

HCA COMPETENCY BOOKLET TRANSITIONAL CARE UNIT (TCU)



PHILOSOPHY OF CARE

In the Transitional Care Unit we are committed to providing safe, holistic, compassionate care and support to children and families with a strong emphasis on family centred care.

We promote independence of the individual and provide a service that is respectful of culture and spirituality.

NIARAT.		
NAME		



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HACPP

Fire Lecture

Children First

Waste Management

to you during your placement here.

.....

WELCOME

We are delighted to welcome you as a staff member to CHI at Crumlin. Our family centred approach to care promotes caring for children in partnership with their family. We encourage parents & carers to stay with their children as we hope to minimise anxieties associated with hospitalisation. This approach is based on the Smith's Nottingham's Model of Children's nursing.

This booklet is intended to give you an overview of the ward and the learning opportunities that are available

the various policies and procedur recommended documents careful hospital. The contents of the orie correct and efficiently. If you are	res recommended by the last re	he hospital. It is request that of patients, pare designed to assist year of your orientation at is 8-10 weeks. As	all our employees are familiar with lested that all employees read the rents, visitors and staff within the ou to learn to carry out your duties a please contact the CNM2 on the supportive role is provided by the
Mandatory	Date	Signature	Manager
Vaccinations (Occupational Health)			
Patient Handling			
Infection Control			
Basic Life Support			
Blood Products			
Hand Hygiene			

¹ Smith, F (1995) Children's Nursing in Practice: the Nottingham Model. Blackwell Science, Oxford.



HUMAN RESOURCES

Date y	HCA Signature
9	
ce	
	<i>NMBI:</i>
	Date:
be given to include	
Date	Completed by
	NMBI:
	Date:
	Date.
e following with you:	
te	Completed by
	be given to include Date Date following with you:



SELF-ASSESSMENT

SELF-ASSESSMENT	STANDARD	SUGGESTED EVIDENCE					
Level 1 - Observed	Observed demonstration of skill can discuss core elements involved and relate theoretical knowledge	Can describe essential components of the skill and can relate theory appropriately					
Level 2 - Participative	Can perform safely and effectively under supervision with potential for some omissions and inaccuracies	Skilful in some aspects but lack coordination. Displays some confidence but spends considerable time focusing on the skill					
Level 3 - Supervised	Can perform safely accurate and effective in most aspects of the skill	Skilful and coordinated performance in most aspects of the skill. Some degree of confidence but distracted when the skill is more complex					
Level 4 - Competent	Can perform safely, accurately and effectively	Skilful and coordinated performance Confident and able to achieve objectives within in appropriate time frame					
Prior to your first interview, please self-assess your competencies as listed out on the following pages							
HCA Name: (Print Name)	HCA Name: (Print Name)						

	Tracheostomy Care						
	Basic A&P of Airway	Indications for Trache	Complications of Trache	Safety Considerations	Emergency Box		
Self-Assessment							
Date Performed							
Nurse Initials							
Date Performed							
Nurse Initial							
Competent Signed					_		

	Tracheostomy Care							
	Suctioning	Suctioning Respiratory Ties Change of Tube Assessment Ties Planned						
Self-Assessment								
Date Performed								
Nurse Initials								
Date Performed								
Nurse Initial								
Competent Signed								



	Tracheostomy Care						
	Change of Tube Emergency	Change of Tube Emergency	Communication & Speaking Valve	Ventilation			
Self-Assessment							
Date Performed							
Nurse Initials							
Date Performed							
Nurse Initial							
Competent Signed							

	ORAL AND ENTERAL FEEDING						
	Oral feeding infants & babies	Considerations for feeding trach patients	Flocare Infinity Feeding Pump	Bolus Feeding			
Self-Assessment							
Date Performed							
Nurse Initials							
Date Performed							
Nurse Initial							
Competent Signed							

	ORAL AND ENTERAL FEEDING						
	Checking NT Tube position – pH Peg Tube Care Prep of patients diet Documentation						
Self-Assessment							
Date Performed							
Nurse Initials							
Date Performed							
Nurse Initial							
Competent Signed							

