Conclude the collection of blood or blood component donations and support, advise and monitor donors following donation procedures



Overview

This standard covers concluding blood, or blood component donation, monitoring donors following the donation process and providing post-donation advice and support. It applies to both whole blood automated collection/apheresis donations, from a range of donors at all types of sessions.

Users of this standard will need to ensure that practice reflects up to date information and policies.

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Performance criteria

You must be able to:

- P1 apply standard precautions for infection prevention and control any other relevant health and safety measures
- P2 conclude the donation procedure correctly and at the appropriate time
- P3 remove, and clean or dispose of all equipment and materials from the donor safely and correctly
- P4 treat the needle site (venous access site) correctly in line with organisational procedure and give the donor clear and accurate instructions on how to care for the site
- P5 identify any sign of adverse reaction/event promptly and take action appropriate to the donor's condition without delay
- P6 verify that the donation samples and records correspond prior to transport for storage, and report any discrepancies to the appropriate person
- P7 give the donor clear and accurate advice on:
 - P7.1 the need for rest and refreshment
 - P7.2 activities which should be avoided following donation,
 - P7.3 the possible consequences of those activities,
 - P7.4 how they can recognise delayed reaction to donation,
 - P7.5 what to do if a delayed reaction occurs
- P8 respond to questions or concerns from the donor clearly and concisely and in an appropriate manner, which promotes confidence in the team
- P9 refer any questions or concerns to the appropriate person if they are beyond your responsibility
- P10 monitor the length of the donor's rest period accurately
- P11 take prompt and appropriate action if any sign of adverse reaction/event is identified in the donor's condition
- P12 refer issues where the unwell donor refuses to rest or to take refreshment to an appropriate member of the team immediately
- P13 ensure that where the donor requires transport or escort, suitable arrangements are made in accordance with organisational policy
- P14 document all relevant information clearly, accurately and correctly in the appropriate records

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Knowledge and understanding

You need to know and understand:

- K1 the current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to concluding the collection of blood or blood component donations
- K2 your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance
- K3 the duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer
- K4 the importance of working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence
- K5 the importance of applying standard precautions to concluding the collection of blood or blood component donations and supporting, advising and monitoring donors following donation procedures
- K6 how to clean instruments, equipment, machines and blood spills and splashes effectively
- K7 what is hazardous and non-hazardous waste and how to dispose of each
- K8 the importance of checking that the identification labels and numbers on packs, donor records and sample tubes match - and what to do if discrepancies are found
- K9 the importance of checking and recording batch numbers and expiry dates
- K10 the extent of the action which you may take, including the information which you may give
- K11 the type of reassurance and emotional support donors may need following donation of blood or blood components - and the importance of giving support which is appropriate to the individual donor's needs and wishes
- K12 the common concerns which donors may have following donation and appropriate responses (verbal and non-verbal)
- K13 why donors need to rest, eat and drink after giving blood or blood components and the possible consequences of them not doing so
- K14 how long donors should rest for and what food and drink they should have immediately after giving blood or blood components
- K15 what donors should be advised to do and not do over a longer period following donation and why
- K16 why it is important to give post-donation information and advice clearly and to check donors' understanding

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- K17 the types and impact of adverse reactions/events or other problems with donations may have donor following donation
- K18 why anticoagulant is added to donations
- K19 the instruments and equipment that may be reused and which should be discarded
- K20 the volume of blood or blood components which may be collected and the amount of time which can safely be allowed to collect them
- K21 how to collect blood samples in line with organisational procedure, and the importance of mixing samples
- K22 how and when to conclude the donation process what needs to be done and in what order
- K23 how to treat the venous access site following donation -including what information to give the donor about caring for their site
- K24 the importance of monitoring the donor following donation and what aspects you need to monitor
- K25 why it is important to avoid damaging donation packs and samples
- K26 how to arrange transport and escort for donors, if necessary
- K27 what information needs to be recorded in relation to donors and donations and where and how this should be done
- K28 the importance of keeping accurate and up to date records
- K29 the importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff

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Additional Information

External Links

This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB7 Interventions and treatments

The candidate and assessor must only sign below when all Performance Criteria and Knowledge points have been met.

Unit assessed as being complete

Candidate's Name	e:		
Candidate's Sign	ature:		
Date submitted to assessor as com			
Assessor's Name:			
Assessor's Signature:			
Date assessed as	complete	:	
Internal Verification — to be completed in accordance with centre's IV strategy			
Evidence for this Unit was sampled on the following date/s:		IV's Signature	IV's Name
date/s:			
This Unit has been subject to an admin check in keeping with the centre's IV strategy.			
Date of admin che	eck IV	's Signature	IV's Name
Unit completion confirmed			
IV's Name:			
IV's Signature:			
Date complete:			