Healthcare Worker Vaccination Program Management Course

13 – 17 September 2027
Rome

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Training Center

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Ref: 1546_214129 **Date:** 13 – 17 September 2027 **Location:** Rome **Fees:** 5700 Euro

Overview

The Healthcare Worker Vaccination Program Management Course is a one-week course for occupational health, infection prevention, workforce management, clinical education, vaccination coordination, and quality professionals who leave with a Healthcare Worker Vaccination Program Assurance File. Participants design risk-based policy, eligibility, consent, records, access, communication, escalation, coverage monitoring, and improvement workflows while preserving clinical decision boundaries. Agile Leaders Training Center presents healthcare worker vaccination program management through governance tools.

Who Should Attend

- Occupational health teams responsible for workforce immunization services
- Infection prevention teams connecting vaccination with exposure controls
- Workforce managers overseeing eligibility, access, and policy application
- Clinical educators preparing vaccination communication and staff guidance
- Vaccination coordinators managing records, logistics, and coverage follow-up
- Quality leaders monitoring program performance and assurance

The course assumes participants manage workforce health or vaccination processes and leaves prescribing, administration, contraindication decisions, and individual medical advice to qualified professionals.

Departments and Industries

The course supports departments and industries responsible for healthcare-worker vaccination and occupational infection prevention.

- Hospital occupational health and employee health services
- Infection prevention and patient safety departments
- Outpatient and community healthcare organizations
- Laboratory, emergency, and diagnostic service networks
- Healthcare education and workforce development functions
- Quality, governance, and health information teams

Learning Objectives

By the end of this course, participants will be able to:

- Analyze workforce roles and occupational vaccination risks
- Build vaccination policy, eligibility, and evidence-of-immunity workflows
- Evaluate access, consent, confidentiality, and equity controls
- Apply communication methods to vaccination uptake barriers
- Use escalation and coordination maps for events, exposures, and outbreaks
- Create coverage monitoring and program assurance tools

Course Agenda

Day 1: Risk, Policy, and Accountability

- Healthcare Worker Risk Segmentation Matrix
- Vaccination Policy Governance Map
- Role and Accountability Assignment Chart
- National Schedule Alignment Review
- Program Scope and Clinical Boundary Guide

Day 2: Eligibility, Access, and Records

- Eligibility and Evidence-of-Immunity Workflow
- Preplacement and Periodic Review Map
- Consent and Confidentiality Control Checklist
- Accessible Service Delivery Planner
- Vaccination Record Quality Standard

Day 3: Uptake, Communication, and Equity

- Vaccination Uptake Barrier Assessment
- Workforce Communication Message Map
- Leadership and Peer Engagement Plan
- Equitable Access Review Tool
- Declination and Follow-Up Process Map

Day 4: Safety Interfaces and Performance

- Cold-Chain and Service Interface Checklist
- Adverse-Event Escalation Route
- Occupational Exposure Coordination Map
- Outbreak Response Vaccination Interface
- Coverage and Performance Dashboard

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Day 5: Vaccination Program Practice

- Suggested Exercise: Workforce Risk and Eligibility Review
- Suggested Exercise: Access and Uptake Improvement Design
- Suggested Exercise: Event and Exposure Escalation Simulation
- Suggested Exercise: Coverage Dashboard Assurance Review
- Capstone Exercise: Healthcare Worker Vaccination Program Assurance File

Practical Exercises

The course uses suggested activities from hospital, outpatient, laboratory, and workforce-health settings.

- Suggested activity: segment workforce roles by exposure and program eligibility requirements.
- Suggested activity: diagnose access and communication barriers using staff feedback and coverage data.
- Suggested activity: map adverse-event, exposure, and outbreak coordination responsibilities.
- Suggested activity: review a coverage dashboard and prioritize improvement actions.

FAQs

Who is the healthcare worker vaccination program course designed for, and what does it assume?

The course suits occupational health, infection prevention, workforce, education, coordination, and quality professionals. It assumes program responsibility and excludes clinical administration and individual prescribing decisions.

How does healthcare worker vaccination program management differ from vaccine administration training?

Program management addresses policy, access, records, communication, monitoring, and assurance; vaccine administration training develops clinical screening, preparation, injection, and immediate care competencies.

How can healthcare worker vaccination uptake be improved?

Uptake can be improved by assessing barriers, providing convenient access, using consistent communication, engaging leaders and peers, protecting confidentiality, following up appropriately, and monitoring coverage by workforce group.

What records support a healthcare worker vaccination program?

Programs need controlled evidence-of-immunity and vaccination records, eligibility decisions, consent or declination documentation where applicable, follow-up actions, access records, and coverage measures, managed under confidentiality rules.

How should vaccination programs coordinate with outbreak response?

Vaccination programs should define decision authority, workforce prioritization, records, communication, service capacity, exposure-management interfaces, and reporting routes before an outbreak requires rapid action.

Conclusion

Participants take back a Healthcare Worker Vaccination Program Assurance File containing policy, risk, eligibility, access, communication, escalation, equity, coverage, and improvement tools. The file strengthens program consistency and accountability. It connects occupational-health priorities with measurable delivery while preserving individual clinical decision boundaries.