	Basic Life Support							
	BLS - Infant BLS - Child BLS - Trachie Choking Infant / Child Arrest Call Emergency Managemen							
Self-Assessment								
Date Performed								
Nurse Initials								
Date Performed								
Nurse Initial								
Competent Signed								



	NGT (Nasogastric Tube) Insertion							
	Theory Completed	' ()hserved Practice '						
Self-Assessment								
Date Performed								
Nurse Initials								
Date Performed								
Nurse Initial								
Competent Signed								

	General Skills				
	Bathing Infant / Child	Weight Taking	Standard Precautions	Taking Swabs	Taking Samples
Self-Assessment					
Date Performed					
Nurse Initials					
Date Performed					
Nurse Initial					
Competent Signed					

	General Skills				
	Documentation – Nursing Notes	Safety Checks	Child Development	Play with Infant / Child	Respiratory Assessment
Self-Assessment					
Date Performed					
Nurse Initials					
Date Performed					
Nurse Initial					
Competent Signed					
		Н	CA Skills		
	Ordering Stock / Stores	Collecting Stock / Feeds	CA Skills Equipment Maintenance	CSSD	Cleaning
Self-Assessment	_	Collecting Stock /	Equipment	CSSD	Cleaning
Self-Assessment Date Performed	_	Collecting Stock /	Equipment	CSSD	Cleaning
	_	Collecting Stock /	Equipment	CSSD	Cleaning
Date Performed	_	Collecting Stock /	Equipment	CSSD	Cleaning
Date Performed Nurse Initials	_	Collecting Stock /	Equipment	CSSD	Cleaning



	SLUICE ROOM		
	Tiding of sluice room	Stocking of supplies	Requesting to have glass bin emptied
Self-Assessment			
Date Performed			
Nurse Initials			
Date Performed			
Nurse Initial			
Competent Signed			

ROLE IN EMERGENCY PLAN			
Role in Emergency Plan	Reporting repairs needed	Assisting in the provisions of clinics	



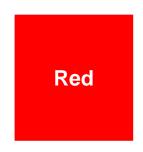
This list is not exhaustive and can be changed in accordance with the service provision in your area

LINEN COLOUR CODING

White

Non-Infected Linen

All non-infected linen, should be put into a white linen bag



Infected Linen

All infected linen should be first put into an alginate soluble bad and then put into a red linen bag.

Do not over fill linen bags - Secure and Label

OCCUPATIONAL BLOOD EXPOSURE (OBE)

(formerly known as Needle Stick Injury)

- First Aid (At site of exposure)
 - o Encourage bleeding of wound under running water.
 - Wash thoroughly under running water with hibiscrub / bethadine. Do not use nail brush. Cover wound with water proof dressing.
 - Splash into eyes: wash eyes with normal saline & remove contact lenses.
 - Splash into mouth/nose or onto skin: wash well with water.
- Report incident to Ward manager/Head of Department/most senior person
- Where to go:
 - Incidents occurring on wards/clinical areas managed where incident occurred.
 - o Incidents occurring outside wards/clinical areas managed in Emergency dept.
- Locate Occupational Blood Exposure (OBE) packs i.e. Source Pack & Recipient Pack (available in every ward / clinical area).
 - Packs contain guidelines, blood bottles & forms, consent forms & OBE report form.
- Contact SHO/Registrar on-call to commence management as per Guidelines for Management of Occupational Blood Exposure document (in packs).

Source patient bloods <u>must</u> be taken at time of exposure and sent to microbiology lab as URGENT sample

- Complete OBE report form & hospital incident form.
- Please contact Occupational Health (ext. 6106/bleep 8106) to report incident and ensure appropriate follow-up care.



CLEANING DETERGENTS

We Use two cleaning products in OLCHC, BRIAL and Actichlor





BRIAL is made up of 5ml of detergent with 1000ml of water.

