

PEER REVIEW ASSESSMENT OF CLINICAL PRACTICE

for authorised vaccinators seeking re-authorisation

1. The reviewer must be **currently authorised** as an independent vaccinator
2. The vaccinator must have **previously completed an independent clinical assessment**
3. Assessment to be undertaken on a patient within the vaccinators scope of practice (i.e. baby under 15 months, school aged child or adult)

Name of Vaccinator:	Date of Last Update:
Name of Reviewer:	Reviewer Authorisation Expires:
Age of Vaccinee:	Date of Peer Review:
Type of vaccine	

	Yes	No
Emergency Equipment (must be accessible whenever vaccinations are given)		
<ul style="list-style-type: none"> • Emergency Kit. To include: <ul style="list-style-type: none"> ○ adrenaline : 1 :1000 and dosage chart ○ syringes : 1.0ml tuberculin (not insulin) ○ needles: a range of needle lengths and gauges, ○ oxygen, attached to tubing and appropriate sized facemask ○ appropriate sized ambu-bag ○ appropriate sized airways 		
Cold Chain:		
<ul style="list-style-type: none"> • Daily minimum and maximum fridge temperatures are documented • Vaccines are stored correctly 		
Pre-vaccination Check and Informed Consent:		
<ul style="list-style-type: none"> • Checks patient is well and has no relevant allergies • Checks for any specific contraindications • Ascertains weight (baby or child only) • Explains what vaccines are to be given • Discusses what side effects there may be • Informs parent/patient they must stay in clinic for 20 minutes post vaccination • Allows time to answer questions • If no contraindications, obtains consent – verbal or written 		
Administration:		
<ul style="list-style-type: none"> • Washes hands • Checks correct vaccine, diluent, expiry date and appearance • Draws up vaccine using an aseptic technique • Changes needles • Uses correct needle size and length 		

<ul style="list-style-type: none"> • Patient appropriately positioned/held 		
<ul style="list-style-type: none"> • Administers vaccine using appropriate site, route and needle angle 		
<ul style="list-style-type: none"> • Disposes of needles and syringes into sharps container 		
Post Vaccination:		
<ul style="list-style-type: none"> • Discusses management of potential side effects 		
<ul style="list-style-type: none"> • Provides advice on paracetamol dose (baby/child only) 		
<ul style="list-style-type: none"> • Provides written post immunisation advice and contact number(s) 		
<ul style="list-style-type: none"> • Completes documentation (written and/or computer) 		
<ul style="list-style-type: none"> • Completes Well Child/Tamariki Ora Book (baby/child only) 		
<ul style="list-style-type: none"> • Completes Immunisation Certificate (all 15 month and 4 year immunisation events) 		
<ul style="list-style-type: none"> • Advises parent/caregiver when next vaccination due 		
<ul style="list-style-type: none"> • Keeps vaccinee in clinic for 20 minutes 		
<p>Peer Reviewer's Comments:</p> <p>Signature:</p> <p>Contact Details:.....</p>		
<p>Vaccinator's Comments:</p> <p>Signature:</p> <p>Contact Details:.....</p>		