
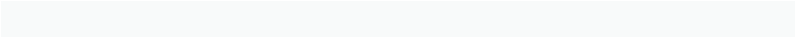




**Section B information for PHECC registered Vaccinators (Emergency Medical Technicians (EMT), Paramedics and Advanced Paramedics) for the administration of the Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray to children between 2-17 years of age for the 2025/2026 influenza season**

(This document is to be read in conjunction with the Master Medicine Protocol published by National Immunisation Office for administration of Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray to children between 2-17 years of age)

<b>Name of Organisation where this section b applies</b>	Health Service Providers across the voluntary and statutory services of the Health Service Executive (HSE), and vaccination clinic centres. This protocol applies to registered Emergency Medical Technicians (EMT), Paramedics and Advanced Paramedics) involved in the administration of the LAIV Fluenz Nasal Spray Vaccine to vaccine recipients under this protocol. This protocol does not apply where practitioners are deployed on behalf of a PHECC Licensed CPG Service Provider.
<b>Date this section b comes into effect</b>	September 2025
<b>Date for review of this section b</b>	September 2026  The first version of this document is dated 12 <sup>th</sup> Sept 2024. This document is subject to ongoing revision. Please refer to the current version available on the NIO website
<b>Document prepared by:</b>	Pre-Hospital Emergency Care Council in consultation with the National Immunisation Office (NIO)
<b>Names and Signatures of the officers authorising the implementation of this protocol</b>  <i>“On behalf of the HSE as the approving authority of the LAIV training programme for registered PHECC Practitioners, I have read this protocol and authorise its implementation”</i>	Name: <b>Mr Richard Lodge</b> , Director, Pre-Hospital Emergency Care Council Signature:  



**Section B: Information Specific to Pre-Hospital Emergency Care Council (PHECC) registered Vaccinators** (Emergency Medical Technicians (EMT), Paramedics and Advanced Paramedics), for the administration of Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray to children between 2-17 years of age for the 2024/2025 influenza season for Health Service Executive (HSE) winter vaccination programme.

Statutory Instruments No. 245 of 2021 and 422 of 2023 enables registered health care professionals (including Registered EMT, Paramedics and Advanced Paramedics) to administer the Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray to children between 2-17 years of age for the 2025/2026 Influenza Season as part of the Health Service Executive (HSE) Winter Vaccination Programme.

In order to administer the vaccine, PHECC registered Vaccinators (EMT, Paramedics and Advanced Paramedics) **must read and understand** the vaccine specific master medicine protocol for the administration of LAIV Fluenz Nasal Spray.

PHECC registered Vaccinators (EMT, Paramedics and Advanced Paramedics) shall **complete the Self-Assessment of Competency Form** included in this document. The medicine protocol and the Self-Assessment of Competency Form are available at [www.immunisation.ie](http://www.immunisation.ie)

PHECC registered Vaccinators (EMT, Paramedics and Advanced Paramedics) **must** have attained the professional qualification, training and competence requirements as listed below in order to be eligible to administer LAIV Fluenz Nasal Spray using the HSE master medicine protocol for this vaccine.

#### **Professional Qualifications, Training, Experience and Competence Required**

<b>Professional qualifications, training, experience and competence required prior to using this medicine protocol</b>	<p>The PHECC registered Vaccinators (EMT, Paramedics and Advanced Paramedics) must have completed all of the following:</p> <ol style="list-style-type: none"><li>1. Be a Registered EMT, Paramedic or advanced paramedic on the active register maintained by PHECC</li><li>2. Be currently certified at Cardiac First Response – Advanced within the last two years</li><li>3. Initial <i>National Anaphylaxis Education Programme for Health Care Professionals</i> accessible on <a href="http://www.HSELanD.ie">www.HSELanD.ie</a> 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 <a href="http://www.HSELanD.ie">www.HSELanD.ie</a></li><li>4. Self-Assessment of Competency Form for LAIV Fluenz Nasal Spray (included in this Section B document ) accessible on: <a href="https://www.hse.ie/eng/health/immunisation/hcpinfo/fluinfo/">https://www.hse.ie/eng/health/immunisation/hcpinfo/fluinfo/</a></li><li>5. National Immunisation Office two e-Learning modules for LAIV. Both are accessible on <a href="http://www.HSeLanD.ie">www.HSeLanD.ie</a></li><li>6. National Immunisation Information System (NIIS) online training programme available at <a href="http://www.HSeLanD.ie">www.HSeLanD.ie</a></li><li>7. Storing and Managing Vaccines, available at <a href="http://www.HSeLanD.ie">www.HSeLanD.ie</a></li></ol> <p><b>Recommended:</b></p> <ol style="list-style-type: none"><li>1. <i>Children having vaccinations and healthcare procedures:</i> (Professor Lucy Bray ONMSD 2023, available at <a href="http://www.HSeLanD.ie">www.HSeLanD.ie</a></li><li>2. <i>Talking about Immunisation</i>, available at <a href="http://www.HSeLanD.ie">www.HSeLanD.ie</a></li><li>3. <i>LAIV information leaflet for parents</i> available at <a href="https://www.hse.ie/eng/health/immunisation/pubinfo/flu-vaccination/information/information-%20material.html">https://www.hse.ie/eng/health/immunisation/pubinfo/flu-vaccination/information/information-%20material.html</a></li></ol>
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**The PHECC registered Vaccinators (EMT, Paramedics and Advanced Paramedics) must be familiar with the following list of clinical documents:**

