

Hull and East Yorkshire Hospitals **NHS**

NHS Trust



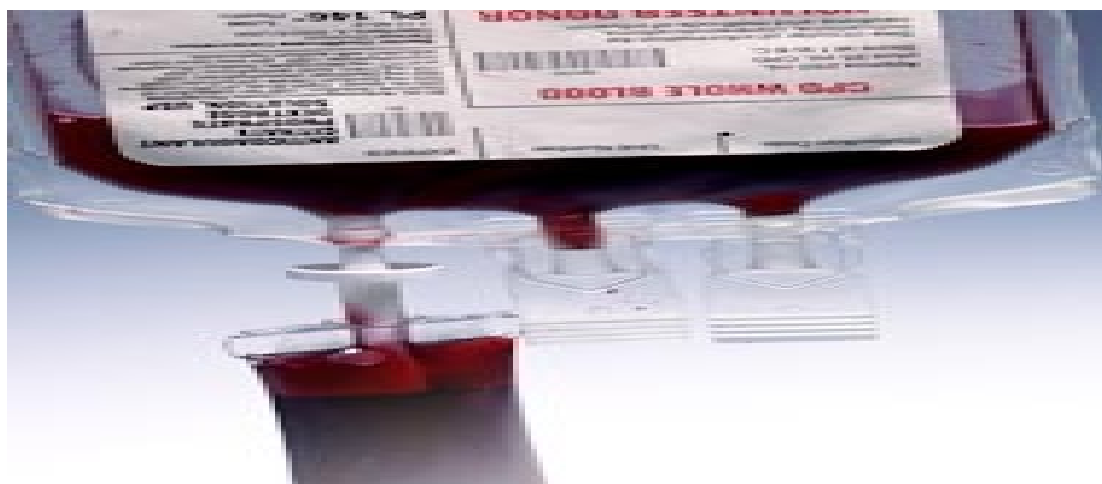
Hull and East Yorkshire Hospitals

NHS Trust

Safe and Appropriate Use of Blood and Blood Products

Competency Assessment Practitioner Pack

Name of Practitioner	
Name of Supervisor	
Date	
Clinical Area	



Introduction to Transfusion Competencies

As part of the National Patient Safety Agency (NPSA) Safer Practice Notice 14 'Right patient, right blood' initiative, formal assessment of the relevant competencies for all clinical staff groups involved in the blood transfusion process have been developed. The NPSA has developed 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; and 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 staff involved in the transfusion process. The aims of transfusion competency assessment are to demonstrate the Practitioner **can** undertake the skill; in that they have the underpinning knowledge and **can** follow the correct procedure. The Practitioner is deemed competent upon completion of the theoretical / formal training and completion of all the required competencies on 3 separate occasions. They are linked to the Knowledge Skills Framework, and failure to complete the competencies may affect those staff under Agenda for Change conditions.

HEY NHS Trust competencies have been developed to cover the following aspects of the transfusion process and are assessed on a 3 yearly basis.

Competence title	Assessment Criteria	Appropriate staff groups
1. Obtaining a venous transfusion sample	Assesses staffs 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	Phlebotomists, Nursing and Medical staff involved in venous blood sampling for transfusion only, Clinical Support Workers, Healthcare Assistants, Renal Assistants
2a. Safe collection of blood products Level 1	Assesses staffs ability to organise the receipt and collection 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	Clinical Support Workers, Healthcare Assistants, Renal Assistants, Operating Department Practitioners, Porters, Nursing and Medical staff involved in organising the receipt of and/or collection of blood products for transfusion

2b. Safe collection of blood products Level 2	Assesses staffs ability to organise the receipt and collection of blood products for transfusion for the correct patient, in addition is involved in the monitoring of patients undergoing transfusion Staff should be assessed after they have attended a local training course on this core task	Clinical Support Workers, Healthcare Assistants, Renal Assistants
3. Safe and appropriate use of blood products	Assesses staff ability to undertake the above competencies, in addition to the preparation required for the administration of blood/ blood products and safely administering blood/blood product transfusions	Nursing and Medical staff

If you require any further information or have any concerns please contact the Transfusion Practitioners or refer to the Blood Transfusion intranet site <http://intranet/blood>.



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Transfusion Nurse Specialist
Transfusion Practitioner
Transfusion Practitioner

Transfusion Competency Assessment

Prior to the first meeting all practitioners must have attended Trust training in Safe and Appropriate Use of Blood and Blood Products

First Meeting - Discussion

Objectives

- ✓ To highlight the aims of transfusion competency assessment within the clinical area.
- ✓ To ensure all parties are aware of the legal responsibility surrounding the practice of safe transfusion in line with the NPSA safer practice notice 2006.
- ✓ To ensure all parties have studied the assessment package and are aware of their roles and share the same vision as to what is expected to be achieved throughout this process.
- ✓ To discuss competencies which have already been achieved prior to this first meeting. An understanding of which can be confirmed by verbal demonstration of underpinning knowledge. For example, demonstrate underpinning knowledge of blood group compatibility of red blood cells.

All parties must be informed that;

1. Questioning of underpinning knowledge will occur on two separate occasions
2. Observational assessment will occur on one occasion
3. Feedback will be given on each occasion

This process is merged within normal working practice and can be carried out in stages if you are observed partaking in partial transfusion practice. For example, as a second checker, or collecting blood from the blood fridge for a colleague etc.

Blood Products involved in the transfusion competency assessment;

Red Blood Cells	RBC
Fresh Frozen Plasma	FFP
Human Albumin Solution	HAS
Platelets	PLAT

The booklet must be worked through on two separate occasions asking direct questions of the competency framework to assess the retention and underpinning knowledge required to ensure safe and appropriate use of blood and blood products.

Any blood product may be used as an observational assessment in order for the practitioner to demonstrate their application of knowledge to clinical practice. Artificial blood products may be used to assess practitioner ability to safely remove blood from the blood fridge.

From the start date at the first meeting the transfusion competency assessment package must be completed within five working weeks. Allowing for rotational off duty and annual leave. If this has not been achieved the parties must refer to the incompetency pathway for further guidance.

Both parties must work as a team within their roles throughout completion of the transfusion competency package. Maintaining continuity of assessment and agreeing the aims and objectives set out within this process. Both parties must meet a minimum of four occasions in order for successful competency assessment to occur.

Signature of Assessor

Signature of Practitioner

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Overview of Element

The Blood Safety and Quality Regulations (2005) have enshrined the collection, testing, processing, storage and distribution of human blood and blood components within criminal law. Any one working in health care setting who is involved within the transfusion process must receive full training every three years with annual updates.

The purpose of this element is to;

- Update and develop knowledge and skills relating to safe transfusion practice in the use of blood and blood products
- Establish current trigger values to guide the use of blood products
- Establish legal requirements of the Blood Safety Law
- Demonstrate a working knowledge of local policy, guidelines and practice surrounding the use of blood and blood products

Understand the potential hazards of the use of blood and blood products

Outcome Statement

Practitioners will be able to demonstrate their knowledge and skills to competently complete the transfusion of a blood product. They will have underpinning knowledge of the Trust policies in place to guide their practice and safeguard their patients. They will also have an understanding of the consequences of failure to adhere to Trust policy.

You will be expected to understand and implement the principles of;

- Safe collection of blood products
- Safe storage of blood products
- Pre-transfusion checks
- Administration of blood product
- Safe observation and documentation of transfused patients
- Completing the transfusion process
- Reporting adverse incidences or events

Scope of competencies

The scopes of these competencies include the following:

Registered practitioners involved in the safe collection, administration of blood products and management of patients undergoing any part of the transfusion process.

Source Documents:-

The Blood Safety and Quality Regulations (2005)

CP113 The collection of samples, prescription, collection and transfusion of blood and blood products.

