

# Registered Nurse Intravenous Therapy and Peripheral Cannulation Competency Framework

**Name:**

**Location:**

**Date commenced:**

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## Introduction

This competency framework describes the competencies that you will need to enable you to practice Peripheral Cannulation and Intravenous Therapy proficiently within Southern Health NHS Foundation Trust; for ease of use the competencies are divided into domains of practice. The purpose of the framework is threefold; it should be used as a guide to enable you to appreciate the scope of practice you will require to allow you to practice competently and effectively; it serves as the key tool to enable you and others to assess your current level of practice and structure your development accordingly, and finally it is a record of your professional development.

A seven point rating scale is used to describe your level of practice; you should use this initially to identify your own level of competence and to determine your specific learning needs.

You will be required to demonstrate a safe & competent clinical practice working within the limitations of your own scope of practice. It is expected that all Registered Nurses will achieve a competency at Level 4 as a minimum.

The competency framework is divided into sections. All core competencies must be achieved. Specific competencies must be achieved according to the practitioners role and in accordance with their job description and agreed by their line manager.

Assessment of competence is conducted primarily in the clinical setting; it is achieved through observation of practice and professional conversation with an identified Assessor; the objective being to assess both theoretical and procedural knowledge (the 'know what' and the 'know how'). This guidance is based on best available evidence and offers advice on the management of Intravenous Therapy in primary care. The identified assessor must be competent to level 4 or above at all competencies for which he/she is assessing. A copy of the completed competency tool must be retained by the staff member, and their line manager.

Competency framework should be completed within 6 months of attending Intravenous Therapy and Peripheral Cannulation Study Day.

**Level of Competency Rating Scale**

<b>Level</b>	<b>Descriptor</b>
0	Cannot perform this activity to participate in the clinical environment.
1	Can perform this activity but not without constant supervision and assistance.
2	Can perform this activity with basic understanding of theory and practice principles, but requires some supervision and assistance.
3	Can perform this activity with understanding of theory and practice principles without assistance and/or supervision.
4	Can perform this activity with understanding of theory and practice principles without assistance and/or supervision at an appropriate pace and adhering to best practice guidelines.
5	Can perform this activity with thorough understanding of theory and practice principles without assistance and/or supervision at an appropriate pace and adhering to best practice guidelines. Additionally demonstrating initiative and adaptability to special problem situations.
6	Can perform this activity with thorough understanding of theory and practice principles, without assistance and/or supervision, at an appropriate pace, adhering to best practice guidelines. Demonstrating initiative and adaptability to special problem situations and can lead others in performing this activity.

**Intravenous Therapy and Peripheral Cannulation Clinical Competencies**

Name:	Role:
Base:	Date initial training completed: Date aseptic e-assessment completed:

**Competency Statement:**

The participant demonstrates clinical knowledge and skill in all core competencies and specific competencies according to role in intravenous therapy and peripheral cannulation without assistance and/or direct supervision (level 4 - see level descriptors). Assessment in practice must be by a Registered Nurse who can demonstrate competence at level 4 or above.

Performance criteria	Assessment method	Level achieved	Date	Assessor/self assessed
<b>Core Competencies: Demonstrate knowledge that underpins intravenous therapy and peripheral cannulation.</b>				
a) Demonstrate knowledge of the Southern Health Intravenous Therapy and Peripheral Cannulation Policy.	Questioning			
b) Demonstrate knowledge of Southern Health Hand Hygiene Procedure	Questioning			
c) Demonstrate knowledge of the Infection prevention and control policy including the Aseptic Technique (AT) and Clean Technique procedure	Questioning			
d) Demonstrate knowledge of national and local policies for injectable medicines.	Questioning			
e) Demonstrates knowledge of Medicines Control, Administration and Prescribing Policy (SH CP1)	Questioning			
f) Demonstrate knowledge of the principles of the Mental Capacity Act and Deprivation of Liberties Standards and essential requirements of obtaining informed consent.	Questioning			
g) Demonstrates knowledge	Questioning			

