

FP04 04 (BDS10) Welcome donors at donation sessions and provide information

About this Unit

This standard covers welcoming donors and providing them with information prior to both whole blood and blood component donation. You are expected to deal with donors of differing status and apply a limited range of donor selection criteria to alleviate unnecessary donor waiting time.

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

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 , explaining to a donor what information needs to be provided, and assisting donors to complete documentation.
◆ Professional discussion: Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. For example , when you would adapt information for different donors and why it is important to keep accurate, confidential records.
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.
◆ 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.
◆ 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.
◆ Witness Testimony: Can be a confirmation or authentication of the activities described in your evidence which your assessor or mentor has not seen.
◆ 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.
◆ 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.
◆ 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.
◆ Evidence must be provided for ALL of the performance criteria, ALL of the knowledge.
◆ 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.
◆ All evidence must relate to your own work practice.

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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.

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 welcoming donors at donation sessions and providing information.	
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 rights of donors under organisational and service standards including the principles of care and customer service, donor care pathway, organisational values.	
6 What is complete positive donor identification and why it is important.	
7 The importance of confidentiality in relation to donor information and ways in which confidentiality should be maintained.	
8 The importance of sensitivity when passing information from and to donors and the likely concerns they may have.	
9 The differences between the various donor categories and status and how this affects the amount and type of information that can be given and sought from them.	
10 The nature and sequence of activities at blood and blood component donation sessions.	
11 The extent of the action you can take, including the information which you can give, in relation to clinical and other issues.	
12 How donors can be supported through effective communication.	
13 How to demonstrate that donors are respected and valued.	
14 How to recognise that donors may not fully understand what is said or asked, and what should be done to enhance their understanding.	

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You need to show that you know, understand and can apply in practice:	Enter Evidence Numbers
15 The main difference between paper-based and computer-based record systems.	
16 How to interpret information from questioning against specified criteria and when to refer donors to a professional for further assessment or advice.	
17 How and where to record information relating to donor assessment and eligibility.	
18 The importance of keeping accurate and up-to-date records.	
19 The importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff.	

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Performance Criteria		DO	RA	EW	Q	P	WT	PD
1	Welcome individual members of the public politely, in a friendly manner and with minimum delay, thanking them for attending.							
2	Communicate with donors in a way that makes them feel valued and respected, adapting behaviour to respond effectively to different donor behaviour.							
3	Identify the reason for their attendance in a manner likely to promote confidence in the service and direct them, where appropriate, to other areas within the session.							
4	Obtain information about their individual donor status in a polite manner, and issue the correct donor information at the appropriate stage.							
5	Explain clearly to donors the content and purpose of the donor information, at a level and pace that meets their needs and direct them to a private area to complete their documentation and confirm where assistance can be obtained.							
6	Identify discreetly the donor's ability to assimilate the donor information and complete their responses to their documentation, offering assistance if needed.							
7	Respond appropriately to donors who indicate that they need or want your attention.							
8	Check if the donor has been able to complete their documentation if appropriate and answer any questions that they may have.							
9	Apply the selection criteria correctly or refer to the appropriate person if beyond your own knowledge or responsibility.							
10	Check that the personal details of donors who are deferred or suspended are correct and, if appropriate, amend any incorrect donor personal details and documentation in accordance with organisational policy.							
11	Maintain confidentiality of information, positively identify the donor, if appropriate and confirm individuals signature, on the documentation prior to transfer.							

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Performance Criteria							
	DO	RA	EW	Q	P	WT	PD
12 Co-ordinate appointment and/or queuing systems to meet donor needs and promote efficient donor flow.							
13 Inform donors politely and promptly of delays and where possible make alternative arrangements.							

DO = Direct Observation

RA = Reflective Account

Q = Questions

EW = Expert Witness

P = Product (Work)

WT = Witness Testimony

PD = Professional Discussion

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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: