

Medication Protocol for the checking and administration of Meningococcal B & ACWY Vaccines in the Haemoglobinopathy OPD.

1. Department
Haemoglobinopathy Department

2. Date Issue February 2020

3. Review Date February 2023

4. Name & Signature of authoriser of this protocol

Drugs & Therapeutics Group CHI at Crumlin

Signature

5. What staff members will be affected by this protocol?

CNS in the Haemoglobinopathy Clinic Department

6. Staff Inclusion Criteria

All registered nursing staff who have received the relevant immunisation education and training

7. Exclusion circumstances

All other clinical areas- pertains only to haemoglobinopathy department

8. Description of clinical activity to be covered

- Assessments will be completed by OPD staff nurse prior to vaccination.
- Vaccinations will be prescribed on the medication kardex by the medical staff prior to vaccination administration and recorded on the prescription after administration.
- Vaccinations will be ordered by pharmacy requisition stock forms and pre-ordered.
- Vaccinations are administered to the child by one registered nurse checking the child's name and date of birth and double checking identity with the parent/guardian. In the event a parent is unavailable to be second checker the double checking algorithm will apply and the vaccination will need to be checked with a second nurse. The child will need a name band in this instance.
- Vaccinations will need to be recorded on the Immunisation Form Type 2 and returned to National Immunisation Authority Council.

9. Names of medications included in this protocol

- Bexsero Meningococcal Group B Vaccine
- Nimenrix Meningococcal Group ACWY Vaccine

10. Do guidelines accompany this protocol?

Yes, see the SOP on "ADMINISTRATION OF MENINGOCOCCAL B & ACWY VACCINES FOR NURSING STAFF IN THE OPTHAMOLOGY DEPARTMENT"

11. Will the use of this protocol improve the patient journey/quality of care?

Yes. These immunisations will help this cohort of patients from contracting Meningococcal B and ACWY as they have asplenia / hyposplenism. The National Immunisation Guidelines updated Chapter 13- Meningococcal in 2018 recommended that all these patients were vaccinated to prevent sepsis and/or further infection from these Meningococcal strains.

12. Please include details of evidence to suggest this is best practice

- 1. HSE Immunisation Guidelines, Chapter 13, Meningococcal Infection
- 2. Guidelines on the administration of intra-muscular and sub-cutaneous injections.
- 3. Guidance to Nurses and Midwives on Medication Management (2007)
- 4. CHI at Crumlin Medication Policy

13. Non-Conformance

Non-Compliance and/or an increase in medication incidents arising will be monitored using audit. This will be carried out on a monthly basis to ensure the procedures are adhered to.

14. Authors

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15. Authorised By: