

Plan must be completed on initial set up, reviewed annually or updated as staff changes occur. Date (yyyy-Mon-dd) ☐ Completed Reviewed ☐ Updated **Facility and Vaccine Storage Information** Site Name Alberta Vaccine Inventory (AVI) PIN Number (generated by site contact) Site Address AHS Zone South Calgary Central ☐ Edmonton ☐ North Facility Type Public Health Acute Care Outpatient Clinics and Emergency Departments Other (describe) Acute Care Inpatient Pharmacy ☐ LTC Site Vaccine Controller Name Phone (daytime) Fax Phone (after hours) **Email** Backup Vaccine Controller Name Phone (daytime) **Email** Phone (after hours) Fax Other Important Contacts (if more than 5, attach additional sheet) Name Phone (daytime) Fax **Email** Phone (daytime) Name Fax Email Name Phone (daytime) Fax **Email** Name Phone (daytime) Fax **Email** Name Phone (daytime) Fax **Email** 

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Re	cord Manufacturer and Model Nu	mbe	r for each Refri	gerator at your facility		
	Manufacturer		Model Number	r	Purchas	se Date (yyyy-Mon-dd)
1						
2						
3						
4						
5						
6						
7						
			Service/F	Repair Provider		
Name		Phone		After Hours Contact		
Re	cord Manufacturer and Model Nu	mbe	r for each Freez	zer at your facility		
	Manufacturer		Model Numbe	r	Purchas	se Date (yyyy-Mon-dd)
1						
2						
3						
4						
5						
6						
7						
			Service/F	Repair Provider		
Name		Phone		After Hours Contact		
Re	cord Manufacturer and Model Nu	mbe	r for each Therr	nometer/Temperature	⊔ Monitor at	t your facility.
		odel Number Location of Monitor			Purchase Date (yyyy-Mon-dd)	
1						
2						
3						
4						
5						
6						
7		+				

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Facility Power Arrangements							
Facility Maintenance Contact (daytime)					Facility Maintenance Contact (after hours)		
Electricity Service Provider (may not be the same as retailer/billing compa				g company)	24-Hour Outage Contact Phone		
Circuit Breaker Location			Circuit Brea	Circuit Breaker Access Instructions (if applicable)			
☐ L	lity Power Type (select one) arge-scale facility with continuou acility with backup power arrang lo backup power (high volume sites	ements	for vaccine s	supply ( <i>mus</i>			
Bac	kup Power Supply (not require	d for la	rge scale fa	cilities or f	facilities wi	thout ba	ickup power)
Che	ck all that apply	Ot	her (describe)	)			
Rec	ord Generator/Backup Power Su	pply at F	acility				
	Manufacturer	Model	Number	Location of	Location of Monitor		Purchase Date (yyyy-Mon-dd)
1							
2							
3							
4							
5							
			Service/Re	epair Provid	der		
Nam	e	Pho				After Ho	ours Contact
Expe	ected duration of backup power (	hours)					
	ckup power on an automatic swi		☐ Yes ☐	No - proc	edures to s	witch to b	packup power
	rnate Facility Arrangements (n		completed f				· ·
	nate Facility Name/Address				,		
Facility Contact (daytime)				Facility C	ility Contact (after hours)		
Access Instructions							
Vac	cine Packing and Transporting	(must l	be complete	ed for all fa	acilities)		
Location(s) of packing and transporting supplies							
Tran	sport Method						
Courier (Name and contact number)							
□ P	rivate Vehicle	Othe	r (describe) _				

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**Equipment Set-Up, Maintenance & Training Checklist** 

Power Supply							
☐ Vaccine fridge is the only appliance plugg (if plugged into an extension cord, fridge is the on	ly appliance plugged into an extension cord)						
(for example behind a fridge)	Unused receptacles are protected by a safety-lock plug or outlet cover unless receptacle is not accessible (for example behind a fridge)						
"Do Not Unplug" sign is posted above wa							
Correct circuit breaker switch/fuse is labe	elled with "Vaccine Fridge"						
Power Supply Maintenance							
☐ Backup power tested annually	Date of last backup power test						
☐ Backup power maintained annually	Date of last maintenance service						
Refrigerator Location and Set-up							
Room is well-ventilated							
Refrigerator is not in direct sunlight							
Refrigerator is not located close to a heat s	ource						
☐ There is a minimum of 10 cm clearance (or	as recommended by manufacturer) between back of refrigerator and wall						
☐ Motor compartment and vents are not block	ked by walls or other equipment						
Refrigerator is level							
Refrigerator bottom is 2.5 cm to 5.5 cm about							
Refrigerator is in a secure location away from	•						
	d beside fridge temperature mechanism, fridge temperature should be						
set to 4°C	and only with "Vaccine Llee Only" sign posted on fridge						
	nes only, with "Vaccine Use Only" sign posted on fridge						
Temperature Monitoring Set-Up							
Thermometer/probe located in centre of r							
	Probe immersed in liquid glycol (recommended)						
l	For vaccine stored between +2°C and +8°C, thermometer alarms set at +3.5°C (min) and +6.5°C (max)						
<ul><li>☐ Thermometers calibrated within at least ±</li><li>☐ Thermometer inspected annually</li></ul>	E i C by the manufacturer						
Refrigerator Maintenance	to the first and the state of the state of the first state of the firs						
High touch areas (such as door handles) and visibly soiled areas cleaned daily							
Refrigerator compartment, coils and motor cleaned annually							
Refrigerator maintained annually (at minimum)							
Location of maintenance log							
	idelines at Vaccine Storage and Handling   Alberta Health Services						
Packing/Transporting Equipment and Su	<u> </u>						
Cooler(s) Portable fre							
	p (or other insulating barrier)  Paper						
· · · · · · · · · · · · · · · · · · ·	Portable temperature monitor(s)						
☐ Facility has sufficient packing/transporting	g supplies to move <u>entire</u> vaccine inventory						
Staff Training							
All staff (clinical and non-clinical) who handle Handling Training and review annually	or manage vaccine supplies have completed Vaccine Storage and						
Type of Training ☐ e-Learning	☐ Training log up-to-date						
☐ In-service	Location of training log						

