



Non-Patient Specific Standing Orders for Adult Vaccinations:

AN IMPLEMENTATION GUIDE FOR CLINICIANS

Non-patient specific standing orders (standing orders) are written orders that authorize nurses and pharmacists to assess a patient’s need for vaccination and administer the vaccine without a physician’s or certified nurse practitioner’s direct involvement with the individual patient at the time of the interaction. Standing orders are an evidence-based strategy to improve adult vaccination rates in your practice. They can be established for one or more vaccines.

In New York State, standing orders must be authorized by a physician or certified nurse practitioner (NP) and allow registered nurses (RN) and pharmacists to vaccinate adults without a patient-specific order.

Key Components of Standing Orders

- Target audience to receive the vaccine(s), e.g., adults 60 years of age and older for the shingles (zoster) vaccine
- Procedure for administering the vaccine(s), e.g., vaccine name, dosage, administration route and vaccination schedule
- Information on contraindications and precautions for the vaccine(s)
- Order to administer anaphylactic treatment agents, including target audience to receive the treatment and procedures for administration

Key Components of Standing Orders’ Protocols

The issuing physician or NP is also responsible for writing a standing order’s protocol to make sure eligible staff safely deliver the vaccine(s) and follow medical guidelines for vaccine administration. The protocol should include instructions on the following:

- Screening for contraindications*
- Recommending all needed vaccine(s) to patients
- Informing patients of potential side effects and adverse reactions*
- Providing patients with federally required Vaccine Information Statements (VIS)
- Obtaining patient consent for the immunization*
- Following proper medical guidelines for vaccine administration, e.g., vaccine dose, needle size and injection location
- Providing patients with a certificate of immunization*
- Communicating relevant information to the patient’s primary care provider*

- Using the Vaccine Adverse Event Reporting System (VAERS) to report any adverse events*
- Maintaining immunization records in accordance with the law*
- Reporting all immunizations given to patients 18 years of age to the Citywide Immunization Registry (CIR), as required by New York State Public Health Law
- Reporting all immunizations given to patients 19 years and older to the CIR with verbal or written consent
- Maintaining records of all potential vaccine recipients, noting those who refused to be immunized*
- Allowing RNs to assign the administration of the vaccine to a licensed practical nurse (LPN)*
- Having anaphylaxis treatment and equipment available*
- Administering anaphylactic treatment*
- Documenting and reporting the administration of anaphylactic treatment agents

Planning for Potential Barriers

It is important to plan for potential obstacles as you develop and launch your standing orders program. Common barriers includeⁱ:

- Lack of support from organizational leadership, physicians and other staff
- Legal concerns
- Inadequate training and communication among staff
- Inadequate processes and monitoring systems

*New York State law requirements

Steps to Implementation

The following steps can help you establish a standing orders program for adult vaccination at your facility and address any potential barriers.

1. Get buy-in from leadership at the start of the planning process

- Determine your facility's adult vaccination coverage rates before meeting with your leadership team.
- Discuss the benefits of starting a standing orders program with the leadership in your facility.
- Identify who will authorize the standing orders and protocol, e.g., medical director.

Talking points:

- Standing orders are a CDC-recommended, evidence-based strategy to improve vaccination rates and protect patients from vaccine-preventable diseases.
- Standing orders can empower nurses and staff members in the workplace.

2. Identify a program lead

The program lead is in charge of the standing orders program and is usually an NP, physician assistant or RN. They should be an influential leader and immunization champion in your facility, and should have medical knowledge about adult vaccination delivery, as well as an understanding of standing orders and protocols.

3. Decide which vaccines to administer

Your program lead and facility leadership should decide together which vaccine(s) will be covered under your standing orders program. If standing orders are new in your facility, you might want to start with the flu vaccine; you can expand once staff are trained and familiar with the program.

4. Develop materials and strategies

- Create standing orders and protocols for the vaccine(s) you want to administer.
- You can adapt existing standing order and protocol templates to meet your facility's needs. To download sample templates, visit nyc.gov/health and search **standing order**. For additional templates, visit immunize.org/standing-orders.
- Have the standing orders and protocol reviewed and approved by the signing physician or authorized provider.

5. Get buy-in from your staff

- Hold a meeting with your staff to explain why you are starting this program.
- Refer to any existing standing orders at your facility to show that this is already an accepted practice.

Talking points:

- Each year, thousands of adult New Yorkers get sick and some even die from vaccine-preventable diseases.
- Influenza and pneumonia together continue to be the third-leading cause of death in New York City. Ensuring your patients are vaccinated against these diseases can help reduce mortality rates.
- Vaccines are one of the most effective ways of preventing diseases.
- Standing orders are an effective way of standardizing vaccine assessment and delivery so we can avoid missed opportunities and keep our patients healthy.

6. Determine an operational strategy

- Review and revise your existing vaccination work flow.
- Create strategies for improving your vaccination rates, e.g., assess flu vaccine status of all patients, accept walk-ins or hold after-hours vaccination clinics.
- Automate work flow, e.g., use electronic health record prompts for protocols and screening questionnaires.
- Determine which tools staff will use for vaccine assessment, e.g., electronic health record alerts or screening checklists.
- Define when and where staff will administer vaccines, e.g., when checking vital signs, in the emergency department or at an easy-to-access site at your facility, such as a primary care outpatient clinic.
- Define where and how staff will document vaccines, e.g., CIR, electronic health record or paper forms.

7. Determine responsibilities for staff

- Assign roles for your staff, including who will assess patient vaccination needs, provide patients with VIS, administer vaccinations and document administered vaccines.

8. Train your staff

Staff should be familiar with all vaccine administration requirements and protocols. Train your staff on how to:

- Carry out the standing orders and protocols.
- Properly store, handle and administer vaccines (include pharmacy staff in this training if appropriate).
- Properly document administered vaccines.

9. Publicize the program

- Use existing and new outreach methods to tell your patients about vaccines available at your practice and to remind them of needed vaccines, e.g., a website, social media, local media advertising, or posters and brochures at your facility.

10. Start the program and monitor its progress

- Start vaccinating your adult patients under the standing orders program.
- Meet with staff members to get feedback on the program; use this feedback to improve your standing order processes.
- Compare the number of vaccines given since starting your standing orders program to previous years.

Adapted from <http://www.immunize.org/catg.d/p3067.pdf> and www.immunize.org/catg.d/p3066.pdf, accessed on September 27, 2016.

i Source: New York State Education Department, Office of the Professions. Non-Patient Specific Standing Order and Protocol Guidelines. www.op.nysed.gov/prof/nurse/immuniguide.htm

ii Sources: Zimmerman, R. K., Albert, S. M., Nowalk, M. P., Yonas, M. A., & Ahmed, F. (2011). Use of standing orders for adult influenza vaccination: a national survey of primary care physicians. *American journal of preventive medicine*, 40(2), 144-148.

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