# Policy 2.5 – Administration and Provision of all Immunization Services (including the administration of immunizing agents and the management of adverse events following immunization)

**Purpose:** To outline **standards** for immunizers, and their employers (including private immunization clinic services) regarding directives to administer vaccines through the publicly funded New Brunswick Immunization Program. The policy also establishes which immunizers requires a directive.

**Preamble:** A directive is a written order from an authorized prescriber<sup>1</sup>, for a number of clients, when specific conditions are met. The specifics of the directive will depend on the client population and the nature of the order (i.e., vaccines). Authorized prescribers<sup>1</sup> do not require a directive to provide immunizations.

Providing immunization is within the scope of practice for many health care professionals in New Brunswick (NB) however, some require a directive to administer vaccines. These directives may originate from the Regional Medical Officer of Health (RMOH) or by an authorized prescriber<sup>1</sup>.

Providing safe immunization requires that both the authorized prescribers<sup>1</sup> and the immunizers follow the National Guidelines for Immunization Practice in the <u>Canadian Immunization Guide</u> as well as in the <u>New-Brunswick Immunization Program Guide</u> (NBIPG).

Policy: The following health care professionals require a signed directive to provide vaccines in NB:

- Registered Nurses
- Licensed Practical Nurses
- Paramedics<sup>2</sup>
- Pharmacy Technicians<sup>2</sup>
- All health care students authorized to practice medicine
- Delegated "non-traditional" health care professional during a pandemic

Regional Medical Officers of Health have a mandate to provide the directive for health care professionals within the Regional Health Authority Public Health setting to administer vaccines and biologics including management of immediate events following the administration of those products.

Upon request from the administrative authority responsible for the provision of Public Health immunization programs for community health nurses<sup>3</sup> in First Nations communities, the Regional Medical Officer of Health (RMOH) may provide a directive for the provision of immunization services in that community.

For the Extra Mural Program (Adult Residential Facilities and home bound patients) or within nursing home settings, authorized prescribers<sup>1</sup> may provide a directive for the provision of immunization services within those programs.

Health care professionals working outside of the Regional Health Authority setting (i.e., extra mural program or in nursing homes), will provide immunization services under the designated authorized prescriber<sup>1</sup>.

All Health Care professionals are guided by professional practice standards and are always accountable for their practice and compliance with relevant standards.

#### Standards:

1. A directive for immunization services will be provided for Public Health nurses and community health nurses<sup>3</sup> following consultation among the parties involved; namely, the Regional Medical Officer of Health; the administrative authority for immunization service delivery in each organization; and the

<sup>&</sup>lt;sup>1</sup> In NB current authorized prescribers include physicians, nurse practitioners, optometrists, dentists, pharmacists and midwives.

<sup>&</sup>lt;sup>2</sup> Paramedics and Pharmacy Technicians have directives already established by their authorized prescriber.

<sup>&</sup>lt;sup>3</sup> The term "community health nurses" refers to those nurses working in First Nations communities

- nurses affected by the directive. The nurses may be represented by the immunization coordinator or designate. In this document, refer to its <u>Appendix A Directive for the Administration and Provision of all Immunization Services</u> including vaccine administration and the management of adverse events following immunization.
- 2. A directive for immunization services will be provided for extra mural program nurses and nurses working in nursing homes following consultation among the parties involved; by the designated authorized prescriber¹ as the administrative authority for immunization service delivery in each organization; and the nurses affected by the directive. The nurses may be represented by the immunization coordinator or designate. In this document, refer to its Appendix A Directive for the Administration and Provision of all Immunization Services including vaccine administration and the management of adverse events following immunization.
- 3. Employers will ensure that all immunizers have met conditions outlined in this directive.
- 4. The directive will be reviewed by all parties and updated each fiscal year.
- 5. A copy of the directive will be available to staff in all sites where the directive is applied. In this document, refer to its Appendix A Directive for the Administration and Provision of all Immunization Services.
- 6. The accountability and responsibility to initiate, implement and maintain a directive for client care is shared by the person administering the vaccine, authorized prescribers<sup>1</sup>, and employers.

## Appendix A - Directive for the Administration and Provision of all Immunization Services

All immunizers may provide immunization services to those eligible for publicly funded vaccine are subject to the policies, standards and guidelines of the latest edition of the <a href="New Brunswick Immunization Program Guide">New Brunswick Immunization Program Guide</a> (NBIPG).

Both the immunizer and the prescriber must follow the standards established in this directive and its policy attached (*Policy 2.5 - Administration and Provision of all Immunization Services*), to administer vaccines through the New Brunswick Immunization Program.

The immunizer signing the directive must have demonstrated they are competent in all essential immunization practices and refer to NBPIG Policy 2.4 Immunization Competency Standards for all Immunization Providers. The prescriber signing the directive ensures the immunizer's competencies have been met per the requirements set in Policy 2.4.

There are several vaccines available that may have different compositions annually (example COVID-19 and influenza vaccines). Immunizers may be providing services involving more than one product over time; therefore, it is the immunizer's responsibility to ensure they review and familiarize themselves with the correct vaccine(s) for the individual they are immunizing.

Immunizers must refer to the following documents for the required vaccine information for each practice setting.

<u>Please note</u>: Additional vaccine reference documents exist for providing certain vaccines programs (i.e., Influenza and COVID-19). Vaccine information guides are provided for <u>all</u> Health Care Professionals offering these specific vaccine programs and located on <u>Communicable Disease</u> Control Resources for Health Care Professionals (gnb.ca).

