

**Assessment of Competence for Registered Healthcare Practitioners
Clinical Skill / Equipment Skill: Preparation, Insertion and Care of a Patient with a T34
(McKinley) Subcutaneous Ambulatory Syringe Pump**

Name:	Ward/Dept:
AIM:	To maintain and monitor the delivery of drugs for symptom management, at a predetermined rate by continuous subcutaneous injection, using a T34 (McKinley) syringe pump.
OBJECTIVES:	The healthcare practitioner will be able to complete the theoretical assessment detailed in the underpinning knowledge and demonstrate competency in perform, maintain and monitor the delivery of drugs for symptom management, at a predetermined rate by continuous subcutaneous injection, using a T34 (McKinley) syringe pump. The practitioner will be able to: <ul style="list-style-type: none"> • Demonstrate an understanding of the knowledge and skills necessary for administration of subcutaneous drugs via a T34 (McKinley) syringe pump • Demonstrate competence in performing the procedure • Demonstrate understanding of the principles of symptom control • Demonstrate understanding of medicines management policy • Demonstrate an understanding of the procedure for administering drugs using a syringe pump.
PREREQUISITES:	Registered General Nurses working in high acuity areas who have attended a specific training session.
TRAINING:	Attendance at a specific training session (training content must be available to the assessor)
ASSESSMENT:	Using performance criteria below. Assessment of competence will be by ward manager or appointed nominee
RISK ASSESSMENT:	HIGH (level of risk of harm due to user error)
UPDATE:	Competence to be reviewed annually and a record held centrally via training records, or sooner if limited practice, incident or extended leave taken.

UNDERPINNING KNOWLEDGE			
<p>The healthcare practitioner will be expected to:</p> <ul style="list-style-type: none"> ▪ Read and understand “the syringe pump policy” ▪ Have attended a practical training session on how to set up a syringe pump ▪ Demonstrate an understanding of the reasons for use of a subcutaneous syringe pump. ▪ Demonstrate an understanding of the drugs used, compatibilities, and meet the standards set out in the Standards for Medications Management (NMC 2010) ▪ Demonstrate an understanding of the importance of infection control including use of safer sharp – Saf-T-Intma and disposal of sharps and the management of needle stick injury. ▪ Demonstrate an understanding of the issues surrounding accountability and practice. ▪ Demonstrate knowledge of the issues concerning patient consent ▪ Demonstrate understanding of access to Specialist Palliative Care Team, including out of hours advice line for advice around complex symptom control issues <p>I certify that the above named healthcare practitioner has successfully completed the theoretical assessment which covers the above.</p>			
Signed:		Date:	
Print Name:		Position:	

CLINICAL SKILL		
PERFORMANCE CRITERIA - The practitioner will:		Performed Safely (✓)
1.	Explain the procedure to be performed to the patient, obtain and document informed consent.	
2.	Check condition of equipment, battery and date of next service.	
3.	Prepare the environment, patient and equipment in a manner to reduce infection risk, and maintain privacy and dignity.	
4.	Draw up drugs and diluent using a 30ml luer- lock syringe only and state the amount of fluid used (22ml) according to the drug administration policy.	
5.	Once drawn up, check for drug compatibility and make a visual inspection of the fluid in the syringe. Observe for cloudiness, particles or any discolouration if mixing 2 or more drugs together. Seek SPC advice if more than 3 drugs prescribed.	
6.	Attach the prepared syringe to the 100cm butterfly line. Prime line manually. Label the syringe with patient's name, drugs and diluent used, date and time, and attach it to syringe. Do not obscure syringe markings.	
7.	Before powering on the driver, ensure that the barrel clamp arm is down and no syringe is in place.	
8.	Install a Duracell plus battery* into the T34 pump. *Alternative 9V batteries are not advised as they are proven to rapidly shorten battery life. However, if this is the only alternative batteries in stock, then use alternative battery until Duracell can be ordered.	
9.	Press and hold down the ON/OFF key to power on. Observe 'pre loading' on LCD. The actuator will start to move. Wait until the syringe detection screen (load syringe) appears.	
10.	Check battery level %. Press INFO key to display and press yes to view battery meter. Replace if necessary	
11.	Lift the barrel clamp arm. Use the FF/Back keys to move the actuator forward and back so that the syringe collar will sit in the central slots and load the syringe into the driver. Ensure the ml scale is facing upwards and that the label doesn't obscure the sensor in the barrel arm clamp. Lower the barrel clamp arm.	
12.	The syringe brand and size will then be displayed. If they match, press YES to confirm. If not, then scroll up and down arrows until the correct selection is found and then confirm.	
13.	Visibly check the volume, duration and rate on the display with the prescription and syringe. To confirm infusion parameters, press YES.	
14.	Connect the 100cm butterfly line to the patient. Insert the butterfly bevel down at a 45 degree angle and secure, using transparent adhesive dressing, and label with date when inserted.	
15.	Press YES to start the infusion. The green LED light flashes when the pump is running.	
16.	Place the pump into the lockbox and activate the keypad lock. Press and hold the INFO key until progress bar is displayed. Hold the key until the bar has moved completely across the screen and a beep is heard to confirm the lock is activated.	
17.	Complete all documentation relating to the procedure including the patient's medication chart/ monitoring chart, and PRN butterfly insertion record.	
18.	Perform monitoring chart checks and observations whilst syringe pump in use.	

19.	When the infusion is complete and the syringe is empty, the pump will stop automatically and an alarm will sound. Press YES to confirm the end of the infusion. Disable the keypad lock (as per activating instructions). Press and hold ON/OFF to switch the pump off.	
20.	Discuss potential adverse reactions and the actions to take.	
21.	If the patient dies during an infusion, press the STOP button, switch off the pump and document the amount left in the syringe and dispose of as per policy guidelines.	
22.	State clearly how to report an incident and what action to take with the syringe driver.	

I confirm that the above named healthcare practitioner has completed the assessment competently.

Signed:		Date:	
Print Name:		Position:	

ASSESSOR COMMENTS

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CANDIDATE COMMENTS

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DECLARATION

I confirm that I have had theoretical and practical instruction on how to safely and competently perform, maintain and monitor the delivery of drugs for symptom management, at a predetermined rate by continuous subcutaneous injection, using a T34 (McKinley) syringe pump, and agree to comply with the policy and procedures of the Trust. I acknowledge that it is my responsibility to maintain and update my knowledge and skills relating to this competency.

Signed:		Date:	
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SPONSOR/PEER REVIEW

To ensure the content is accurate, current and evidenced based, competencies are required to be peer reviewed by subject matter experts within the specialty. It is your responsibility, as the author, to ensure this is undertaken and the peer review section is signed by the appropriate person.

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Signed:	Electronic sending for speed	Date:	5/8/21

REFERENCES

Royal Marsden Manual of clinical procedures 8th Edition (2011) Dougherty I., Lister S., (Eds) Wiley-Blackwell, UK

Hanks, G et al (eds) (2011). Oxford Textbook of Palliative Medicine, 4th edition. Oxford: Oxford University Press.

Department of Health Essence of Care (2002) Benchmarks for Privacy and Dignity, Record Keeping. London: HMSO.

Gloucestershire Hospitals NHS Trust T34 Syringe Pump – Continuous Subcutaneous Use Guidelines And Procedure (2013)

CME Quick User Guide-Lock On Prime And Load CME Medical UK Ltd

1 copy in Personal File; 1 copy to be recorded on the Training Database; 1 copy in Portfolio