PROVINCIAL
SCHOOL
IMMUNIZATION
POLICY
2026 – 2027

August 2026

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Updates for the 2026-27 School Year

1. The Immunization Forecast should not be used as the sole source for determining vaccine eligibility, as forecasting rules may not reflect all current program changes. Clinical assessment and review of the client's immunization history are required to determine vaccine eligibility.
2. Men-C-ACYW-135 for Grade 8 students (2013+ cohorts). Refer to PHB bulletin #4: *Meningococcal Immunization Program Update*.
3. Uploading past or current immunization consent forms or immunization record documents into Panorama is not permitted. All vaccines are to be entered/back entered into the student's Panorama record.
4. School catch-up clinics are required throughout the school year for Grade 1, 6 and 8 students **and (when possible)** non-targeted **immunization-delayed** students to meet Appendix 1: School-Age Immunization Goals.
5. Adherence to the Grade-specific timelines for ordering consent forms **and** vaccines is strongly recommended.
6. Immunization consent forms showing a student's gender as "X" must be entered as "Other" in Panorama.

Policy Objectives

1. Reduce excessive public health nursing time that is inherent in the preparation, organization, and delivery of school immunizations.
2. Ensure consistent public health nursing practices province-wide to provide equitable and standardized immunization services to students across all communities.
3. Ensure immunization history, consent directives, special considerations, risk factors, client warnings, etc., are accurately documented in Panorama for every student's Immunization Profile.
4. Ensure students are offered all publicly funded immunizations they are eligible for.
5. Promote immunization uptake to protect the health of the students, school staff and the broader community.
6. Monitor and evaluate school immunization coverage and vaccine-preventable disease rates as key public health outcomes.

Guiding Principles

1. Immunization record reviews are mandatory for Grade 1, 6, and 8 students to determine vaccine eligibility, prevent vaccine administration errors, review documented AEFIs, and update student's Immunization Profiles in Panorama. Immunization record reviews may commence in the summer.
2. Verbally reported immunizations and client-entered immunization records (e.g., MySaskHealthRecord, CANImmunize) cannot be accepted as official documentation for assessing vaccine eligibility.
3. Immunization consent grants obtained in Saskatchewan are valid for the duration required to complete a vaccine series. PHNs are required to contact parents/guardians of students, including those who moved from another area, to confirm that the student's health status is unchanged when a student will be offered vaccines previously consented for in another Grade (e.g., student will get second HB and HPV-9 doses in Grade 7).
4. Vaccines that are documented as refused or deferred must be re-offered at minimum in Grades 1, 6 and 8 as age applicable.
5. Students must be offered all vaccines for which they are eligible for at the first visit, unless extenuating circumstances apply. Refer to SIM, Chapter 4 Appendix 4.2 *Where do I document?* for guidance regarding documentation of various topics and situations encountered during clinical practice.
6. The PSIP follows Ministry of Health informed consent policies in SIM, Chapter 3.
7. PHNs must refer to the *Mass Immunization User Guide* and SIM, Chapter 4 Appendix 4.2 *Where do I document*? for guidance on processes and standard documentation practices.
8. PHNs are required to document administered immunizations in Panorama at the point of service (POS). If Panorama is unavailable, immunizations may be recorded on the consent form and must be entered into Panorama within 1 business day. This ensures timely documentation in MySaskHealthRecord accounts.
9. To ensure provincially standardized school immunization practices, PHNs must:
    - Adhere to Standards A, B and C and Grade 1, 6 and 8 work standards.
    - Use Ministry of Health approved resources, including immunization consent forms, vaccine fact sheets and the *Panorama Privacy Information* document.

Practice Standards

A: Obtaining Immunization Consent Directives

Summary

Three documented contact attempts are considered sufficient to fulfill the consent outreach requirement.

Requirements

- Immunization consent directives must be obtained and documented in every student's Panorama immunization record prior to vaccine administration.
- Documentation must include, at minimum:
  - Name(s) of the consenter.
  - Consent type (written or verbal, including method).
  - Name of PHN obtaining/recording consent directives.
  - Date consent directives were obtained.
- In all communications, direct parents/guardians to review the Immunization Forms and Fact Sheets prior to providing consent.
- When consent directives for a student aged 13-17 years old are not provided by a parent/guardian, follow *Policy B: Mature minor provision of immunization consent for directives.*
- When a student turns 18 years old, consent directives must be obtained from the student to initiate or continue a vaccine series previously consented to by a parent/guardian/social worker.
- Document all attempts to obtain Consent Directives in the student's Communications Log, as per the *Mass Immunization User Guide*.
  - Use titles "Consent attempt #2" and "Consent attempt #3".
  - Record contact direction and attempt type as applicable (e.g., phone call to guardian at this number; message left to contact PHN; mailed consent package to the following address).
  - Update the Mass Immunizations Event Status to reflect 'Consent attempt #2' or 'Consent attempt #3'.
  - Following the third documented attempt, advise parents/guardians that Public Health will consider the outreach process complete for the current school year and that they may contact Public Health at any time should they wish to discuss or arrange immunization services.