National Immunisation Advisory Committee (2023) *Anaphylaxis: Immediate Management in the Community* available at: <https://www.hiqa.ie/areas-we-work/national-immunisation-advisory-committee/immunisation-guidelines-ireland>

National Immunisation Advisory Committee *Immunisation Guidelines for Ireland /Chapter 11* Dublin: Health Information Quality Authority Online update available at: [https://www.hiqa.ie/sites/default/files/NIAC/Immunisation\\_Guidelines/Chapter\\_11\\_Influenza.pdf](https://www.hiqa.ie/sites/default/files/NIAC/Immunisation_Guidelines/Chapter_11_Influenza.pdf)

National Immunisation Office (2024) *HSE Guidelines for maintaining the vaccine cold chain including maintenance of vaccine fridges and management of vaccines* available at <https://www.hse.ie/eng/health/immunisation/hcpinfo/vaccineordering/sopnio01fridge.pdf>

National Immunisation Office (2024) *HSE Guidelines for maintaining the vaccine cold chain in vaccine cool boxes.* Available at [www.hse.ie/eng/health/immunisation/hcpinfo/vaccineordering/sopnio02box.pdf](http://www.hse.ie/eng/health/immunisation/hcpinfo/vaccineordering/sopnio02box.pdf)

National Immunisation Office (2025) *Toolkit to Support the Administration of Fluenz nasal spray suspension to Primary School Children in the School Setting winter vaccination programme 2025-2026.* Dublin: Health Service Executive

Master Medicine Protocol for LAIV (found on [www.immunisation.ie](http://www.immunisation.ie))

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

PHECC (2017) *Code of Professional Conduct and Ethics for Registrants.* Available at: [https://www.phecit.ie/PHECC/Public\\_and\\_patients/Code\\_of\\_professional\\_conduct\\_and\\_ethics/PHECC/Public\\_and\\_Patients/Code\\_of\\_Professional\\_Conduct\\_and\\_Ethics/Code\\_of\\_Professional\\_Conduct\\_and\\_Ethics.aspx?hkey=2fc616eb-7865-4bbb-8526-7a6f25ddb54c](https://www.phecit.ie/PHECC/Public_and_patients/Code_of_professional_conduct_and_ethics/PHECC/Public_and_Patients/Code_of_Professional_Conduct_and_Ethics/Code_of_Professional_Conduct_and_Ethics.aspx?hkey=2fc616eb-7865-4bbb-8526-7a6f25ddb54c)

## Self-Assessment of Competency Form



NAME: \_\_\_\_\_

(PRINT CLEARLY in CAPITALS)

### Self-Assessment of Competency to Administer LAIV Vaccine under Medicine Protocol

	Critical Element	Competent Date/Initials	Needs Practice Date/Initials	Needs Theory Date/Initials
1.	I practice within my scope of practice to undertake administration of Seasonal influenza vaccine under medicine protocol.			
2	I understand that vaccines are prescription only medicines (POM) and prior to administration require either: 1. a valid prescription for individual vaccines <u>or</u> 2. a medicine protocol for individual vaccines			
3.	I am familiar with and adhere to the practices as set out in <i>Immunisation Guidelines for Ireland (NIAC)</i> .			
4.	I understand the role and function of medicine protocols in the context of NIAC guidelines and understand the current medicine protocol for this vaccination programme.			
5.	I have successfully completed the National Immunisation Office (NIO) education programme for LAIV, available at <a href="http://www.HSEland.ie">www.HSEland.ie</a>			
6	I understand the current medicine protocol for this vaccination programme			
7	I am aware of the inclusion/exclusion criteria for children receiving LAIV under this medicine protocol			
8	I am familiar with and adhere to the practices as set out in: • <i>Immunisation Guidelines for Ireland (NIAC)</i> .			
9	I have successfully completed the National Immunisation Office (NIO) HSEland education programme for LAIV. I understand that I will need to regularly review the most current vaccination information from the NIO available at: <a href="http://www.immunisation.ie">www.immunisation.ie</a>			
10.	I have attended Cardiac First Response - Advanced within the last two years and am currently certified.			
11	I am competent in safe intranasal vaccine administration technique.			
12.	I have successfully completed an approved Anaphylaxis education programme as outlined in the medicine protocol. I am familiar with NIAC (2023) <i>Anaphylaxis: Immediate Management in the Community</i> .			

