Medicine Protocol for the Administration of MMR (Measles, Mumps and Rubella) vaccine (Priorix) by registered nurses and registered midwives

This medicine protocol is a specific written instruction for the administration of Priorix Vaccine (MMR) to children/students in Primary and Second Level School by registered nurses and registered midwives. This medicine protocol is valid for the 2017/2018 HSE School Immunisation Programme.

This medicine protocol enables registered nurses and midwives employed in the voluntary and statutory services of the HSE who have undertaken the required education and training programmes to administer MMR (Priorix) measles, mumps and rubella (live) vaccine with reference to and guidance from Nursing & Midwifery Board of Ireland, National Immunisation Group, National Immunisation Office, HSE and in accordance with the Summary of Product Characteristics for MMR vaccine (Priorix) as detailed by the Health Products Regulatory Authority at www.hpра.ie:

- Health Services Executive (2016) Directions for Nurses and Midwives for the Management of a Patient who Develops Anaphylaxis. Dublin: Health Service Executive
- Royal College of Physicians of Ireland National Immunisation Advisory Committee Immunisation Guidelines for Ireland Dublin: Royal College of Physicians of Ireland National Immunisation Advisory Committee (Online Update available at http://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/

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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<tr>
<th>Document number:</th>
<th>ONMSD 2017-003</th>
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### 1.0 Critical Elements

**Name of Organisation where protocol applies**

Health Service Providers across the voluntary and statutory services of the Health Service Executive (HSE). This Medicine Protocol applies to:
- Registered nurses and midwives involved in the supply and administration of the Priorix vaccine to children/students in primary/second level school through a School Immunisation Programme.

**Date the protocol comes into effect**

September 2017

**Date for review of protocol**

May 2018

**Document prepared by:**

Office of the Nursing and Midwifery Services Director (ONMSD) HSE, in collaboration with the National Immunisation Office (NIO) at the request of Dr Kevin Kelleher, Assistant National Director, Health and Wellbeing – Public Health and Child Health, HSE

**Names and Signatures of the employing authority who is authorising the implementation of the protocol**

*On behalf of the authority employing professionals authorised to administer under this medicine protocol, I have read this medicine protocol and authorise its implementation*

**Name:** Dr. Kevin Kelleher, Assistant National Director, Health and Wellbeing – Public Health and Child Health, HSE

**Signature:**

\[Signature\]

Name: Dr Áine Carroll, National Director of Clinical Strategy and Programmes, HSE

**Signature:**

\[Signature\]

Name: Ms Mary Wynne, Nursing and Midwifery Services Director, HSE

**Signature:**

\[Signature\]
| Clinical Condition for use of the 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 School Immunisation Programme (SIP) will be delivered annually by the Health Service Executive (HSE). The aim of the immunisation programme is to complete the measles, mumps and rubella (live) vaccine, schedule for children. The MMR vaccine is recommended for all children at 12 months of age and at 4-5 years in the Immunisation Guidelines for Ireland [http://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/](http://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/).
If a child has not received a 1st dose of MMR vaccine, Priorix (MMR) should be given, under this protocol, to a child in junior infants or age equivalent in special schools and home schooled. A 2nd dose of Priorix (MMR) should then be given at least 4 weeks after the 1st Priorix (MMR) dose. – Preferably in a SIP mop up clinic. This medicine protocol also applies in MMR catch up campaigns and outbreaks situations as recommended by NIAC (2014). |
| Inclusion criteria for children/students treatment using the medicine protocol | Children/Students in primary/ second level school or age equivalent in special schools and home schooled students. See [http://www.hse.ie/eng/health/immunisation/pubinfo/schoolprog/4in1mmr/schoolguidelines.pdf](http://www.hse.ie/eng/health/immunisation/pubinfo/schoolprog/4in1mmr/schoolguidelines.pdf) Children/Students with valid consent. |
| Exclusion criteria for children/ student s using the medicine protocol | A known history of anaphylactic or hypersensitivity reaction to Priorix or to any of the MMR vaccine constituents including neomycin.
Acute febrile illness: The presence of a minor infection such as a mild upper respiratory infection or low grade fever is not a contraindication to immunisation.
Child/student with a history of thrombocytopenia within six weeks of receiving the first dose MMR vaccine.
Child/Student with a contraindication to intramuscular injection (haematological disorder/coagulation disorder e.g. haemophilia, severe thrombocytopenia
Child/student who is immunocompromised either due to disease or treatment.
Child/student who received low-dose immunoglobulin within the previous 3 months or red-cell transfusion within 6 months or high-dosage immunoglobulin within 11 months.
Child/student on topical tacrolimus within the past 28 days.
Child/student who received Varicella or, Yellow Fever live vaccines within the previous 4 weeks.
Active untreated tuberculosis.
Pregnancy where applicable |
| Actions to be taken for those who are excluded from the Protocol | • All children/students meeting exclusion criteria must be referred to the medical practitioner for an individual medical assessment. • Document action in clinical notes |
- Where MMR Vaccine (Priorix) is prescribed following medical assessment, the nurse or midwife may administer MMR Vaccine (Priorix) within their scope of practice.

