

Core blood competencies assessment framework

Assessment criteria for preparing and administering a transfusion of blood/blood products

This framework is for assessing the candidates ability in preparing and administering a transfusion of blood/blood product to a patient. Candidates should be assessed after they have received training in this skill.

This framework was developed by the National Patient Safety Agency (NPSA) to assess the core blood transfusion competence, *preparing to administer and administering a transfusion of blood/blood products* and has been adapted in line with the trust's policies and procedures.

This workforce competence is linked to the Knowledge and Skills Framework (October 2004) dimensions developed by Skills for Health. The dimensions are Communication, Health and Safety, and Health and Well-being.

Dimension : Core 5 Quality - level 1; a,b,c,d,e.

HWB7 Interventions and treatments - level: 1;a,b,c,d,e

How to use this competence assessment:

- This assessment should be completed whilst observing the candidate preparing to administer blood/blood products to patients and administering a transfusion of blood/blood products.
- It is important that the assessor informs the patient that the candidate is being assessed as part of an on-going three-yearly process.
- The assessor should allow the candidate time to read through the assessment criteria prior to the assessment.
- All assessment criteria must be completed.
- The assessment should be undertaken within one working day.
- It is the assessors responsibility to ensure the form at the end of the assessment is completed, removed from the assessment document and returned to the transfusion practitioners as proof of assessment.
- The candidate to retain the assessment documentation.
- **Please note, the completion of this assessment documentation is subject to periodic quality control checks.**

Disclaimer: This record of competency relates to performance at the time of the assessment and does not guarantee future performance.

Preparing to and administering a transfusion of blood/blood products

Name of candidate:	Name of assessor:
Job title:	Job title:
Grade:	Grade:
Ward:	Ward:
Hospital:	Hospital:
Date attended Blood Transfusion Training:	
Date of assessment:	

Observational assessment

Performance Criteria	Competency Achieved?
Did the candidate meet the following criteria?	Y/N (Completed by Assessor only)
1 Did the candidate check the patient was wearing a wristband stating the patients: a) Surname b) First name c) DOB d) Hospital ID number e) Gender	
2 Perform preliminary checks to include: a) Patients understanding and agreement to transfusion b) Suitable venous access c) Product prescribed d) Reason for transfusion recorded in patients notes e) Any special requirements i.e. irradiated or CMV negative product f) Use transfusion care pathway (where applicable) g) Gather necessary equipment	
3 Patient identification for <u>conscious</u> patient: Did the candidate ask the patient to state their: a) Full name b) DOB Did the candidate check:	

<p>c) Details on the wristband or other attached identifier matched information given</p> <p>d) Ensure the information on the compatibility label on the blood/blood product matches the patients wristband details</p>	
<p>4 Patient identification <u>unconscious</u> patient or patient unable to verbally respond:</p> <p>Did the candidate check:</p> <p>a) Details on the wristband or other attached identifier for:</p> <ul style="list-style-type: none"> • Full name • DOB • Hospital number or other identification number <p>b) Ensure the information on the compatibility label on the blood/blood product matches the patients wristband details</p>	
<p>5 Did the candidate record the patient's pre transfusion vital signs:</p> <p>a) Blood pressure</p> <p>b) Temperature</p> <p>c) Pulse rate</p>	
<p>6 Administering the blood transfusion:</p> <p>Did the candidate ensure the blood transfusion:</p> <p>a) Started within 30 minutes of removal from fridge</p> <p>Did the candidate:</p> <p>a) Inform patient if they feel unwell to use call buzzer to alert a member of staff</p> <p>b) Monitor & record the patient's vital signs 15 minutes after starting the transfusion</p> <p>c) Monitor & record the patient's vital signs on completion of the blood transfusion</p> <p>d) If continual monitoring (ITU/HDU/CCU) – document observations as above on patients chart</p> <p>e) Dispose of equipment safely on conclusion of transfusion</p>	
<p>7 Documentation:</p> <p>Did the candidate record the following information in the patient's notes/transfusion care pathway:</p>	

a) Date of transfusion b) Start time c) Stop time of the transfusion d) Attach donation number of unit to transfusion care pathway/patients notes e) Attach collection slip to back of transfusion care pathway (or place in patients notes) Did the candidate: f) Complete the traceability tag in accordance with national law and return to transfusion lab	
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Assessor Guidance

- Unless indicated as not applicable (N/A) and a reason provided in box above, all of the above criteria must be achieved to gain competency.
- Candidates must also undertake a knowledge assessment by completing the knowledge questions.
- Where certain aspects of the assessment cannot be observed such as the transfusion of day-case patients or patients unable to identify themselves, correct responses in the knowledge assessment will suffice as long as the alternative is observed

Knowledge Assessment: See questions overleaf.

