

Requirement for a Blood Transfusion Knowledge Based Competency Assessment Scheme (KBAS)

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Why the perceived need?

(Mis) Use of EQA exercise material

- Requests for additional material for repeat testing by additional staff during exercise
- Labs want to 'buy' an extra set of material
- We phone labs with errors
 - 'several BMS staff did the EQA and we all got the same answer'

IQC
Weak controls



Today's results
same as
yesterday's



Instrument 1
same as
Instrument 2



Demonstrates day to day
reproducibility

Competency
Assessment



Perform
and interpret
a test

Need to assess background
knowledge not just ability
to follow procedures



Demonstrates competency
of individual staff members

EQA



Your result same
as the result
down the road

Requires same level of
testing as clinical
samples

Requires same level of
testing as clinical
samples



Demonstrates that
process works

Why the perceived need?

Evidence from SHOT and EQA

- Root cause of many SHOT incidents shown to be lack of knowledge
- IBCT SHOT incidents 2011
 - 70% involved staff who had been competency assessed
- Highest rate of EQA errors in tests requiring interpretation
 - Antibody ID (2 specificities) – error rate 1.3%

Why the perceived need?

Issues for hospital transfusion

The need to 'prove' competence

- BSQRs
- CPA
- HPC requirements
- Laboratory Collaborative recommendations

Factors making it difficult to maintain competency programs

- Pathology Modernisation leading to
 - Change in skill mix
 - cross discipline and cross site working
- BSQRs
 - Increasing demands on laboratory managers' time

Identify the need

Consultation

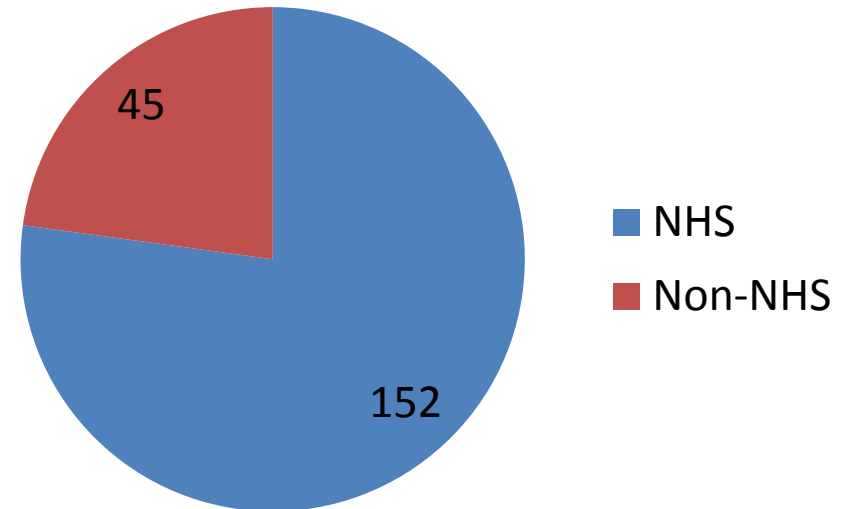
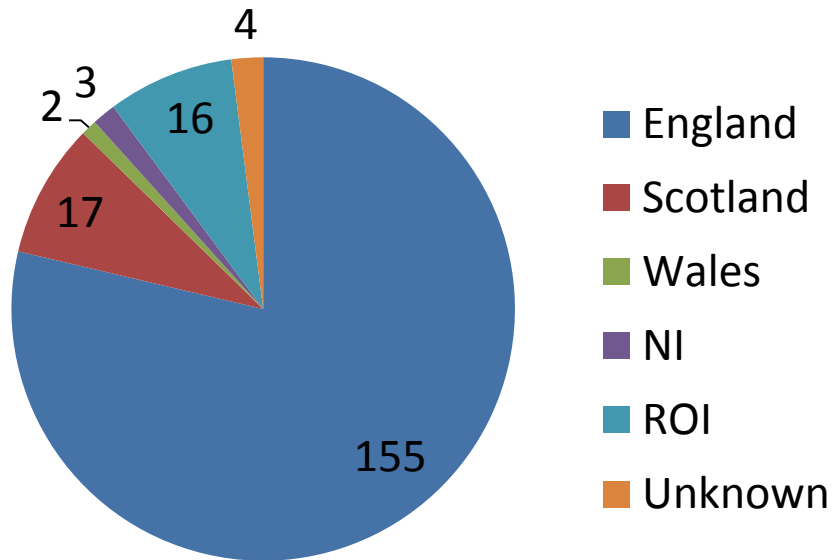
- Other suppliers of competency material
 - WASPS, NHSBT
- Professional bodies
 - BBTS, IBMS
- Panel of advisors
 - Range of lab managers, educationalist
- Potential customer base
 - UK NEQAS (BTLP) Participants

Advisory panel 'mind mapping' day

- Recognition of the resources needed to assess KBC
- Perception that knowledge is not always assessed
- Support for knowledge based national assessments:
 - At different levels to reflect differing needs of staff groups
 - To reflect the critical processes within BT
 - To include an interface to enable managers to monitor progress of staff and identify supplementary training needs
- Any scheme MUST meet requirements set by HPC, CPA, MHRA, IBMS, BBTS

