

The Newcastle Upon Tyne Hospitals NHS Foundation Trust

Title	Obtaining Blood Samples for Blood Transfusion Competency Assessment.
Version No	3.0
Effective From	February 2016
Expiry date	February 2018
Author/Developed by	Transfusion Practitioners
Ratified By	Nursing and Midwifery Practice Development Group
Date Ratified	February 2016

1. Introduction

This competence assessment document offers a framework for best practice when obtaining a blood sample for blood transfusion. This document will enable a unified approach to obtaining a blood sample for the purpose of blood transfusion 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, Phlebotomists, Operating Department Practitioners, Nursing Assistant Practitioners and Healthcare Assistants.

3. Aim

The aim of the competency document is to ensure an individual's clinical competence when obtaining blood samples for transfusion and to ensure standards are consistent across the Trust.

4. Pre requisites to competency assessment

- All staff must have successfully completed the yearly mandatory Blood Transfusion Specimen Taking e-learning package and have knowledge of the Trust Sample Acceptance and Rejection, Patient Identification and Patient Identification - Establishment and Confirmation Prior to Investigative Testing and Treatment policies.
- All staff must have completed the Trust venepuncture training programme and/or training in taking a sample from an established line.
- Staff must undertake a 3 yearly competency assessment.
- A record of all training & competency assessment will be held by the Trust education department.
- An action plan must be developed and regularly reviewed if competency assessment is not achieved.

5. Duties roles and responsibilities

Trainee

- Registered Nurses, Midwives, Medical Practitioners, Phlebotomists, Operating Department Practitioners, Nursing Assistant Practitioners and Healthcare Assistants.
- Trainees must have completed the Trust venepuncture training programme and/or training in taking a sample from an established line. Trainee must feel confident to be competency assessed for obtaining samples for blood transfusion.
- Once deemed competent it is the practitioner's responsibility to maintain knowledge, skills and competence.
- Yearly online mandatory training and 3 yearly competency assessment is required.

Assessor

- The assessor must be either one of the Transfusion Practitioners who are 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 keep up to date with their own training and competencies in order to assess others.

6. Competency assessment tool

- The competency assessment is valid for 3 years following assessment.
- 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 (2015) [Sample Acceptance and Rejection Policy](#). Version 3.7

The Newcastle upon Tyne Hospitals NHS Foundation Trust (2013) [Patient Identification Policy](#). Version 9.0

The Newcastle upon Tyne Hospitals NHS Foundation Trust (2013) [Patient Identification-Establishment and Confirmation Prior to Investigative Testing and Treatment](#). Version 1.0

BCSH(2009) *Guideline on the Administration of Blood Components*. Available at: http://www.bcshguidelines.com/documents/Admin_blood_components_bcsh_05012010.pdf

Bolton Maggs, P.H.B(Ed), Poles, D. et al on behalf of the Serious Hazards of Transfusion (SHOT) Steering Group (2015). [The 2014 Annual SHOT Report](#).

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

Obtaining Blood Samples for Blood Transfusion Competency Assessment.

Staff member: _____ Designation: _____ PIN: _____

Assessor: _____ Designation: _____

Performance	Date achieved	Action Plan
<p>1. Collect and complete the relevant sample request form with as much information as possible and take this to the patient's bedside.</p>		
<p>2. Identify the patient:</p> <ul style="list-style-type: none"> ○ CONSCIOUS PATIENT - Ask patient to state their first name, surname and date of birth. Crosscheck this information with the sample request form. Confirm the patient's unique identification number with the patient's wristband or notes at the patient's bedside. ○ UNCONSCIOUS PATIENT – If possible ask family member to state first name, surname and date of birth. Otherwise check the patient's details on the wristband. Crosscheck this information with the sample request form. 		
<p>3. Confirm with the patient that they are happy for the blood sample to be taken and ensure the patient has been given an 'About Blood Transfusion' information leaflet outlining the risks and benefits of transfusion. This should be given and documented in notes when the initial Group and Screen sample is taken.</p>		
<p>4. When patients are admitted in an emergency situation and are unidentified they will be issued with an MRN and the request form and sample can be labelled using the following identifiers:</p> <ul style="list-style-type: none"> ● Surname (MRN) ● Forename (Male, Female or Unknown) ● MRN ● Default Date of Birth 		
<p>5. Take the sample in line with Trust policy and ANTT procedures.</p>		
<p>6. Complete the sample tube by hand (no labels on the sample tube). This must be done at the patient's bedside, where possible asking the patient to once again confirm their full name and date of birth and crosschecking with wristband and patient notes.</p>		

7. Complete the request form with the date and time of sampling and sign the declaration to confirm you positively identified the patient at the time of sampling. A contact number should also be provided on the request form so any problems can be rectified quickly.		
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Knowledge	Date achieved	Action Plan
8. Understands the importance of positively identifying the patient and is aware of the potential dangers of not doing this.		
9. Understands the requirement for consent at all stages of the transfusion process and the importance of giving and documenting that they have given the patient information leaflet.		
10. Fully understands the risk of pre-labelling samples and is aware that under no circumstances should this be done.		

Professional Approach	Date achieved	Action Plan
11. Maintains a professional approach throughout procedure		
12. 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:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Referral to manager - to be used when an action plan has not resulted in competence being achieved and further action is necessary.

Reason for referral:

Signatures to confirm that full competence is achieved:

Staff member: _____

Date: _____

Assessor: _____

Date: _____