**DP0D 04 (PCS14) Prepare surgical instrumentation and supplementary items for the surgical team**

## About this Unit

This standard covers the preparation of surgical instrumentation and supplementary items for the surgical team. This includes the preparation of the sterile trolley, surgical instruments and supplementary equipment. You will be working in a 'scrubbed' role whilst undertaking these activities.

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

Your **knowledge and understanding** will be specifically related to legal requirements and codes of practice and conduct applicable to your job, and the NHS Knowledge and Skills Framework. This will relate to your work activities; the job you are doing, and the setting, eg in hospital and community, domiciliary, residential care, and the individuals you are working with.

**Values —** the values underpinning this Unit are embedded within the 2009 NHS Code of Conduct for Health Care Support Workers. These are stated in full within the Assessment Strategy and Guidance document for the awards.

**Key Words and Concepts —** a glossary of definitions, key words and concepts used in this Unit is contained in the Assessment Strategy and Guidance document.

In occupational standards it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. **You should read the Assessment Strategy and Guidance document before you begin working with the standards and refer to it if you are unsure about anything in the Unit.**

**DP0D 04 (PCS14) Prepare surgical instrumentation and supplementary items for the surgical team**

**Specific Evidence Requirements for the Unit**
**It is essential that you adhere to the Evidence Requirements for this Unit**

| **SPECIFIC EVIDENCE REQUIREMENTS FOR THIS UNIT** |
|---|
| **Simulation:** |
| ♦ Simulation is **NOT** permitted for any part of this Unit. |
| ♦ **The following forms of evidence ARE mandatory:** |
| ♦ **Direct Observation:** Your assessor or expert witness must observe you in real work activities. Their confirmation of your practice will provide evidence for a significant amount of the performance criteria in this Unit. **For example**, checking date controlled items and setting up surgical instrumentation. Your assessor may use a **checklist** to record this.<br>♦ **Professional discussion:** Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. **For example**, you could explain why it is important that surgical instruments used can be traced and the potential consequences of poor practice. |
| **Competence of performance and knowledge could also be demonstrated using a variety of evidence from the following:** |
| ♦ **Reflective Account:** These are written pieces of work which allow you to reflect on the course of action you took in a specific situation to identify any learning from the piece of work and to describe what you might do differently in the light of your new knowledge.<br>♦ **Questioning/professional discussion**: May be used to provide evidence of knowledge, legislation, policies and procedures which cannot be fully evidenced through direct observation or reflective accounts. In addition your assessor/mentor or expert witness may also ask questions to clarify aspects of your practice.<br>♦ **Expert Witness**: A designated expert witness, eg a senior member of staff, may provide a direct observation of your practice, or record a professional discussion they have held with you on a specific piece of practice.<br>♦ **Witness Testimony**: Can be a confirmation or authentication of the activities described in your evidence which your assessor or mentor has not seen.<br>♦ **Products:** These can be any record that you would normally use within your normal role, eg you should not put confidential records in your portfolio; they can remain where they are normally stored and be checked by your assessor and internal verifier.<br>♦ **Prior Learning:** You may be able to use recorded prior learning from a course of training you have attended within the last two years. Discussion on the relevance of this should form part of your assessment plan for each Unit.<br>♦ **Simulation:** There may be times when you have to demonstrate you are competent in a situation that does not arise naturally through your work role, eg dealing with violent or abusive behaviour. The Evidence Requirements in each Unit provide specific guidance regarding the use of simulation. |
| **GENERAL GUIDANCE** |
| ♦ Prior to commencing this Unit you should agree and complete an assessment plan with your assessor which details the assessment methods you will be using, and the tasks you will be undertaking to demonstrate your competence.<br>♦ Evidence must be provided for ALL of the performance criteria, ALL of the knowledge.<br>♦ The evidence must reflect the policies and procedures of your workplace and be linked to current legislation, values and the principles of best practice within the Health Care sector. This will include the National Service Standards for your areas of work.<br>♦ All evidence must relate to your own work practice. |

**DP0D 04 (PCS14) Prepare surgical instrumentation and supplementary items for the surgical team**

## KNOWLEDGE SPECIFICATION FOR THIS UNIT

Competent practice is a combination of the application of skills and knowledge informed by values and ethics. This specification details the knowledge and understanding required to carry out competent practice in the performance described in this Unit.

When using this specification **it is important to read the knowledge requirements in relation to expectations and requirements of your job role**.

**You need to provide evidence for ALL knowledge points listed below. There are a variety of ways this can be achieved so it is essential that you read the 'knowledge evidence' section of the Assessment Guidance.**

| | **You need to show that you know, understand and can apply in practice:** | **Enter Evidence Numbers** |
|---|---|---|
| 1 | 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 preparing surgical instrumentation and supplementary items for the surgical team. | |
| 2 | Your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and clinical/corporate governance. | |
| 3 | The duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer. | |
| 4 | The role of regulatory bodies in relation to medical and healthcare products and regulations relating to medical devices. | |
| 5 | The application of standard precautions to the preparation of medical devices and surgical instruments and the potential consequences of poor practice. | |
| 6 | The difference between scrubbed and circulating roles. | |
| 7 | The importance of working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence. | |
| 8 | The principles of asepsis in relation to the preparation of surgical instruments and supplementary items. | |
| 9 | The potential hazards associated with surgical instruments and supplementary items and how they can be avoided or minimised. | |
| 10 | The types, purpose and function of surgical instruments and supplementary items in common use in the clinical specialties relevant to your practice. | |
| 11 | The requirements for, and suitability of, surgical instruments and supplementary items for the clinical specialties relevant to your practice. | |
| 12 | The factors to consider in selecting surgical instruments and supplementary items for individual patients. | |
| 13 | The importance of adhering to manufacturers' instructions regarding the preparation of surgical instruments and supplementary items for surgery. | |