  Note: In determining their scope of practice, nurses and midwives must make judgements about their competency to carry out a role or activity (NMBl, 2015).

| Description of circumstances and referral arrangements when further advice or consultation is required | Refer the student to the Medical Practitioner in the event of:
| Adverse reaction
| Other clinical concerns |

| Documentation required to support implementation of the medicine protocol | Consent form must be completed by the parent/legal guardian for all children/students who receive the MMR (Priorix) vaccine. Students aged 16 years and over consent on their own behalf. Appropriate details including the batch number must be recorded on the consent form.
The following documents will be available at each school vaccination session:
- Vaccination session form
- Blank Vaccine consent forms
- Patient held record cards
- Health Products Regulatory Authority Adverse Reaction Reporting forms
- HSE Incident/near miss report forms (NIRF, 2017)
- Tear pads for post vaccination

It is the responsibility of each nurse or midwife to be familiar with the appropriate documentation to support the safe administration of MMR (Priorix) vaccine which includes the following:
- Guidelines for Staff: School Immunisations Programme 2017-2018
- Medicine Protocol for the administration of measles, mumps, and mumps (live) vaccine, Priorix by registered nurses and registered midwives to children/students in primary/second level school or equivalent (e.g. home schooled, special schools) through the School Immunisation Programme.

### 3.0 Name of Medicine

**Link to Medicine**

**Details of product information and other data including instructions for supply and administration is available from the Health Products Regulatory Authority at [www.hpra.ie](http://www.hpra.ie)**

**MMR Vaccine (Priorix): 2017/2018**

**Link to Summary of Product Characteristics:**

**Link to Patient Information Leaflet:**
| **Procedure for the management, reporting and documentation of errors and near misses involving the medication** | In the case of medication errors that directly involve the child/student, i.e. wrong medication/patient/dose/route being administered or another medication error, the registered nurse or registered midwife must remain with the child/student and closely monitor them for any adverse reactions. Vital signs should be recorded and the child/student should be reviewed by the registered nurse/midwife and medical practitioner.

The incident must be reported to the relevant line manager as soon as possible. The incident and all actions taken must be promptly recorded and the relevant National Incident Management Report Form completed (National Incident Report Form (NIRF-01-V09)) (Jan 2017) https://www.hse.ie/eng/about/QAVD/Incident-Management/NIRF-02-V09-Person.pdf

The incident and all actions taken must be promptly recorded in the child/student’s documentation/notes and the relevant report form completed.

The child/ student’s parent and/or legal guardian must be informed of the incident.

An incident report form must be completed by the registered nurse or registered midwife and forwarded to the relevant line manager as per local policy.

Any suspected adverse reactions associated with medicine errors should be reported to the HPRA as outlined below. |
| **Procedure for reporting Adverse Drug Reactions to the Health Products Regulatory Authority (HPRA)** | All adverse drug reactions or suspected adverse drug reactions following administration of the vaccine must be reported as soon as possible in accordance with criteria outlined by the Health Products Regulatory Authority (HPRA).

Reporting of suspected adverse reactions may be carried out on line at [http://www.hpra.ie](http://www.hpra.ie) or through use of the yellow card system which is available in a downloadable format from the HPRA website, or on request from the HPRA.