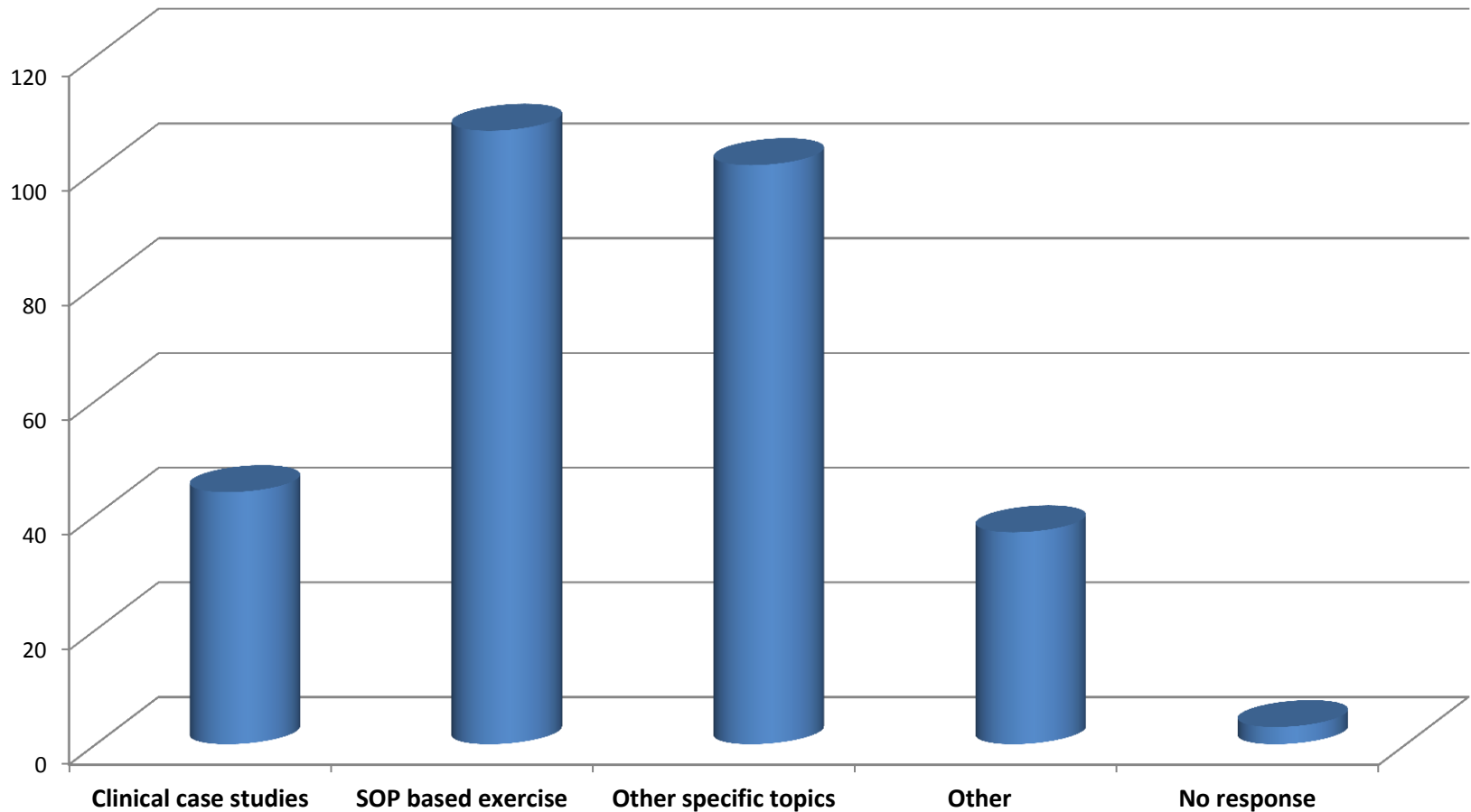
UK NEQAS (BTLP) participant survey

Returns 197/350 (56%)



Participant survey outcomes

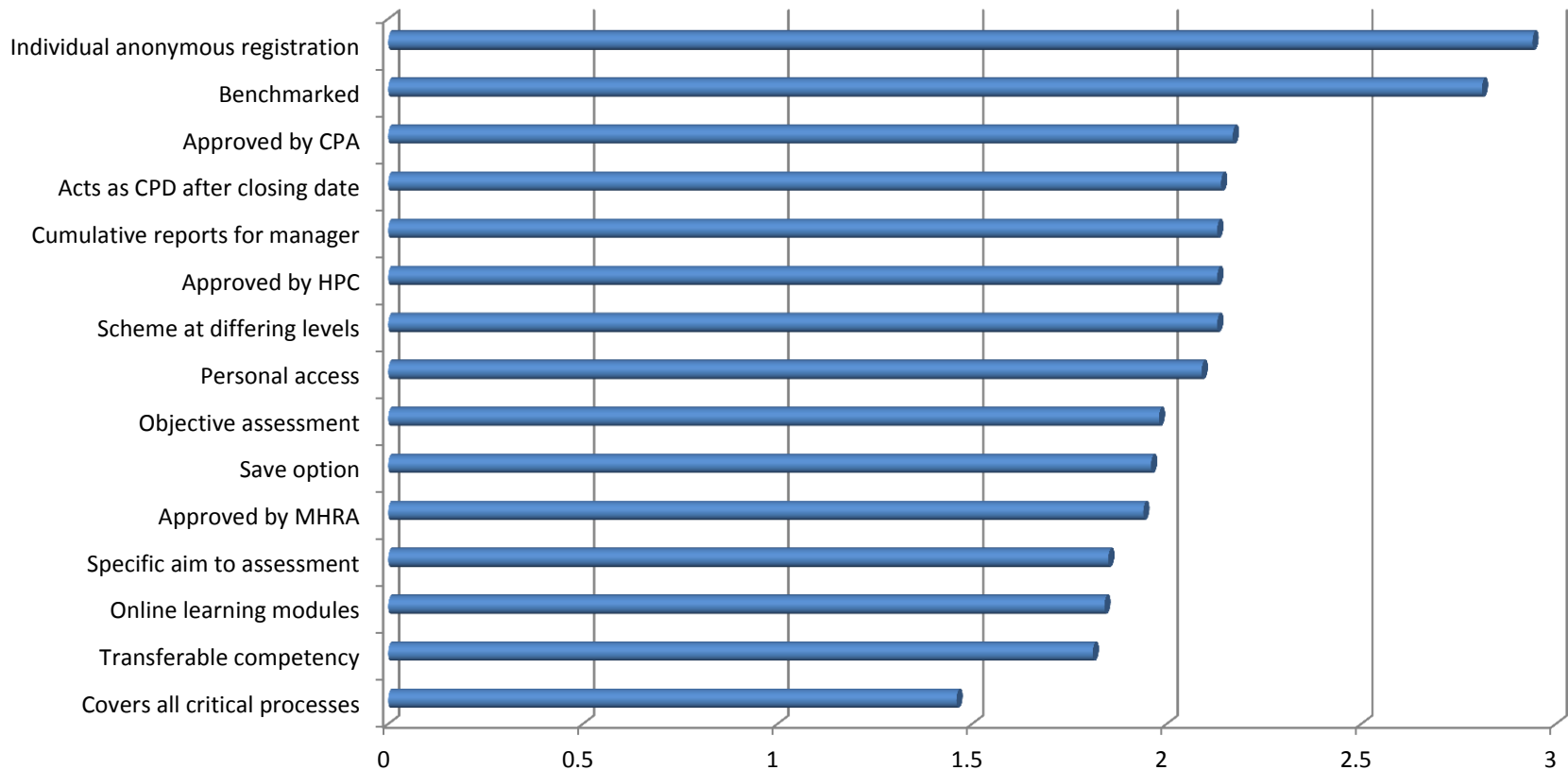
How do you assess staff knowledge?



