

## Blood Transfusion Competency Assessment

### Assessor Pack



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These are available on the Trust's Intranet under Departments / Pathology / Transfusion / Blood transfusion competencies.

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#### Acknowledgement:

This information pack has been adapted from the Hull and East Yorkshire Hospitals NHS Trust documentation on the *Safe and Appropriate Use of Blood and Blood Products – competency assessment practitioner pack 2007*.

## 1. Introduction to the Transfusion Competencies

As part of the National Patient Safety Agency (NPSA) Safer Practice Notice 14 'Right patient, right blood' initiative, formal assessment of all clinical staff groups in the relevant competencies relating to the blood transfusion process have been developed.

The NPSA has developed five national competencies for:

- obtaining a venous blood sample
- organising the receipt of blood/blood products for transfusion
- collecting blood/blood products for transfusion
- preparing to administer transfusion of blood/blood products
- administering a transfusion of blood/blood products.

Formal assessment of the relevant competencies is required for nurses, midwives, medical staff, phlebotomists, healthcare assistants, operating department practitioners and any other member of staff involved in the transfusion process.

The aim of each transfusion competency assessment is to demonstrate that the member of staff **can** undertake the skill, in that they have the underpinning knowledge and **can** follow the correct procedure. The member of staff is deemed competent upon completion of the theoretical / formal training and completion of all the required competencies including the knowledge assessment. They are linked to the Knowledge Skills Framework, and failure to complete the competencies may affect those staff under Agenda for Change conditions.

The Mid Yorkshire NHS Trust competencies have been developed, using a revised version of the NPSA documentation to cover the following aspects of the transfusion process and are assessed on a three yearly basis.

***50% of staff must be assessed by May 2009 and 100% by November 2010.***

Competence title	Assessment Criteria	Appropriate staff groups
1. Obtaining a venous sample for blood transfusion	To assess candidate's ability to obtain a venous sample for transfusion only. Staff should be assessed after they have attended a local training course on this core task.	<ul style="list-style-type: none"> <li>▪ Phlebotomists</li> <li>▪ Nurses</li> <li>▪ Midwives</li> <li>▪ Medical staff</li> <li>▪ Healthcare Assistants NVQ level 3</li> </ul> <p>involved in venous blood sampling for transfusion only</p>
2. Organising the receipt of blood/blood products for transfusion	To assess candidate's ability to organise the receipt of blood products for transfusion for the correct patient.  Staff should be assessed after they have attended a local training course on this core task.	<ul style="list-style-type: none"> <li>▪ Operating Department Practitioners</li> <li>▪ Nurses</li> <li>▪ Midwives</li> <li>▪ Medical staff</li> </ul> <p>involved in organising the receipt of blood/blood products.</p>

Competence title	Assessment Criteria	Appropriate staff groups
3. Collecting blood/blood products for transfusion	<p>To assess candidate's ability to collect blood/blood products for transfusion and for the correct patient.</p> <p>Staff should be assessed after they have attended a local training course on this core task.</p>	<ul style="list-style-type: none"> <li>▪ Operating Department Practitioners</li> <li>▪ Nurses</li> <li>▪ Midwives</li> <li>▪ Medical staff</li> <li>▪ Porters</li> <li>▪ Healthcare Assistants</li> </ul> <p>involved in collecting blood/blood products</p>
4. Preparing to administer blood/blood products and administering a transfusion of blood/blood products	<p>To assess candidate's ability to safely prepare and to administer blood/blood products for transfusion.</p> <p>Staff should be assessed after they have attended a local training course on this core task.</p>	<ul style="list-style-type: none"> <li>▪ Operating Department Practitioners</li> <li>▪ Nurses</li> <li>▪ Midwives</li> <li>▪ Medical staff</li> </ul> <p>Involved in preparing and administering blood/blood products</p>

If you require any further information or have any concerns please contact your Transfusion Practitioner or refer to the Blood Transfusion policy.

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## 2. Organising Transfusion Competency Assessments

**Please note, you can only assess competencies in which you yourself have been assessed as competent.**

1. Discuss with candidate and candidates line manager, which competency assessments apply. Ensure candidate feels ready to undertake the assessment.
2. Check candidate has attended blood transfusion training within the last 12 months (note you will require evidence of this and date attended training). If not, please arrange blood transfusion training by contacting Organisational Development PGH on 01924 212720 or internal x2720.
3. Issue candidate with "Blood Transfusion Competency Assessments – information pack for candidates undergoing assessment" and relevant assessment documents.

Candidates should complete the knowledge assessment questions within the assessment documentation (found on page 4 or 5 of the document) prior to the practice assessment.

**Note:** staff who have been trained and assessed as competent in venepuncture in the last 3 years (Mid Yorks venepuncture course) will not be required to be reassessed until the 3 years has elapsed.

\*Health Care Assistants and Porters will be required to attend blood transfusion training specifically for them, and to undergo a period of supervised practice before undergoing final assessment.

4. Advise candidate to review the Blood Transfusion Policy and utilise the *aide memoir* of the relevant procedure – these are flowcharts at the back of the policy.
5. Arrange a mutually agreed date and time for each assessment.

## 3. Day of assessment

1. Check assessment is still convenient and that there is opportunity for candidate to be assessed undertaking relevant procedure.
2. Inform ward/department colleagues and line manager of assessment.
3. Allow time for candidate to view the relevant assessment documentation prior to commencing the assessment. Answer any queries they may have.
4. The assessor should work alongside the candidate during the assessment, observing the procedure and can act as second checker (receipt of correct blood, bedside checking procedure or participating in confirming patient ID in unconscious patient).
5. Inform patient/patients where applicable of candidate's assessment.

6. Conduct observation of practice and complete observational assessment section of assessment documentation.
7. Allow sufficient time/procedures to allow candidate adequate opportunity to obtain evidence. Where practice has not been observed, check for knowledge questions as they may cover criteria not observed. If not, an assessor devised question can be used. Please document question asked and candidate's response and which criteria it relates to on the assessment documentation.
8. After completing observational assessment, check answers from the knowledge assessment. Please ensure this is conducted in a private environment.
9. On conclusion of assessment, inform candidate of outcome and provide feedback. Allow candidate to give their response/feedback.
10. Complete and sign (including candidates) all relevant sections on the assessment documentation as appropriate. Please complete and sign (both assessor and candidate) the form at the back of the assessment document and forward to the Lead Practitioner Blood Transfusion (see assessment documentation). The candidate should retain the original assessment document as proof of competence.

#### 4. Blood Products involved in the transfusion competency assessment

Any blood product may be used as an observational assessment in order for the candidate to demonstrate their application of knowledge to clinical practice.

Red Blood cells	RBC
Platelets	PLAT
Fresh Frozen Plasma	FFP
Cryoprecipitate	CRYO

#### 5. Assessing candidates using simulation exercises

Simulation exercises\*\* can be used to assess competency if the opportunity for assessment is so infrequent, i.e. transfusions rarely undertaken on the ward/department.

The need for the simulation exercise must first **be agreed with the transfusion practitioner** and your clinical manager/matron. The transfusion practitioner may request to view the setting up of the simulation exercise to ensure it meets the standards required for a fair and valid assessment. Failure to do so could invalidate the assessment.

\*\*The assessor **MUST** document on the assessment documentation that competency has been assessed using simulation exercise. This must also be noted on the form (back page of the relevant competency assessment) sent to the transfusion practitioner.

**Note:** "mock" blood banks are available on loan from the transfusion practitioners.

#### 6. Failure to achieve competence

Mid Yorkshire NHS Trust Blood Transfusion Competency Assessment – Information Pack for Candidates undergoing assessment. V6 January 2009/CB/SS

In the event of failure to achieve the required competencies the following procedure should be undertaken. **Note:** this should be undertaken with due regard for confidentiality of the candidate. Colleagues of the candidate should only be informed on a “need to know” basis and in agreement with the candidate.

- **First assessment**

Discuss with candidate the areas in which they did not demonstrate competence, i.e. observational assessment and/or knowledge assessment. Inform Clinical Manager of outcome of assessment. In agreement with candidate and Clinical Manager, complete the action plan in the competency assessment document, stating what support and development opportunities the candidate requires and agree a timescale and date for follow up assessment.

Consider if the candidate requires a period of supervised practice (compulsory if assessor observed unsafe practice).

- **Second assessment**

Again, discuss with candidate the areas in which they did not demonstrate competence i.e. observational assessment and/or knowledge assessment. Inform clinical manager of outcome and transfusion practitioner.

Transfusion Practitioner and Clinical Manager, together with candidate complete the action plan stating what support and development opportunities the candidate requires and agree a timescale and date for follow up assessment. This may include 1:1 training with transfusion practitioner.

Clinical manager to allocate a supervisor to support candidate during this period. Third assessment carried out by transfusion practitioner.

- **Third assessment**

If the candidate fails to achieve competency on three separate occasions, following further training and support etc. the Clinical Manager must be informed by the Transfusion Practitioners. The candidate must then be managed by the Clinical Manager and Matron for the specialty in relation to pay progression, using the trusts Knowledge and Skills Framework Gateway Policy and if necessary the Capability Policy (HR8). The candidate must not undertake the procedure(s) in which they have not demonstrated competence.

## 6.1 What to do next

You will need to complete the Referral Pathway document (printed off from the Intranet) with an action plan documenting what further training/support is required.

When the candidate undertakes their next assessment, please complete a new competency assessment document and record outcome of assessment on the referral pathway document.

## 7. Observing unsafe practice during assessment

During the assessment, should the assessor observe “unsafe” practice i.e. any practice which could put the patient or staff member at risk, the assessor must intervene and take over/stop the procedure. This should be carried out in a professional manner and without causing concern to the patient. The unsafe practice should not be discussed in the presence of the patient, but with the candidate in a private and confidential manner. The candidate must be informed of the reason for halting the assessment and the unsafe practice observed. Reference should be made to the correct procedure using the Blood Transfusion Policy and/or relevant *aide memoir*.

