

## **FN9X 04 (BDS1) Undertake pre donation assessment at blood/blood component donation sessions**

### **About this Unit**

This standard covers the assessment of regular or established donors and applies to both whole blood and/or automated blood component collection/apheresis and to all types of donation session.

The standard is limited to reviewing donors' responses, asking scripted questions and noting donors' responses by referencing donor deferral and acceptance criteria. Haemoglobin testing is not included.

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.**

**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> <li>◆ <b>The following forms of evidence ARE mandatory:</b></li> <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>, performing an assessment with an individual and explaining the purpose of the assessment.</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>, you could explain why it is important that donors understand the process fully before consenting, and when you should refer questions to a registered member of staff.</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 undertaking pre donation assessment at blood/blood component donation sessions.	
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 working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence.	
5 The importance of applying standard precautions and the potential consequences of poor practice.	
6 What is complete, positive donor identification and why it is important even at a busy session.	
7 Which procedures require valid consent and why it is vital to obtain such consent from donors before they give blood or blood components.	
8 The importance of identifying that the donor has accurately completed their own health status record.	
9 The importance of confidentiality in relation to donor information and ways in which confidentiality can be maintained.	
10 The purpose of health screening in the context of blood and blood component collection and the different forms it can take.	
11 How to set up a confidential health screening assessment area.	
12 The importance of sensitivity when informing donors they have been assessed as unsuitable to donate, and the likely concerns which they may have.	
13 The different types of donor status and how this affects the amount and type of information which should be sought from them.	

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<b>You need to show that you know, understand and can apply in practice:</b>	<b>Enter Evidence Numbers</b>
14 The difference between open and closed questions and the circumstances in which each should be used in the assessment of donors.	
15 The extent of the action which you can take, including the information which you can give, particularly in relation to clinical issues.	
16 How you meet the individual needs of donors with communication difficulties or special needs.	
17 Which categories of donor you are able to assess, and which must be referred to other team members.	
18 The key factors which affect an individual's suitability to give blood or blood components and why.	
19 Why it is important to ask questions exactly as scripted and to record answers precisely.	
20 How to recognise that donors may not fully understand what is said or asked — and what should be done to try and enhance their understanding.	
21 The nature and sequence of activities at blood and blood component collection sessions.	
22 How you assess information from questioning and tests against specified criteria, and when you must refer donors to a professional for further assessment or advice.	
23 What donors are confirming when they sign their individual donor record.	
24 The main differences between paper-based and computer-based donor record systems.	
25 The differences between session based donor records and centre held session documents/records and how each is created, accessed, checked, amended and updated.	
26 How and where to record information relating to donor assessment and eligibility for awards.	
27 The importance of keeping accurate and up-to-date records.	
28 The importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff.	

Performance Criteria		DO	RA	EW	Q	P	WT	PD
1	Greet each donor in a polite and friendly manner taking into account their individual needs.							
2	Explain clearly, accurately and in an appropriate manner, the reasons why the health screening is required, and the importance of providing complete and correct information.							
3	Confirm the individual donor's status and donor details, if necessary, and refer issues outside your own role and responsibility.							
4	Check that the documented responses to questions are completed.							
5	Ask further relevant questions following the agreed process and protocol, in a manner which encourages the donor to provide full and accurate responses.							
6	Check the donor's understanding of the questions you have asked and the information you have given, using alternative methods if necessary.							
7	Pass on details of any situation where the donor is unable or unwilling to provide the information needed for assessment to the appropriate team member.							
8	Assess against the specified selection criteria any information provided by the donor regarding their suitability to make a donation.							
9	Seek further guidance if the donor's suitability to donate falls outside the defined selection criteria.							
10	Explain the nature and purpose of procedures which need valid consent, in a manner appropriate to the individual donor and obtain and/or confirm informed written consent for donation.							
11	Pass on accurate information to the appropriate member of the team when the donor does not give the required consent.							
12	Document all relevant information clearly, accurately and correctly in the appropriate documentation, maintaining confidentiality of information.							

Performance Criteria	DO	RA	EW	Q	P	WT	PD
13 Answer questions from the donor correctly and appropriately, and refer to the appropriate member of the team if the questions are beyond your own scope of practice.							
14 Provide donors with appropriate support, information and advice if they are assessed as unsuitable for donation.							
15 Inform the donor, and check their understanding, about the next stage in the procedure.							
16 Ensure that the donor award system is applied and implemented appropriately.							

*DO = Direct Observation*

*EW = Expert Witness*

*PD = Professional Discussion*

*RA = Reflective Account*

*P = Product (Work)*

*Q = Questions*

*WT = Witness Testimony*

*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: .....