

# Band 2 Theatre Support Assistant Competency Framework

Name:.....

Clinical area / Department:.....

Line Manager: .....

Date of commencement of competencies:.....

Date of completion of competencies:.....

**Working in partnership**

The Royal Wolverhampton NHS Trust  
Walsall Healthcare NHS Trust



# Contents

## Page

|                                                                     |    |
|---------------------------------------------------------------------|----|
| Introduction.....                                                   | 3  |
| Assessment Taxonomy .....                                           | 5  |
| Assessor Signature and Stamps .....                                 | 6  |
| Competencies:                                                       |    |
| 1. Commitment to Trust Values and the Delivery of Quality Care..... | 7  |
| 2. Confidentiality .....                                            | 8  |
| 3. Communication .....                                              | 9  |
| 4. Team Working.....                                                | 11 |
| 5. Privacy and Dignity .....                                        | 12 |
| 6. Equality and Diversity .....                                     | 13 |
| 7. Infection Prevention .....                                       | 14 |
| 8. Manual Handling .....                                            | 16 |
| 9. Core Skills .....                                                | 17 |
| 10. Falls Prevention .....                                          | 20 |
| 11. Tissue Viability.....                                           | 21 |
| 12. Emergencies .....                                               | 22 |
| 13. Collection, Storage and Transportation of Specimens .....       | 24 |
| 14. Stock Ordering / Re-Stocking .....                              | 25 |
| 15. Care after Death .....                                          | 26 |

## Introduction

This document identifies generic skills and competencies expected of all Theatre Support Assistant (TSA) working within Walsall Care NHS Trust & The Royal Wolverhampton NHS Trust at Band 2.

These competencies are designed to encompass the trusts' values which must be embedded throughout all sections of this document.

On completion, this document must be kept by the Theatre Support Assistant for their personal portfolio; a copy submitted to the line manager and retained in their personal file.

**Please note if the TSA is yet to complete and achieved their Care Certificate then they will be required to complete the Care Certificate competencies whilst also completing this document.**

## Code of Conduct for Care Support Workers

The Trust expects all Theatre Support Assistants to adhere to the Skills for Health/Skills for Care Code of Conduct for Care support workers and Adult Social Care Workers in England.

Skills for Care/Skills for Health (2013) Code of Conduct for Care Support workers and Adult Social Care Workers in England [www.skillsforcare.org](http://www.skillsforcare.org).

## Guidance Notes

All the skills identified within this document must be carried out in line with:

- Current Trust policies, procedures, and protocols
- Current legislation

The TSA undertaking these competences must also ensure that they:

- Maintain the health and safety of the patient, their colleagues and themselves.
- Use all equipment appropriately and safely.
- Provide the patient with emotional and physical support throughout
- Seek appropriate advice and support if unsure of the action to take.
- Participate in the delivery evidence-based quality care.

## Assessment

Staff undertaking competency assessments must be competent in the skills being assessed. The assessor must be a Registered Nurse, Nursing Associate or AHP who has been deemed competent by the Department Manager.

Whilst completing the competencies within this document the assessors must be aware that they will remain accountable for the delegation of any task and the supervision of the individual.

A TSA is expected to demonstrate a minimum of Level 3 of Steiner and Bell's taxonomy as identified below (Page 5) in all competencies. The assessor must ensure that each outcome is reviewed, signed, and dated indicating assessment or non-assessment in line with the outlined standards.

**Competencies MUST be achieved within 6 months of commencing in post however this can be increased to 12 months in the exceptional circumstances and will be reviewed on an individual basis. Staff assimilated into the Band 3 role must complete the competencies within 12 months of assimilation.**

The manager or person with delegated responsibility will:

- Meet the TSA fortnightly, review competencies and set realistic timescales for assessment.
- Competencies should be reviewed at the annual appraisal.
- Accurately and honestly assess the TSA against the competence criteria, identify any competencies not being met and provide constructive feedback and guidance to support and enable the TSA to become competent.
- Review progress midway through the programme and escalate to the Area Manager if timescales are not being achieved or other concerns are identified.

Where competence cannot be demonstrated because that element of care is not delivered in a particular clinical setting this must be documented in this booklet by the manager of that clinical area. The TSA is expected to ensure any competencies omitted because opportunities are not available, are achieved within 6 months of commencement should they move to a clinical area where that skill is required.