NPSA (2006) Healthcare-competencies- BDS17 Organise the receipt of blood/blood products for transfusion, BDS18 Collect blood/blood components for transfusion, BDS19 Prepare to administer transfusion of blood/blood products to patients, BDS20 Administer a transfusion of blood and blood products

CP26 Drug Policy

CG1737 Platelets Transfusion

CG1729 Use of Fresh Frozen Plasma

CG1715 Red Cell Transfusion

CP019 Correct identification of Patients

Assessment Methodology

= Observation

= Questioning

= Underpinning Knowledge/portfolio evidence

Outcome:

- Practitioner to be knowledgeable in the theoretical principles, which underpin the safe and appropriate use of blood and blood products
- Practitioner can competently implement the theoretical principles within the clinical setting

Clinical Competency	KSF Dimension	KSF Level	KSF Indicator	Date achieved	Signature Practitioner	Signature Supervisor
Practitioner has an understanding of the Blood Safety and Quality Regulations (2005) and can discuss what impact the regulations have within the clinical area.	Core 1 Communication	Level 3	a,b,c,d,e,f			
Practitioner has read and understands the Trust policy CP113 The collection of samples, prescriptions, collection and transfusion of blood and blood products.	Core 1 Communication	Level 3	a,b,c,d,e,f			
Practitioner is aware of the correct procedure involved when labelling venous samples for transfusion in line with Trust policy and the Blood Safety and Quality Regulations (2005).	Core 1 Communication	Level 3	a,b,c,d,e,f			
Practitioner is aware of the different blood products available for transfusion.	Core 1 Communication	Level 3	a,b,c,d,e,f			

Clinical Competency	KSF Dimension	KSF Level	KSF Indicator	Date achieved	Signature Practitioner	Signature Supervisor
<p>Practitioner has a basic understanding of blood product results relating to transfusion triggers.</p> <p>Practitioner is aware of issues surrounding appropriate use of blood products.</p>	Core 1 Communication	Level 3	a,b,c,d,e,f			
<p>Practitioner has an understanding of red blood cell group compatibility and Rh-D antibody and the importance of the compatibility of blood products.</p>	<p>Core 1 Communication</p> <p>Core 3 Health, safety and security</p>	<p>Level 3</p> <p>Level 2</p>	<p>a,b,c,d,e,f</p> <p>a</p>			
<p>Practitioner understands and can discuss the legal implications regarding the temperature control of blood products, the distribution processes and storage facilities.</p>	Core 1 Communication	Level 3	a,b,c,d,e,f			
<p>Practitioner is aware of where the blood bank fridges are across the Trust.</p>	Core 1 Communication	Level 3	a,b,c,d,e,f			
<p>Practitioner can demonstrate the processes involved in safely collecting red blood cells from the blood fridges and how to take appropriate action if there is not an exact match between the patient details and the blood products and documentation.</p>	Core 1 Communication	Level 3	a,b,c,d,e,f			

Clinical Competency	KSF Dimension	KSF Level	KSF Indicator	Date achieved	Signature Practitioner	Signature Supervisor
Practitioner understands the requirement for emergency O Rh D negative blood and the processes involved in its collection, replenishment and traceability.	Core 1 Communication	Level 3	a,b,c,d,e,f			
Practitioner is aware of the procedure to safely return red blood cells to the blood bank fridge and the legal implications involved in this process.	Core 1 Communication	Level 3	a,b,c,d,e,f			
Practitioner is aware of the procedure to safely return any blood products to the laboratory.	Core 1 Communication	Level 3	a,b,c,d,e,f			
Practitioner can demonstrate the processes involved in the checking the patient's details and the blood product within the clinical area.	Core 1 Communication	Level 3	a,b,c,d,e,f			
Practitioner can demonstrate their responsibility of performing and documenting observations surrounding transfusions.	Core 1 Communication	Level 3	a,b,c,d,e,f			
Practitioner is aware of the minimum legal requirements surrounding observations throughout the transfusion process.	HWB 7	Level 2	d,e,f			
Practitioner can demonstrate the use of standard precautions for infection control and any other health and safety issues.	Core 3 Health, safety and security	Level 2	a,c,d			

Clinical Competency	KSF Dimension	KSF Level	KSF Indicator	Date achieved	Signature Practitioner	Signature Supervisor
Practitioner can demonstrate their knowledge and minimum requirement of documentation surrounding each episode of transfusion. Practitioner can demonstrate their knowledge surrounding the traceability of blood products following a transfusion.	Core 1 Communication HWB 7	Level 3 Level 2	a,b,c,d,e,f d			
Practitioner has underpinning knowledge of the hazards of transfusion and what signs and symptoms they should be observing for.	Core 1 Communication HWB 7	Level 3 Level 2	a,b,c,d,e,f e			
Practitioner can safely dispose of the blood bag and other equipment used in the transfusion process.	Core 1 Communication Core 3 Health and safety and security	Level 3 Level 2	a,b,c,d,e,f c			
Practitioner can discuss the processes involved in managing and reporting transfusion reactions.	Core 1 Communication HBW 7	Level 3 Level 2	a,b,c,d,e,f g			
Practitioner has awareness of the patient's right to refuse blood products and the processes involved to support these patients.	Core 1 Communication HWB 7	Level 3 Level 2	a,b,c,d,e,f b			

Competency Assessment Log

Date of commencement		
Date of initial meeting		
Date of observational assessment 1		
Date of observational assessment 2		
Date of observational assessment 3		
Has competency been achieved?	Yes	No

Form of update undertaken

1. Formal teaching session
2. Update news letter
3. Competency assessment

If competency has not been achieved please refer to the incompetence pathway;

Clinical manager informed	Date:	
Action Plan	Further training requirements and recommendations	Further training given
Date:		
Has competency been achieved?	Yes	No

If competency has not been achieved after re-assessment opportunity has occurred the clinical manager must inform the Transfusion Practitioners

Transfusion Practitioners informed		Date:
Action Plan	Further training requirements and recommendations	Further training given
Date:		
Has competency been achieved?	Yes	No

If competency has not been achieved on a third occasion the Transfusion Practitioners must inform the clinical manager for possible referral to Pay Progression using Gateways Policy (CP240) or Loss of Competence/Capability Policy Procedure (CP250)

Transfusion Practitioners inform Clinical Manager	Date:
Any further comments;	

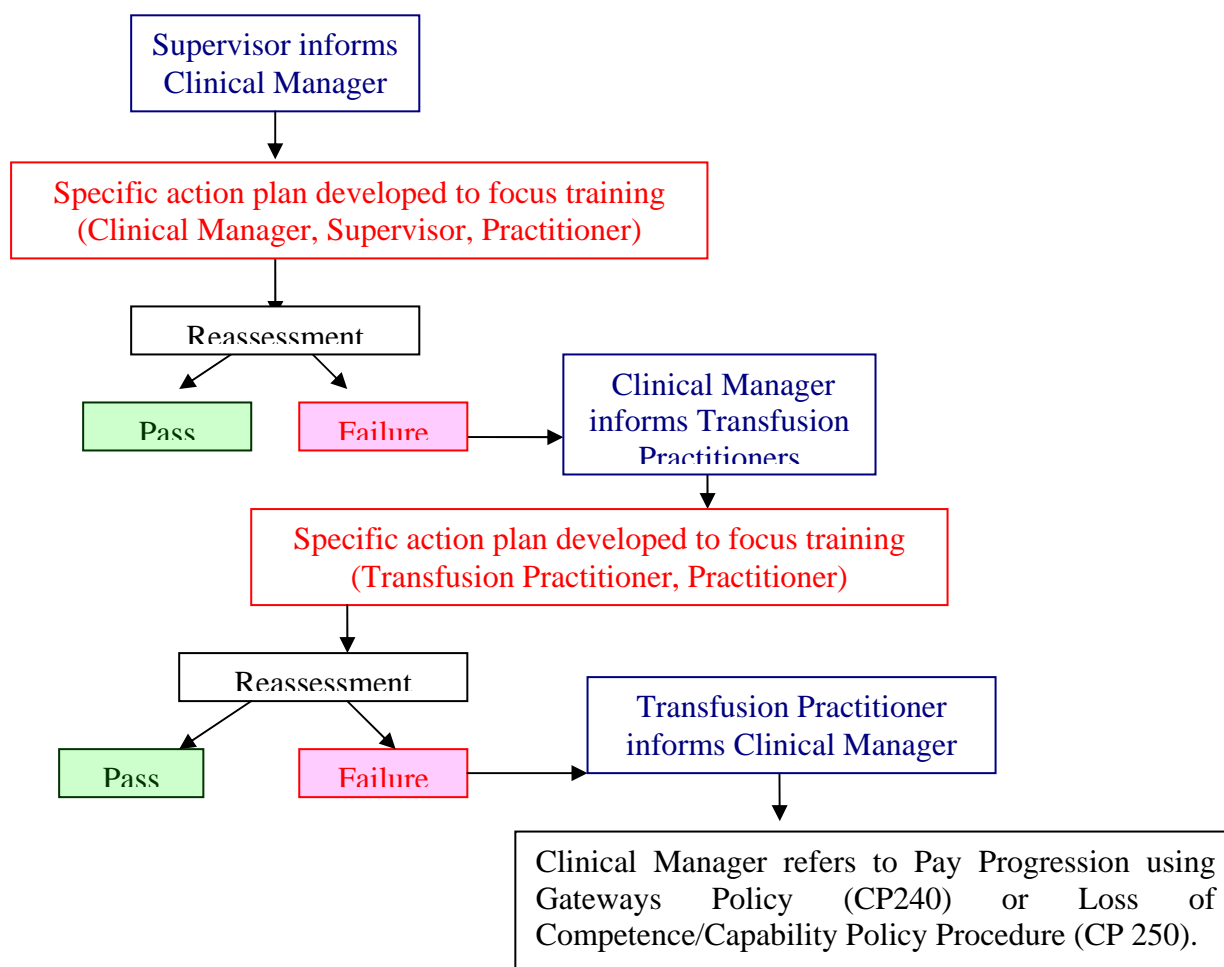
The aims of transfusion competency assessment are to demonstrate the Practitioner can undertake the skill; in that they have the underpinning knowledge and can follow the correct procedure. The Practitioner is deemed competent upon completion of the theoretical / formal training and completion of all the required competencies (linked to Knowledge Skills Framework) on 3 separate occasions. However in the event of failure to adequately complete the required competencies the following procedure should be undertaken.

If the Practitioner fails to achieve the full competencies on 3 separate occasions despite further support and reflection with Supervisor, Clinical Manager and peers, then the Supervisor must inform the Clinical Manager. The Supervisor should identify problem areas to the Practitioner and Clinical Manager, to enable the development of a specific action plan to focus training.

Following an agreed length of time the Practitioner should undergo the assessment process again. If the Practitioner fails to complete the assessment again, then further training and support will be provided by the Transfusion Practitioners.

If the Practitioner continues to fail repeated transfusion competency assessment, then the Clinical Manager must be informed by the Transfusion Practitioners and they must be managed by the Clinical Manager in relation Pay Progression using Gateways Policy (CP240) and if necessary the Loss of Competence/Capability Policy Procedure (CP 250).

Summary of action of failure to complete transfusion competencies



Competency Update Log

Date of update	Form of update undertaken	Name of update supervisor

Form of update undertaken

4. Formal teaching session
5. Update news letter
6. Competency assessment

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Please ensure this entry form for the Transfusion Competency Database is completed, removed from the pack and returned to the Transfusion Practitioners.

Name of Practitioner		Date of competency assessment:
Name of Supervisor		Clinical Area:

Please accept this form as confirmation of competency assessment within the processes involved with safe and appropriate use of blood and blood products in line with Trust policy and the Blood Safety and Quality Regulations (2005).

Signature of Supervisor:

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Please forward this form to;

The Transfusion Practitioners
Pathology Building
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