SFHBDS7 - SQA Code HD1Y 04
Register donors at donation sessions

Overview

This standard is designed for you if your work involves the registration of donors. The standard applies to both whole blood and blood component collection, to all types of donor session and a range of donors in relation to the donation, the registration of donor attendance and the checking process that has taken place.

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

SFHBDS7 - SQA Code HD1Y 04

Register donors at donation sessions

Performance criteria

You must be able to:

P1 obtain information, when required, in a way which encourages the donor to provide full answers, including positive identification and donor status

P2 check the information given by the donor against existing records and identify any discrepancies, seek further details and clarification if the information obtained does not match existing records

P3 answer any questions from the donor correctly and in an appropriate manner or refer to the appropriate person if this is beyond your own responsibility and knowledge

P4 maintain confidentiality of information

P5 check the donor's understanding of the information given and use alternative approaches and methods if possible, taking into account the donor's individual needs

P6 document all relevant information clearly, accurately and correctly in the appropriate donor's records

P7 give the donor clear information on the donation procedure appropriate to their individual needs and concerns including the next stage in the process

SFHBDS7 - SQA Code HD1Y 04

Register donors at donation sessions

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 registering donors at donation sessions

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 proper registration

K6 how to apply the principles of good manufacturing practice

K7 how quality incidents are prevented, identified, reported and recorded

K8 the differences between new, newly enrolled, returning/lapsed, regular/established, autologous, appointment, non-appointment donors and how this affects the amount, type and requirement of information which is sought from them

K9 how different record systems impact on when, how and if registration is undertaken

K10 the differences between long term donor records and short term session documents and how each is created, accessed, checked and updated

K11 how to produce data summaries of session outcomes if they are required

K12 the full management of information process and how registration fits into that process

K13 why it is essential that positive identification is completed and the importance of reporting discrepancies

K14 how to deal with breakdowns in information systems, who to report to and the limits of your own sphere of competence to deal with these

K15 safe techniques for moving and handling

SFHBDS7 - SQA Code HD1Y 04

Register donors at donation sessions

Additional Information

External Links

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

Dimension: IK1 Information processing

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:	
Candidate's Signature:	
Date submitted to assessor as complete:	

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**

This Unit has been subject to an admin check in keeping with the centre's IV strategy.

Date of admin check	**IV's Signature**	**IV's Name**

Unit completion confirmed

IV's Name:	
IV's Signature:	
Date complete:	