13	<p>I have the knowledge and skills to safely administer the vaccine regarding the following:</p> <ul style="list-style-type: none"> <li>• Preparation of the vaccine for administration</li> <li>• Documentation of the details of the vaccine to include the vaccine label which has the batch number and expiry date details</li> <li>• Date and time and site of administration of vaccine</li> <li>• Vaccinator ID</li> </ul>			
14	I understand the documentation required to support implementation of the medicine protocol to ensure safe administration of LAIV			
15	I can discuss the benefits of this vaccine for children and potential side effects to the child, parent/legal guardian.			
16.	I understand if further education and training is required to deem myself competent in intranasal vaccine technique, preparation of vaccines under medicine protocol utilising Antimicrobial Resistance and Infection Control (AMRIC) aseptic technique, I am required to access the education/training required			
17	I have successfully completed all the education programmes as listed in Table 1: Professional Qualifications, Training, Experience and Competence Required			
18.	I have the appropriate skills and knowledge to assess children's suitability for vaccination, which includes a clinical assessment of children, presenting for vaccination within the scope of the medicine protocol			
19	I have the knowledge and skills to effectively communicate with the child and parent/legal guardian and use play and distraction during this procedure			
20.	I understand when and how to refer those children who meet the exclusion criteria to the relevant medical practitioner for an individual medical assessment as per medicine protocol			
21.	I am familiar with the documentation required to support implementation of the medicine protocol to ensure safe administration of LAIV			
22.	<p>I can provide written and verbal information in relevant language and advice to the child, parent/legal guardian to support the individual to make an informed consent available at: <a href="https://www.hse.ie/eng/health/immunisation/hcpinfo/botpipa/consentukr.pdf">https://www.hse.ie/eng/health/immunisation/hcpinfo/botpipa/consentukr.pdf</a></p>			
23.	<p>I have knowledge of the appropriate documentation procedure for treatment and reporting of adverse drug reactions to the Health Products Regulatory Authority (HPRA) if required available at: <a href="http://www.hpra.ie">www.hpra.ie</a>.</p>			
24.	I can demonstrate the procedure for reporting and documentation of medication errors/near misses as per HSE Enterprise Risk Management Policy & Procedures (2023)			
25	<p>I understand how to dispose of single use equipment and sharps in accordance with National Clinical Guideline No. 30 (2023) Infection Prevention and Control (IPC) available at: <a href="https://www.gov.ie/en/publication/a057e-infection-prevention-and-control-ipc/">https://www.gov.ie/en/publication/a057e-infection-prevention-and-control-ipc/</a></p>			
26.	I am aware of and comply with the guidance on vaccine storage and handling including the maintenance of the cold chain in accordance with national and local policies.			

27	I understand the agreed process, including ICT systems if applicable for the accurate and appropriate documentation of the vaccine administration			
28	I understand the purpose and importance of completing the required HSE data returns following vaccine administration			
29	<p>I have undertaken the following HSELand/online programmes:</p> <ul style="list-style-type: none"> <li>• AMRIC Aseptic Technique <a href="http://www.hseland.ie">www.hseland.ie</a></li> <li>• AMRIC Hand Hygiene <a href="http://www.hseland.ie">www.hseland.ie</a></li> <li>• GDPR Guidelines <a href="http://www.hseland.ie">www.hseland.i</a> <a href="http://www.hseland.ie">e</a></li> <li>• National Consent Policy: <a href="https://www.hse.ie/eng/about/who/national-office-human-rights-equality-policy/consent/">https://www.hse.ie/eng/about/who/national-office-human-rights-equality-policy/consent/</a></li> </ul>			

*I have sufficient theoretical knowledge and practice to undertake vaccination under this medicine protocol independently, and I acknowledge my responsibility to maintain my own competence in line with current best evidence.*

PHECC Registered Emergency Medical Technician, Paramedic or Advanced Paramedic

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **PHECC Reg.PIN** \_\_\_\_\_

*If any deficits in theory and/or clinical practice are identified, the PHECC Registered Emergency Medical Technician, Paramedic or Advanced Paramedic must discuss with relevant line manager and implement appropriate action plan to achieve competency within an agreed time frame.*

Action Plan (for use if needed to reach competencies outlined)

Action necessary to achieve competency:

Date to be achieved:

Supporting evidence of measures taken to achieve competency:

PHECC Registered EMT, Paramedic or Advanced Paramedic signature

Date:

Line Manager Signature

Date: