

15-02 Peer Influenza Immunization

Description of Procedure, Treatment or Intervention

Nurses assigned to assist in the Occupational Health (OH) influenza vaccination campaign are authorized to administer influenza vaccine.

Authorized To

All Quinte Healthcare nurses, who have:

1. Completed the Self-Learning Package and have reviewed the Medical Directive by completing the e-learning module *Medical Directive 15-02 Peer Influenza Immunization*
2. Completed the Self-Appraisal of Competency Statement included in the e-learning module *Medical Directive 15-02 Peer Influenza Immunization*.

Authorized By

Chair of QHC's Infection Control Committee.

- Ensure a signed copy of approvals is maintained with the Medical Directives on the unit, Medical Directive Manual (Patient Services), and Chief of Staff office.

Patient Population

QHC staff, physicians, volunteers, students, contract workers, medical trainees (herein after referred to as "the recipient").

Inclusion Criteria

All Quinte Health Care employees, physicians, students, contract workers, medical trainees and volunteers which may include pregnant or breast feeding women unless one or more contraindications are identified.

Exclusion Criteria

This refers to any specific contraindications for implementing the procedure or intervention.

Contraindications to the Implementation of the Directive

This medical directive is contraindicated if the Influenza Immunization Consent form (Appendix 3) for the approved/provided vaccine has not been completed and signed by the recipient. Specific contraindications for the approved influenza vaccine are listed on the consent form specific to the vaccine provided by Public Health as different vaccines have different components. The contraindications are reviewed by the designated nurse prior to administration.

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Contraindications to Vaccination with Influenza Vaccine:

1. Allergy or sensitivity to substances found in the influenza vaccine (see Appendix 3).
2. Severe allergic/adverse reaction to a previous dose of influenza vaccine (including Ocular Respiratory Syndrome).
3. Previous Guillain-Barre Syndrome (GBS) occurring within 6 - 8 weeks of a prior influenza vaccination.
4. Fever or active infection at present.
5. A serious, active, unstable neurologic disorder.
6. Potential medication contraindications- (see Appendix 4)

NOTE: Vaccination with the influenza vaccine is believed to be safe at any stage in pregnancy. Pregnant recipients are advised to discuss vaccination with their treating physician.

Medical Directive Orders

The designated nurse must:

- Provide the recipient with information regarding influenza immunization (Appendix 3)
- Review the consent form (Appendix 3) to ensure that it has been read, understood and signed
- Perform a brief assessment of relevant allergy status, present health and present medications
- Explain the procedure
- Explain the risks, side effects, and precautions (Appendix 3)
- Ensure there are no contraindications to vaccination with influenza vaccine (Appendix 3)
- Advise the recipient to remain in the vicinity for 15 minutes' post injection to ensure a serious reaction does not occur
- Advise the recipient to notify OH of significant side effects

The designated nurse will have knowledge of proper administration procedure for the influenza vaccine; the vaccine indications, contraindications, precautions, and side effects; and the anaphylaxis protocol.

Administer 0.5 mL of the influenza vaccine provided by the local Public Health Unit, intramuscularly into the deltoid muscle.

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Documentation

The recipient will read and sign a consent form (Appendix 3) for influenza vaccination after reviewing the vaccine information, contraindications, precautions, and side effects of the vaccine.

The designated nurse will sign for the administration of the vaccine on the consent form, including the lot # and expiry date.

The original consent will be forwarded to Occupational Health (BGH Site) for tracking and archival purposes.

Quality Monitoring

Staff identifying any untoward or unintended outcomes arising from implementation of orders under this directive, or any issues identified with it will report these to the supervising physician and nurse manager/designate as soon as possible for appropriate disposition. These do not include untoward or unintended outcomes or issues that are possible clinical sequelae regardless of whether a direct order or directive is used.

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Medical Directive Authorization

The necessity of a medical directive authorization process is for the organizations internal documentation

Every physician responsible for the care of a patient who will receive the proposed treatment, procedure or intervention, must sign the medical directive using QHC's credentialing and onboarding process through Medical Affairs.

Approving Committee	Date
Program Advisory Committee	N/A
Interprofessional Practice Advisory Committee	N/A
Pharmacy and Therapeutics	
Diagnostic Imaging Quality and Safety Committee	N/A
Medical Advisory Committee	

	Name	Signature	Date
Chief of Staff			
Chief Nursing Executive			

References

College of Nurses of Ontario. (2020). *Practice Guidelines: Directives*. Toronto, Ontario: College of Nurses of Ontario
 College of Physicians and Surgeons of Ontario (CPSO). (2012). *Delegation of Controlled Acts - Policy Statement #5-12*. Toronto, Ontario: Physician Advisory Service
 Service Ontario e-Laws. (1991). *Regulated Health Professions Act (Ontario Regulations 107/96)*. Toronto, Ontario: Ontario Government

Appendices

- Appendix 1: Designated Physician Authorization Sheet
- Appendix 2: N/A Order Set
- Appendix 3: Influenza Immunization Consent Form
- Appendix 4: Influenza Immunization Reference Tool
- Appendix 5: Influenza Vaccine Fact Sheet