In the case of Anaphylaxis the incident and all actions taken must be promptly recorded in accordance with the *Management of a Patient with Anaphylaxis* HSE (2016) – available online at [http://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/Anaphylaxis.pdf](http://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/Anaphylaxis.pdf) |
| **Resources and equipment required** | • Vaccine (pre-filled syringe)
• Vaccine cool packs
• Fridge/Cooler box with minimum/maximum thermometer to maintain cold chain temperature between +2°C to +8°C
• Disposable kidney dishes/coloured trays
• Gauze swabs/Plasters
• Sharps bins, and bags for disposal of other hazardous material
• Alcohol hand rinse
• Access to telephone |
<table>
<thead>
<tr>
<th>Audit process to identify appropriate use of the protocol or unexpected outcomes</th>
<th>All documentation will be held for review and audit purposes as per local policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.0 Information for child/student/parent/guardian</td>
<td><strong>MMR vaccine</strong> Information leaflet must be supplied with the consent form to each student/parent/legal guardian prior to administration of the vaccine.</td>
</tr>
<tr>
<td>Advice to be given to the child/student/parent/guardian before treatment</td>
<td><strong>After Treatment</strong> An Information Tear Pad, stating date and time of vaccination must be given to all children/students for parental/guardian’s attention. The Tear Pad includes advice about contacting relevant medical personnel in the event of adverse reaction occurring following administration of the vaccination.</td>
</tr>
<tr>
<td>Advice to be given to the child/student/parent/guardian after treatment</td>
<td>The child/student 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.</td>
</tr>
<tr>
<td>Details of any necessary follow-up, action and referral arrangements</td>
<td>Adverse reactions are considerably less common (less than 1%) after the 2nd dose of MMR vaccine.</td>
</tr>
<tr>
<td>Details of any necessary follow-up, action and referral arrangements</td>
<td>In the event of an adverse reaction the nurse/midwife must ensure that all procedures are adhered to as outlined in Section 3.</td>
</tr>
<tr>
<td>5.0 Staff authorised to use this medicine protocol</td>
<td>Registered nurse or registered midwife on the live register of The Nursing and Midwifery Board of Ireland.</td>
</tr>
<tr>
<td>Professional qualifications, training, experience and competence required prior to working under this medicine protocol</td>
<td>Education programme for nurses and midwives on the use of <strong>Medicine Protocol for the Administration of MMR Vaccine (Priorix) through a School Immunisation Programme</strong> Basic Life Support for Health Care Workers within the last two years.</td>
</tr>
<tr>
<td></td>
<td>Approved Anaphylaxis Training programme initially, with updates as required to maintain individual competence. <a href="http://www.hseLand.ie">www.hseLand.ie</a></td>
</tr>
<tr>
<td></td>
<td>Competency in Injection Technique Recommended: Nursing and Midwifery Board of Ireland eLearning programme on <strong>Medicines Management Standards for Nurses and Midwives</strong> (2016).</td>
</tr>
</tbody>
</table>
References


European Medicines Agency available at [www.EMA.europa.eu](http://www.EMA.europa.eu)


Health Service Executive (2016) *Directions for Nurses and Midwives for the Management of a Patient who Develops Anaphylaxis*. Dublin: Health Service Executive


Irish Medicines Board (Miscellaneous Provision) Act 2006 (No. 3 of 2006) (Section 10(1)(i)). Dublin: Stationery Office


Royal College of Physicians of Ireland National Immunisation Advisory Committee *Immunisation Guidelines for Ireland* Dublin: Royal College of Physicians of Ireland National Immunisation Advisory Committee [Online Update available at](http://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/)


Nursing and Midwifery Board of Ireland (2015) *Practice Standards for Midwives* Dublin: Nursing and Midwifery Board of Ireland


29 July 2011

Mr. Michael Shannon
Assistant National Director,
Clinical Strategy and Programme Directorate, Health Service Executive
Dr. Steeven’s Hospital
Dublin 8

Dear Mr. Shannon,

Thank you for informing An Bord Altranais of the current work undertaken by the Office of the Nursing and Midwifery Services Director in relation to the national programme for the administration of the immunisations by nurses and midwives as part of the school immunisation programmes provided by the Health Service Executive. I note your request for professional guidance from An Bord Altranais regarding the scope of practice of nurses and midwives administering vaccines under medication protocol.


The Nursing Board recognises and supports the role of the registered nurse and midwife in utilising the medication protocol for the administration of immunisations to children as part of the school immunisation programme. We note the key supports for registrants' scope of practice in implementing these medication protocol have been incorporated in the individual content of the medication protocols in association with reference to the education and clinical supports as you have outlined in your letter.

An Bord Altranais recognise that the HSE medication protocols\(^1\) complement the guidance of the Nursing Board and facilitate the achievement and maintenance of professional competency and outline the accountability of the nurse/midwife asked to participate with this medication protocol.

I hope this information is of assistance to you.

Yours sincerely,

Dr. Maura Phelan
Chief Executive Officer

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\(^1\) Tetravac vaccine, IPV Infanrix vaccine, Priorix vaccine, M-M RVAXPRO vaccine and Boostrix vaccine