



Medicine Protocol for the Administration of MMRVAXPRO (MMR - Measles, Mumps and Rubella) live vaccine by registered nurses and registered midwives to Refugees and Applicants Seeking Protection in Ireland and in the event of an outbreak

This medicine protocol is a specific written instruction for the administration of MMRVAXPRO vaccine to Refugees and Applicants Seeking Protection in Ireland and in the event of an outbreak (hereafter referred to as vaccine recipients) as advised by public health by registered nurses and registered midwives. This medicine protocol is valid for the 2023/2024 Health Service Executive (HSE) Primary Childhood Immunisation Programme (PCIP), Schools Immunisation Programme (SIP) and National Immunisation Advisory Committee (NIAC) catch up Immunisation Programme and in the event of an outbreak as advised by public health.

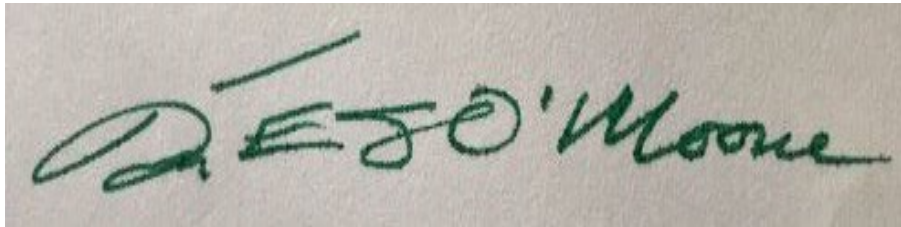
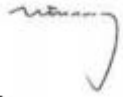
This medicine protocol enables registered nurses and registered midwives employed in the voluntary and statutory services of the HSE including Mass vaccination clinics who have undertaken the required education and training programmes to administer MMRVAXPRO vaccine with reference to and guidance from Nursing & Midwifery Board of Ireland (NMBI), National Nursing and Midwifery Immunisation Working Group, National Immunisation Advisory Committee (NIAC), National Immunisation Office (NIO), HSE and in accordance with the Summary of Product Characteristics (SmPC) for MMRVAXPRO vaccine as detailed by the European Medicines Agency(EMA) at www.ema.europa.eu

- An Bord Altranais (2007) *Guidance to Nurses and Midwives on Medication Management*. Dublin: An Bord Altranais
- National Immunisation Advisory Committee (2023) *Anaphylaxis: Immediate Management in the Community* available at: https://rcpi.access.preservica.com/uncategorized/IO_a36f9e4b-4c80-432d-8264-546089359925/
- National Immunisation Advisory Committee *Immunisation Guidelines for Ireland*: Royal College of Physicians of Ireland National Immunisation Advisory Committee available at: <https://www.rcpi.ie/Healthcare-Leadership/NIAC/Immunisation-Guidelines-for-Ireland>
- National Immunisation Office (2023/2024) *Supporting Information for Staff: Schools Immunisation Programme* available at: <https://www.hse.ie/eng/health/immunisation/hcpinfo/schoolproghcp/supportingdoc.pdf>
- National Immunisation Office (2023) *Clinical information to support healthcare staff to deliver catch-up vaccination for Refugees and Applicants Seeking Protection in Ireland and in the event of an outbreak* available at: <https://www.hse.ie/eng/health/immunisation/hcpinfo/botpipa/clinicalinfobotpipa.pdf>
- National Immunisation Office (2022) *Supporting Information for Vaccinations in General Practice* available at: <https://www.hse.ie/eng/health/immunisation/infomaterials/gpsupportingdocpci.pdf>
- Nursing and Midwifery Board of Ireland (2021) *Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives*. Dublin: Nursing and Midwifery Board of Ireland available at: <https://www.nmbi.ie/NMBI/media/NMBI/Code-of-Professional-Conduct-and-Ethics.pdf>
- Nursing and Midwifery Board of Ireland (2020) *Guidance for Registered Nurses and Midwives on Medication Administration* available at: <https://www.nmbi.ie/NMBI/media/NMBI/NMBI-Medication-Administration-2020.pdf?ext=.pdf>
- Nursing and Midwifery Board of Ireland (2022) *Practice Standards for Midwives*. Dublin: Nursing and Midwifery Board of Ireland available at: <https://www.nmbi.ie/Standards-Guidance/MidwivesStandards>
- Nursing and Midwifery Board of Ireland (2015) *Recording Clinical Practice. Guidance to Nurses and Midwives*. Dublin: Nursing and Midwifery Board of Ireland available at: <https://www.nmbi.ie/Standards-Guidance/More-Standards-Guidance/Recording-Clinical-Practice>
- Nursing and Midwifery Board of Ireland (2015) *Scope of Nursing and Midwifery Practice Framework*. Dublin: Nursing and Midwifery Board of Ireland available at: <https://www.nmbi.ie/StandardsGuidance/Scope-of-Practice/Nursing-Practise-Scope-Definition>

The Nursing and Midwifery Board of Ireland defines medicine protocols as “written directions that allow for the supply and administration of a named medicinal product by a nurse or midwife in identified clinical situations. A medicine protocol involves the authorisation of the nurse/midwife to supply and administer a medicine to groups of patients in a defined situation meeting specific criteria and who may not be individually identified before presentation for treatment. An individually named prescription is not required for the supply and administration of medication when a medication protocol is in effect” (An Bord Altranais, 2007).



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Document reference number	NIO 2023
1.0 Critical Elements	
Name of Organisation where medicine protocol applies	Health Service Providers/Mass vaccination clinics across the voluntary and statutory services of the HSE. This Medicine Protocol applies to: <ul style="list-style-type: none">registered nurses and registered midwives employed in the voluntary and statutory services of the HSE including Mass vaccination clinics, congregated settings, temporary clinics and mobile units
Date the medicine protocol comes into effect	December 2023
Date for review of medicine protocol	December 2024
Document prepared by	National Immunisation Office (NIO) in collaboration with the Office of the Nursing and Midwifery Services Director (ONMSD) HSE.
Names and Signatures of the employing authority who is authorising the implementation of the medicine protocol <i>“On behalf of the authority employing professionals authorised to administer under this medicine protocol, I have read this medicine protocol and authorise its implementation”</i>	<p>Name: Dr. Eamonn O’Moore Director of National Health Protection, HSE</p> <p>Signature: </p> <p>Name: Dr Colm Henry, Chief Clinical Officer, HSE</p> <p>Signature: </p> <p>Name: Dr Geraldine Shaw, Nursing and Midwifery Services Director, HSE</p>



Signature:  _____

2.0 Clinical Criteria	
Clinical condition for use of the medicine protocol	The clinical condition for which this medicine protocol has been developed is for the active immunisation against and prevention of measles, mumps and rubella infection.
Circumstances in which the medicine protocol applies	The primary childhood immunisation schedule at 12 months of age and for any subsequent presentation for vaccine or booster e.g. measles outbreak, late entrants, catch-up campaigns or adult vaccination to Refugees and Applicants Seeking Protection in Ireland (hereafter referred to as vaccine recipients) and in the event of an outbreak.
Inclusion criteria for vaccine recipients receiving MMRVAXPRO (MMR) live vaccine under this medicine protocol	<ol style="list-style-type: none"> 1. All children at 12 months of age should receive a MMRVAXPRO vaccine under primary childhood immunisation programme, with a second dose at 4-5 years of age (usually given in junior infants) 2. Children and adults presenting late for vaccine or without documented vaccination records 3. Measles outbreak – during an outbreak MMRVAXPRO vaccine may be given as young as 6 months of age. A dose given < 12 months of age does not replace the dose recommended at 12 months of age.