Essential Immunization Practices	Reference
Competencies for Immunization Providers	<ul> <li>NBIPG- Policy 2.4 Immunization Competency Standards for all Providers</li> <li>Health Canada-Immunization Competencies for Health Professionals</li> </ul>
Communication	NBIPG -Standard 3.2 - Communicating Effectively About Immunization: A Guideline for Immunization Providers in New Brunswick
	NBIPG- Policy 2.6 - Consent for Immunization     Canadian Immunization Guide (CIG)- Part 1 - Key     Immunization information- Communicating Effectively     about Immunization

	NBIPG -Standard 3.4 - Vaccine Storage and Handling
Vaccine Storage and Handling	<ul> <li>CIG- Part 1 - Key Immunization information- Storage and Handling of Immunizing Agents</li> <li>NBPIG – Appendix 5.4 - Guidance for Vaccine Response Plans in the event of Power Failure</li> </ul>
Pre- vaccination assessment	CIG- Part 1 - Key Immunization information-     Vaccine Administration Practices
Adverse events following immunization	NBIPG- Policy 2.7 - Adverse Events Following     Immunization (AEFIs)
	NBIPG-Standard 3.8 - Reporting of Adverse     Events Following Immunization in New     Brunswick
	<u>NBPIG – Standard 3.9 Reporting Adverse</u> <u>Events Following Immunization (Poster)</u>
	NBIPG Appendix 5.1-Anaphylaxis- Management.pdf (gnb.ca)
	Appendix 4.1.8-AEFI Reporting Form
	CIG -Part 2 – Vaccine Safety
Documentation	NBIPG- Standard 3.5 - Recording, Reporting and Releasing Immunization Information
Populations requiring special consideration	NBIPG-Policy 2.11 - Populations Requiring     Special Consideration
	CIG- Part 3 - Vaccination of Specific     Populations
Eligibility criteria for publicly funded vaccines	<u>NBIPG standard/guideline 3.3- Eligibility</u> <u>Criteria for Publicly Funded Vaccines/Biologics</u>
Immunization Schedule	NBIPG Standard 3.1 - Routine Immunization     Schedule
	NBIPG Appendix 4.4- An Assessment Tool to     Determine the Validity of Vaccine Doses
	CIG: Part 4 - Active Vaccines

#### **VACCINES**

Diphtheria, Tetanus, Acellular Pertussis, Inactivated Polio & Haemophilus Influenza Type b (DTaP-IPV-Hib)

Haemophilus Influenzae Type b (Hib)

Hepatitis A - pediatric (HA)

Hepatitis A - adult (HA)

Hepatitis B - pediatric (HB)

Hepatitis B - adult (HB)

Hepatitis B- dialysis (HB)

Hepatitis A and B adult (HAHB)

Hepatitis A & B junior (HAHB)

Human Papillomavirus (HPV)

Inactivated polio (IPV)

Measles, Mumps, Rubella (MMR)

Measles, Mumps, Rubella, Varicella (MMRV)

Meningococcal conjugate (Men-C-C)

Meningococcal conjugate A, C, Y & W-135 (Men-C-ACYW-135)

Meningococcal-B (Men-B)

Mpox

Pneumococcal conjugate 13-valent (Pneu-C-13)

Pneumococcal polysaccharide (Pneu-P-23)

Rabies (Rab)

Rotavirus (RV)

Tetanus Toxoid, Diphtheria (Td)

Tetanus, Diphtheria, Acellular Pertussis (Tdap)

Tetanus, Diphtheria, Acellular Pertussis, Inactivated Polio (Tdap-IPV)

Varicella (Var)

#### **INFLUENZA VACCINES 2022/2023**

Composition of quadrivalent vaccines egg-based vaccines:

- A/Victoria/2570/2019 (H1N1) pdm09-like virus
- A/Darwin/9/2021 (H3N2)-like virus
- B/Austria/1359417/2021 (B/Victoria lineage)-like virus
- B/Phuket/3073/2013 (B/Yamagata lineage)-like virus

Refer to the specific influenza vaccine product ingredients found in each vaccine's product monograph

**Products** 

	COVID-19 VACCINES  • Messenger RNA (mRNA vaccines)  • Protein subunit vaccines  • Viral vector-based  Refer to the specific COVID-19 vaccine product ingredient found in each vaccine's product monograph
Management of Anaphylaxis	NBPIG Appendix 5.1 – Anaphylaxis     Management in a Non-Hospital Setting
Management of Vaccine Errors and Deviations of Administration	NBPIG – Policy 2.15 - Management of Vaccine     Administration Errors or Deviation for all     Immunizers
Dosage, Route and Administration Instructions	Product Monograph for each vaccine
Contraindications and side effects	Product Monograph for each vaccine

### Form - Directive for the Provision of Immunization Services

#### Directive for the Provision of Immunization Services

Directive for the Provision of Influenzation Services
The employers of immunizers responsible for providing immunization services must have in place ongoing quality control processes to ensure adherence to the conditions of this directive and to the policies, standards and guidelines of the New Brunswick Immunization Program.
Regional Medical Officer of Health or NB Authorized Prescriber:
(Name)
(Signature)
(Date)
Staff and Employer Acknowledgement of the directive for the Provision of Immunization Services
·
the Provision of Immunization Services
the Provision of Immunization Services  I have met the conditions outlined in this directive: