

Vaccination error
17HDC01754, 13 December 2018

*Registered nurse ~ Medical centre ~ Immunisation ~
Policy ~ Vicarious liability ~ Right 4(1)*

A 26-month-old boy presented to a medical centre with his father for his varicella (chickenpox) vaccine. A registered nurse administered the varicella vaccine as well as the three other vaccines on the 15-month vaccine schedule. Prior to administering the vaccines, the nurse did not check the boy's immunisation record, which showed that the boy had already received the three other 15-month vaccines. The nurse advised the boy's father of the error immediately and his general practitioner the following day.

Findings

It was held that by administering three vaccines to the boy in error, the nurse did not provide the boy services with reasonable care and skill and, therefore, breached Right 4(1) of the Code. Criticism was also made that the nurse did not notify one of the doctors at the medical practice of the adverse event until the following day.

It was also held that the medical centre had not taken reasonably practicable steps to prevent the nurse's breach of the Code. It did not have a formal written policy for the administration of vaccines as required by Ministry of Health standards, and it did not monitor the nurse's compliance with the vaccinator practice standards in which she was trained. Accordingly, the medical centre was found vicariously liable for the nurse's breach of the Code.

Recommendations

It was recommended that the nurse and the medical centre provide a written apology to the family. It was also recommended that the medical centre provide HDC with an audit of vaccination-related documents to ascertain compliance with the vaccination administration policy. As recommended in the provisional opinion, the nurse attended a refresher vaccinator training course.