

As a health-care provider, you may have questions about how to integrate the CARD system (Comfort, Ask, Relax, Distract) in your practice setting. This factsheet provides suggestions to facilitate implementation in your clinic. For more information and resources visit CardSystem.ca

Education:

Integration barrier	Clinic adaptations
We are doing just fine! Why do we need CARD?	CARD is a new innovation in vaccine delivery that makes vaccinations safer. CARD is proven to reduce immunization stress-related responses (fear, pain, dizziness, fainting). CARD improves the vaccination experiences for vaccine recipients and health-care providers. Vaccination
Will CARD add time to the vaccination process?	With CARD, vaccine injections are quicker, not slower. This is because clients are prepared, and the clinic is set up to optimize conditions for positive vaccination experiences.
Our space/processes are unique. Can CARD even be integrated?	CARD can be integrated into any vaccine setting within minutes and ensures equitable and high-quality vaccination services. CARD has been successfully integrated across vaccination settings, including mass clinics, school and hospital-based clinics, and community pharmacies.
Do we have to educate clients before vaccination day because we don't do that now (e.g., walk-in appointments)?	Clients can be educated about CARD at vaccine appointment check-in. The CARD checklist reviews what the clinic offers as part of its vaccination services and allows clients to select preferred coping choices on the spot. Staff can introduce the CARD checklist by saying: "We use CARD in our clinic to make vaccinations a better experience. Choose what you want to do for your vaccination today from the different letter categories."
How do we educate clients about CARD before vaccination day?	Information about CARD can be provided digitally (online via website, vaccine booking software) or with clinic posters or pamphlets. Tell clients to choose what they want to do from the CARD checklist so they are prepared ahead of time and can bring their preferred coping choices (e.g., comfort item). Vaccine clients can also be educated on vaccination day!
Don't topical anesthetics make appointments harder?	Some clients want to use topical anesthetics. These medicines are effective analgesics and part of good vaccination service delivery. Topical anesthetics are particularly helpful for those who are fearful of needles and will facilitate a more positive vaccination experience for everyone involved. Ensure there is time to accommodate the administration of topical anesthetics before injection. There is a required waiting time that varies from 20 to 60 minutes depending on the commercial preparation used. Vaccinate others that are present while waiting to prevent falling behind schedule. Provide activities while waiting (e.g., distraction items) as individuals who select topical anesthetics tend to be more fearful and fear can escalate over time. Alternatively, allow clients to leave and return when the application time has elapsed.

How do we get people to know where to apply topical anesthetics?

Consider offering topical anesthetics as part of routine practice in your clinic. Use multi-dose tubes to minimize cost (actual dose needed is only 1 to 2 g). Clients can be asked to donate a nominal amount to cover the cost of their use. Alternatively, clients can purchase and apply topical anesthetics at home. If this is the case, provide guidance on application site(s).

Environment:

Environment:	CARD W
Integration barrier	Clinic adaptations
How does CARD work if our clinic's waiting and aftercare areas are the same?	No matter the physical layout, there is still an opportunity to integrate CARD. Ensure all spaces are visually appealing and clearly identified. Arrange furniture to make clients feel comfortable. Use posters and distraction items to inform, educate and distract. If possible, create a hub for CARD distraction materials that are accessible using carts that can be wheeled around.
How can we provide chairs for vaccine clients and support persons when we have limited space?	Ensure that adequate time is given for each appointment. This prevents people from standing and crowding, which increases stress for everyone, including staff.
How do we provide a private space when we don't have a separate room?	Install a privacy barrier (room dividers, screen, curtains) and play calming music or a sound machine (white noise).
How can we accommodate lying down to manage dizziness/fainting without a bed?	Use movable, foldable mats that can be placed in different locations to facilitate lying down (e.g., on a table or the floor).
How can we reduce stress from having to take clothes off (coats and sweaters)?	Encourage individuals to remove coats and sweaters before entering the vaccination room. Provide a space for them to be hung up if possible. Educate clients about CARD ahead of time so they wear clothing to their appointment that makes it easier to access limbs for injection (e.g., short-sleeved shirt, loose-fitting sweater).
How do we prevent our vaccine clients from hearing others when they are upset or crying?	There are many CARD interventions that can reduce fear cues and fear contagion (spreading of fear to others). Reduce visual and auditory cues of fear (e.g., hide needles, ensure doors to vaccination rooms are closed). Provide distraction items for clients to focus their attention. Vaccinate the most fearful client first and vaccinate children separately and independently of siblings. Use noise-cancelling headphones or ask individuals to bring them from home.
How do we hide fear- inducing and threatening visuals (e.g., needles, signs)?	Arrange furniture so that clients face distraction materials rather than equipment and staff. Conceal needles from sight, disguise sharps container and equipment with client-friendly visuals, change the language on signs to non-threatening words ("vaccine" instead of "shot"; "aftercare" instead of "recovery area").
What do we do if we don't have space on the wall for posters?	Use pamphlets, floor signs and decals.



CUSTOMIZING CARD:

Making CARD work for you

Engagement:

Engagement:	
Integration barrier	Clinic adaptations
Why do I need to ask vaccine clients about their fear when I can read their body language?	Just like screening for allergies and under-lying conditions, assessing clients' level of fear is part of good immunization practice. Not all people will show or voluntarily disclose their fears and being afraid increases the risk of immunization stress-related responses, including fear, pain, dizziness and fainting. These adverse reactions can be avoided by screening for fear and addressing it head-on.
Why do I need to involve the vaccine client when I know all the evidence and can just direct them on how to manage their fear/pain?	CARD invites vaccine clients and staff to collaborate which is part of delivering vaccinations using a person-centred care approach - the model of care delivery practiced across Canada. Staff set up clinics and carry out vaccinations using the best evidence. Clients participate and choose their preferred coping strategies. Importantly, an individual's coping preferences are not uniform and what might make one person calm can escalate fear in another. With CARD, everyone has their own hand to play!
Do we need to pay for distraction items?	Educate clients about CARD ahead of time and invite them to bring their own distraction items from home. Hang up CARD posters. Alternatively, use inexpensive distractions that can be given to each individual (e.g., mazes, pipe cleaners) and discarded after use. Distraction items that can be sanitized between uses (e.g., fidget spinners) can also be used.
Where do we need to provide distractions?	Provide distraction items in all clinic areas (waiting and vaccination spaces).
Is it safe to omit alcohol swab skin antisepsis from the injection process?	Alcohol skin antisepsis prior to vaccine injection is unnecessary (World Health Organization, 2010). It increases the time and cost of vaccination, increases fear and pain, and increases waste. Signage can be posted letting everyone know this practice is unnecessary.
But what if we can't do everything that CARD suggests?	Review CARD educational resources for intervention options with your staff and decide what is feasible for you to implement in your practice setting. Obtain feedback from clients and staff during implementation to ensure that expected outcomes are being achieved. Be prepared to alter approaches.
What if family/caregivers are not supportive of vaccine clients' coping choices?	Empower staff to take ownership for inviting client participation and advocating for them. Provide education to family/caregivers about supporting clients in their coping choices and recognizing coping strategies. Staff can explain how some small interventions make a big difference in the experiences of vaccine clients and that service delivery is targeted toward the vaccine client and supporting them in having a positive vaccine experience. Children in particular, may not show how afraid they are or advocate for coping strategies.
What if parents/ caregivers want all family members together for all vaccinations?	Options for the presence of family members can be obtained from the CARD checklist. Explain to parents/caregivers that children are vaccinated independently of siblings and that younger children are typically accompanied by a parent. The most fearful child is vaccinated first. Note that children typically become more fearful when witnessing others getting vaccinated.

Evaluation:

Integration barrier

Clinic adaptations

Why do we have to ask clients for feedback when they don't complain? This takes a long time.

CARD was developed with input of clients and staff. Feedback is important to track adverse reactions and to inform future practice. Getting feedback is easy, no extra time is needed because feedback is obtained during the post-vaccination (aftercare) waiting period. Feedback can be written (preferred) or oral (and documented). If oral, be sure to be specific as vague questions like 'How did that go?' do not elicit meaningful responses and/or reveal deficiencies.



Why do we need to obtain feedback from staff?

CARD was developed with input of staff and clients. Feedback is important to ensure intended effects are being realized. Promote a culture of continuous quality improvement which recognizes that staff experiences are important and values their input. Incorporate feedback from clients so that their perspectives are captured. Use the information to inform future practices and changes.

N.B. Try these adaptations for your clinic. Consider involving others in co-creating adaptations that may be required as you proceed with CARD integration in your practice setting and evaluate their impact to ensure they do not interfere with the effectiveness of the program.

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