Directives

First Attempt

1. Distribute printed immunization consent packages to the school prior to a scheduled clinic.
2. Use the General Consent form for immunization delayed students, including Grade 6 and 8 and non-targeted immunization-delayed students, ensuring they are provided to the students in sealed, labelled envelopes; or provide parent/guardians with the electronic consent packages available on the SaskHealth general web link and direct them to return the completed form by email or send a printed copy with their child to school.
3. If Grade 1 students are not immunized in school, they may be invited for a clinic appointment, and consent directives can be obtained from their parent/guardian at or prior to the clinic appointment.

Second and Third Attempt Options

1. Resend printed immunization consent package home with the student.
2. Refer to Obtaining Verbal Immunization Consent Directives from a Parent/Guardian
3. Text or email parent/guardian using provided contact information, if available on the school class lists.
4. Mail immunization consent package to the student's mailing address care of their parent/guardian.
5. Conduct a home visit.

B: Provision of Immunization Consent Directives by a Mature Minor

Summary

In Saskatchewan, children **aged 13-17 years** who can understand the benefits and possible reactions for each vaccine and the risks of not getting immunized can legally provide consent directives (e.g., grants or refusal) for their healthcare decisions as mature minors.

Directives

1. If immunization consent directives have **not** been provided by a parent/guardian for a student 13-17 years old, a PHN may provide information to the student regarding mature minor consent directive provisions for immunization.
2. Use the health-screening questionnaire in SIM, Chapter 8 *Administration of Biological Products* .
3. Confirm that the student understands the standard information they have been provided. To assess a person's level of competence, a PHN needs to ensure that the student:
   a. Understands the vaccine offered and why they are eligible.
   b. Understands the risks of not being immunized.
   c. Understands the benefits and risks of being immunized.
      i. Explore with the student how they would manage an adverse event following immunization.
      ii. The student may need to inform their parent/guardian that they have received an immunization if they have an adverse event to an immunization. Explore with the student how they would manage this situation.
   d. Makes an independent decision regarding immunization without prompts, suggestions, or pressure from the PHN.
4. Provide an opportunity for the student to ask questions and confirm their readiness to proceed.
5. Obtain informed consent directives as outlined in SIM, Chapter 3 *Informed Consent*. Document consent directives in Panorama.
6. In the comments section of the consent form, document the PHN's professional assessment of the student's ability to make informed directives based on their comprehension of materials and maturity. If a PHN assesses that a student is unable to give informed consent for immunization because of lack of understanding and comprehension of the standard information, then the student is not to be immunized at this time and needs to be informed of the PHN's assessment.
7. The student and the PHN must both sign the completed consent form on page 2 prior to the administration of any vaccines. Students who do not sign their immunization consent form cannot be immunized.
8. Update the student's immunization consent directive(s) in Panorama and document that mature minor consent was obtained.
9. The *Notice of Immunization* form is completed and given to the student.
10. Because mature minor informed consent directives for immunization are considered confidential health information, these must not be disclosed to any party without the minor's permission.
    a. If the student expresses concern about a parent or guardian seeing their Panorama record, the PHN will document the client warning "*Mature Minor consent sensitive*" in the student's Panorama record.
11. Students who are Saskatchewan residents must be informed that immunizations administered will be recorded in the provincial immunization registry and are accessible through MySaskHealthRecord (MSHR).
    a. If the student is **13 years of age or younger,** the immunizer must inform the student that their parent or guardian will have access to the student's immunization record. If the student is **14 years of age and older**, only the student has access to their immunization record through their MSHR account.
12. A parent, guardian, or social worker cannot override immunization consent directives obtained from a mature minor.
13. When a student 12 years of age or younger is actively seeking immunization information and/or requests to receive a vaccine(s), the PHN **must** consult their supervisor and/or the jurisdictional MHO.

C: Attempts to Retrieve and Obtain Immunization Records

Summary:

Two attempts are required to retrieve and obtain immunization records for a student.

