Patient Group Direction for the administration of:

Influenza vaccine

To:

Staff by designated nurses and pharmacists (Chief Flu Fighters)

PGD 16

Status: Approved

This Patient Group Direction has been endorsed for use by:

Title	Name	Signature	Date
Medical Director	Dr Ahmad Khouja		24/08/20
Director of Nursing and Governance	Elizabeth Moody	EMoody	27/8/20
Chief Pharmacist	Chris Williams		4/9/20

This Patient Group Direction has been approved by:

Title	Name	Signature	Date
Drug and Therapeutics Committee	Dr Baxi Sinha (Chair)		17/09/2020

Contents

1. Clinical condition or situation to which the Patient Group Direction applies

Indication	Immunisation of staff against influenza in accordance with the Dept. of Health national flu immunisation programme 2020-21
Objectives of care	• To reduce rates of influenza infection in staff • To provide protection to patients against spread of infection by staff
Criteria for inclusion	• All employees of Tees, Esk and Wear Valleys NHS Foundation Trust; • Associated staff providing services directly to TEWV patients, e.g. social workers, student nurses; • Volunteers providing services directly to TEWV patients; where individual consent has been obtained to receive the vaccine.
Criteria for exclusion	• Acute infection • Acute febrile illness (>38^{o}C) • Confirmed or suspected COVID-19 • Confirmed anaphylactic reaction to a previous dose of influenza vaccine • History of anaphylaxis to egg, or egg allergy with uncontrolled asthma**, if egg-free vaccine is not available at the time of administration*** • Hypersensitivity to any component of the vaccine which may include: gentamicin, kanamycin, neomycin, polymyxin, formaldehyde, thiomersal, cetyltrimethylammonium bromide (CTAB), polysorbate 80, octoxinol-9, barium sulphate, disodium phosphate dihydrate, sodium dihydrogen phosphate dihydrate, anhydrous disodium phosphate, potassium dihydrogen phosphate, sodium chloride, potassium chloride, calcium chloride, calcium chloride dihydrate, magnesium chloride hexahydrate. • Use of influenza antiviral drugs within the past 48 hours • Aged over 65 years and do not consent to receiving the quadrivalent vaccine as an alternative to the trivalent vaccine * *see the advice in section 3.1 regarding immunisation of individuals with a history of anaphylaxis to egg, or egg allergy*
Action if excluded	• Arrange alternative appointment for individuals suffering febrile illness or who are systemically unwell or have confirmed/suspected COVID-19 • Arrange alternative appointment for individuals who require an egg-free vaccine • Advise to attend GP surgery to receive trivalent vaccine if over 65 and does not consented to receive quadrivalent vaccine • Ensure all actions / decisions are documented
Action if patient declines treatment	• Ensure staff member fully understands risks and loss of benefit of declining vaccination • Advise on symptoms and complications of influenza disease • Document refusal to accept vaccination on the paper recording

	form
Reference to national/local policies or guidelines	• Access to 'Immunisation against Infection Disease' (Green Book) and to comply with its recommendations: Influenza: the green book, chapter 19 - Publications - GOV.UK • Summary of product characteristics for relevant flu vaccine. • RPSGB/RCN: Professional Standards on the Administration of Medicines in Healthcare Settings (2019) • HSC 2000/026 (9/8/00) Patient Group Directions. • British National Formulary online via Medicines Complete • Trust Medicines Overarching Framework

2. Characteristics of staff

Qualifications required	• Registered nurse with current NMC registration • Registered pharmacist with current GPhC registration
Additional experience / training required	• Employee of TEWVFT and has completed preceptorship training. • Up-to-date resuscitation training (basic life support) which includes adrenaline / anaphylaxis training – within last 12 months (as per agreed organisational training position due to COVID) • Attendance at Chief Flu Fighter training, which includes the principles of working under PGDs to administer medicines

Continued training requirements	➢ Annual practical update in resuscitation training (basic life support) or as per agreed organisational training position due to COVID
	➢ Maintains own competence with evidence of continuing professional development, in relation to:
	  ➢ understanding the main features of influenza, its complications and the type of flu vaccine used in the seasonal flu campaign
	  ➢ discussing the risk and benefits of the flu vaccine and addressing concerns that staff may have.
	  ➢ Safe and secure storage of vaccines.