of the accountability and responsibility for the Registered Nurse in relation to intravenous therapy and cannula insertion.				
h) Demonstrate understanding of the importance of following Health and Safety principles and works to ensure the safe disposal of waste and sharps, according to Southern Health policies.	Questioning			
i) Demonstrate relevance and attendance of Anaphylaxis and Basic Life Support training	Questioning			
j) Demonstrate effective and appropriate communication with patient and carers, medical staff and other agencies involved in patient treatment including referral to appropriate clinical records such as RIO and HHR.	Questioning			
k) Demonstrate knowledge of the anatomy and physiology that relates to intravenous therapy and peripheral cannulation.	Questioning			
l) Demonstrate knowledge of the relevance of the patient's present condition and medical history.	Questioning			
m) Demonstrate understanding of the relevance of risk assessment.	Questioning			
n) Demonstrates safe knowledge including checking of the <b>prescribing</b> of medicines, including flushes at key points in the administration of medicines:  Prescription being written correctly Correctly identify the patient using name, NHS number and date of birth Allergies	Questioning			

<p>Indications, contraindications and side effects of medicines being prescribed. Route of administration is appropriate Method /Duration/Frequency/Timing of medication administration. Expiry date of medicine Correct dose Ability to perform medicine calculation Accurate documentation in both primary and secondary records as per Standard Operating Procedure.</p>				
<p>o) Demonstrate knowledge of the types of venous access devices; their position in the body, the reasons for their use; the recommended duration of their use, the recommendations for device maintenance.</p>	Questioning			
<p>p) Demonstrate knowledge and practice of the correct methods to monitor the administration of the medicine including documentation.</p>	Questioning / Observation			
<p>q) Demonstrate knowledge and practice of the correct methods to monitor the skin site of the intravenous therapy device including the relevant documentation.</p>	Questioning / Observation			
<p>r) Demonstrate knowledge and practice of correct methods and documentation to monitor the patient's condition and respond appropriately to any change.</p>	Questioning / Observation			
<p>s) Demonstrate knowledge of the signs and symptoms of problems that are associated with intravenous therapy and their management including; infiltration, extravasation, phlebitis, infection, speed shock, fluid overload, air</p>	Questioning / Observation			

embolism and breakage of the line.				
<b>2. Core Competencies: Demonstrate safe practice in the administration of prescribed intravenous medication</b>				
a) Demonstrate that the prescription is written correctly.	Questioning / Observation			
b) Explain the importance of checking for allergy status, and electronic/paper documents correctly.	Questioning / Observation			
c) Demonstrates safe practice in regard to:  Correct identification of patient using name, NHS number and date of birth  Drug, Dose Expiry date, Route and frequency of administration is accurate and appropriate  Ability to perform medicine calculation  Discuss appropriateness of prescribed medication.  Confirms rate and duration of administration.  Secondary checking.	Questioning / Observation			
d) Demonstrates best practice in regard to informed consent, including use of RIO EPR for evidence of patient consent.	Observation			
e) Calculates and record in the appropriate clinical record, the volume of medication required to	Questioning / Observation			

administer the prescribed dose				
f) Correctly identifies the contraindications and side effects of medicines prescribed	Questioning / Observation			
g) Demonstrate preparation and administration using AT	Observation			
h) Demonstrate correct identification and labelling of medication.	Observation			
i) Demonstrate when to flush venous access device, correct type of syringe to use and correct volume.	Observation			
j) Demonstrate and keep record of training and competency in the use of each specific infusion device used.	Questioning / Observation			
k) Demonstrate safe disposal of waste and sharps.	Questioning / Observation			
l) Describes the correct transport and storage of the medicine/fluid being administered.				
m) Demonstrates completion of all documentation correctly and in a timely and logical sequence as per Clinical record Standard Operating Procedure.	Observation			
<b>1. Specific Competencies: Peripheral Cannula Insertion</b>				
a) Demonstrate safe knowledge and practice of the equipment and preparation required for Peripheral Cannulation, including; patient preparation and comfort, selection of the correct sized cannula and use of extension set.	Questioning / Observation			
b) Demonstrates safe knowledge and practice of insertion of a peripheral cannula <ul style="list-style-type: none"> <li>Assessment of patient and</li> </ul>	Questioning / Observation			