	<p>Notes: MMRVAXPRO vaccine can be given to those who have a history of measles, mumps or rubella infection</p> <p>Children (\geqage 4 years and older) and adults without prior MMR vaccination should be given Priorix (MMR) vaccine as soon as possible and a second dose 4 weeks later.</p> <p>Children from 12 months to 4 years without evidence of MMR vaccination should receive one dose of MMR vaccine and continue with routine age appropriate MMR vaccination.</p> <p>Precautions</p> <ul style="list-style-type: none">• Acute severe febrile illness, defer until recovery• Injection with another live vaccine within the previous 4 weeks• Recent administration of blood or blood products. These may contain significant levels of virus-specific antibodies, which could prevent vaccine virus replication. MMRVAXPRO vaccine should be deferred for at least 6 months after packed red-cell, whole-blood transfusion and Human Normal Immunoglobulin (HNIG) (see NIAC Chapter 2, Table 2.5). If the MMRVAXPRO vaccine is administered within these timeframes, a further 1 or 2 doses as required should be given• MMRVAXPRO vaccine should not be administered on the same day as yellow fever vaccine. If rapid protection is required the vaccines may be given at any interval and an additional dose of MMRVAXPRO vaccine given at least 4 weeks later <p>Those who developed thrombocytopenia within 6 weeks of their first dose of MMRVAXPRO vaccine should undergo serological testing to decide whether a second dose is necessary. The second dose is recommended if the patient is not fully immune to the 3 component viruses.</p> <p>Note: COVID-19 vaccines (except for COVID-19 vaccine given to children aged 6 months4 years where a 14-day interval is recommended) and other vaccines may be administered at the same time or at any interval.</p>
<p>Exclusion criteria for vaccine recipients receiving MMRVAXPRO (MMR - Measles, Mumps and Rubella) live vaccine under this medicine protocol</p>	<ul style="list-style-type: none">• A known history of anaphylactic or hypersensitivity reaction to MMRVAXPRO vaccine or to any of the MMRVAXPRO vaccine constituents including neomycin• Significant immunocompromise (see NIAC Chapter 3)• Pregnancy (there is no requirement to carry out a pregnancy test prior to vaccination). Note: pregnancy should be avoided for 1 month after MMRVAXPRO vaccine• Children under 12 months of age born to mothers who received infliximab throughout their pregnancy• Children who are being breastfed by mothers taking infliximab.
<p>Actions to be taken for those who are excluded from this medicine protocol</p>	<p>All recipients meeting exclusion criteria must be referred to the medical practitioner for an individual medical assessment.</p> <ul style="list-style-type: none">• Document action in clinical notes• Where MMRVAXPRO vaccine is prescribed following medical assessment, the nurse or midwife may administer MMRVAXPRO vaccine within their scope of practice.