Did the candidate demonstrate an understanding of the importance of the following points?	Competency Achieved? Y/N
1. The wearing of patient wristbands or alternatives by inpatients and day case patients	
2. Infusion times for the following: a) Red cells b) Platelets c) Fresh Frozen Plasma d) Cryoprecipitate	
3. Using open ended questions to identify patients	
4. Ensuring that the patient and staff are adequately prepared	
5. The rationale for checking the suitability of the component in terms of quality, expiry date and special requirements	
6. The risks associated with checking blood/blood products away from the patients bedside	
7. Correct procedure if a patient is unconscious or unable to provide verbal ID	
8. Action to take if there are any discrepancies in data	
9. The requirements to achieve 100% traceability of all blood/blood products	
10. Risks associated with inadequate patient observation	

11. What action to take if suspected patient was having an adverse reaction	
12. Maintenance of accurate documentation	

Candidate to complete the following questions :

The following questions are to be used to ascertain the candidate's understanding of the statements in the above knowledge assessment. **Assessor to review responses.**

Q 1. In what circumstances is it acceptable to transfuse a patient without a wristband or alternative identifier attached to their person?

Q 2. What are the Infusion times for the following?

- a) Red cells
- b) Platelets
- c) Fresh Frozen Plasma
- d) Cryoprecipitate

Q 3. What is an open-ended question?

Q 4. Why is it important to use open-ended questions when checking verbal identity?

Q 5. Why are closed questions not suitable when checking verbal identity?

Q 6. Why is it important to ensure that there is patent venous access and that all other equipment is ready prior to administering the transfusion?

Q 7. Within what timescale can units be returned to the issue fridge or transfusion Laboratory?

Q 8. When inspecting a unit of blood or blood product, what abnormalities should you check for?

Q 9. If the expiry date shows today's date when should the product be transfused by?

Q 10. Are you aware that certain patients may have special transfusion requirements (i.e. irradiated components or Cytomegalovirus negative)?

How would you know this applied to your patient?

Q 11. Why is the bedside check important?

Q 12. Describe the correct procedure to identify the conscious patient and check the blood component against their ID.

Q 13. Describe correct procedure to identify the unconscious patient/patient unable to provide verbal ID and check the blood/blood product against their ID.

Q 14. If the patient who is unable to identify themselves is not wearing a wristband or other identifier what would you do?

Q 15. If the DOB on the component label and the DOB given by the patient are different, but all other details being identical, what would you do?

16. What action would you take if you suspected the patient was having an adverse reaction?

Competency in skill: (*circle appropriate outcome)

*Achieved *Requires further training *Further practice required

*Further assessment opportunity required

Assessor comments:

Signature of Assessor: _____

Candidates comments:

I ***accept / do not accept the outcome of this assessment** (*delete as appropriate)

Signature of Candidate: _____

Date _____

Please indicate how the assessment was undertaken:	Tick relevant box:
Observation of practice	
Simulation exercise	

Note: If competency is not achieved, the assessor must complete the Referral Pathway document and a new assessment document used for the next assessment. Please refer to Assessor Pack for further guidance.

*Please ensure the entry form overleaf is completed, removed from the assessment document and returned to ensure the assessment is recorded on the transfusion competency data base.

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Assessment criteria for preparing and administering a transfusion of blood/blood products		
Name of Candidate (print):	Ward: Hospital:	Date of assessment: Pass? Referred? <small>(Please circle relevant outcome)</small>
Name of Assessor (print):	Ward: Hospital:	

Signature of Assessor.....

Signature of Candidate.....

Please indicate how the assessment was undertaken:	Tick relevant box:
Observation of practice	
Simulation exercise	

Please return this form to Carol Blears, Lead Transfusion Practitioner, Pathology Dept. Dewsbury.

