nurses as defined in the Regulation.

² CWTC is located at 51 Tsing Yi Road South, Tsing Yi, New Territories, Hong Kong.

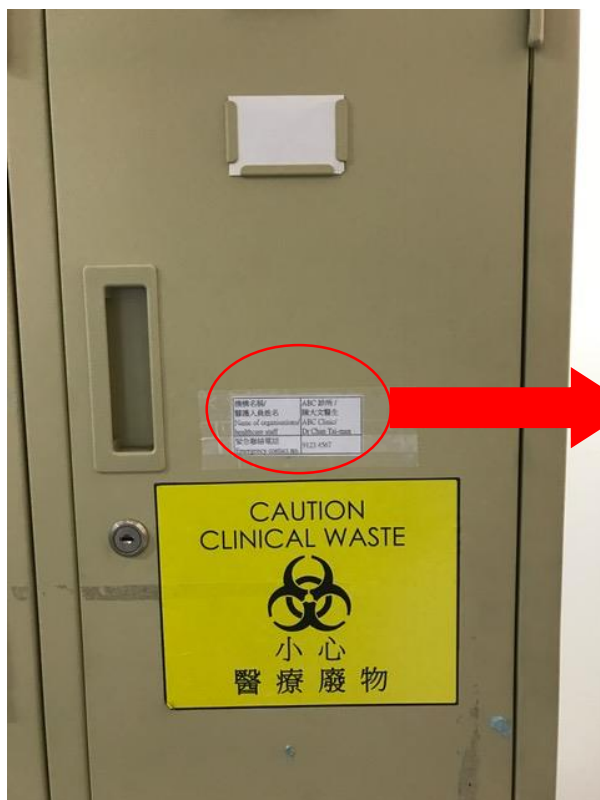
³ The charge is stipulated under the Waste Disposal (Charges for Disposal of Clinical Waste) Regulation.

1. Example of a labelled clinical waste container



Name of organisations/ healthcare worker	ABC Clinic/ Dr Chan Tai-man
Emergency contact no.	9123 4567
Address of clinical waste generation	DEF Elderly Centre, G/F, XX House, XX Estate
Date of sealing	25/11/2017

2. Example of warning sign and label on a temporary storage cabinet



Name of organisations/ healthcare worker	ABC Clinic/ Dr Chan Tai-man
Emergency contact no.	9123 4567