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## **Routine Vaccine Storage and Handling Procedures**

Task	Staff Member(s) Responsible	Frequency	
Coordinate overall vaccine storage, management, staff training and cold chain	Vaccine Controller	Ongoing	
contingency response	Backup Vaccine Controller		
Monitor internal temperature of the refrigerator storing vaccines	Designated staff member(s)	Twice Daily (or ongoing if 24/7 monitoring)	
Maintain temperature logs for a minimum of five (5) years	Designated staff member(s)	Ongoing	
Order vaccine using the web-based Alberta Vaccine Inventory System	Designated staff member(s)	As needed	
Receive, unpack and inspect vaccine shipments	Designated staff member(s) (list all names)	As needed	
nduct routine cleaning and intenance of vaccine storage	Vaccine Controller	Daily Weekly	
equipment	Designated staff member(s)	Monthly Quarterly	
aintain cold chain during transport d clinics	Vaccine Controller	As needed	
	Designated staff member(s)		

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#### **Cold Chain Excursion Checklists**

Pr	rint & store the Cold Chain Excursion Algorithm with this plan (check when complete)
(A) (	Checklist 1: Loss of Power
	If applicable, confirm Uninterruptible Power Supply (UPS) or Emergency Power is functioning properly, verify the status of backup emergency generators and their fuel source amounts and notify Site Vaccine Controller immediately on the status of the systems.
If ba	nckup power not available or functioning:
	Confirm the vaccine refrigerator is plugged in.
	Keep refrigerator door closed until ready to pack and transport vaccine to maintain temperature for as long as possible.
	Contact vaccine coordinator and immediately initiate Checklist 3: Packing of Vaccines for Transport to move vaccines to alternate facility.
	Confirm whether other plugged-in equipment is still working.
	Check if power is affected throughout the area/facility.
	If problem is specific to vaccine fridge, check fuse/circuit breaker (or notify facility maintenance).
	Contact electricity provider to determine if the issue is with the provider or if it is a site issue.
	If the issue does not appear to be loss of power, refer to Checklist 2: Equipment Failure.
(√) (	Checklist 2: Equipment Failure
	If available, relocate vaccine supply to alternate refrigeration option and ensure temperature monitoring is maintained.
	If no alternate refrigeration option available, contact Vaccine Controller and immediately initiate Checklist 3: Packing of Vaccines for Transport to move vaccines to alternate facility.
	Contact Refrigerator Service/Repair Provider.
	Retrieve maintenance logs and provide to Service/Repair Provider.
	Location of Maintenance Logs

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## (✓) Checklist 3: Packing of Vaccines for Transport

Insulated containers must demonstrate the ability to maintain the required temperature and must be large enough to store vaccines and packing materials.
External surfaces must be intact, strong, durable, clean, and the lid tight fitting.
The container must be clearly identified as containing valuable and fragile vaccines.
Vaccine should be packed in layers using the following materials: refrigerated and/or frozen packs, insulating barrier (e.g. bubble wrap, crumpled brown packing paper, Styrofoam peanuts), vaccine, a temperature monitor, and filler materials (may be the same as those used as insulating barriers) to prevent shifting of the contents during transport. The number and placement of refrigerated or frozen packs inside the container will depend on container size, outside temperature, and jurisdictional variations in storage and handling materials.
Frozen ice/gel packs:  Must be stored in freezer a minimum of 24 hours and completely frozen prior to use.  Use of bagged or loose ice is NOT acceptable.
Refrigerated gel packs:  Must be stored between +2°C to +8°C.  Must be stored in refrigerator a minimum of 24 hours prior to use.
Credo Cubes  If using Credo Cubes, follow Zone specific and manufacturers recommendations for conditioning and packing
Be sure to place an insulating barrier (e.g. bubble wrap, crumpled brown packing paper, styrofoam peanuts) between the refrigerated or frozen packs and the vaccines to prevent accidental freezing.  This is not applicable when transporting vaccines in frozen state.
Pack vaccines in their original packaging on top of the barrier. Do not remove vaccine vials from boxes. Be sure to fill any spaces between vaccine boxes with crumpled paper or other filler to prevent shifting of contents in the insulated container.
Use a properly placed min/max thermometer, data logger, or cold chain monitor near the vaccine. The temperature-monitoring device should be placed in the middle of the vaccines and should not come in contact with the refrigerated or frozen packs.
Record vaccine type(s), lot numbers, brand names, quantity, date, time and originating facility on a packing slip (for example, an AVI print out) to place on the inside of each container being packed.
Attach labels to the outside of the container to clearly identify the contents as being valuable, fragile, and

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