Participant survey outcomes

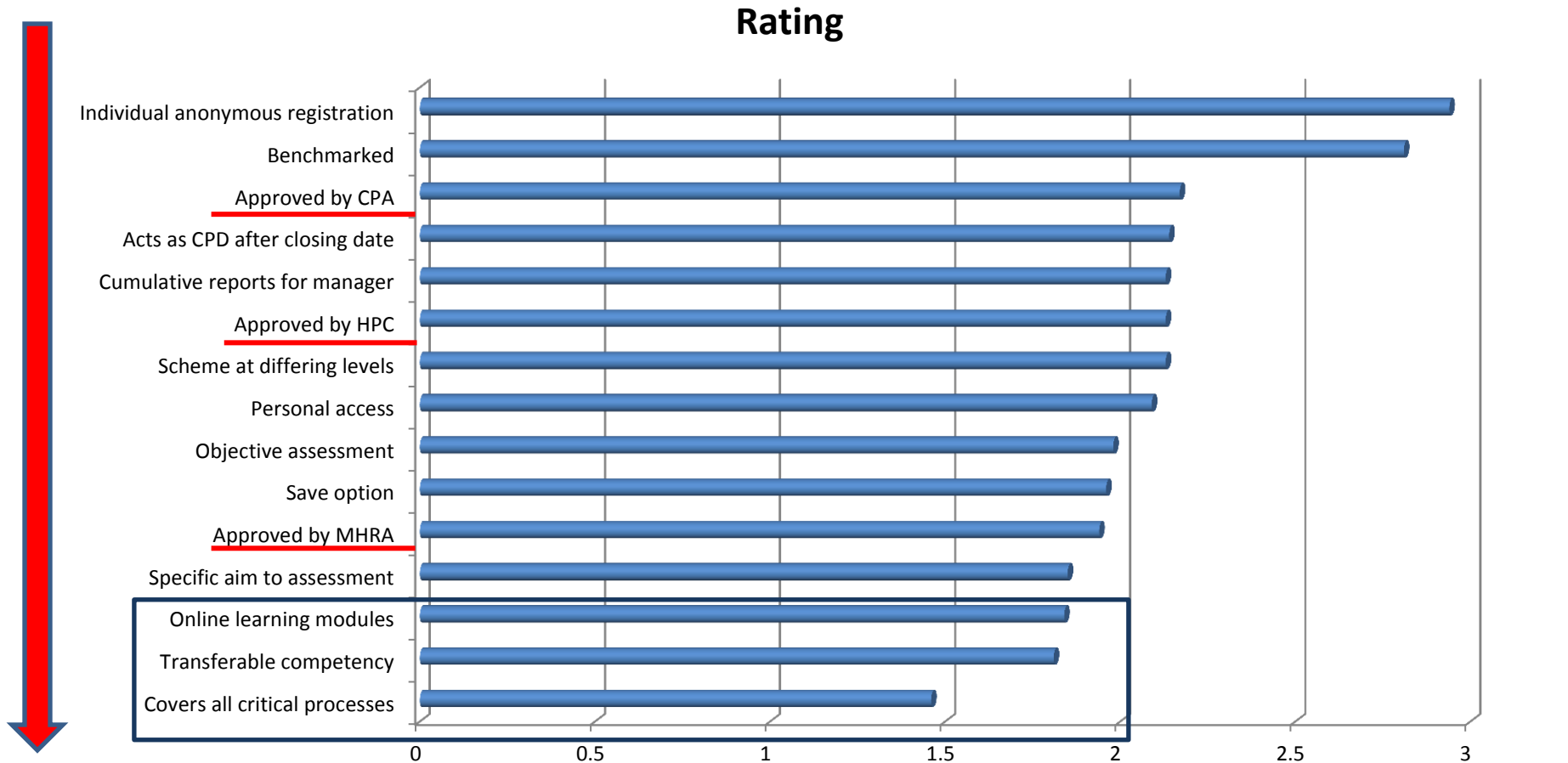
Features rating

Rating



Participant survey outcomes

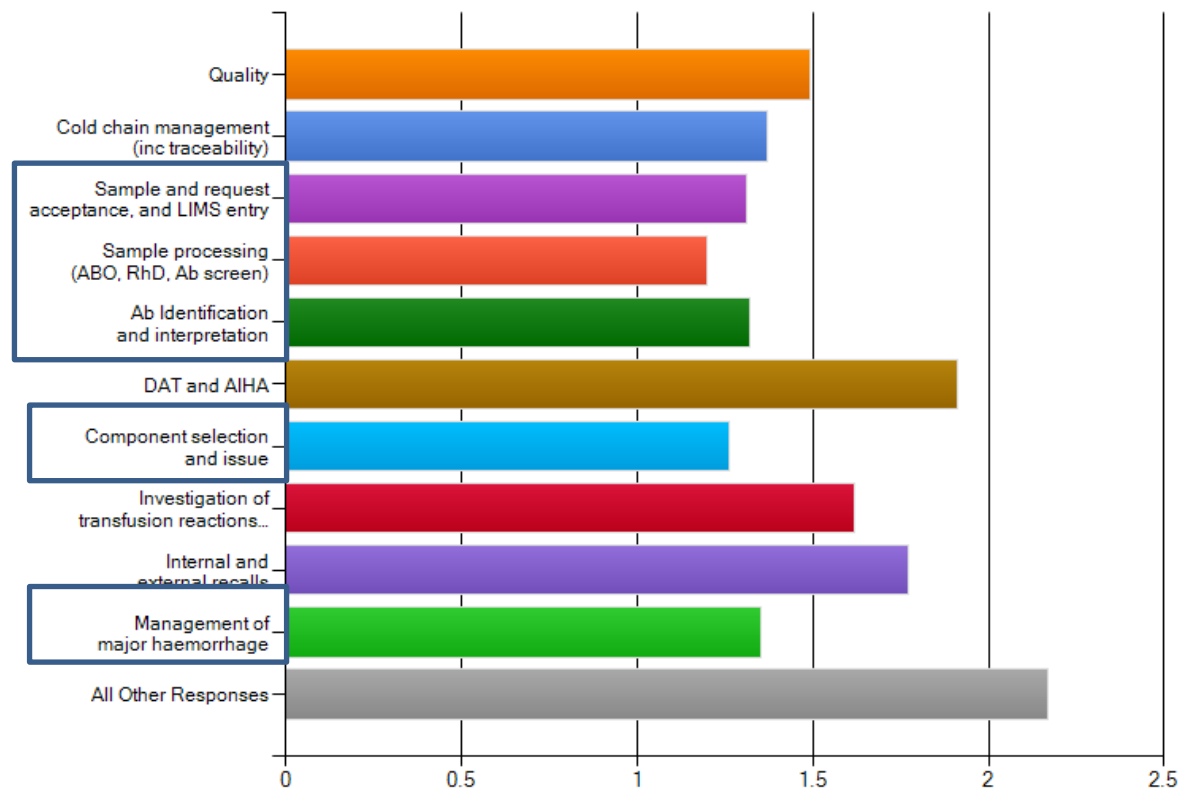
Features rating



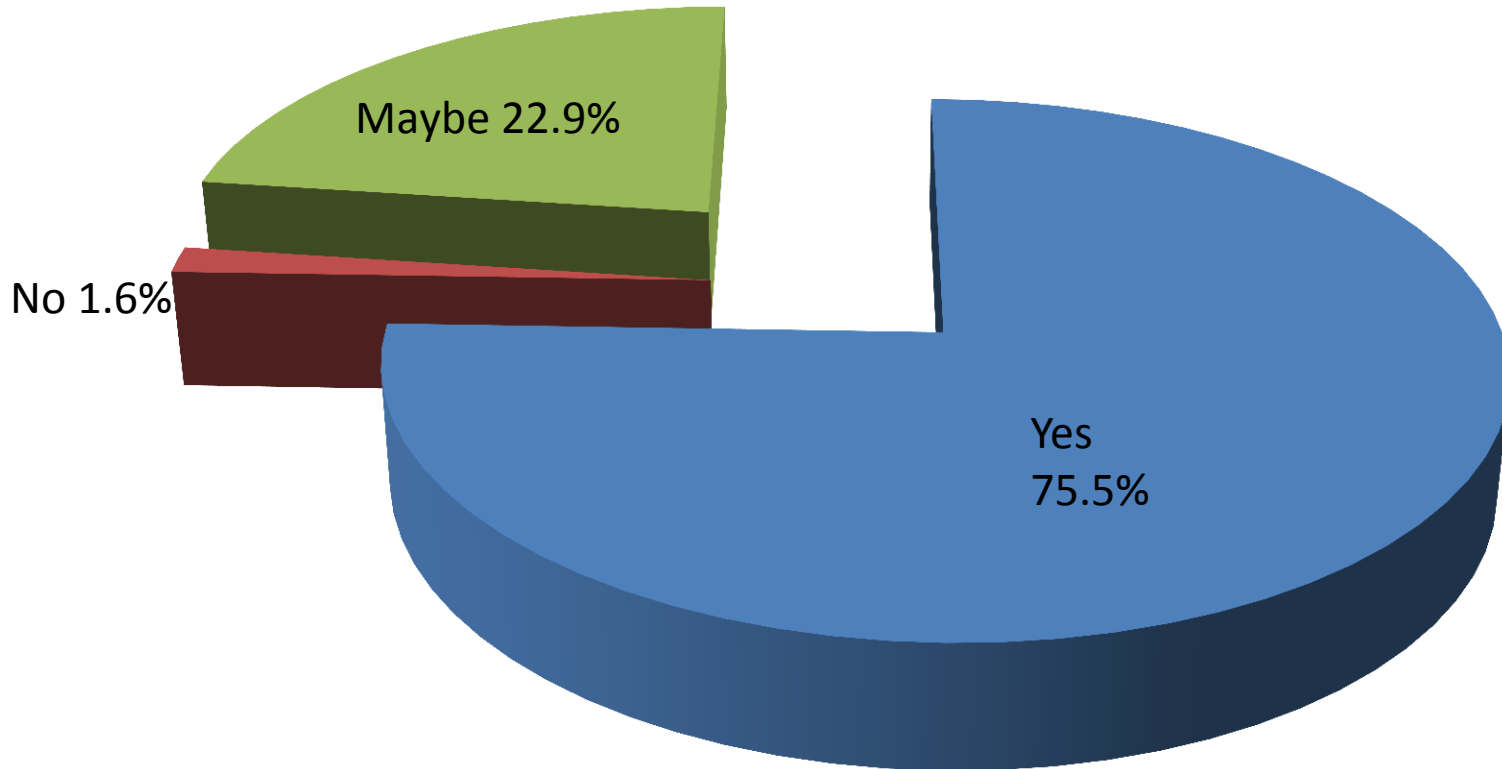
Participant survey outcomes

Critical processes

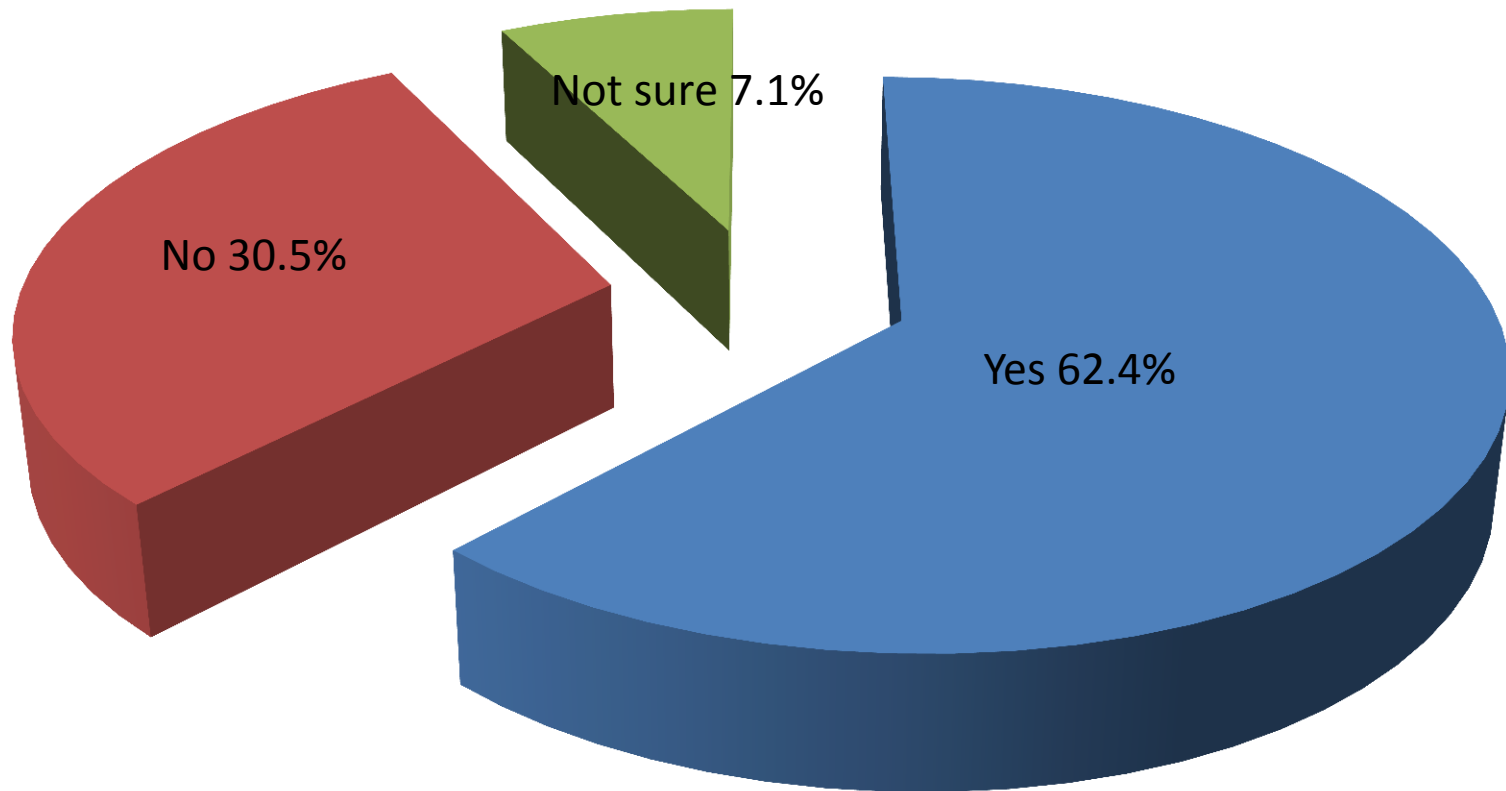
In order to inform which critical processes should initially be included in any assessment scheme please complete the following table.



Participant survey outcomes would you participate?

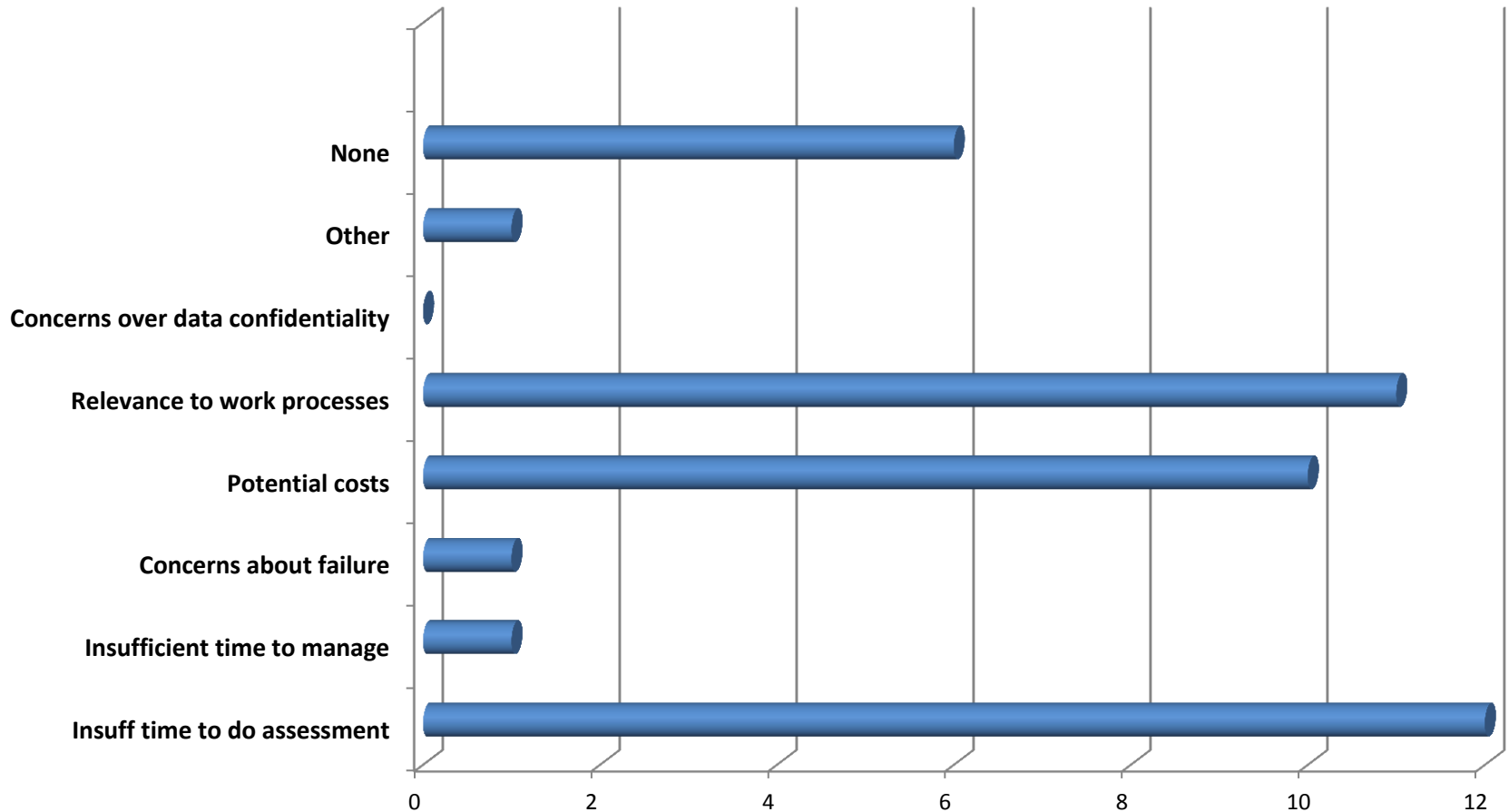


Participant survey outcomes would you pay?



