

Lincolnshire Training Hub Position Statements for Registered Nursing Associates in Primary Care

Childhood Immunisations

The below is Lincolnshire Training Hubs position statement with regards to registered Nursing Associates providing childhood immunisations. This statement has been written considering the current guidance and is subject to changes or updates if the national guidance changes. This position statement is only applicable to Lincolnshire and is based on guidance for England.

Qualified Nursing Associates are registered by the NMC and are accountable to, and required to work within, The Code (NMC, 2018a). The role of the Nursing Associate is evolving with variation between organisations. The role is seen as being part of a nursing team. The Registered Nurse is responsible for planning, providing and evaluating care and the Nursing Associate is responsible for providing and monitoring care. The Nursing Associate role will include delegated tasks and monitoring care. The NMC Nursing Associate standards (NMC, 2018b) clearly outline the role of a Nursing Associate and how this differs to other registered professionals.

- Registered Nursing Associates provide and monitor care.
- Registered Nurses plan, provide and evaluate care.
- Nursing Associates work with delegated tasks and monitoring care.
- Suitably registered healthcare professionals, excluding Nursing Associates, can delegate and are responsible for these tasks.

Training

The National minimum standards and core curriculum for vaccination training (UKHSA, 2025) sets out the requirements for the knowledge and skills required for those involved in the immunisation programmes. These standards apply to all healthcare staff involved in delivering vaccinations, including Nursing Associates. All Nursing Associates should have completed the two-day initial training course, a satisfactory period of supervision and an assessment of competency.

Accountability

Recommendations are made for the safe and supported administration of vaccines by Nursing Associates.

Those responsible for delegating a role in immunisation to a Nursing Associate should be aware that only those professions listed in the legislation (Human Medicines Regulations 2012, Schedule 16, Part 4) can operate under a patient group direction (PGD). As such, a Nursing Associate will require a written, signed patient specific direction (PSD) to administer immunisations. Registered Nurses working under a PGD cannot delegate to a Nursing Associate the supply or administration of medicines in accordance with a PGD.

- The prescriber is responsible for delegating to the Nursing Associate
- The prescriber has a duty of care when putting a PSD in place to ensure that they made an appropriate assessment of the patient.
- The prescriber is also responsible for ensuring that informed consent is gained prior to administration of the vaccine.
- Nursing Associates must work under a PSD
- Nursing Associates cannot work under a PGD
- Registered Nurses cannot delegate under a PGD

As per the Specialist Pharmacy Service (2026), a PSD must include:

- Patient name and other identifiers (including age if the patient is a child)
- The name, form and strength of the medicine (vaccine)
- The route of administration
- Dose to be given
- Frequency
- The date of treatment, number of doses, frequency and an end date as applicable
- The signature of the prescriber and date that the PSD has been written (this may be handwritten or electronic)

Nursing Associate Role

To ensure all guidance is followed and the Nursing Associate remains within their scope of practice, LTH recommend that:

- Nursing Associates only administer childhood primary immunisations once the infant has been assessed by a Registered Nurse or GP prior to the appointment. This can be in the form of the 6-8 week check where a PSD is put in place for the 8-week vaccines, or a Registered Nurse administer the first set of vaccinations and the Nursing Associate can complete the primary course under PSD.
- If a child presents with an incomplete vaccination history, this is no longer classed as monitoring care and requires planning, providing and evaluating care. As such this should not be completed by a Nursing Associate. An exemption to this would be a Nursing Associate with significant childhood immunisation experience where the Registered Nurse completes the initial assessment and vaccines. The Nursing Associate could then complete the vaccination course as delegated by the Registered Nurse, under PSD.
- The prescriber should include a time frame with the PSD to show how long it will be valid for. If the prescriber puts PSDs in place following their assessment for all primary immunisations to be given at 8, 12 and 16 weeks of age, they must clearly indicate the total number of doses that are to be given for each vaccine, and necessary time intervals between doses (Specialist Pharmacy Service, 2026). If there are any changes to the health (or treatment) of an infant, they should be reassessed by the prescriber to ensure that the PSD is still appropriate for use.
- Nursing Associates should be competent in basic life support and anaphylaxis management. There should be another suitably trained person in the building at the time of any immunisation.

Definitions:

NMC (2019) table demonstrating the differences between Nursing Associates and Registered Nurses.

Nursing associate	Registered nurse
6 platforms	7 platforms
Be an accountable professional	Be an accountable professional
Promoting health and preventing ill health	Promoting health and preventing ill health
Provide and monitor care	Provide and evaluate care
Working in teams	Leading and managing nursing care and working in teams
Improving safety and quality of care	Improving safety and quality of care
Contributing to integrated care	Coordinating care
	Assessing needs and planning care

References:

Human Medicines Regulations 2012 [The Human Medicines Regulations 2012 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

NMC (2018a) The Code [The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates - The Nursing and Midwifery Council \(nmc.org.uk\)](https://www.nmc.org.uk)

NMC (2018 – redesigned in 2024) Standards of proficiency for Nursing Associates [standards-of-proficiency-for-nursing-associates.pdf \(nmc.org.uk\)](https://www.nmc.org.uk)

Specialist Pharmacy Service (2026) PSD [Patient Specific Directions \(PSD\) – NHS SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](https://www.nhs.uk)

NMC (2019) Role differences between nursing associates and nurses [Blog: Role differences between nursing associates and nurses - The Nursing and Midwifery Council \(nmc.org.uk\)](https://www.nmc.org.uk)

UKHSA (2025) National minimum standards and core curriculum for vaccination training [UKHSA National Minimum Standards for immunisation training 2025.pdf \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk)

RCN (2019) The Role of Nursing Associates in Vaccination and Immunisation. London:RCN