



# Clinical Governance and Clinical Oversight of Catch-up Vaccination Services for: Beneficiaries of Temporary Protection (BOTP) and International Protection (IP) applicants

Version	Approval Date	Approved by	Prepared by	Comment / updates
1.0	18/01/2023	Dr Colm Henry, Chief Clinical Officer, HSE	National Immunisation Office	First version

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## **1.0 Provision of Catch-up vaccinations**

It is very important that any new entrant to Ireland, particularly children and young people, are brought up to date with the Irish immunisation schedule to protect themselves against potentially serious vaccine preventable diseases like measles and meningitis, as well as to prevent outbreaks.

There are established pathways for catch-up vaccination for new entrants who are young children through General Practice. However, due to the large numbers of people entering Ireland in the past year who are BOTP and IP applicants, sometimes living in congregate settings like hotels as temporary accommodation, it has not been possible for them to consistently register with a GP nor avail of catch-up vaccinations via usual pathways.

## **2.0 Governance of catch-up vaccination services**

### **2.1 General Practice**

Catch-up vaccination services delivered in the setting of a General Practice operate within established governance arrangements for that General Practice. The return of vaccination information to local areas should be undertaken in a timely manner in line with usual practice and the patient/parent should be provided with an immunisation passport so they have a copy of their record in the event that they move accommodation between vaccine doses in a course.

### **2.2 Hospital groups or Hospitals**

Where catch-up vaccination services are delivered by hospital groups or hospitals the established clinical governance arrangements within the hospital group/hospital apply whether the vaccination service is delivered on established hospital premises or other premises used by the hospital group/hospital for this specific purpose. The return of vaccination information to local areas should be undertaken in a timely manner in line with usual practice and the patient/parent should be provided with an immunisation passport so they have a copy of their record in the event that they move accommodation between vaccine doses in a course.

### **2.3 Community services**

Catch-up vaccination services delivered by the Community Vaccination Service operate within established governance arrangements for the Community Vaccination Service, whether the vaccines are administered by the CHO vaccination team or in Central Vaccination Centres (CVCs). The return of vaccination information to local areas should be undertaken in a timely manner in line with national guidance and the patient/parent should be provided with an immunisation passport so they have a copy of their record in the event that they move accommodation between vaccine doses in a course.

### **2.4 Contracted services**

Where other parties are contracted by the HSE to deliver catch-up vaccinations the governance arrangements should be outlined within the service level agreement. The return of vaccination information to local areas should be undertaken in a timely manner in line with national guidance and the patient/parent should be provided with an immunisation passport



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### **3.0 Catch-up vaccination services provided within community vaccination services including CVCs**

There are three designated roles in community vaccination services, including CVCs as follows:

#### **3.1 Vaccinator**

Administers vaccines as per catch-up schedule depending on age of client and previous vaccines received, if any.

In the context of catch-up vaccines for IP and BOTP applicants, vaccinators:

- must be employed as nurses, midwives or doctors
- are professionally responsible to ensure that they have completed appropriate education and training as recommended. Nurses and midwives should administer the vaccines using medicine protocols provided within their scope of practice.
- should have completed BLS training and be competent in the management of anaphylaxis
- are responsible for administering vaccines as per Immunisation Guidelines of Ireland.
- will ensure consent protocols are adhered to and vaccine information, aftercare advice and immunisation passport are provided

#### **3.2 Site Manager/Lead Vaccinator**

Supervises overall set up and operation of the service and directs the work of vaccinators. Site Manager/Lead Vaccinator will generally be an experienced manager for larger sites but may be a designated vaccinator (lead vaccinator) in a smaller site.

The site manager/lead vaccinator is responsible for:

- the overall safe set up and operation of the service including the management of safe flow of those attending for vaccination
- the direction of the work of all vaccinators on site including ensuring all staff are of the appropriate profession and have completed all required training, preparing rosters for duty and for supporting and supervising the adherence of vaccinators to safe practice in relation to their work on site
- ensuring that at all times competent staff are on site to provide immediate treatment for anaphylaxis and Basic Life Support
- ensuring that there is a clear defined process for accessing the National Ambulance Service in the event of anaphylaxis or other medical emergency.



- liaising with the Clinical Lead regarding serious adverse clinical events that occur on site (whether assessed as vaccine related) and serious adverse events that are reported to Site Manager/Lead Vaccinator subsequent to vaccination
- ensuring that adverse events are reported to the Health Products Regulatory Authority (HPRA) and that in addition to this serious adverse incident are recorded on the National Incident Management System (NIMS)
- planning, ordering and management of vaccine requirements
- ensure tablets/laptops and appropriate levels of admin are available and vaccination records are updated.
- providing information from National Groups to their local management structure and vaccination teams.
- provide feedback from the local management structures and local teams to the National Groups
- ensure the local coordination of any 'mop up' vaccination
- ensure all appropriate equipment including anaphylaxis kits are brought to each session (or are available on site) and cool boxes where required.

### **3.3 Clinical Lead**

Provides clinical advice and direction to support to the Vaccinators and Site Manager/Lead Vaccinator

The Clinical Lead:

- will be an experienced vaccinator who is a doctor, registered nurse or midwife, ideally with experience in administering vaccines to children
- must be on site and available to support other vaccinators by addressing clinical questions such as eligibility for and safety of administering vaccination to individuals in cases where there is clear direction required. This will include providing advice on the catch-up schedule, having taken the NIO training and being familiar with the NIAC guidance, relevant medicine protocols and NIO clinical information document to support vaccination for BOTP and IP applicants.
- will support the Site Manager/Lead Vaccinator in assessing the requirement for and completing HPRA and NIMS reporting
- contact the National Immunisation Office as required to seek expert clinical advice on vaccination and queries in relation to vaccine ordering, storage and handling when required
  - Manage team using 'time out' protocols.

## **4.0 Vaccine ordering and management**

There may be a pharmacist/pharmacy technician support on site. In all circumstances it is vital there is a lead and deputy to ensure all vaccine orders are placed on time and that vaccines are stored under appropriate conditions with temperature monitoring as per NIO guidance.



## **5.0 Medical support**

It is not a requirement to have a doctor on site, as the clinical lead role can be fulfilled by an experienced registered nurse or midwife who will provide support to vaccinators. All vaccinators will have completed training and be competent to provide vaccines, with registered nurses and midwives doing so using medicine protocols.

In rare instances, a person may meet the exclusion criteria for vaccination under medicine protocol, and on discussion with the clinical lead a decision may be made that the person should be referred to a doctor for consideration of whether they may receive a vaccine. The medical support does not have to be on site or immediately available. If, after assessment, the doctor prescribes the vaccines to be given, they may be administered by a nurse vaccinator under their scope of practice.

## **6.0 National Immunisation Office**

The medical and pharmacist staff of the National Immunisation Office will provide remote expert advice to the Clinical Lead when requested by emailing [immunisation@hse.ie](mailto:immunisation@hse.ie)