### **Failure to progress**

Where areas of concern are identified, or the TSA fails to achieve competence in a timely manner this should be escalated to the Area Manager at the earliest opportunity. The TSA, Manager and Practice Education Facilitator must agree clear action plans to facilitate assessment within a defined timescale. These plans must be documented in the individual's personal file and progress regularly reviewed. Further failure to progress should then be managed under the Trust's Capability or Conduct Procedures.

### **Relevant Contact Details:**

The education team may be able to offer support or identify appropriate training opportunities to support the TSAs who are failing to demonstrate competence.

### **Disclaimer/Sign Off**

I confirm that I have checked the below competencies and confirm that all sections are completed accurately.

**Senior Sister /Charge Nurse / Practice Education Facilitator:**

Print name: ..... Signature/Stamp: ..... Date: .....

**Member of Staff:**

Print name: ..... Signature/Stamp: ..... Date: .....

## Assessment Taxonomy

The following taxonomy developed by Steinaker and Bell (1979) describes the sequence of levels of skill acquisition that individuals progress through as they learn and develop competence in a skill.

All TSA's are expected to demonstrate skills at a minimum of Level 3 of the taxonomy to be deemed competent.

| <b>Taxonomy level</b> | <b>Learners performance</b> | <b>Criteria for accepted performance</b>                                                                                                                  | <b>Implications for mentors / assessors</b>                                                                                                                                  |
|-----------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Level 1 (L1)          | Exposure                    | Gain understanding through exposure of the knowledge, skills and attitudes needed for professional competence.                                            | Selects and presents information. Demonstrates appropriate task. Acts as a motivator to reduce anxiety and maintain confidence. Observes trainees willingness to learn.      |
| Level 2 (L2)          | Participation               | Completes competence only with substantial supervision and support. Student is unable to relate theory to practice                                        | Offers guidance and supportive feedback. Questions the trainees understanding. Promote further thought and learning from situation. Observes level of learner participation. |
| Level 3 (L3)          | Identification              | <b>Perform competency safely with minimal supervision / support, is able to relate theory to practice.</b>                                                | <b>Less supervision and intervention. Provides advice and feedback. Reinforces good practice. Asks questions of the trainee, relating theory to practice.</b>                |
| Level 4 (L4)          | Internalisation             | Able to explain the rationale for nursing action, is able to transfer knowledge to new situations. Seeks and applies new knowledge and research findings. | Requires less supervision whilst caring for a group of patients/clients, demonstrates ability to use problem solving skills, critical analysis, and evaluation.              |
| Level 5 (L5)          | Dissemination               | Capable of independent nursing practice. Advises others, teaches junior colleagues, and demonstrates ability to manage care delivery by junior staff.     | Requires minimal supervision to plan, implement and evaluate care for a group of patients. Demonstrates critical analysis, evaluation, and decision-making skills            |

Steinaker, N. and Bell, M (1979), The Experiential Taxonomy: A New Approach to teaching and learning.

Assessor Signature and Stamps

For validation purposes, all Assessors involved in the assessment of the TSA undertaking these competences are required to provide a signature and the relevant details below.

While the use of personal stamps is encouraged, this should be in addition to, rather than a replacement for, the Assessor’s signature and date.  
All Assessors are personally and professionally accountable for ensuring that they are competent to assess a TSA undertaking these competences.

| Full Name | Position | Clinical Area | Signature | Initials |
|-----------|----------|---------------|-----------|----------|
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |
|           |          |               |           |          |

## Clinical Competencies

### 1.0 Commitment to Trust Values and the Delivery of Quality Care

| Performance Criteria                                                                                                                                                                                                                                           | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>1.1</b> Demonstrate adherence to Trust policies and practices, relevant to your role to include: <ul style="list-style-type: none"> <li>• Trust values</li> <li>• Infection Prevention</li> <li>• Human Resources</li> <li>• Clinical Procedures</li> </ul> |                                                                            |                              |      |
| <b>1.2</b> Discuss the boundaries of your role and responsibilities.                                                                                                                                                                                           |                                                                            |                              |      |
| <b>1.3</b> Discuss your understanding of what constitutes compassionate care.                                                                                                                                                                                  |                                                                            |                              |      |
| <b>1.4</b> Explain how you would seek supervision when situations are beyond your level of competence.                                                                                                                                                         |                                                                            |                              |      |
| <b>1.5</b> Identify ways in which you can promote and uphold the delivery of person-centred care.                                                                                                                                                              |                                                                            |                              |      |
| <b>1.6</b> Discuss how you will maintain competence within your role.                                                                                                                                                                                          |                                                                            |                              |      |
| <b>1.7</b> Demonstrate presentation of self in a manner which promotes a positive image of health care workers.                                                                                                                                                |                                                                            |                              |      |
| <b>1.8</b> Demonstrate adherence to the Trust dress code policy at all times.                                                                                                                                                                                  |                                                                            |                              |      |
| <b>1.9</b> Demonstrate consistent reliability and punctuality.                                                                                                                                                                                                 |                                                                            |                              |      |
| <b>1.10</b> Discuss the Trust patient safety culture and identify some of the initiatives that the Trust implements.                                                                                                                                           |                                                                            |                              |      |
| <b>TSA</b><br>Print and sign:                                                                                                                                                                                                                                  |                                                                            | Date:                        |      |
| <b>Assessor</b><br>Print and sign:                                                                                                                                                                                                                             |                                                                            | Date:                        |      |

