



Section B: Information Specific to Registered Nurses and Registered Midwives for the administration of the Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray to children between 2-17 years of age for the 2024/2025 influenza season

Statutory Instruments No. 245 of 2021 and 422 of 2023 enables health care professionals (including registered nurses and registered midwives) who are COVID-19 vaccinators as professions that can administer Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray to children between 2-17 years of age for the 2024/2025 influenza season.

In order to administer the vaccine, registered nurses and registered midwives must be familiar with the medicine protocol for the administration of the LAIV Fluenz Nasal Spray. Registered nurses and registered midwives must also have completed the Self-Assessment of Competency Form included in this section. The medicine protocol and the Self-Assessment of Competency Form are available at www.immunisation.ie

Registered nurses and registered midwives 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.

TABLE 1 Professional Qualifications, Training, Experience and Competence Required

<p>Professional qualifications, training, experience and competence required prior to using this medicine protocol / Professional Qualifications :</p> <p>Training, Experience, Competence:</p>	<p>The 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 NMBI 2. An approved <i>Basic Life Support for Health Care Providers Course</i> within the last two years (i.e. Irish Heart Foundation (IHF)) 3. 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.ie 4. <i>Immunisation Foundation Programme</i> accessible on www.HSELand.ie 5. Live Attenuated Influenza Vaccine (LAIV) education programme 2024/2025 accessible on www.HSELand.ie 6. Critically examining the evidence and practice of holding children for clinical procedures (Masterclass Recording - 6th Dec 2022) accessible on www.HSELand.ie 7. Self-Assessment of Competency Form for LAIV Fluenz Nasal Spray (included in this Section B document) available at https://www.hse.ie/eng/health/immunisation/hcpinfo/fluinfo/ 8. COVAX online programme available at: https://www.hse.ie/eng/health/immunisation/hcpinfo/hsecovid19vms.html <p>Recommended:</p> <ol style="list-style-type: none"> 9. The flu vaccine – protect yourself, protect others, available at www.hseland.ie 10. <i>Storing and Managing Vaccines</i>, available at www.HSELand.ie
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Supporting Documents for Registered Nurses and Registered Midwives

HSE COVID-19 Vaccination Programme (2023) Operational Guidance (Note: This guidance document covers 2023/2024 Seasonal Influenza Vaccination Programme), available at 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/>.

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* Dublin: Royal College of Physicians Ireland. Online update available at
<http://www.hse.ie/eng/health/immunisation/hcpinfo/guidelines/>

National Immunisation Office (2023) *Seasonal Influenza Vaccination Programme (SIVP) Supportive Information Document for HSE Vaccinators*. Dublin: Health Service Executive

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: <http://www.nmbi.ie/Standards-Guidance/Code>

Nursing and Midwifery Board of Ireland (2020) *Guidance for Registered Nurses and Midwives on Medication Administration*. Dublin: Nursing and Midwifery Board of Ireland

Nursing and Midwifery Board of Ireland (2022) *Practice Standards for Midwives*. Dublin: Nursing and Midwifery Board of Ireland available at: <http://www.nmbi.ie/Standards-Guidance/Midwives-Standards>

Nursing and Midwifery Board of Ireland (2015) *Recording Clinical Practice. Guidance to Nurses and Midwives*. Dublin: Nursing and Midwifery Board of Ireland available at:
<http://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: <http://www.nmbi.ie/Standards-Guidance/Scope-of-Practice/Nursing-Practise-Scope-Definition>



NAME: _____

(PRINT CLEARLY in CAPITALS)

NMBI PIN Number: _____

Self-Assessment of Competency to Administer Live Attenuated Influenza Vaccine (LAIV) Fluenz Nasal Spray under Medicine Protocol (to be completed by registered nurse/registered midwife prior to administering this vaccine)

Performance Criteria		(Tick/date/initial as applicable)		
No	Critical Element	Competent Date/Initials	Needs Practice Date/Initials	Needs Theory Date/Initials
1	I practice within my scope of practice (Scope of Nursing and Midwifery Practice Framework, Nursing and Midwifery Board of Ireland (NMBI, 2015) to undertake administration of LAIV			
2	I understand that vaccines are prescription only medicines (POM) and prior to administration require either: <ol style="list-style-type: none"> 1. a valid prescription for individual vaccines <li style="text-align: center;">or 2. a medicine protocol for individual vaccines 			
3	I understand the role and function of medicine protocols in the context of NMBI and NIAC guidelines in relation to: <ul style="list-style-type: none"> • The Code of Professional and Ethical Conduct for Registered Nurses and Registered Midwives (NMBI, 2021) • Scope of Nursing and Midwifery Practice Framework (NMBI, 2015) • Guidance for Registered Nurses and Midwives on Medication Administration (NMBI, 2020) • Guidance to Nurses and Midwives on Medication Management (An Bord Altranais, 2007) • NIAC Immunisation Guidelines for Ireland available at: https://www.rcpi.ie/Healthcare-Leadership/NIAC/Immunisation-Guidelines-for-Ireland 			
4	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: www.immunisation.ie			
5	I understand the documentation required to support implementation of the medicine protocol to ensure safe administration of LAIV			
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 competent in safe intranasal vaccine administration technique			
9	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 an education/training programme in a Centre for Nurse and Midwifery Education and /or HSELand. I understand that I must discuss my individual learning needs with my line manager.			
10	I have successfully completed all the education programmes as listed in Table 1: Professional Qualifications, Training, Experience and Competence Required			
11	I have attended an approved Basic Life Support for Health Care Providers Course within the last two years (i.e. Irish Heart Foundation (IHF))			
12	I have successfully completed an approved anaphylaxis programme as listed in Table 1 and am familiar with NIAC (2023) <i>Anaphylaxis: Immediate Management in the Community</i>			



13	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			
14	I have the knowledge and skills to effectively communicate with the child and parent/legal guardian and use play and distraction during this procedure			
15	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			
16	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: https://www.hse.ie/eng/health/immunisation/hcpinfo/botpipa/consentukr.pdf			
17	I understand the agreed process, including ICT systems if applicable for the accurate and appropriate documentation in the child’s record for vaccine administration			
18	I understand the purpose and importance of completing the required HSE data returns following vaccine administration			
19	I have the knowledge and skills to safely administer the vaccine regarding the following: <ul style="list-style-type: none"> • Preparation of the vaccine for administration • Documentation of the details of the vaccine to include the vaccine label which has the batch number and expiry date details • Date and time and site of administration of vaccine • Vaccinator ID (name, signature and NMBI PIN/MRN) 			
20	I can discuss the benefits of this vaccine for children and potential side effects to the child, parent/legal guardian.			
21	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: www.hpra.ie			
22	I can demonstrate the procedure for reporting and documentation of medication errors/near misses as per HSE Enterprise Risk Management Policy & Procedures (2023)			
23	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) https://www.gov.ie/en/publication/a057e-infection-prevention-and-control-ipc/ .			
24	In the event of needle stick injury, I understand the guidelines as outlined in the ‘EMI Tool Kit’ available at: https://www.hpsc.ie/a-z/EMIToolkit/			
25	I understand how to manage vaccines (including: vaccine handling, delivery and storage including the maintenance of the cold chain in accordance with national and local policies, procedures, protocols and guidelines (PPPGs))			
26	I have undertaken the following HSELand/online programmes: <ul style="list-style-type: none"> • AMRIC Aseptic Technique www.hseland.ie • AMRIC Hand Hygiene www.hseland.ie • GDPR Guidelines www.hseland.ie 			



- National Consent Policy: <https://www.hse.ie/eng/about/who/qid/other-quality-improvement-programmes/consent/national-consent-policy.html>

I have sufficient theoretical knowledge and skills to administer this intranasal vaccine independently, and I acknowledge my responsibility to maintain my own competence in line with the Scope of Nursing and Midwifery Practice Framework (NMBI, 2015) and current best evidence.

Registered Nurse/Midwife Signature: _____ Date: _____

If any deficits in theory and/or clinical practice are identified, the registered nurse/midwife must discuss with relevant Line Manager/Employer and implement appropriate support plan to achieve competency within an agreed time frame.

Support Plan (for use if needed to reach competence outlined)

Action necessary to achieve competence:

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Date to be achieved:

Supporting evidence of measures taken to achieve competence:

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Registered Nurse/Midwife Signature:

Date: _____

Name and title of Line Manager/Clinical Lead: _____

Line Manager/Clinical Lead Signature:

Date: _____