medical condition. <ul style="list-style-type: none"> <li>• Assessment of appropriateness of a peripheral cannula.</li> <li>• Awareness of possible unwanted effects of a cannula.</li> <li>• Use of technical knowledge and information gathering.</li> </ul>				
c) Demonstrate correct use of AT during the procedure of insertion of a peripheral cannula, identifying key parts and key sties	Observation			
d) Demonstrates appropriate site selection.	Observation			
e) Demonstrates correct method for cleansing the skin prior to cannulation	Observation			
f) Demonstrates correct insertion technique of the peripheral cannula.	Observation			
g) Demonstrates correct method of creating and maintaining a closed system.	Observation			
i) Demonstrates correct selection and application of a peripheral cannula dressing	Observation			
f) Demonstrate the correct techniques in maintaining patency of the peripheral cannula.including equipment for flush, amounts, intervals and techniques to maintain patency and positive pressure.	Observation			
j) Demonstrate correct documentation following insertion, including the use of the Peripheral Cannula Insertion and management form as per Standard Operating Procedure.	Observation			
<b>2. Specific Competencies:                  Demonstrate practical skill in the on-going care and maintenance of patency of venous access devices</b>				

a) Demonstrate the correct administration of the recommended flush including intermittent push pause technique and positive pressure technique for a Midline Peripheral Catheter.	Observation			
c) Demonstrate the correct administration of the recommended flush, including intermittent push pause technique and positive pressure technique of a non-valved central venous catheter.	Observation			
d) Demonstrate the correct administration of the recommended flush, including intermittent push pause technique and positive pressure technique of a valved central venous catheter.	Observation			
e) Demonstrate the correct administration of the recommended flush, including intermittent push pause technique and positive pressure technique of an implanted port.	Observation			
e) Demonstrate correct method of cleansing a needle free access devices.	Observation			
f) Demonstrate change of needle free access device at recommended time intervals using AT	Observation			
g) Demonstrate correct method using AT of change of sterile IV dressing and securing device (where relevant) at recommended time intervals.	Observation			

**3. Specific Competencies:  
 Demonstrates practical skill in blood sampling from a Central venous**

<b>Catheter</b>				
a ) Demonstrates correct procedure for blood sampling	Questioning / Observation			
<ul style="list-style-type: none"> <li>• Correct preparation of aseptic field and equipment including needle free access device.</li> <li>• Correct use of AT</li> <li>• Correct lumen selected.</li> <li>• Withdrawal and discard of blood prior to blood sample collection.</li> <li>• Correct use of blood transfer device</li> <li>• Correct use of flush post sampling.</li> <li>• Correct cleansing of needle free access device</li> <li>• Correct labelling of sample bottles at the patient's bedside</li> <li>• Correct sharp disposal</li> </ul>				
b) Demonstrates correct procedures for waste disposal.	Questioning / Observation			
c) Demonstrates correct documentation following procedure.	Questioning/ Observation			
<b>4. Specific Competencies: Demonstrates safe knowledge and practice in disconnecting IV chemotherapy.</b>				
a) Identify the correct venous access device appropriate for cytotoxic therapy.	Questioning / Observation			
b) List three complications of cytotoxic therapy?	Questioning / Observation			
c) Describe and demonstrate the precautions taken when handling cytotoxic medicines?	Questioning / Observation			
d) Demonstrate knowledge/practice on how to deal with a cytotoxic spillage?	Questioning / Observation			
e) Describe and	Questioning /			

demonstrate precautions which should be taken by a pregnant or breast feeding woman in relation to cytotoxic therapy?	Observation			
f) Demonstrate correct documentation following procedure/removal.	Questioning/ Observation			
<b>5. Specific Competencies: Peripheral Cannula Removal</b>				
a) Demonstrate safe knowledge and practice of the equipment and preparation required for Peripheral Cannula removal including; patient preparation and comfort, and selection of correct equipment.	Questioning / Observation			
b) Demonstrates safe knowledge and practice of removal of a peripheral cannula <ul style="list-style-type: none"> <li>• Assessment of patient and medical condition.</li> <li>• Awareness of risks associated with cannula removal.</li> <li>• Appropriate use of PPE.</li> <li>• Correct disposal of equipment.</li> <li>• Ensuring patient comfort and safety.</li> </ul>	Questioning / Observation			
c) Demonstrate correct use of AT during the procedure of removal of a peripheral cannula, identifying key parts and key sties	Observation			
d) Demonstrate appropriate equipment preparation.	Observation			
e) Demonstrate correct removal technique of the peripheral cannula.	Observation			
f) Demonstrate correct selection and application of an appropriate dressing.	Observation			
g) Demonstrate correct disposal of waste and sharps.	Observation			
h) Demonstrates correct patient education regarding	Observation			

