



BC Centre for Disease Control

An agency of the Provincial Health Services Authority

Date: October 3, 2011

ATTN: Medical Health Officers and Branch Offices
Public Health Nursing Administrators and Assistant Administrators
Holders of Communicable Disease Control Manuals

Re: **Revisions to the Communicable Disease Control Manual –
Chapter 2, Immunization Program, Section 1B, Informed Consent**

Please note the following changes to the Communicable Disease Control Manual, Chapter 2 –Immunization Program, Section 1B, Informed Consent

The BC Immunization Committee Informed Consent Working Group has continued to meet and to revise the standard of practice based on feedback received from public health nurses and community nurses working in Aboriginal communities. With this revision, there has been extensive consultation with solicitors from the Ministry of the Attorney General. Consultation with representatives from Health Services for Community Living has been valuable in revisions to the section pertaining to “Immunization of Adults Assessed as Incapable of Giving or Refusing Informed Consent.”

Pages 2 & 3, “General Definitions”:

- Updated definition for “Capability”: the ability of an individual or representative to understand the Standard Information and that the information applies to the individual being immunized.
- Updated definition for “Informed Consent” to include “...and demonstrating an understanding of the Standard Information and that the information applies to the individual being immunized.”

Administrative Circular 2011:13

**IMMUNIZATION PROGRAMS AND VACCINE PREVENTABLE DISEASES
SERVICES**

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- “Standard Information” now includes consent being obtained for a vaccine series, and consent being valid until the series is completed or consent is revoked. BC Health Files has been changed to “HealthLinkBC Files or other provincial resources as applicable” here and throughout the document.
- Updated definition for “vaccine”: a pathogen-specific preparation of a weakened or killed pathogen, such as a bacterium or virus, or of a portion of the pathogen's structure, or of a genetically engineered antigen that upon administration stimulates antibody production or cellular immunity against the specific pathogen. For the purposes of this document, the term “vaccine” will include anti-toxin and immune globulin preparations.
- Updated definition of “Parent/Representative of a child”: an individual authorized to consent to immunization on behalf of a child (i.e., is authorized to make health care decisions for that child.) This can include a person to whom the parent/representative has given delegated authority to make decisions with respect to immunization of a child.
- Additional information regarding “Delegated Authority” moved to 4.1f.

Page 4, a) “Routine Infant Series”:

- First bullet revised to reflect use of INFANRIX hexa™.

Pages 5 & 6, “Step 1: Determine Authority to Provide Informed Consent”:

- Updated definition for “Adults”: Adults give, refuse or revoke consent for their own immunization.
- New information regarding the authority of prospective adoptive parents to consent for their child to be immunized.
- Simplified information regarding “delegated authority” and what must be included in a note to a health care provider.

Page 7, “Step 2: Assess Capability to Give informed Consent”, “Adults”:

- Expanded information about seeking consent from an adult presenting for immunization, including observing for implicit consent or seeking assistance to interpret the client’s communication.

Page 9, “Step 7: Document Consent or Refusal”:

- The person providing consent may do so in person (e.g., orally, or by inference through their conduct), in writing, or by telephone.

Page 10, Effective Period”:

- New information added regarding circumstances that may alter vaccine refusal. “Individual circumstances to a prior refusal to vaccination may change; these include medical issues such as ‘outgrowing’ an egg allergy, and philosophical changes in stance, as well as maturation of an individual to an age where they may consent on their own behalf to vaccines previously refused by a parent/ guardian. These dynamic circumstances should be

considered in future approaches to offer immunization services and avoid missed opportunities for vaccination.”

Page 10, “Subsequent visits in a Series”:

- Pharmacists added to the list of private immunizers.
- Discuss with the client new and significant changes to the vaccine information (e.g., changes to contraindications, precautions or adverse events.) The entire consent process does not need to be repeated.
- Repeat the Standard Information when the person giving consents asks that the information be repeated or requests further information.

Page 11, 5.0 “Checklist for Obtaining Informed Consent for a Vaccine Series”:

- Expanded information for assessing capability; “assess client’s methods of communication and hearing, language and cognitive abilities.”
- Confirmation that the person giving consent understands the Standard Information including an understanding that this information applies to the person being immunized. .

Pages 12 – 15, 7.0 “Immunization of Adults Assessed as Incapable of Giving or Refusing Informed Consent”:

- This section has been expanded for clarity
- “Adults incapable of consenting for self” has been revised to read “Adults assessed as incapable of providing informed consent.”
- When an adult has been assessed as incapable of providing consent, obtain consent from a substitute decision maker (i.e., a personal guardian, representative or temporary substitute decision maker [TSDM])
- When consent has been provided by a TSDM, the vaccine series must be started within 21 days of the date of signing. The consent is valid for the remainder of the series.
- Consent may also be provided through a Health Care Plan
- Consent forms have been revised to reflect changes in this section. Forms are available on the BCCDC website at <http://www.bccdc.ca/imm-vac/VaccinesBC>

Please remove and destroy the following pages from the Communicable Disease Control Manual, Chapter 2 – Immunization Program, Section 1B: Informed Consent

Please insert the following pages in the Communicable Disease Control Manual, Chapter 2 – Immunization Program, Section 1B: Informed Consent

TOC and Pages 1-16

Dated October 2011

Special thanks and acknowledgement is given to the BCIC Informed Consent Working Group members for these revisions:

Issy Aguiar, Interior Health

Marion Guenther, Vancouver Coastal Health

Felicity Hemming and Stephanie Meier, Fraser Health

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If you have any questions or concerns, please contact Cheryl McIntyre, Clinical Nurse Specialist, at telephone (604) 707-2510, fax (604) 707-2516 or by email at cheryl.mcintyre@bccdc.ca

Sincerely,



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