

Title	Administration of Blood Products Competency Assessment.
Version No	4.0
Effective From	May 2019
Expiry date	May 2022
Author/Developed by	Transfusion Practitioners
Ratified By	Nursing and Midwifery Practice Development Group
Date Ratified	22 nd May 2019

1. Introduction

This competency assessment document offers a framework for best practice when administering blood and blood products to patients. This document will enable a unified approach to administration of blood products throughout the Trust following Trust policy.

2. Guideline Scope

All Trust staff are governed by their Code of Professional Conduct and Trust Policies and Procedures.

The following personnel may undertake this training after discussion with their line manager: Registered Nurses, Midwives, Medical Practitioners, Perfusionists and Operating Department Practitioners.

3. Aim

The aim of the competency assessment document is to ensure an individual's clinical competence when administering blood and blood products and to ensure standards are consistent across the Trust.

4. Prerequisites to competency assessment

- All staff must have successfully completed the 3-yearly mandatory Blood Transfusion Administration e-learning package and have read and understood the Trust's [Administration of Blood Components Procedure](#).
- Prior to competency assessment it is recommended individuals should have performed a number of observed/supervised practices of the procedure and feel confident to undergo assessment.

5. Duties, roles and responsibilities

Trainee

- Registered Nurses, Midwives, Medical Practitioners, Perfusionists and Operating Department Practitioners.
- Trainees must have observed the practice of administration of blood products in the clinical area and feel confident to be competency assessed.
- Once deemed competent, it is the practitioner's responsibility to maintain knowledge, skills and competence. Subsequent assessment may be required if there has been a change in personal circumstances eg. A gap in practice or if concerns are raised regarding competence.
- 3-Yearly online mandatory elearning training must be completed to maintain knowledge of the process.

Assessor

- The assessor must be either a Transfusion Practitioner who is deemed expert in the area or a cascade trainer who has already been deemed competent in the practice by the Transfusion Practitioners.
- The cascade trainers must have completed a Blood Transfusion Cascade Training Programme and keep up to date with their own training and competencies in order to assess others.

6. Competency assessment tool

- See attached.
- If any concerns are raised regarding competence, the individual will be subject to retraining and repeating of competency assessment.

7. References

- The Newcastle upon Tyne Hospitals NHS Foundation Trust (2018) [Administration of Blood Components Procedure](#). Version 9.0
- BSH(2017)The Administration of Blood Components: a British Society for Haematology Guideline. Available at:[Administration of Blood Components | British Society for Haematology](#)
- Bolton Maggs, P.H.B(Ed), Poles, D. et al on behalf of the Serious Hazards of Transfusion (SHOT) Steering Group (2016). The 2016 Annual SHOT Report.
- National Patient Safety Agency (2006). Right Patient, Right Blood. Available at: <http://www.nrls.npsa.nhs.uk/resources/collections/right-patient-right-blood>
- National Blood Transfusion Committee (2016a) Indication Codes for Transfusion – An Audit Tool. <http://www.transfusionguidelines.org.uk/uk-transfusion-committees/national-blood-transfusion-committee/responses-and-recommendations>
- National Blood Transfusion Committee (2016b) Requirements for Training and Assessment in Blood Transfusion. <http://www.transfusionguidelines.org.uk/document-library/documents/nbtc-requirements-for-training-and-assessment-final>
- The Blood Safety and Quality Regulations 2005. Available at: <http://www.legislation.gov.uk/uksi/2005/50/schedule/part/4/made>

Clinical Competency Assessment Tool:

Administration of Blood Products Competence.