care of the site.				
i) Demonstrate correct documentation following removal.	Observation			
<b>6. Specific Competencies: Non coring needle insertion</b>				
a) Demonstrate safe knowledge and practice of the equipment and preparation required for the insertion of a non coring needle into an implanted port, including; patient preparation and comfort, selection of the correct sized needle.	Questioning / Observation			
b) Demonstrates safe knowledge and practice of insertion of a non coring needle <ul style="list-style-type: none"> <li>• Assessment of patient and medical condition.</li> <li>• Assessment of appropriateness of a non coring needle. Awareness of possible unwanted effects/risks of the access device.</li> <li>• Use of technical knowledge and information gathering.</li> </ul>	Questioning / Observation			
c) Demonstrate correct use of AT during the procedure of insertion of a non coring needle, identifying key parts and key sties	Observation			
d) Demonstrates appropriate site identification and isolation.	Observation			
e) Demonstrates correct method for cleansing the skin prior to insertion.	Observation			
f) Demonstrates correct insertion technique of the non coring needle including priming the device.	Observation			
g) Demonstrates correct method of creating and maintaining a closed system.	Observation			
h) Demonstrates correct selection and application of the	Observation			

non coring needle dressing				
i) Demonstrate the correct techniques in maintaining patency of the non coring needle and implanted port including equipment for flush, type and amount of flushes, intervals and techniques to maintain patency and positive pressure.	Observation			
j) Demonstrate correct disposal of waste and sharps.	Observation			
k) Demonstrate correct documentation following insertion of the non coring needle.	Observation			
<b>7. Specific Competencies: Non coring needle removal</b>				
a) Demonstrate safe knowledge and practice of the equipment and preparation required for non coring needle removal, including; patient preparation and comfort, selection of appropriate equipment, the use of AT, the requirement for removal to be undertaken using positive pressure.	Questioning / Observation			
b) Demonstrates safe knowledge and practice of removal of a non coring needle: <ul style="list-style-type: none"> <li>• Assessment of patient and medical condition.</li> <li>• Awareness of possible risks associated with the removal.</li> <li>• Use of technical knowledge and information gathering.</li> </ul>	Questioning / Observation			
c) Demonstrate correct use of AT during the procedure of removal of a non coring needle, identifying key parts and key sties	Observation			
d) Demonstrates correct equipment preparation.	Observation			
e) Demonstrates correct method for removal of dressing over non coring needle.	Observation			

f) Demonstrates correct removal technique of the non coring needle, maintaining positive pressure.	Observation			
g) Demonstrates correct skin cleansing and correct selection and application of appropriate dressing post removal if required.	Observation			
h) Demonstrate correct disposal of equipment and sharps.	Observation			
i) Demonstrate appropriate patient education given.	Observation			
j) Demonstrate correct documentation following removal, including future plan of care.	Observation			

I can confirm that I have attended initial training on.....  
and that I am confident and competent in the administration of intravenous medication including flush, and the care and maintenance on an intravenous device,

namely:

<b>Competency:</b>	<b>Verified Date:</b>
Core: Demonstrate knowledge that underpins intravenous therapy and peripheral cannulation.	
Core: Demonstrate safe practice in the administration of prescribed intravenous medication	
Specific: Peripheral Cannula Insertion	
Specific: Demonstrate practical skill in the on-going care and maintenance of patency of venous access devices	
Specific: Demonstrates practical skill in blood sampling from a Central venous Catheter	
Specific: Demonstrates safe knowledge and practice in disconnecting IV chemotherapy	
Specific: Peripheral Cannula Removal	
Specific: Non coring needle Insertion	
Specific: Non coring needle removal	

Registered Nurse: .....

Signature:.....

Status:.....

Date: .....

I can confirm that I have assessed the above named Registered Nurse and can verify that he/she demonstrates competence and confidence in the theory and practice of intravenous therapy according to role and job description.

Verifier:.....

Signature:.....

Level: .....

Date attained: .....

<b>Review dates:</b>	<b>Competent Yes/No</b>	<b>Registered Nurse Signature</b>	<b>Verifier Signature</b>	<b>E-assessment completed</b>	<b>Comments</b>