3. Description of treatment

Name, strength & formulation of drug	Seasonal inactivated influenza **quadrivalent** vaccine, including egg-free and low ovalbumin formulations (intramuscular formulations only)
Legal class: **POM / P / GSL**	POM
Dose/dose range	0.5 ml
Storage	Store in a fridge at 2°C to 8°C, protected from light.
Method/route	• Intramuscular injection into the deltoid muscle area only. • Allow vaccine to reach room temperature and shake well before use.
Frequency of administration	Once only
Maximum dose & number of treatments	Single dose.
Follow-up treatment	Annual re-vaccination.

3.1. Further aspects of treatment

Individuals with egg allergy / anaphylaxis	• Individuals with a history of anaphylaxis to egg, or egg allergy with uncontrolled asthma, can be immunised with an egg-free vaccine under this PGD. • Individuals with a history of egg allergy without uncontrolled asthma can be immunised with either an egg free vaccine, if available, or a vaccine with an ovalbumin content less than 120 nanograms/mL under this PGD (facilities should be available to treat anaphylaxis). [Vaccines with an ovalbumin content more than 120 nanograms/mL or where content is not stated should **not** be used in individuals with egg allergy] • Vaccine containing ovalbumin must **not** be administered to individuals with a history of anaphylaxis to egg, or egg allergy with uncontrolled asthma, under this PGD.
Patient advice (verbal and written)	• Explain reason for immunisation. • Possible side effects: pain, swelling or redness at the injection site, low grade fever, malaise, shivering, fatigue, headache, myalgia. Symptoms usually disappear within 48 hours post vaccination. Rarely anaphylaxis - estimated incidence 1 in 1,000,000 • Pain, swelling or redness at the injection site, • Consent **must** be sought and recorded prior to administration ○ For over 65s - as part of the consent process, ensure the staff member is informed that the vaccine being offered is not the preferred vaccine but is a licensed, safe and effective alternative. Explain the possible lower efficacy of the vaccine being offered, why it is being offered instead of the preferred vaccine and why it may still offer protection

	against seasonal flu, or attenuate the progression of the infection should they get it.
Identification and management of adverse reaction(s)	• Request staff member to report side effects. • Advise analgesia for pain or fever • Apply cold compress. • Drink plenty of clear fluids.
Reporting procedure of adverse reaction(s)	• Report to doctor. • Also report adverse events to Occupational Health staff for documentation in their notes for future year's vaccination. • Document in staff record. • Yellow card to MHRA for severe or unusual reactions.
Arrangements for referral to medical advice	• Seek advice from doctor if appropriate.
Additional facilities/supplies required	• Facility to maintain cold chain, e.g. medicine fridge, vaccine porter. • Working resuscitation equipment. • Immediate access to the drugs required to treat anaphylaxis (adrenaline 1 in 1000 injection).
Records	The following **must** be recorded (usually a paper recording form): • Staff name, job title and date of birth • Confirmation of absence of exclusions / contra-indications • Confirmation that potential side effects have been discussed • Staff signature as consent to receive vaccine • Date of administration; • Dose, site & route of injection; • Manufacturer, batch number & expiry date of vaccine; • Signature of vaccinator.

4. Management and authorisation of Patient Group Direction

I have read and understood the Patient Group Direction and agree to administer this medicine only in accordance with this Patient Group Direction.

- PGDs do not remove inherent professional obligations or accountability
- PGDs should be used in conjunction with reference to national or local policies, guidelines or standard text (e.g. manufacturer's Summary of Product Characteristics) and do NOT replace the need to refer to such sources
- It is the responsibility of each professional to practice only within the bounds of their own competence

Note to authorising managers: **All staff authorised to use this PGD must have received training as defined within the PGD and be competent to administer the medicines identified in the PGD.** Authorised staff should be provided with an individual copy of the clinical content of the PGD and a photocopy of the authorisation sheet showing their authorisation.

Name of Nurse/Pharmacist		
Pre-requisite training		
Subject	*Date completed:*	*Evidence checked by: (authorising manager)*
		Name: *Signature:*
Resuscitation which includes adrenaline/anaphylaxis (within last 12 months or as per agreed organisational training position due to COVID)		
Chief Flu Fighter training in the administration of Influenza vaccine to staff in line with this PGD		
Date attended:	*Training provided by* *Role:* *Name:* *Signature:*	
The above named nurse/pharmacist is authorised to work within the criteria of this PGD		
Name & designation of authorising manager:	*Signature*: *Date:*	
I, the undersigned, have read and understood this PGD. I have attended a specific information and training session/completed the appropriate e-learning package for the implementation of this PGD and can safely implement this PGD		
Signature of named nurse/pharmacist	*Date*	
Record Keeping		
One copy of signed PGD to be retained by named nurse/pharmacist; one copy to personal file		