**DP0D 04 (PCS14) Prepare surgical instrumentation and supplementary items for the surgical team**

| You need to show that you know, understand and can apply in practice: | | Enter Evidence Numbers |
|---|---|---|
| 14 | The importance of checking and confirming that surgical instruments and supplementary items are in a suitable condition prior to use. | |
| 15 | Procedures for identifying and reporting problems in surgical instruments and supplementary items. | |
| 16 | The action to take if problems are identified with surgical instruments and supplementary items which have been requested. | |
| 17 | The types of procedure carried out in the clinical specialties relevant to your practice. | |
| 18 | The surgical instruments and supplementary items required by the surgical team for common procedures carried out in the clinical specialties relevant to your practice. | |
| 19 | Procedure(s) to be carried out if any item is identified as missing during preparation. | |
| 20 | The importance of following procedures for the tracking and traceability of surgical materials and instruments during preparation. | |
| 21 | The potential hazards associated with the preparation of surgical instruments and supplementary items and how they can be avoided or minimised. | |
| 22 | The potential consequences of poor practice in relation to the preparation of surgical instruments and supplementary items. | |
| 23 | The importance of checking and confirming that surgical instruments and supplementary items are in a suitable condition prior to use. | |
| 24 | The criteria and methods for checking the sterility of surgical instruments and supplementary items to be used. | |
| 25 | Ways in which the sterile field can be compromised by those working outside it, and how this can be avoided. | |
| 26 | The specific lines of accountability within the surgical team. | |
| 27 | Where and how to record information on the number and location of surgical instruments and supplementary items for used in clinical procedures. | |
| 28 | The importance of recording all information clearly and precisely in the correct documentation. | |
| 29 | The importance of reporting all information to the registered practitioner. | |
| 30 | The procedures for reporting adverse incidents and equipment failure. | |
| 31 | The importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff. | |

**DP0D 04 (PCS14) Prepare surgical instrumentation and supplementary items for the surgical team**

| Performance Criteria | DO | RA | EW | Q | P | WT | PD |
|---|---|---|---|---|---|---|---|
| 1 Apply standard precautions for infection prevention and control and other relevant health and safety measures. | | | | | | | |
| 2 Prepare and maintain sterile instrumentation and supplementary items in a designated preparation area to ensure asepsis. | | | | | | | |
| 3 Select and prepare the correct surgical instrumentation and supplementary items according to the clinical specialty, the anticipated requirements of the operative procedure, and the patient's individual needs. | | | | | | | |
| 4 Check date controlled items and confirm them as being within their expiry date. | | | | | | | |
| 5 Safely handle, move and check surgical instrumentation and supplementary items in line with manufacturers' instructions, confirming them as safe and functioning correctly before preparing them ready for use. | | | | | | | |
| 6 Take the appropriate action to remedy or report any faults where you find surgical instrumentation and supplementary items are faulty or unsafe during preparation. | | | | | | | |
| 7 Correctly set up surgical equipment in line with manufacturer's instructions, and to meet the needs of the operative procedure and the patients' plans of care. | | | | | | | |
| 8 Count and record instruments, needles, swabs and supplementary items in conjunction with a registered practitioner as the second authorised checker prior to commencing the case, in line with organisational policies and protocols. | | | | | | | |
| 9 Prepare the surgical trolley, positioning surgical instrumentation and supplementary items in a way which facilitates their access and use, according to the anticipated sequence of the operative procedure. | | | | | | | |

*DO = Direct Observation* *RA = Reflective Account* *Q = Questions*
*EW = Expert Witness* *P = Product (Work)* *WT = Witness Testimony*
*PD = Professional Discussion*

**DP0D 04 (PCS14) Prepare surgical instrumentation and supplementary items for the surgical team**

*To be completed by the candidate*
**I SUBMIT THIS AS A COMPLETE UNIT**

Candidate's name: ……

Candidate's signature: ……..

Date: ……..

*To be completed by the assessor*
*It is a shared responsibility of both the candidate and assessor to claim evidence, however, it is the responsibility of the assessor to ensure the accuracy/validity of each evidence claim and make the final decision.*

**I CERTIFY THAT SUFFICIENT EVIDENCE HAS BEEN PRODUCED TO MEET ALL THE ELEMENTS, PCS AND KNOWLEDGE OF THIS UNIT.**

Assessor's name: …….

Assessor's signature: …….

Date: ……..

**Assessor/Internal verifier feedback**

*To be completed by the internal verifier if applicable*
***This section only needs to be completed if the Unit is sampled by the internal verifier***

Internal verifier's name: ……

Internal verifier's signature: ……..

Date: ……..……..