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

This medicine protocol is a specific written instruction for the administration of MMRVaxPRO vaccine to children/students in first year in Primary and Second Level School by registered nurses and registered midwives. This medicine protocol is valid for the 2019/2020 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 MMRVaxPRO 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 MMRVaxPRO vaccine as detailed by the Health Products Regulatory Authority at www.hpra.ie:

- Health Services Executive (2019) Directions for Nurses and Midwives for the Management of a Patient who Develops Anaphylaxis or suspected anaphylaxis incorporating Medicine Protocol for the administration of Epinephrine (Adrenaline) injection BP 1:1000 by intramuscular injection for nurses and midwives for the management of a patient with anaphylaxis or suspected anaphylaxis. Dublin: Health Service Executive
- National Immunisation Advisory Committee Immunisation Guidelines for Ireland Dublin: Royal College of Physicians of Ireland National Immunisation Advisory Committee (Online Update available at https://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/
- 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/Standards-Guidance/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).
|---------------------------|---------------------------------|

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 MMRVaxPRO vaccine to children/students in primary/secondary level school through a School Immunisation Programme.

**Date the protocol comes into effect**

September 2019

**Date for review of protocol**

May 2020

**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 Public Health, National Office for Public Health/Child Health, Strategic Planning and Transformation, 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 Public Health, National Office for Public Health/Child Health, Strategic Planning and Transformation, HSE

Signature: [Signature Image]

Name: **Dr Colm Henry**, National Director of Clinical Strategy and Programmes, HSE

Signature: [Signature Image]

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

Signature: [Signature Image]
### 2.0 Clinical Criteria

<table>
<thead>
<tr>
<th>Clinical Condition for use of the protocol</th>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Circumstances in which the medicine protocol applies</td>
<td>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 vaccination programme. The MMR vaccine is recommended for all children at 12 months of age and at 4-5 years in the Immunisation Guidelines for Ireland <a href="https://www.hse/eng/health-immunisation/hcpinfo/guidelines/">https://www.hse/eng/health-immunisation/hcpinfo/guidelines/</a>. If a child has not received a 1&lt;sup&gt;st&lt;/sup&gt; dose of MMR vaccine, MMRVaxPRO (MMR) should be given, under this protocol, to a child in junior infants or age equivalent. A 2&lt;sup&gt;nd&lt;/sup&gt; dose of MMR vaccine should then be given at least 4 weeks after the 1&lt;sup&gt;st&lt;/sup&gt; MMR (MMRVaxPRO) dose. – Preferably in a SIP mop up clinic. This medicine protocol also applies in MMRVaxPRO catch up campaigns and outbreaks situations as recommended by NIAC(2014)</td>
</tr>
<tr>
<td>Inclusion criteria for children/service user treatment using the medicine protocol</td>
<td>Children/students in primary/second level school or age equivalent in special schools and home schooled students. <a href="https://www.hse.ie/eng/health-immunisation/pubinfo/schoolprog/4in1mmr/schoolguidelines.pdf">https://www.hse.ie/eng/health-immunisation/pubinfo/schoolprog/4in1mmr/schoolguidelines.pdf</a> Children/Students with valid consent.</td>
</tr>
<tr>
<td>Exclusion criteria for children using the medicine protocol</td>
<td>A known history of anaphylactic or hypersensitivity reaction to MMRVaxPRO or any of the MMRVaxPRO vaccine constituents including neomycin or gelatin. 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 first dose MMRvaxPRO vaccine. Child/student with a contraindication to intramuscular injection (haematological disorder/coagulation disorder e.g. haemophilia, severe thrombocytopenia). Child/student who are immunocompromised either due to disease or treatment. Child/student who received low-dose immunoglobulin within the previous 5 months or red-cell transfusion within 6 months or high-dosage immunoglobulin within 11 months. Child/student who have received varicella or yellow fever live vaccine within the previous 4 weeks. Active untreated tuberculosis. Pregnancy where applicable.</td>
</tr>
<tr>
<td>Actions to be taken for those who are excluded from the Protocol</td>
<td>• All children/students meeting exclusion criteria must be referred to the medical practitioner for an individual medical assessment. • Document action in clinical notes.</td>
</tr>
</tbody>
</table>
- Where MMR (VaxPRO) vaccine is prescribed following medical assessment, the nurse or midwife may administer MMRVaxPRO vaccine 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 (NMBI, 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 | A Consent form must be completed by the parent/legal guardian for all children/students who receive the MMRVaxPRO 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 forms
- 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 after vaccination

It is the responsibility of each nurse or midwife to be familiar with the appropriate documentation to support the safe administration of MMRVaxPro vaccine which includes the following:
- Information for Staff: School Immunisation Programme 2019/2020
- Medicine Protocol for the administration of measles, mumps, and mumps (live) vaccine, MMRVaxPro 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.
- Directions for nurses and midwives for the management of a patient who develops anaphylaxis or suspected anaphylaxis incorporating Medication Protocol for the Administration of Epinephrine (adrenaline) Injection BP 1:1000 by intramuscular injection by nurses and midwives for the management of a patient with anaphylaxis or suspected anaphylaxis (HSE 2019) available at [https://www.hse.ie/eng/health/immunisation/hcpinfo/fluinfo/adrenalineprotocol.pdf](https://www.hse.ie/eng/health/immunisation/hcpinfo/fluinfo/adrenalineprotocol.pdf) |

### 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.hpра.ie](http://www.hpра.ie) | - MMRVaxPRO : 2019/2020
### Procedure for the reporting and documentation of errors and near misses involving the medication

In the case of medicine errors that directly involve the child/student, i.e. wrong medicine/patient/dose/route being administered or another medicine 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 student should be reviewed by the registered nurse/midwife and/or or 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-V10)) (May 2018) available at:


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 medication errors should be reported to the HPRA as outlined below.