The Clinical Manager must be informed of the incident and the candidate should be supervised undertaking the procedure until deemed competent by a follow up assessment. Please see section 6 on how to proceed.

## **8. Competency assessment documents**

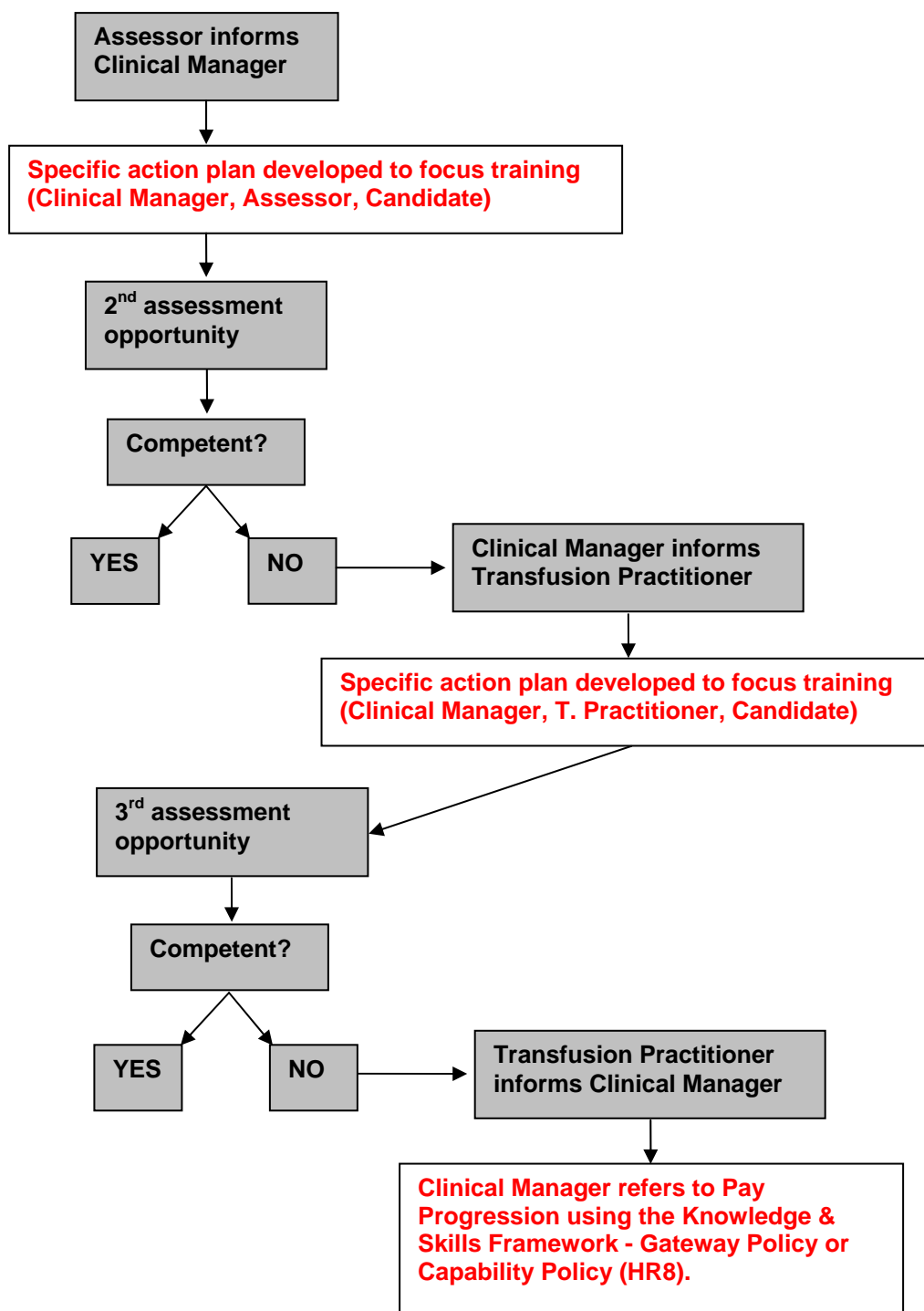
### **The following are available:**

1. Obtaining a venous sample for blood transfusion
2. Organising the receipt of blood/blood products for transfusion
3. Collecting blood/blood products for transfusion
4. Preparing to administer blood/blood products to patients and administering a transfusion of blood/blood products
5. Blood Transfusion Competency Assessment – Information pack for candidates undergoing assessment
6. Referral Pathway document (failure to achieve competency)

Additional assessment documents can be accessed via the Trust’s Intranet under Departments / Pathology / Transfusion / Blood transfusion competencies.



## Appendix A

**Summary of action of failure to achieve competence**

## NOTES PAGE