Directives

1. The PHN may employ the following options and document each attempt and method in the Panorama Communication Log:
   a) Provide an agency developed hard copy immunization record request form to the student for their parent/guardian to complete and return to the school; or
   b) Mail or email the consent form to the student's parent/guardian for them to complete and send it back with the student or email it to the PHN/health centre. Ideally, the parent would attempt to obtain the record from the previous area health centre; or
   c) Request the student's immunization record(s) from the agency/provider(s) that the parent/guardian has provided; or
   d) Call or text the student's parent/guardian.
2. Upon receiving the record, enter the student's documented immunization records as historical records into Panorama.
3. If a student's immunization records remain unobtainable after two retrieval attempts, they are considered unimmunized and they are to be offered all primary immunization series according to age-specific eligibility criteria stated in SIM, Chapter 5 *Immunization Schedules*.

Grade-specific Work Standards

A. A PHN or designate sends a request to the school for an appropriate space and mutually agreeable dates to conduct an immunization clinic.
B. To avoid 'rework' related to inaccurate class lists, obtain them as close to the end of September as possible.
C. PHN's should do an initial search in Panorama Mass Imms for class lists prior to preparing consent packages.
D. Use the General Consent form for all immunization-delayed students.
    - Complete section 1 First and Last Name and DOB,
    - Complete Section 3, by checking eligible vaccines (required),
    - Add vaccine-specific immunization fact sheets (required),
    - Add the Panorama Privacy fact sheet,
    - Add the consent instruction sheet,
    - For privacy, the student-specific packages intended to go home with the student, must be placed in a sealed and labelled envelope, and
    - The envelope is to be given to the student at school to take home and once completed, it must be returned to the school immediately.
E. Once the consents are collected, the PHN must review each student's consent form for completeness and accuracy:
    - Update Immunization Profile sections as required in Panorama, and
    - The PHN must contact parents/guardians to resolve any incomplete areas.
F. Refer to *Policy A: Obtaining Immunization Consent Directives* if required.
G. Ensure student relationships and demographic information from the consent form are entered and updated in Panorama. An Office Assistant may complete this task.
H. Document client consent directives in Panorama. Only a RN/LPN is legally permitted to document immunization consent directives in a student's record.
I. Documented immunization consent directives are valid throughout the Saskatchewan Health Authority (SHA), the Athabasca Health Authority (AHA), Indigenous Services Canada (ISC) and the Northern Inter Tribal Health Authority (NITHA).
J. Print off each student's offline cohort/client profile report (SK011) from Mass Imms before each school clinic. See the *Mass Immunization User Guide* for procedure to print these reports. Office Assistant support, if available, may assist with this process.
K. Prior to the immunization clinic, attach each student's offline cohort/client profile report to their consent form.
L. Post-immunization, each student should receive a completed *Notice of Immunization* form from Mass Imms.
M. Document immunizations at point of service.
N. PHN shall accommodate a parent/guardian request for immunization of the student in an alternate setting. Refer to the *Mass Immunization User Guide* to documenting a client warning regarding this request. If a parent requests to have their child immunized at the health centre, create a client warning and update the Mass Imms event status.
O. Parents/guardians must receive a notification from Public Health at the end of the school year if their child is immunization delayed. This action must be documented in the Communication Log in the student's Panorama record.
P. Contact parents of students who were absent during a school clinic and request that they schedule their child's immunization at public health.

Grade 1

A. As Kindergarten is not mandatory in Saskatchewan, some students may enter Grade 1 without having completed routine preschool immunizations and/or the recommended tuberculin skin test.
B. PHNs should use professional judgement when immunizing young children in the school setting. Consideration may include:
   a. Scheduling school-based immunization at a time when a parent/guardian can be present to hold and comfort their child during immunization.
   b. Inviting Grade 1 students and their parents to attend an immunization clinic at the health centre, allowing the child to be held and comforted by their parent during immunization.
   c. Ensuring that a PHN is available to hold and comfort the child during immunization when administered in the school setting.

Grade 1 timelines	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug
● Identify potential clinic dates	◙	◙	◙	◙	◙							
● Contact schools to arrange clinics	◙	◙	◙	◙	◙	◙						
● Generate Panorama class lists				◙	◙	◙						
● Order General Consent forms				◙	◙	◙						
● Complete immunization history reviews and record retrievals				◙	◙	◙						
● Contact parents/guardians of students who are eligible for vaccines or have incomplete immunization records				◙	◙	◙						
● Deliver General Consent packages to schools or email them directly to parents/guardians					◙	◙						
● Collect and review consent forms for completeness					◙	◙	◙					
● Follow up with parents/guardians as required					◙	◙	◙					
● Order required vaccines					◙	◙						
● Administer all vaccines students are eligible for						◙	◙	◙	◙	◙		
● Provide catch-up vaccines throughout the school year and summer	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙

Grade 6

Grade 6 timelines	(Aug.)	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July
• Identify mass imms clinic dates	◙	◙										
Contact schools to: • Get Grade 6 student class lists • Arrange 1st and 2nd clinic dates		◙ ◙										
• Generate Panorama class lists • Order Grade 6 consent packages, General Consent forms and consent instructions	◙	◙ ◙										
• Complete immunization history reviews and record retrievals • Contact parents/guardians of students who are eligible for additional vaccines or have incomplete immunization records • Deliver consent packages to schools • Create Mass Immunization event in Panorama		◙ ◙ ◙ ◙	◙ ◙ ◙ ◙									
• Collect and review consent forms for completeness • Follow up with parents/guardians as required		◙ ◙	◙ ◙									
• Order vaccines (1st round)	◙	◙	◙									
• 1st visit		◙	◙	◙								
• Confirm 2nd clinic dates with school					◙	◙	◙					
• Order vaccines (2nd round)							◙	◙	◙			
• 2nd visit								◙	◙	◙	◙	
• Provide catch-up vaccines throughout the school year and summer	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙

Grade 8

Grade 8 timelines	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.
• Identify mass imms clinic dates	◙	◙	◙	◙	◙							
Contact schools to: • Get Grade 8 student class lists • Arrange clinic dates			◙ ◙	◙ ◙								
• Generate Panorama class lists • Order Grade 8 consent packages, General Consent forms and consent instructions				◙ ◙	◙ ◙	◙	◙					
• Complete immunization history reviews and record retrievals • Contact parents/guardians of students who are eligible for additional vaccines or have incomplete immunization records • Deliver consent packages to schools • Create Mass Immunization event in Panorama					◙ ◙ ◙ ◙	◙ ◙ ◙ ◙	◙ ◙ ◙ ◙					
• Collect and review consent forms for completeness • Follow up with parents/guardians as required					◙	◙ ◙	◙ ◙					
• Order vaccines				◙	◙	◙	◙	◙	◙			
• Administer all vaccines students are eligible for					◙	◙	◙	◙	◙	◙		
• Provide catch-up vaccines throughout the school year and summer	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙	◙

Obtaining Verbal Immunization Consent Directives from a Parent/Guardian

Obtaining immunization consent directives (grants and refusals) verbally whether in person, by phone or through another electronic platform, ensures that as many students as possible are ready for immunization on a clinic day without delay. When communicating with a student's parent/guardian, the PHN must follow the steps for obtaining informed consent as outlined in SIM, Chapter 3, *Informed Consent.*

Grade 6 or 8 students who are not immunization delayed:

1. Ask parent/guardian if they have received the student's Grade specific consent package, remind them to complete it and send it back with the student.
2. If they do not have the consent package:
    - Direct parents/guardians to the Ministry of Health's webpage Immunization Forms and Fact Sheets to review the applicable Grade 6 or 8 specific immunization consent package. After reviewing the information, they may:
        - Provide verbal consent directly to the PHN, or
        - Complete and print the fillable consent form and return it by sending it to school with the student or submitting it to the PHN by fax or email.
        - Inform parents/guardians that the PHN can resend the package or fax/e-mail the forms upon request. Completed forms can be returned to the school with the student or sent directly to the PHN by fax or email.

All immunization-delayed students:

1. Ask parent/guardian if they have received the student's General Consent package, remind them to complete it and send it back with the student.
2. If they do not have the consent package:
    - Direct them to the Ministry of Health's Immunization Forms and Fact Sheets website to review the appropriate vaccine fact sheets, and provide verbal consent directives to the PHN; or
    - Inform them that the PHN can resend the packet or fax/e-mail the forms to the parent/guardian. Completed forms can be returned to the school with the student or sent directly back to the PHN by fax/email.

When a parent/guardian provides verbal consent directives, the PHN must review and complete required sections of the appropriate paper consent form including:

- Initialing in the sections where a parent/guardian signature is required.
- Initialing beside sections 2 and 3 of the Grade 6 or 8 consent form and section 2 and 4 of the General consent form.
- Check the box in the nursing note section on the second page of the consent form that states, 'Verbal consent directives obtained from parent or guardian'.
    - Add parent/guardian name from whom consent grants/refusals were obtained.
    - Add date and time.
    - Add their signature.