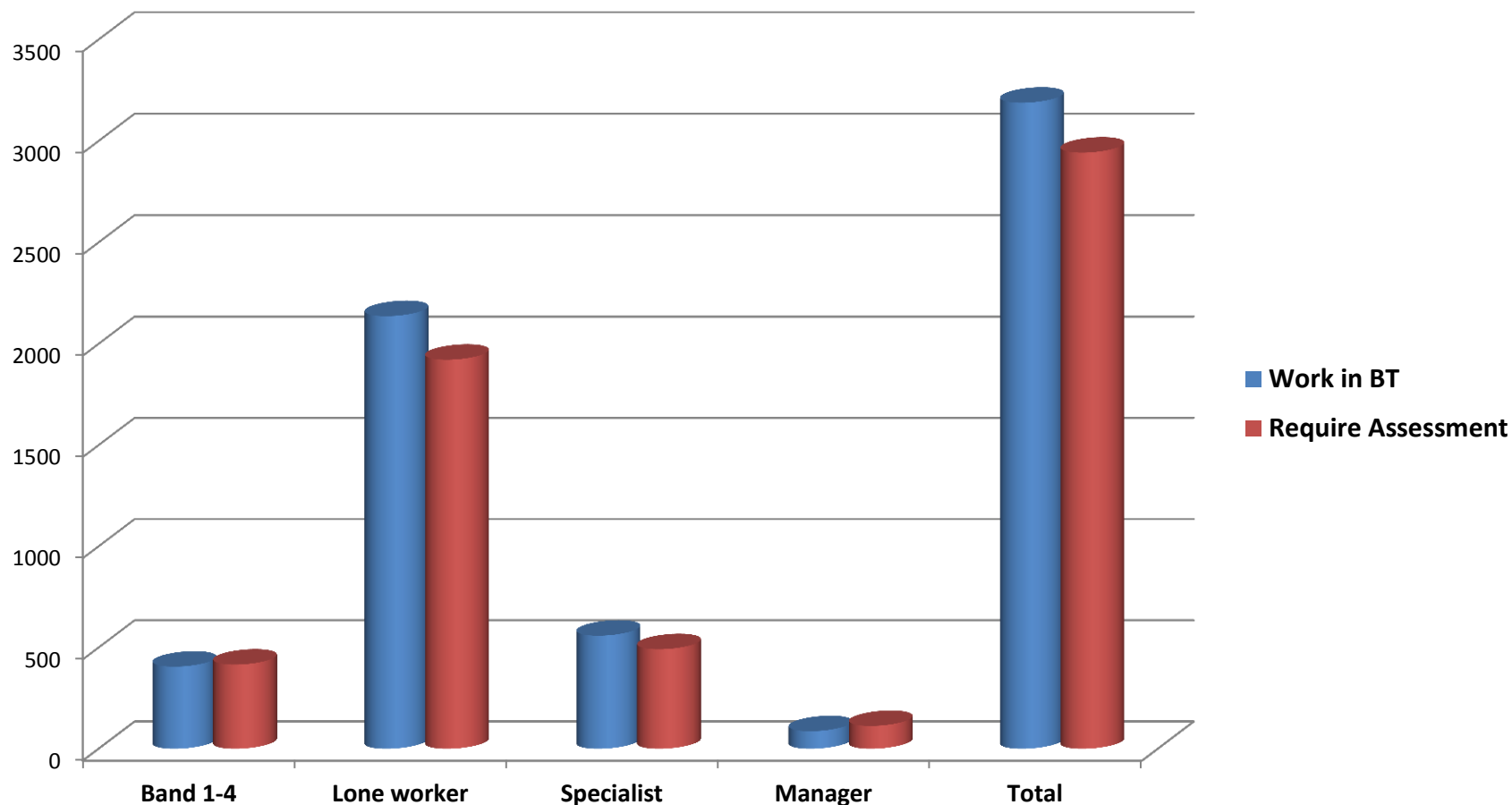
Participant survey outcomes

why might you not participate?