	<p>Note: In determining their scope of practice, nurses and midwives must make judgements about their competence to carry out a role or activity (NMBI, 2015).</p>												
<p>Description of circumstances and referral arrangements when further advice or consultation is required</p>	<p>Discuss the vaccine recipient with the Medical Practitioner in the event of:</p> <ul style="list-style-type: none"> • Previous adverse reaction • Other clinical concerns 												
<p>Documentation required for the implementation of this medicine protocol</p>	<p>Consent form must be completed by the parent/legal guardian for all children who receive the MMRVAXPRO vaccine. Children aged 16 years and over consent on their own behalf, once understood and translation of consent is undertaken. Relevant details including the batch number must be recorded on the consent form.</p> <p>The following documents will be required at each vaccination session:</p> <ul style="list-style-type: none"> • Vaccination session form • Blank vaccine consent forms • Vaccine information leaflets • Patient held record cards/ vaccine passport • HPRA Adverse Reaction Reporting forms • HSE Incident/Near Miss Report Forms • Post vaccination advice <p>It is the responsibility of each registered nurse or midwife to be familiar with the appropriate documentation to support the safe administration of MMRVAXPRO vaccine which includes the following:</p> <ul style="list-style-type: none"> • Medicine Protocol for the Administration of MMRVAXPRO (MMR - Measles, Mumps and Rubella) live vaccine by registered nurses and registered midwives to Refugees and Applicants Seeking Protection in Ireland and in the event of an outbreak • NIAC (2023) <i>Anaphylaxis: Immediate Management in the Community</i> available at: https://rcpi.access.preservica.com/uncategorized/IO_a36f9e4b-4c80-432d-8264-546089359925/ 												
<p>3.0 Name of medicine</p>	<p>MMRVAXPRO (MMR - Measles, Mumps and Rubella) live vaccine</p> <p>Dose: 0.5ml</p> <p>Route: Intramuscular injection</p> <table border="1" data-bbox="400 1485 1449 1995"> <thead> <tr> <th data-bbox="400 1485 751 1559">Patients Age</th> <th data-bbox="751 1485 1098 1559">Site</th> <th data-bbox="1098 1485 1449 1559">Needle length & Size</th> </tr> </thead> <tbody> <tr> <td data-bbox="400 1559 751 1744">Birth to <12 months</td> <td data-bbox="751 1559 1098 1744">Vastus lateralis muscle</td> <td data-bbox="1098 1559 1449 1744">25 mm (Use a 16 mm needle in infants under 2.5 - 3 kg) 23-25 gauge</td> </tr> <tr> <td data-bbox="400 1744 751 1883">12 to <36 months</td> <td data-bbox="751 1744 1098 1883">Vastus lateralis or deltoid muscle (depending on muscle mass)</td> <td data-bbox="1098 1744 1449 1883">25 mm 23-25 gauge</td> </tr> <tr> <td data-bbox="400 1883 751 1995">3 years and older</td> <td data-bbox="751 1883 1098 1995">Deltoid muscle</td> <td data-bbox="1098 1883 1449 1995">25 mm 23-25 gauge</td> </tr> </tbody> </table>	Patients Age	Site	Needle length & Size	Birth to <12 months	Vastus lateralis muscle	25 mm (Use a 16 mm needle in infants under 2.5 - 3 kg) 23-25 gauge	12 to <36 months	Vastus lateralis or deltoid muscle (depending on muscle mass)	25 mm 23-25 gauge	3 years and older	Deltoid muscle	25 mm 23-25 gauge
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<p>Link to Medicine</p> <p>Details of product information and other data including instructions for supply and administration is available from the EMA at www.ema.ie</p>	<p>Link to Summary of Product Characteristics:</p> <p>https://www.ema.europa.eu/en/documents/product-information/m-m-rvaxpro-epar-product-information_en.pdf</p> <p>Link to Patient Information Leaflet:</p> <p>https://www.ema.europa.eu/en/documents/product-information/m-m-rvaxpro-epar-product-information_en.pdf</p>
<p>Procedure for the reporting and documentation of errors and near misses involving the medication</p>	<p>In the case of medicine errors that directly involve the vaccine recipient, i.e. wrong medicine/patient/dose/route being administered or another medicine error, the registered nurse or registered midwife must remain with the vaccine recipient and closely monitor them for any adverse reactions.</p> <p>Vital signs should be recorded and the vaccine recipient should be reviewed by the registered nurse/ midwife and/ or medical practitioner.</p> <p>The incident must be reported to the relevant line manager as soon as possible. The incident and all actions taken must be promptly recorded in the recipient's documentation/notes and the relevant National Incident Management Report Form completed:</p> <p>https://www.hse.ie/eng/about/who/nqpsd/qps-incident-management/nims/nirf-01-v12-person-interactive.pdf</p> <p>For children, the child's parent and/or legal guardian must be informed of the incident.</p> <p>Any suspected adverse reactions associated with medicine errors should be reported to the HPRA as outlined below.</p> <p>Any errors and near misses not involving medication e.g. needle stick injuries, the incident and all actions taken must be promptly recorded on the relevant National Incident Management Report form and forwarded to the relevant line manager as per local policy. Refer to 'EMI Tool Kit' (https://www.hpsc.ie/a-z/EMIToolkit/).</p>
<p>Procedure for reporting Adverse Drug Reactions to the HPRA</p>	<p>The relevant nursing or midwifery staff should report to the HPRA any suspected adverse reactions, in accordance with criteria outlined by the HPRA. This reporting may be carried out online at https://www.hpra.ie or through use of the yellow card system which is available in the downloadable format from the HPRA website, or on request from the HPRA.</p>



<p>Resources and equipment required for administration of MMRVAXPRO (MMR - Measles, Mumps and Rubella) live vaccine</p>	<ul style="list-style-type: none"> • MMRVAXPRO (MMR) vaccine • Fridge/cool box with minimum/maximum temperature recording device to monitor the cold chain temperature (between +2°C and +8°C) • Disposable kidney dishes/coloured trays • Gauze swabs/Plasters • Sharps bins, and bags for disposal of healthcare risk and non-risk waste material • Alcohol hand sanitizer • Face masks (as per local guideline) • Access to telephone • Resuscitation equipment and drugs in accordance with the NIAC (2023) <i>Anaphylaxis: Immediate Management in the Community</i> available at: https://rcpi.access.preservica.com/uncategorized/IO_a36f9e4b-4c80-432d-8264-546089359925/ • Access to medical support • Safe storage areas for medicines and equipment • Current medicine protocol for MMRVAXPRO (MMR) vaccine.
<p>Audit process to identify appropriate use of the medicine protocol or unexpected outcomes</p>	<p>All documentation will be held for review and audit purposes as per local policy.</p>
<p>4.0 Information for vaccine recipient/parent/legal guardian</p>	
<p>Advice to be given to the vaccine recipient/parent/legal guardian before treatment</p> <p>Advice to be given to the vaccine recipient/parent/legal guardian after treatment</p>	<p>Reiterate the information provided in the HSE patient information leaflet for the vaccine in the appropriate language and translator support if required.</p> <p>For children, Patient Information Leaflet/Fact Sheet must be supplied with the consent form to each parent/legal guardian prior to administration of the vaccine as above.</p> <p>After Treatment</p> <p>The vaccine recipient must be advised to remain seated in the post vaccination observation area for 15 minutes to allow monitoring of any immediate reaction including possible anaphylactic reaction and must be advised to report any side effects to the registered nurse or registered midwife.</p> <p>Note: Adverse reactions are considerably less common (less than 1%) after the 2nd dose of MMRVAXPRO (MMR) vaccine.</p>
<p>Details of any necessary follow-up, action and referral arrangements</p>	<p>In the event of an adverse reaction the registered nurse or midwife must ensure that all procedures are adhered to as outlined in Section 3.</p>
<p>5.0 Staff authorised to use this medicine protocol</p>	



<p>Professional qualifications, training and competence required prior to using this medicine protocol</p>	<p>Registered nurse or registered midwife must have completed all of the following:</p> <ol style="list-style-type: none">1) Be a Registered Nurse or Registered Midwife, on the active register maintained by the NMBI2) <i>Immunisation Foundation Programme</i> accessible on www.HSELand.ie3) Education programme for nurses and midwives on <i>Primary Childhood Immunisation Programme</i> and any updates for nurses and midwives accessible on www.HSELand.ie4) Education programme for nurses and midwives on <i>Schools Immunisation Programme</i> and any updates for nurses and midwives accessible on www.HSELand.ie5) NIO education programme on <i>Catch up vaccination for Refugees and Applicants Seeking Protection in Ireland</i> accessible on www.HSELand.ie6) An approved <i>Basic Life Support for Health Care Providers Course</i> within the last two years (i.e. Irish Heart Foundation (IHF))7) Initial <i>National Anaphylaxis Education Programme for Health Care Professionals</i> accessible on www.HSELand.ie followed by a two hour classroom based skills workshop. Recertification is required every two years by completing the on-line <i>National Anaphylaxis Education Programme for Health Care Professionals</i> accessible on www.HSELand.ie8) The registered nurse/midwife must complete the Competency Self-Assessment Form to vaccinate* Refugees and Applicants Seeking Protection in Ireland *Health Service Executive (HSE) Primary Childhood Immunisation Programme (PCIP), Schools Immunisation Programmes (SIP) and the National Immunisation Advisory Committee (NIAC) Catch Up Immunisation Programme available at www.immunisation.ie
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References



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An Bord Altranais (2007) *Guidance to Nurses and Midwives on Medication Management*. Dublin: An Bord Altranais

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National Clinical Guideline No. 30 (2023) – Infection Prevention and Control (IPC) <https://www.gov.ie/en/publication/a057e-infection-prevention-and-control-ipc/>.

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