Staff member: _____ Designation: _____ Payroll No: _____

Assessor: _____ Designation: _____

Performance	Date achieved	Action Plan
<p>Pre-Collection of Blood Components</p> <ol style="list-style-type: none"> 1. Ensures the Blood Component has been authorised for the patient by a practitioner competent in the authorisation of Blood Components. 2. Checks Informed consent has been obtained and is recorded. 3. Checks for any special requirements for the patient, including any specific infusion rates and pre-medication requirements. 4. Ensures the patient has a Patient identification wristband attached and that the details on the band are correct for the patient. 5. Ensures the patient has patent venous access or available line space and venous cannulation documentation is complete. 6. Ensures a full set of baseline observations has been performed and documented prior to the blood component being collected from the laboratory. 7. Arranges collection of the blood component from the laboratory issue fridge. 		
<p>Receipt of Blood Components from Portering Staff</p> <ol style="list-style-type: none"> 8. Ensures the patient's details on the porter's collection slip match the details on the laboratory generated label attached to component. 9. Completes Porters collection slip. 10. Places blood component back into the transport box until ready to commence transfusion (within 30 minutes). 11. Understands correct use of satellite fridge and the documentation required if applicable to their area of work. 		
<p>Retrieving Blood Components from Satellite Fridge</p> <ol style="list-style-type: none"> 12. Ensure the patient details and blood component details on the satellite fridge register match the patient details and blood component details on the laboratory generated label attached to component. 13. Completes the satellite fridge register correctly. 14. Takes the blood component straight to the patient's bedside ready to be administered. 		
<p>Pre-Administration Checks</p> <ol style="list-style-type: none"> 15. Performs positive identification of the Patient <u>All checks must be performed at bedside.</u> 16. Performs Blood Component Check <u>All checks must be performed at bedside.</u> <ol style="list-style-type: none"> a. The donation number, blood group and expiry date on the component pack label must match the laboratory generated 		

<p>label attached to component and the component blood group must be compatible with the patient blood group.</p> <p>b. Check that any additional clinical requirements have been met e.g. irradiated or CMV screened negative.</p> <p>c. Inspect the blood component bag for any signs of leakage or damage. Inspect for unusual colour or clumping.</p>		
<p>Documentation</p> <p>17. Correctly completes all relevant documentation in the patient's records.</p> <p>18. Returns the tear off 'receipt portion' of the blood component label to the laboratory.</p>		
<p>Administration</p> <p>19. Selects appropriate ANTT throughout the procedure.</p> <p>20. Selects the appropriate giving set. Sets up the infusion correctly.</p>		
<p>Monitoring of a Patient during Transfusion</p> <p>21. Performs required minimum observations during/after transfusion.</p> <p>22. Carries out visual monitoring of the patient.</p>		
<p>Post Transfusion</p> <p>23. Correct removal and disposal of equipment including blood component bag.</p> <p>24. Observe patient post transfusion.</p> <p>25. Performs appropriate checks to identify whether or not the transfusion achieved the desired effect.</p>		

	Date achieved	Action Plan
Knowledge		
26. Able to identify correct transfusion times for each product.		
27. Aware of the importance of informed consent for transfusion.		
28. Understands the importance of transfusing correct components with the correct special requirements.		
29. Understands the potential risk of transfusion reaction including signs and symptoms, and course of action. Also aware that transfusion reactions can occur many hours after transfusion completed.		
30. Understands the importance of full traceability of all components.		
31. Aware of minimum required observations and knows that the baseline observations can be performed up to 60 minutes prior to transfusion starting and should be performed prior to collection of components where possible.		
32. Understands the transfusion must commence within 30 minutes of the component leaving the blood transfusion fridge and the importance of returning the component within 30 minutes if there is any delay.		
33. Aware of the Transfusion Care pathway document as the correct		

documentation for recording transfusion in patients medical records.		
34. Understands the requirement for details of any transfusion having taken place being included in patients discharge summary for both the patient and their GP.		

Professional Approach	Date achieved	Action Plan
35. Maintains a professional approach throughout procedure.		
36. Maintains dignity and privacy of patient throughout procedure.		

Action Plan - to be used when further actions are required before competence can be achieved.		
No.	Action Agreed:	Review Date:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

<p>Referral to manager - to be used when an action plan has not resulted in competence being achieved and further action is necessary.</p> <p>Reason for referral:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

Signatures to confirm that full competence is achieved:

Staff member: _____ Date: _____

Assessor: _____ Date: _____