Participant survey outcomes

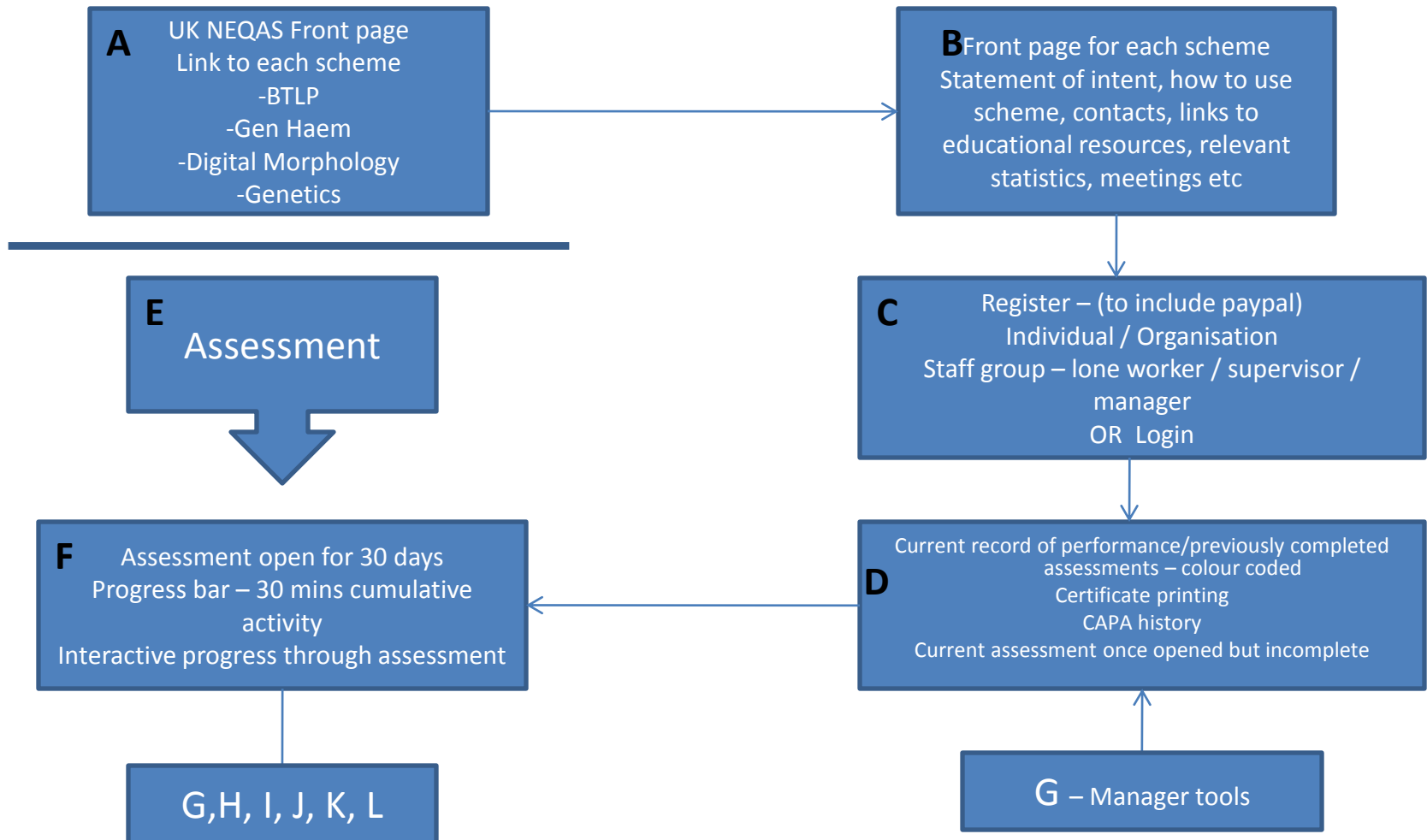
Potential numbers needing assessment



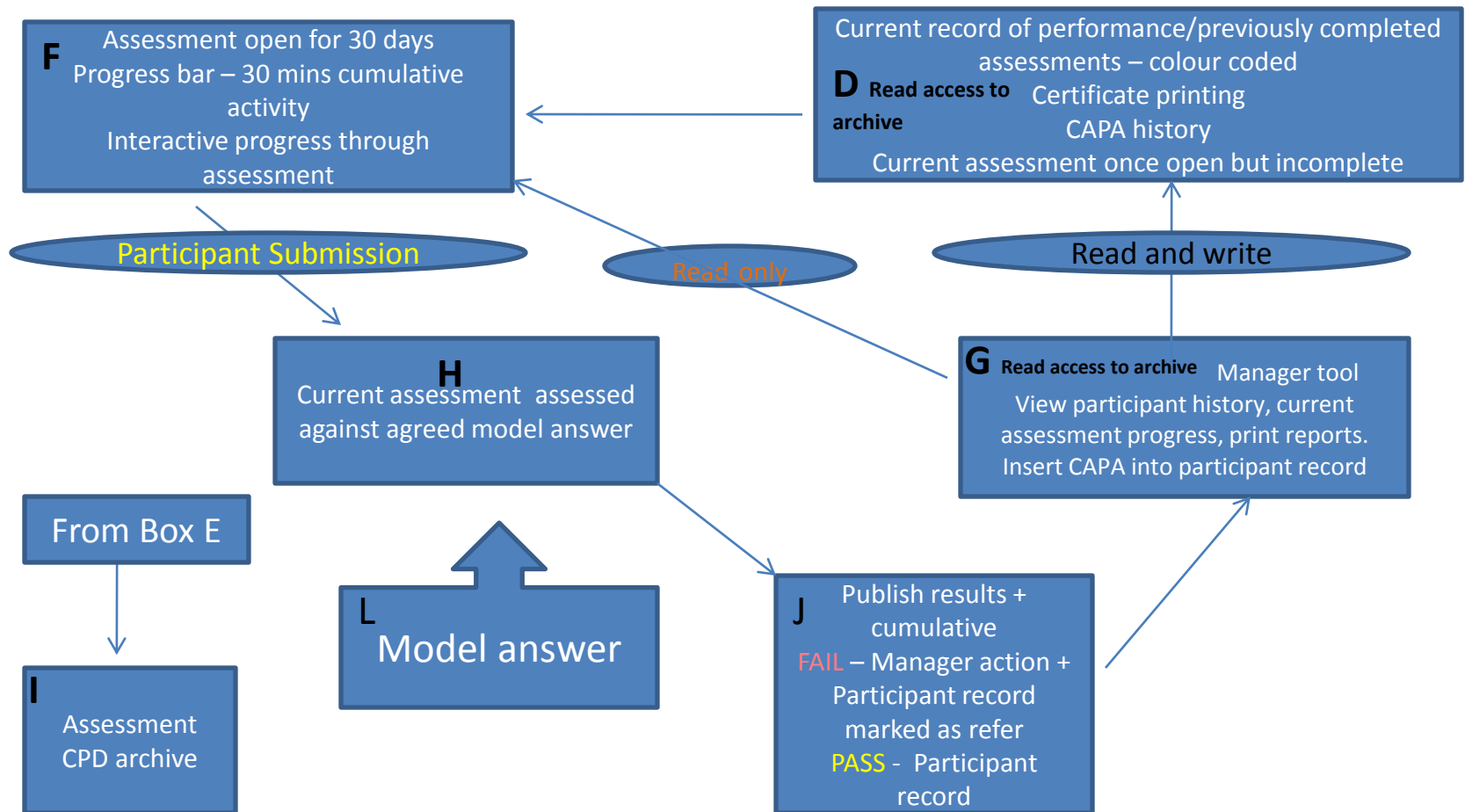
Workplan

- Evaluate IT
- Link/create learning resources
- Facilitate a formal 'Special Advisory Group'
- Produce 'Terms of Reference' for the scheme
- Create an initial library of assessments and model answers
- Issue a 'pilot' assessment to controlled participant base

Proposed schematic



Proposed schematic



Timescale

- 2 year pilot project
- SurveyMonkey pilot of concept in late 2012
- IT pilot 2013
- Lone workers first
- No fee during the pilot
- Feedback from participants

Acknowledgements

Thanks to our panel of advisors:

- Dan Pelling – Ex. training co-ordinator Imperial
 - Now UK NEQAS Haematology!
- Carol Cantwell – Tx lab manager, St Mary's
- Helen Barber – Tx lab manager, Barnet
 - Past SC Chair
- Matt Ginger – WGH Snr BMS
- Anna Capps-Jenner - Ealing, TDL