

**F051 04 (CHS26) Carry out, and conclude, dialysis therapy for individuals with established access**

**About this Unit**

This standard covers initiating, carrying out and concluding dialysis therapy, both haemodialysis and Continuous Ambulatory Peritoneal Dialysis, for chronic, stable, dialysis individuals who have established access. The therapy can occur in a number of settings including the individual's home, hospital or any other care setting.

This standard is not intended to cover acute cases and does not include inserting, connecting, monitoring and disconnecting cannulae and catheters.

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.**

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**Specific Evidence Requirements for the Unit**

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

<b>SPECIFIC EVIDENCE REQUIREMENTS FOR THIS UNIT</b>
<b>Simulation:</b>
<ul style="list-style-type: none"> <li>◆ Simulation is <b>NOT</b> permitted for any part of this Unit.</li> </ul>
<ul style="list-style-type: none"> <li>◆ <b>The following forms of evidence ARE mandatory:</b></li> </ul>
<ul style="list-style-type: none"> <li>◆ <b>Direct Observation:</b> 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. <b>For example</b>, how you start dialysis correctly and safely according to the individuals care plan.</li> <li>◆ <b>Professional discussion:</b> Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. <b>For example</b>, discuss with your assessor/expert witness what you would do if an individual has an abnormal measurement and how this can affect the dialysis to be given.</li> </ul>
<b>Competence of performance and knowledge could also be demonstrated using a variety of evidence from the following:</b>
<ul style="list-style-type: none"> <li>◆ <b>Reflective Account:</b> 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.</li> <li>◆ <b>Questioning/professional discussion:</b> 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.</li> <li>◆ <b>Expert Witness:</b> 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.</li> <li>◆ <b>Witness Testimony:</b> Can be a confirmation or authentication of the activities described in your evidence which your assessor or mentor has not seen.</li> <li>◆ <b>Products:</b> 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.</li> <li>◆ <b>Prior Learning:</b> 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.</li> <li>◆ <b>Simulation:</b> 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.</li> </ul>
<b>GENERAL GUIDANCE</b>
<ul style="list-style-type: none"> <li>◆ 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.</li> <li>◆ Evidence must be provided for ALL of the performance criteria, ALL of the knowledge.</li> <li>◆ 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.</li> <li>◆ All evidence must relate to your own work practice.</li> </ul>

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**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.**

<b>You need to show that you know, understand and can apply in practice:</b>	<b>Enter Evidence Numbers</b>
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 carrying out and concluding dialysis therapy for individuals with established access.	
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 importance of applying standard precautions to carrying out and concluding dialysis therapy for individuals with established access and the potential consequences of poor practice.	
5 The importance of working within your own sphere of competence and seeking clinical advice when faced with situations outside your sphere of competence.	
6 The importance of applying standard precautions in all aspects of dialysis therapy and the potential consequences of poor practice.	
7 The normal anatomy of the kidney and physiology of blood filtration and urine formation.	
8 The principles of diffusion and osmosis in relation to dialysis.	
9 Fluid and electrolyte balance.	
10 The reasons for undertaking dialysis.	
11 The information contained within the plan of care.	
12 How to recognise contra-indications which mean that you should seek advice before continuing with preparation of individuals.	
13 The types of emotional and physical support which different individuals may need during, and following, dialysis.	
14 The types of change which may happen to individuals — both physical and emotional — and why it is important to recognise and report any changes.	
15 What information needs to be recorded and reported in relation to preparing individuals for dialysis.	

You need to show that you know, understand and can apply in practice:	Enter Evidence Numbers
16 What aspects of dialysis need to be monitored and adjusted?	
17 Which physiological measurements need to be measured at which stage(s) of dialysis, why it is important to take the relevant physiological measurements, and why they need to be recorded at the times specified in the plan of care.	
18 The range of results which would be expected for different individuals, what constitutes an abnormal result.	
19 Why unexpected or abnormal results should be reported immediately and how the measurements obtained can affect the therapy being undertaken.	
20 How individuals and their families could be involved in taking measurements and why it is important to encourage their involvement.	
21 The common adverse reactions to dialysis, how to recognise them and what action to take if they occur.	
22 The common concerns which individuals may have regarding dialysis and the way in which it affects their lives.	
23 The importance of timing for dialysis, and the reasons why the length of therapy may be altered in the plan of care.	
24 The nature and function of haemodialysis machines and related equipment, the different types of machine which are available and their advantages and disadvantages for different individuals' conditions and needs.	
25 The equipment used in peritoneal dialysis and how this method of dialysis works.	
26 The different types and sites of dialysis access which individuals may have and the advantages and disadvantages of each.	
27 The reasons why: (a) a safe, treated water supply is needed for haemodialysis (b) specific sterile fluids must be used for peritoneal dialysis	
28 How to check whether the machines and related dialysis equipment are functioning properly.	
29 Relevant procedures for reporting faults and other problems with equipment and materials.	
30 What parameters on haemodialysis machines have to be set according to each individual's care plan and methods of setting controls.	
31 The sorts of access problems which may occur, how to recognise them and what action to take.	
32 The techniques and equipment to use for taking the different physiological measurements.	
33 How to disconnect the individual from dialysis.	
34 How to clean and/or disinfect machines and equipment, including what materials and cleaning techniques to use.	
35 The information that needs to be recorded and/or reported during and following dialysis.	

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<b>You need to show that you know, understand and can apply in practice:</b>	<b>Enter Evidence Numbers</b>
36 The importance of completing documentation clearly, legibly and accurately.	
37 The importance of immediately reporting any issues which are outside your own.	

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	Check the individual's identity and confirm the planned activity.							
3	Give the individual relevant information, support and reassurance in a manner which is sensitive to their needs and concerns.							
4	Gain valid consent to carry out the planned activity.							
5	Confirm that dialysis equipment and material are: (a) appropriate to the procedure (b) fit for purpose							
6	Follow relevant procedures for reporting faults and any other problems.							
7	Initiate dialysis correctly and safely according to the individual's plan of care.							
8	Recognise any problems with the dialysis access site for dialysis promptly and take the appropriate action without delay.							
9	Monitor the progress of dialysis effectively and adjust the process correctly in accordance with the individual's plan of care.							
10	Take physiological measurements accurately using the correct technique and equipment at appropriate times according to the plan of care, and seek immediate advice if any change or unexpected occurrence in the physiological readings are observed.							
11	Interpret the measurements accurately, record them correctly using the required format and report them to the appropriate member of the care team.							
12	Inform an appropriate member of the care team without delay if you are unable to obtain the measurement in the specified way.							
13	Record any unexpected change in the individuals behaviour or condition or the equipment parameters accurately and report them to the appropriate person without delay.							

Performance Criteria		DO	RA	EW	Q	P	WT	PD
		14	Report any condition or behaviour which may signify an adverse reaction to dialysis without delay and take action appropriate to the individual's condition.					
15	Conclude the dialysis safely and correctly when specified in the plan of care.							
16	Disconnect the dialysis equipment from the individual safely and correctly, and in line with manufacturer's instructions and protocols.							
17	Record all relevant information fully and accurately in the correct manner and place.							

*DO = Direct Observation*

*EW = Expert Witness*

*PD = Professional Discussion*

*RA = Reflective Account*

*P = Product (Work)*

*Q = Questions*

*WT = Witness Testimony*

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*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: .....