

Title	Blood Transfusion – Sampling for Blood Transfusion - Competency Assessment.
Version No	5.0
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Author/Developed by	Transfusion Practitioner Team
Ratified By	Nursing, Midwifery & AHP Practice Development Group
Date Ratified	September 2024

1. Introduction

This competency assessment document offers a framework for best practice when obtaining a blood sample for transfusion. Positive patient identification is of the upmost importance when taking samples for transfusion, as the consequences of a wrong blood in tube could be fatal. Between 2016 & 2023 across the UK, there were 31 incompatible ABO transfusions reported to Serious Hazards of Transfusion (SHOT) and 2390 near misses; the majority of these being wrong blood in tube incidents. 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. Competency Scope

This competency document applies to registered nurses, midwives, medical practitioners, nursing associates, assistant practitioners, phlebotomists, operating department practitioners and healthcare assistants working within The Newcastle upon Tyne Hospitals NHS Foundation Trust who are involved in transfusion sampling. This document does not cover the competency assessment of learners whose programme of study is managed by an external organisation (e.g. student nurse, midwife etc)

3. Aim

The aim of this competency document is to ensure a consistent high standard in the assessment of competence in relation to sampling for blood transfusion within The Newcastle upon Tyne Hospitals NHS Foundation Trust.

4. Prerequisites to competency assessment

All staff should:

- Complete 3-yearly mandatory Blood Transfusion eLearning ([Blood Transfusion: Essential Transfusion Practice & Blood Transfusion: Consent](#))
- Have knowledge of the Trust's Blood Transfusion Policy and the Trust's Patient Identification Policy.
- Complete the Trust venepuncture and/or the Trust blood sampling from an established line training and competency assessments.
- Hold a valid ANTT competency assessment.
- Have read the Trust sample acceptance and rejection policy.

5. Duties, roles and responsibilities

Trainee

- Registered nurses, midwives, medical practitioners, phlebotomists, operating department practitioners and healthcare assistants.
- Should have completed the Trust venepuncture and/or the Trust sampling from an established line training and competency assessments and 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. Subsequent assessment may be required if there has been a change in personal circumstances e.g. a gap in practice or if concerns are raised regarding competence.
- 3-Yearly mandatory eLearning training should be completed to maintain knowledge of the process.

Assessor

- The assessor should 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 Practitioner Team.
- 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.

Prior to formal competency assessment it is recommended that trainees perform multiple supervised procedures, which may be documented on the supervised practice record. There is no minimum or maximum number of times the trainee should carry out a skill under supervision before being deemed as competent. This will depend on their individual needs and the nature of the skill. An action plan should be developed if they are unable to achieve the competency.

6. Competency assessment tool

See page 4

7. References

NuTH. Blood Transfusion Policy 2024.

Robinson, S. et al (2017) 'The administration of blood components: a British Society for Haematology Guideline', *Transfusion Medicine*, 28 (1), pp.3-21. Available at: <https://onlinelibrary.wiley.com/doi/10.1111/tme.12481> (Accessed: 27 August 2024).

Clinical Competency Assessment Tool

Sampling for Blood Transfusion Competence

Staff member: _____ (print) Designation: _____ Payroll Number: _____

Assessor: _____ (print) Designation: _____ Payroll Number: _____

Performance	Date achieved	Action Plan
1. Correctly identifies the patient		
2. Explains procedure to patient or patients advocate and all questions answered		
3. Confirms the patient has given informed consent or best interest decision made and documented in patient record		
4. Appropriate hand hygiene throughout procedure in accordance with Trust policy		
5. Dons and doffs appropriate Personal Protective Equipment		
6. Correctly orders the sample via the electronic patient record prior to collecting the sample		
7. Confirms patient identity via the handheld scanner in addition to previous checks		
8. Takes blood sample as per Trust policy		
9. Labels sample tube with the BloodTrack Tx equipment label at the patient's bedside		
10. Correctly packages sample for transport to lab		

Knowledge	Date achieved	Action Plan
11. Understands which sample is required		
12. Explains the importance of positive patient identification and that using an electronic system does not negate the requirement for Practitioner checks and confirmation		
13. Explains the importance of bedside labelling and is aware of the potential risks of not adhering to this		
14. Discusses the requirement for informed consent for blood transfusion and is aware of the patient information leaflet given		

15. Discusses the implications of the mental capacity act and the importance and legal requirement of obtaining consent		
16. Explains the correct order of draw and inversion criteria for sample taking		
17. Understands the backup procedures to follow in the event of IT downtime or medical device failure: a. Completed sample request form b. Sample tube must be handwritten at the bedside c. Understands the declaration on the request form must be signed by the person taking the sample to confirm that they have positively identified the patient at the time of sampling d. Understands the importance of report device failures via the IT service desk		

	Date achieved	Action Plan
Professional Approach		
18. Maintains patient privacy and dignity at all times		
19. Maintains a professional approach at all times		
20. Works within sphere of competence and escalates anything out with this sphere		

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: _____

Printed Name and Signature of Assessor: _____ Date: _____

Appendix 1

Supervised Practice Record

There is no maximum or minimum requirement for supervised practices, competency assessment should be undertaken when the practitioner and assessor feel confident in the practitioner's ability.

No. of Practices	Date	Supervisors Name Print/Signature & Designation	Trainee Name Print/Signature & Designation	Comments
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