Appendices

1: School-Age Immunization Goals

By the end of Grade 1:

- 95% of students will have documentation in Panorama of receiving:
  - Five doses of a diphtheria, tetanus and pertussis vaccine (or four doses if the fourth dose was administered after four years of age).
  - At least three doses of IPV vaccine (with the 3rd dose having been administered after four years of age).
  - At least one dose of
    - Men-C-C or Men-C-ACYW-135 since 1 year old (if born **before** May 1, 2025); **or**
    - Men-C-ACYW-135 since 1 year old (if born **since** May 1, 2025).
  - Two doses of a measles-containing vaccine or have serological measles immunity after 12 months of age documented as an exemption.
  - Two doses of a mumps-containing vaccine or have serological mumps immunity after 12 months old documented as an exemption.
  - At least one dose of a rubella-containing vaccine or have serological rubella immunity after 12 months old documented as an exemption.
  - Two doses of a varicella-containing vaccine or have serological varicella immunity after 12 months old documented as an exemption.
- All refusals to date will be recorded into the student's Panorama immunization record.
- All vaccine exemptions will be verified for applicability.

By the end of Grade 6:

- 90% of students will have documentation in Panorama of completing:
  - An age-appropriate HB vaccine series or have serological HB immunity documented as an exemption.
  - An HPV vaccine series.
- All refusals to date will be recorded into the student's Panorama immunization record.
- All vaccine exemptions will be verified for applicability.

By the end of Grade 8:

- 90% of students will have documentation in Panorama of receiving:
  - At least one Tdap dose since 11 years of age.
  - At least one Men-C-ACYW-135 dose since:
    - 12 years of age of born **since** January 1, 2013; or
    - 10 years of age if born **before** January 1, 2013.
- All refusals to date will be recorded into the student's Panorama immunization record.
- All vaccine exemptions will be verified for applicability.

2: Immunization Data Entry into Client Records by Non-Providers

Panorama Immunization Module Policies

TOPIC:	**Immunization Data Entry into Client Records by Non-Providers**		
APPROVED BY:	**Saskatchewan Ministry of Health**	APPROVED	**Sept. 1, 2015**
		REVISED	**April 21, 2020**

BACKGROUND:

Immunization Data Entry into Client Records by a Non-Provider allows for vaccine administration events to be transcribed into the electronic immunization registry system known as Panorama. There is potential risk for transcription errors to occur and actions within this policy are included to mitigate those risks. The mitigation strategy is designating and training staff to enter the data into the electronic system and an auditing system be put in place to ensure the accuracy of the data entered into the electronic system. The extent and frequency of the audit is to be determined by the AHA/SHA/FNJ based on the volume of data entered and experience of the designated staff, who is an authorized Panorama user, entering the data. Data entry of vaccine administration by someone other than a local PHN or of an immunization record from another jurisdiction may also be entered by the designated staff who is an authorized Panorama user, if the record is considered a non-complicated client record (see policy statement for definition). The AHA/SHA/FNJ may consider the same or other guidelines for auditing of these records.

POLICY:
In situations where documentation of vaccines given by a PHN or other vaccine provider is not possible, designated support staff who are authorized Panorama users, can transcribe the administered vaccines as documented by a vaccine provider when the client record is non-complicated as indicated by:

- Documented evidence exists in the form of a client chart, paper copy consent or registration form that is retained as per the employer policy for retention of records.
- There is no immunization related information such as warnings, risk factors, special considerations, AEFIs to be entered.
- There is no lab data or TB tests to be entered.
- An audit system must be in place to ensure accuracy of data entry by designated support staff who are authorized Panorama users.

PURPOSE:
To ensure timely and accurate immunization data entry into client records of those immunized by a PHN or other vaccine provider to inform and support client care and population health management.

PROCEDURE:

- Appoint, authorize and train non-PHN designates (e.g., designated support staff who are authorized Panorama users) to enter into Panorama vaccines administered and documented by a PHN.
- Designate a nursing professional (PHN, Nursing Supervisor/Manager/Coordinator or Nurse Clinician), to conduct audits.
- Determine the frequency and process for auditing data entry based on the numbers of data entries required and the experience of the designated support staff who are authorized Panorama users (example; random sample of data entry in client records [1 in 5] vs. all client records).
    - Back entry of immunization histories from a hard copy record must be checked by a PHN if entered into Panorama by designated support staff who are authorized Panorama users.
- Retain documents as per the area/network/agency standards regarding record retention.

3: Ministry of Social Services Children's Service Manual Section 11.3: Health Care/Medical Treatment

Health Care/Medical Treatment polices and protocols for children in care are searchable at:
https://pubsaskdev.blob.core.windows.net/pubsask-prod/106811/Childrens-Services-Manual-Aug2019.pdf