PPE must be worn while using BRIAL

It is used on all patient equipment and general cleaning.

It is located in the sluice room on a wall bracket.





Actichlor is made up of one 1.7g tablet into a 1000ml bowl of water.

We use **Actichlor** when cleaning all infected pieces of equipment.

Actichlor is used along with BRIAL on all isolation cleaning.

BRIAL is used first, followed by Actichlor

PPE must be used when this using the product.



INITIAL INTERVIEW Date: **STANDARDS** Level 1 Level 2 Level 3 Level 4 **REVIEWS OF CLINICAL EXPERIENCE**



AGREED LEARNING OBJECTIVES	
CNM/CNF Name: (Print Name)	NMBI:
HCA Name: (Print Name)	



INTERMEDIATE INTERVIEW

Date:

The purpose of this interview is to ensure that you are progressing and achieving the required competencies within the HCA team. The interview will identify areas where more support is required. This meeting will also allow you to give pertinent feedback regarding the orientation programme.

	SELF-ASSESSMENT GRADE
	STANDARDS
Level 1	
Level 2	
Level 3	
Level 4	

COMMENTS



REVIEW OF AGREED OBJECTIVES	
CNM/CNF Name: (Print Name)	NMBI:
HCA Name: (Print Name)	Date:



ADDITIONAL / FINAL MEETING

The interview will also serve to address any further learning needs highlighted by either the CNM/CNF or the HCA.

Date:	
REVIEW OF AGREED OBJECTIVES	
COMMENTS	
COMMENTS	
CNM/CNF Name: (Print Name)	
HCA Name: (Print Name)	Date:



GUIDELINE FOR THE HCA PARTICIPATION IN CARE

Stage 1

Can perform under **DIRECT SUPERVISION** of Registered Nurse if HCA feels competent to do so (Level 1/2)

Please tick	Complete
Safety Checks	
Blood Glucose Monitoring	
Remove intravenous Peripheral Cannula	
Assist child with hygiene needs	
Assist with nutritional needs of infant / child (Oral / NG / PEG / Breastfeeding)	
Communicate with child, families, multi-disciplinary team	
Document nursing care (countersigned by registered nurse)	
Urinalysis	
Collect blood / blood products	
Urinary Catheter Care	
Specimen Collection (urine / stool / swabs / sputum)	
Special a child	
Handover Report	
Prepare a child for transfer	
Transfer children within CHI at Crumlin	
Answer phone / use the bleep system professionally	
Airway suctioning (oral / nasal / nasopharyngeal / tracheostomy)	



Can perform under INDIRECT SUPERVISION of Registered Nurse, if HCA feels competent to do so (Level 2 / 3) and HCA has been signed off as competent in the allocated task

Please tick	Complete
As per Stage 1	
Order stores / pharmacy	
Fridge Temperature checklist	
Storage and labelling of food items	
Meal preparation	
Preparing a bottle	
Refrigerating formula and breast milk	
Ordering meals for patients	
Assist parent's with food preparation	
Stocking Linen	
Linen segregation	
Checking and cleaning oxygen and suction	
Cleaning patient equipment	
Cleaning beds and cots	
Tagging equipment	
Glucometer Check	
Tidying of bedside lockers	
Relieve parents for breaks	



CANNOT PERFORM THE FOLLOWING		
Please tick	Complete	
Cannot unsupervised tracheostomy care		
Cannot perform weight / height / length independently (double checked)		
Cannot unsupervised wound care		
Cannot catheterise children		
Cannot give discharge advice unsupervised		
Cannot remove a chest drain		
Cannot accept or Record laboratory results		
Cannot transfer children		
Cannot remove Central Venous Catheter (CVC)		
Medications:		
Cannot check / administer medication		
Cannot run through IV fluids		
Cannot connect/disconnect IV infusions		
Cannot commence / reset IV pumps		
Cannot flush intravenous cannula		
Cannot hold any medication keys (including controlled / MDA)		
Cannot collect controlled drug / MDA from pharmacy		