Audit Process – Instructions for Use

Alberta Health Services (AHS) and their partners must conduct periodic audits to ensure that the requirements for vaccine storage and handling outlined in the Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine are met. Alberta Health Services – Province Wide Immunization Team is responsible for assuring that the quality indicators in the Alberta Vaccine Storage and Handling Policy have been met and report findings to Alberta Health. Audit Tool Link: http://www.albertahealthservices.ca/assets/info/hp/cdc/if-hp-cdc-audit-tool.pdf

The following chart outlines the process for conducting audits and how the Audit Tool is used. Once the Audit is done, recommendations will be faxed to the site for implementation and a two week time frame will be given to meet recommendations. All sites are required to retain their site inspection with other relevant Cold Chain Documents. It is an expectation that any items identified as non-compliant in the audit will be addressed immediately.

Audit Process						
Site	Staff Member(s) Responsible	Frequency	Process			
AHS Zone Vaccine Depot sites	Will be determined by Public Health or Communicable Disease Control (CDC) as applicable within the zone (e.g., Vaccine Controller, Designated Public Health Contact)	At minimum annual	• Perform onsite inspection using the Vaccine Storage and Handling Audit Tool annually including a review of the Cold Chain Management plan. Audit should be completed within a two week timeframe.			
			 Fax/email completed Audits to the Zone Contact/Province Wide Immunization Team for review. Any major concerns noted from the Audit should be reviewed with the Zone Contact. 			
			• Once the Audit is complete, recommendations will be faxed to the site for implementation and a two week time frame will be given to meet recommendations.			
			 Site is required to retain their Audit Tools for 5 years with other relevant Cold Chain Documents. 			
			Follow- up Audits to be implemented as required addressing specific situations.			
AHS Public Health, Community Health Centres/Public Health Offices	Will be determined by public health within the zone (e.g., Site Vaccine Controller, Designated Public Health or CDC contact)	At minimum annual Note: Onsite Inspection would be done as new Public Health AHS sites are identified	• Perform onsite inspection using the Vaccine Storage and Handling Audit Tool annually including a review of the Cold Chain Management plan. Audit should be completed within a two week timeframe.			
			• Fax/email completed Audits to the Zone Contact/Province Wide Immunization Team for review as per zone protocol. Any major concerns noted from the Audit should be reviewed with the Zone Contact/Province Wide Immunization Team and/or Site Operation Manager.			
			• Once the Audit is complete, recommendations will be faxed to the site for implementation and a two week time frame will be given to meet recommendations.			
			 Site is required to retain their Audit Tools for 5 years with other relevant Cold Chain Documents. 			
			 Follow- up Audits to be implemented as required addressing specific situations. 			



	Audit Process						
Site	Staff Member(s) Responsible	Frequency	Process				
AHS non Public Health/non AHS Partners providing provincially funded vaccines	Vaccine Controller as determined by individual sites	All sites that store provincially-funded vaccine must conduct self-audits annually	 Self-Audits Complete the Vaccine Storage and Handling Audit available on the AHS Vaccine Storage and Handling webpage. This should be completed with the annual review and update of the site Cold Chain Management Plan. Annual Vaccine Storage and Handling Audits should be kept onsite for 5 years and may be requested as part of the random Audit process completed by your Zone Contact. 				
	Information regarding audits and process would be communicated by Public Health/CDC as applicable within the zone (e.g., Zone Contact)	Annual random audits by Public Health or CDC of 10% of AHS non Public Health and/or non AHS Partners providing provincially funded vaccines	 Random Vaccine Storage and Handling Audits Public Health/CDC will contact site to request submission of annual Audit Tool for review. If annual audit has not been completed within the past 12 months, Public Health/CDC will fax site the Audit tool for completion. Audit to be completed and returned within two weeks with the following documents: Temperature logs for previous month Completed Cold Chain Management Plan Pictures of the inside of refrigerator that illustrate placement of thermometer probe and vaccine Once the Audit is reviewed, recommendations will be faxed to the site for implementation and a two week time frame will be given to meet recommendations. If no changes have been implemented after two weeks vaccine ordering will be suspended. Site is required to retain their Annual Audit Tools for 5 years with other relevant Cold Chain Documents. Follow- up Audits to be completed as required addressing specific concerns. If major concerns are noted when the audit is received an onsite visit may be required in order to work with site to meet the Vaccine Storage and Handling requirements. 				
		Onsite Inspections would be done as new AHS non Public Health sites are identified	 Onsite Inspections Onsite inspections may be done for those sites that are requiring additional assistance in meeting the Vaccine Storage and Handling requirements. Onsite Inspections will also be completed for any new AHS sites prior to vaccines being distributed. Perform onsite Inspection using the Vaccine Storage and Handling using the Audit Tool. Recommendations to be given while onsite after the audit is completed. Site will be given two weeks to implement any recommendations provided; if actions have not been implemented vaccine ordering will be suspended. 				



	Audit Process				
Site	Staff Member(s) Responsible	Frequency	Process		
			 Site is required to retain their onsite Audit Tools for 5 years with other relevant Cold Chain Documents. Site is required to retain Follow-up Audits to be implemented as required addressing specific situations. 		