Any errors and near misses not involving medication, 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.

### Procedure for reporting Adverse Drug Reactions to the Health Products Regulatory Authority (HPRA)

The relevant nurse 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 in line at [https://www.hpra.ie](https://www.hpra.ie) or through use of the yellow care system which is available in the downloadable format from the HPRA website, or on request from the HPRA.

The incident and all actions taken must be promptly recorded in accordance with the criteria outlined by the HPRA: Management of a Patient with Anaphylaxis HSE (2019) – available online at

[https://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/Anaphylaxis.pdf](https://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/Anaphylaxis.pdf)

### Resources and equipment required

- Vaccine (pre-filled syringe).
- Fridge/Cooler box with minimum/maximum thermometer to maintain cold chain temperature between +2° 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.
- Resuscitation equipment and drugs in accordance with the Management of a Patient with anaphylaxis (National Immunisation Advisory Committee, 2019) available at
<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>
</table>

### 4.0 Information for child/student/parent/guardian

**Advice to be given to the child/student/parent/guardian before treatment**

HSE 4 in 1 and MMR vaccine Information for parents of children in Junior infants booklet must have been supplied with the consent form to each student/parent/legal guardian prior to administration of the vaccine.

Obtain informed consent and a signed consent form.

**After Treatment**

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 vaccine.

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.

Adverse reactions are considerably less common (less than 1%) after the 2nd dose of MMR vaccine.

**Details of any necessary follow-up, action and referral arrangements**

In the event of an adverse reaction the nurse/midwife must ensure that all procedures are adhered to as outlined in Section 3.

### 5.0 Staff authorised to use this medicine protocol

**Professional qualifications, training, experience and competence required prior to working under this medicine protocol**

Registered nurse or registered midwife on the live register of The Nursing and Midwifery Board of Ireland.

- Education programme for nurses and midwives on the use of Medicine Protocol for the Administration of MMR (Measles, Mumps and Rubella) live vaccine MMRVaxPRO by registered nurses and registered midwives through a schools immunisation programme
- Basic Life Support for Health Care Workers within 2 years.
- “National Anaphylaxis Education Programme for Health Care Professionals”, initially attends a classroom based programme. Updates available on [www.hseland.ie](http://www.hseland.ie) “National Anaphylaxis Education Programme for Health Care Professionals” within 2 years.
- Injection technique education programme. (Local CNME/CNE)
<table>
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<tr>
<th>References</th>
<th><a href="http://www.hseland.ie">www.hseland.ie</a></th>
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<tr>
<td>&quot;Hand Hygiene for HSE Clinical Staff&quot;</td>
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<tr>
<td>&quot;Aseptic Non Touch Technique&quot; (ANTT)</td>
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<td>&quot;Guide to Medicines Management&quot;</td>
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<td>&quot;Immunisation Foundation Programme&quot;</td>
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<td>GDPR Guidelines</td>
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</tbody>
</table>
References


Health Products Regulatory Authority available at [www.hpра.ie](http://www.hpра.ie) (accessed 1st February 2019)


Health Service Executive (2019) *Directions for Nurses and Midwives for the Management of a Patient who Develops Anaphylaxis or suspected anaphylaxis incorporating Medicine Protocol for the Administration of Epinephrine (Adrenaline) injection BP 1:1000 by intramuscular injection by nurse and midwives for the management of a patient with anaphylaxis or suspected anaphylaxis.* Dublin: Health Service Executive


MMRVaxPRO Vaccine MSD Ireland Limited *Summary of Product Characteristics and Patient Information Leaflet.* Available at [www.hpра.ie](http://www.hpра.ie)


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


Nursing and Midwifery Board of Ireland (2015) *Practice Standards for Midwives.* Dublin: Nursing and Midwifery Board of Ireland available at: [https://www.nmbi.ie/Standards-Guidance/Midwives-Standards](https://www.nmbi.ie/Standards-Guidance/Midwives-Standards)


Medicine Protocol for the Administration of MMRvaxPro, 2019
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.

An Bord Altranais has published detailed guidance for developing medication protocols and general information about the professions’ role in vaccinations in Guidance to Nurses and Midwives on Medication Management (2007) and the e-learning programme Guide to Medication Management (An Bord Altranais and the National Council, 2007).

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 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. Maire Ni Bhóthar  
Chief Executive Officer

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1 Tetrawac vaccine, IPV Infanrix vaccine, Priorix vaccine, M-M RVAXPRO vaccine and Boostrix vaccine