

## SFHCHS30 - SQA Code HC7G 04

Obtain and maintain vascular access for, and cease access following, haemodialysis therapy



---

### Overview

This standard covers obtaining and maintaining vascular access for haemodialysis therapy where this is accepted as appropriate according to the individual's condition and your employer's guidelines on this function.

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

## SFHCHS30 - SQA Code HC7G 04

### Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

---

#### Performance criteria

- You must be able to:*
- P1 apply standard precautions for infection prevention and control and other relevant health and safety measures
  - P2 confirm the individual's identity and confirm the planned action
  - P3 give the individual relevant information, support and reassurance in a manner which is sensitive to their needs and concerns
  - P4 gain valid consent to carry out the planned activity
  - P5 identify potential sites and types of vascular access correctly (if there is more than one) with the appropriate member of the care team, and assess using the relevant criteria and protocols which site is the most appropriate to use
  - P6 recognise any problems with the vascular access and report them immediately to the appropriate member of the care team
  - P7 prepare and clean the vascular access site effectively according to the plan of care and agreed protocols
  - P8 insert the appropriate size and type of cannula(e) if cannulation is required, and secure them safely and correctly and in a manner which aims to cause minimum discomfort to the individual and to maximise the continuing viability of the vascular access
  - P9 confirm effective blood flow, using the relevant criteria or protocols, before connecting the individual to the extra-corporeal circuit, taking appropriate action if the blood is not flowing effectively
  - P10 administer the prescribed anti-coagulant if this is required according to the prescription and protocols
  - P11 connect the cannula(e) or catheter and dialysis line according to protocol, correctly at the appropriate time in a manner likely to prevent infection
  - P12 recognise adverse reactions to, and problems with, the procedure promptly and take the appropriate action to resolve them according to the individual, the setting and the problem and/or refer them to an appropriate member of the care team according to protocols
  - P13 encourage individuals to recognise and report any unusual or unexpected change or feeling during therapy
  - P14 monitor the patency of the vascular access effectively during haemodialysis therapy and make appropriate adjustments to maintain the effective flow of blood
  - P15 recognise any problems with blood flow promptly and take action appropriate to the individual and the problem immediately
  - P16 confirm the administration of products to avoid blood coagulation has occurred as specified in the plan of care
  - P17 disconnect the cannula(e) or catheter and dialysis line(s) at the

## **SFHCHS30 - SQA Code HC7G 04**

Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

---

appropriate time and remove it in a manner which aims to cause minimum discomfort to the individual and maximise the continuing viability of the vascular access

P18 apply the appropriate dressing to the vascular access site according to the type of access and the plan of care

## SFHCHS30 - SQA Code HC7G 04

### Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

---

#### 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 obtaining and maintaining vascular access for, and ceasing access following haemodialysis therapy
- 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 the obtaining and maintaining of vascular access for, and ceasing access following, haemodialysis therapy and the potential consequences of poor practice
- K6 the structure of blood vessels
- K7 blood clotting processes and factors influencing blood clotting
- K8 how the individuals dignity might be compromised during access procedures and what measures to take to avoid this
- K9 how to provide support to individuals which is appropriate to their needs and concerns
- K10 the different types of vascular access and why different types of access are used for different individuals
- K11 what factors to consider when assessing and choosing the best site for cannulation, and why it is important to choose an appropriate site
- K12 the type and function of materials and equipment used to obtain, maintain and cease vascular access for haemodialysis
- K13 the particular requirements when dealing with new fistulas
- K14 the importance of having close and effective observation of the individual, the vascular access site and the dialysis machine monitors when connecting the needle and the dialysis line
- K15 why it is important to maintain the safety, placement, and patency of access during dialysis
- K16 what to look for when assessing venous catheters
- K17 the complications and problems may occur during cannulation and connection procedures, how you would recognise them and what action you would take
- K18 the types of problems that might occur in relation to blood flow and vascular access, how you would recognise them and what action you

## SFHCHS30 - SQA Code HC7G 04

### Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

---

- would take
- K19 how to prepare different types of vascular access sites
- K20 how to insert and secure cannulae for dialysis
- K21 the importance of effective blood flow, how you would check it and what action you may take if there is poor blood flow
- K22 how to monitor blood flow, what to look for in terms of the individuals condition, the dialysis machine monitors and the vascular access site
- K23 how patency of access during therapy is maintained
- K24 how to disconnect lines and remove cannulae
- K25 when and how to treat and dress vascular access sites
- K26 the information that needs to be recorded and/or reported regarding:
  - K26.1 obtaining and maintaining vascular access for haemodialysis therapy
  - K26.2 on cessation of vascular access
- K27 the importance of completing documentation clearly, legibly and accurately
- K28 the importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff

## **SFHCHS30 - SQA Code HC7G 04**

Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

---

### **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**

<b>Candidate's Name:</b>	
<b>Candidate's Signature:</b>	
<b>Date submitted to assessor as complete:</b>	

<b>Assessor's Name:</b>	
<b>Assessor's Signature:</b>	
<b>Date assessed as complete:</b>	

**Internal Verification —**

to be completed in accordance with centre's IV strategy

<b>Evidence for this Unit was sampled on the following date/s:</b>	<b>IV's Signature</b>	<b>IV's Name</b>

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

<b>Date of admin check</b>	<b>IV's Signature</b>	<b>IV's Name</b>

**Unit completion confirmed**

<b>IV's Name:</b>	
<b>IV's Signature:</b>	
<b>Date complete:</b>	