



2017 ASSESSMENT OF CLINICAL PRACTICE FOR VACCINATORS

(As per current Vaccinator Training Course Standards, The Immunisation Advisory Centre and current Immunisation Handbook Standards Ministry of Health)

Vaccinator name:	Assessment date:	Venue :		
Assessor name:	VTC achieved (cert sighted) Yes / No	Vaccinator update course due date:		
Role and Organisation:	Prescriptions available if required Yes / No			
Tick type of vaccinator:	<input type="checkbox"/> Infant, child and adult vaccinator	<input type="checkbox"/> Adult vaccinator only		
Vaccinations given / sites used Vaccinee 1:		Vaccinations given / sites used Vaccinee 2:		
<p><i>There are six standards which vaccinators are assessed against during clinical assessment – Note: evidence/judgement of these standards can overlap</i></p> <ol style="list-style-type: none"> 1. The vaccinator is competent in all aspects of the immunisation technique and has the appropriate knowledge and skills for the task 2. The vaccinator obtains informed consent to immunise 3. The vaccinator provides safe immunisation 4. The vaccinator documents information on the vaccine(s) administered and maintains patient confidentiality 5. The vaccinator administers all vaccine doses for which the vaccinee is due at each visit and only follows true contraindications 6. The vaccinator reports adverse events following immunisation promptly, accurately and completely 				
Evidence / Judgment		Comments	C	NYC
Section One:	Standard 3 The vaccinator provides safe immunisation			
The vaccinator demonstrates management of: <ul style="list-style-type: none"> • Adverse Events following Immunisation (AEFI) • Differentiate of anaphylaxis and other reactions • Regularly checking of onsite emergency equipment • Cold chain and the practice/clinic has achieved Cold Chain Accreditation • Cold chain breach - actions required • Safe disposal of needles/ syringes/vaccine applicators/vaccines and spillage's (blood or vaccine) • The venue is private and appropriate 				

Evidence / Judgment		Comments	C	NYC
Section Two:	Standard 6 The vaccinator reports adverse events following immunisation promptly, accurately and completely			
The vaccinator is able to manage adverse events following immunisation and can demonstrate: <ul style="list-style-type: none"> • Who can report adverse events • How AEFI are reported and who is informed • The type of events that should be reported • Where the AEFI should be recorded e.g. NIR, NHI, Well Child Tamariki Ora Book, GP, vaccinator records 				
Section Three:	Standard 5 The vaccinator administers all vaccine doses for which the vaccinee is due at each visit and only follows true contraindications			
Prior to vaccinating the vaccinator: <ul style="list-style-type: none"> • Undertakes an appropriate pre-vaccination clinical assessment or check • Determines the current health status of vaccinee • Ascertains the date of last immunisation and ensures correct spacing of vaccines • Enquires about reactions to previous immunisations and identifies true contraindications • Where appropriate, enquires about possible immune suppressed status of contacts • Knows how to plan a catch up immunisation with minimum number of visits 				
Section Four:	Standard 2 The vaccinator obtains informed consent to immunise			
The vaccinator is able to: <ul style="list-style-type: none"> • Assess individual/parent/guardian knowledge of vaccine preventable diseases and process of immunity • Provide written and verbal information about diseases and risks/benefits of the vaccines, using resources suitable for the individual's understanding/language or access an appropriate interpreter • Pick up on cues, concerns, encourage questions, and allow time to reflect on information provided • Outline the information to be collected, its transfer and storage on the National Immunisation Register • Obtain consent for each immunisation episode from the individual/parent/guardian and document • Provide information about keeping healthy if parent/guardian declines immunisation 				
Section Five:	Standard 1 The vaccinator is competent in all aspects of the immunisation technique and has the appropriate knowledge and skills for the task			
The vaccinator: <ul style="list-style-type: none"> • Uses clean technique in preparing and administering the vaccine • Checks the correct vaccine, visual appearance, the expiry date and reconstitutes correctly • The appropriate vaccines are administered for the age and history of the vaccinee • Appropriate needle size, gauge and route for the vaccines used • Instructs the parent/caregiver in the way to hold infant or child comfortably • Follows appropriate strategies for mitigation of vaccination pain and distress 				

Evidence / Judgment		Comments	C	NYC
Section Six:	Standard 4 The vaccinator documents information on the vaccine(s) administered and maintains patient confidentiality			
The vaccinator documents: <ul style="list-style-type: none"> • The individual’s personal details: name, DOB, NHI, , ethnicity, address, contact number and next of kin • Relevant information <ul style="list-style-type: none"> ○ Consent obtained, date, vaccine type and number in the series; batch number and expiry date; injection site, needle length; patient was observed for 20 minutes post immunisation, if the vaccine is given by a non-standard route, the reason is recorded, the date for the next immunisation entered in the PMS and the Well Child Tamariki Ora Health Book, and resources given to individual/parent/caregiver • The Immunisation Certificate is completed and explained to parent/caregiver • The Immunisation Benefit is claimed correctly • Transfer of information is discussed and consent obtained if vaccinator is not primary health care provider • Rationale for 20 minutes wait post immunisation is explained • Vaccinator demonstrates how to notify other providers if necessary: • Clinical documentation is managed to maintain confidentiality and is available on appropriate request • Is able to use the NIR to check a child’s immunisation records, status query • Information to be recorded on the NIR and that they may have the option to opt off • Computer screen not visible to others 				

Competent / Not Yet Competent

Copy of assessment given to candidate: Yes / No

Assessor Comments:	
Assessor's Signature:	Date:
Candidate's Comments:	
Candidate's Signature:	Date:

IMAC does not require a copy of the Clinical Assessment. Contact the local Immunisation Coordinator or Medical Officer of Health for authorisation process. Pharmacists email the Pharmaceutical Society of New Zealand details: full name, membership & indemnity number, pharmacy site, education/clinical assessment completion date