2.0 Confidentiality

| Performance Criteria                                                                                             | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| 2.1 Explain the principles of confidentiality.                                                                   |                                                                            |                              |      |
| 2.2 Discuss why it is important to clarify the identity of the enquirer prior to providing any information.      |                                                                            |                              |      |
| 2.3 Explain how you maintain the confidentiality of the individual's information within the working environment. |                                                                            |                              |      |
| 2.4 Explain why it is important to gain patient permission to disclose information.                              |                                                                            |                              |      |
| 2.5 Discuss when disclosure of information is justified.                                                         |                                                                            |                              |      |
| TSA<br>Print and sign:                                                                                           |                                                                            | Date:                        |      |
| Assessor<br>Print and sign:                                                                                      |                                                                            | Date:                        |      |



### 3.0 Communication

| Performance Criteria                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>3.1</b> Discuss the importance of responding and addressing patients in a timely manner                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                            |                              |      |
| <b>3.2</b> Discuss the appropriate action to take where actions/behaviours of patients give you cause for concern.                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                            |                              |      |
| <b>3.3</b> Demonstrate development and maintenance of professional relationships with patients, carers, and colleagues.                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                            |                              |      |
| <b>3.4</b> Demonstrate use of telephones i.e. transferring call, using the mute facility appropriately and placing a call back.                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                            |                              |      |
| <b>3.5</b> Demonstrates the correct handling of telephone enquiries including: <ul style="list-style-type: none"> <li>• Demonstrates a professional manner.</li> <li>• Answers the telephone promptly.</li> <li>• Greets callers; identifies self and department.</li> <li>• Establishes who is calling.</li> <li>• Take relevant details from the caller including who they wish to speak to.</li> <li>• Identifies the appropriate person to deal with the call.</li> <li>• Ensure messages are communicated in an accurate and timely fashion.</li> </ul> |                                                                            |                              |      |
| <b>3.6</b> Demonstrate communication with patients at a pace, in a manner and at a level appropriate to individuals' understanding and preferences.                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                            |                              |      |
| <b>3.7</b> Discuss actions that you may take to ensure patients have the support they need to communicate their views, wishes and preferences.                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                            |                              |      |
| <b>3.8</b> Explain how you would seek information and advice about patients' specific communication, language needs and preferences.                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                            |                              |      |

|                 |                                                                                                                                                     |  |       |  |
|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|-------|--|
| <b>3.9</b>      | Demonstrate appropriate body language, eye contact, and tone of voice and methods of listening that actively encourage patients and to communicate. |  |       |  |
| <b>3.10</b>     | Discuss the importance of concentrating, listening, and responding appropriately when you are communicating with patients.                          |  |       |  |
| <b>3.11</b>     | Discuss the action you would take if you identified a matter of concern/ potential safeguarding issue.                                              |  |       |  |
| <b>3.12</b>     | Explain the importance of seeking additional advice regarding questions and concerns that are beyond your limitations.                              |  |       |  |
| <b>3.13</b>     | Discuss the appropriate action to address any misunderstandings.                                                                                    |  |       |  |
| <b>3.14</b>     | Demonstrate access and accurate completion of patient's bedside records.                                                                            |  |       |  |
| <b>3.15</b>     | Discuss how to deal with a complaint.                                                                                                               |  |       |  |
| <b>3.16</b>     | Discuss the PALS service and their role.                                                                                                            |  |       |  |
| <b>3.17</b>     | Explain how you may deal with an agitated or aggressive patient.                                                                                    |  |       |  |
| <b>TSA</b>      | Print and sign:                                                                                                                                     |  | Date: |  |
| <b>Assessor</b> | Print and sign:                                                                                                                                     |  | Date: |  |

#### 4.0 Team Working

| Performance Criteria                                                                                                                                                                                                                                        | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>4.1</b> Demonstrate collaborative working with colleagues from own/other professions.                                                                                                                                                                    |                                                                            |                              |      |
| <b>4.2</b> Demonstrate the ability to identify: <ul style="list-style-type: none"> <li>• The structure of the theatre team</li> <li>• The different roles and responsibilities</li> <li>• How your role fits into this structure</li> </ul>                 |                                                                            |                              |      |
| <b>4.3</b> Demonstrate an understanding of theatre etiquette                                                                                                                                                                                                |                                                                            |                              |      |
| <b>4.4</b> Agree, seek, support, and take responsibility for any development and learning that will enable you to carry out your role and responsibilities within the team more effectively.                                                                |                                                                            |                              |      |
| <b>4.5</b> Ensure your behaviour to others in the team supports the effective functioning of the team.                                                                                                                                                      |                                                                            |                              |      |
| <b>4.6</b> Offer supportive and constructive assistance to team members.                                                                                                                                                                                    |                                                                            |                              |      |
| <b>4.7</b> Complete commitments to other team members effectively and according to overall work priorities.                                                                                                                                                 |                                                                            |                              |      |
| <b>4.8</b> Discuss what action you would take if you experienced problems in working effectively with other team members.                                                                                                                                   |                                                                            |                              |      |
| <b>4.9</b> Demonstrate the correct preparation of the theatre environment and any equipment to be used to include: <ul style="list-style-type: none"> <li>• Identification of any health and safety hazards and action in line with trust policy</li> </ul> |                                                                            |                              |      |
| <b>TSA</b><br>Print and sign:                                                                                                                                                                                                                               |                                                                            | Date:                        |      |
| <b>Assessor</b><br>Print and sign:                                                                                                                                                                                                                          |                                                                            | Date:                        |      |

5.0 Privacy and Dignity

| Performance Criteria                                                                                                      | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| 5.1 Discuss how patient privacy and dignity is upheld.                                                                    |                                                                            |                              |      |
| 5.2 Demonstrate the maintenance of patient dignity through theatre care i.e. transfer, induction, operating and recovery. |                                                                            |                              |      |
| TSA<br>Print and sign:                                                                                                    |                                                                            | Date:                        |      |
| Assessor<br>Print and sign:                                                                                               |                                                                            | Date:                        |      |

## 6.0 Equality and Diversity

| Performance Criteria                                                                                       | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>6.1</b> Demonstrate treating and valuing patients as individuals.                                       |                                                                            |                              |      |
| <b>6.2</b> Demonstrate respect the individual's diversity, cultures, values, and beliefs.                  |                                                                            |                              |      |
| <b>6.3</b> Demonstrate appropriate support to enable individuals to make their own decisions.              |                                                                            |                              |      |
| <b>6.4</b> Discuss how you would support individuals to make compliments and complaints.                   |                                                                            |                              |      |
| <b>6.5</b> Explain how you put the individual's preferences at the centre of everything you and others do. |                                                                            |                              |      |
| <b>6.6</b> Discuss how to challenge behaviours and practice that discriminate against individuals.         |                                                                            |                              |      |
| <b>6.7</b> Discuss how you would seek advice if having difficulty promoting equality and diversity.        |                                                                            |                              |      |
| <b>TSA</b><br>Print and sign:                                                                              |                                                                            | Date:                        |      |
| <b>Assessor</b><br>Print and sign:                                                                         |                                                                            | Date:                        |      |

## 7.0 Infection Prevention

| Performance Criteria                                                                                                                                                    | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>7.1</b> Demonstrate correct hand washing technique to prevent the spread of infection.                                                                               |                                                                            |                              |      |
| <b>7.2</b> Discuss the five moments of hand hygiene.                                                                                                                    |                                                                            |                              |      |
| <b>7.3</b> Demonstrate safe handling of body fluids in accordance with Infection Prevention policies.                                                                   |                                                                            |                              |      |
| <b>7.4</b> Discuss how infection prevention standards are always upheld.                                                                                                |                                                                            |                              |      |
| <b>7.5</b> Discuss the importance of keeping your fingernails short and clean, and do not use nail polish or artificial fingernails.                                    |                                                                            |                              |      |
| <b>7.6</b> Discuss the importance of reporting any skin problems to your line manager, Occupational Health, or your GP so that appropriate treatment can be undertaken. |                                                                            |                              |      |
| <b>7.7</b> Discuss the importance of cleanliness of equipment.                                                                                                          |                                                                            |                              |      |
| <b>7.8</b> Explain the principles of isolation.                                                                                                                         |                                                                            |                              |      |
| <b>7.9</b> Discuss the infection prevention risks for non-sterile surgical equipment.                                                                                   |                                                                            |                              |      |

|                 |                                                                                                                                                                                                                                                                                                           |  |       |  |
|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------|--|
| <b>7.10</b>     | Demonstrate how to dispose of all waste. <ul style="list-style-type: none"> <li>• Sharps.</li> <li>• Soiled linen.</li> <li>• Infected linen.</li> <li>• Clinical waste.</li> <li>• Domestic waste.</li> <li>• Glass bottles.</li> <li>• Blood and blood products.</li> <li>• Cytotoxic waste.</li> </ul> |  |       |  |
| <b>7.11</b>     | Demonstrate the accurate cleaning of equipment between cases and at the beginning/end of the operating session.                                                                                                                                                                                           |  |       |  |
| <b>7.12</b>     | Discuss decontamination and sterilisation processes.                                                                                                                                                                                                                                                      |  |       |  |
| <b>7.13</b>     | Discuss the action to take following a needlestick injury.                                                                                                                                                                                                                                                |  |       |  |
| <b>7.14</b>     | Demonstrate the correct procedure for cleaning up blood and fluid spillages to include: <ul style="list-style-type: none"> <li>• Use of correct solutions</li> <li>• Personal Protective Equipment</li> <li>• Waste Management</li> </ul>                                                                 |  |       |  |
| <b>7.15</b>     | Demonstrate the correct management of used instruments, sets and different types of waste to include where to place them for collection.                                                                                                                                                                  |  |       |  |
| <b>7.16</b>     | Identify and discuss when a supplementary item or theatre set is sterile including the ability to identify when items/sets are unsuitable for use.                                                                                                                                                        |  |       |  |
| <b>7.17</b>     | Demonstrate cleaning of the theatre environment following a procedure to include: <ul style="list-style-type: none"> <li>• Ensuring the environment is clean and free from dust</li> <li>• Accurate completion of cleaning logs</li> </ul>                                                                |  |       |  |
| <b>TSA</b>      | Print and sign:                                                                                                                                                                                                                                                                                           |  | Date: |  |
| <b>Assessor</b> | Print and sign:                                                                                                                                                                                                                                                                                           |  | Date: |  |

8.0 Manual Handling

| Performance Criteria                                                                                                                                                                                                                                                  | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| 8.1 Identify where you would locate information regarding patient's manual handling needs.                                                                                                                                                                            |                                                                            |                              |      |
| 8.2 Locate and discuss the use and storage of available equipment.                                                                                                                                                                                                    |                                                                            |                              |      |
| 8.3 Demonstrate safe manual handling practice following correct techniques and using appropriate equipment to include: <ul style="list-style-type: none"><li>• The correct patient positioning for the procedure</li><li>• Transfer of patients to recovery</li></ul> |                                                                            |                              |      |
| TSA<br>Print and sign:                                                                                                                                                                                                                                                |                                                                            | Date:                        |      |
| Assessor<br>Print and sign:                                                                                                                                                                                                                                           |                                                                            | Date:                        |      |



## 9.0 Core Skills

| Performance Criteria                                                                                                                                                                                                                                                                         | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>9.1</b> Identify the correct documentation to collect a patient for theatre from the clinical area.                                                                                                                                                                                       |                                                                            |                              |      |
| <b>9.2</b> Identify the correct transportation requirements for individual patients.                                                                                                                                                                                                         |                                                                            |                              |      |
| <b>9.3</b> Demonstrate comprehensive knowledge of the hospital to ensure effective patient transfer takes place.                                                                                                                                                                             |                                                                            |                              |      |
| <b>9.4</b> Demonstrate effective communication with staff/departments to ensure safe patient transfer to theatre.                                                                                                                                                                            |                                                                            |                              |      |
| <b>9.5</b> Discuss and demonstrate the importance of maintain patient privacy, dignity and confidentiality during transfer to and from theatre.                                                                                                                                              |                                                                            |                              |      |
| <b>9.6</b> Demonstrate the ability to ask about a patients requirement for: <ul style="list-style-type: none"> <li>• Communication</li> <li>• Specific needs</li> <li>• To ask for extra support to enable effective communication</li> </ul>                                                |                                                                            |                              |      |
| <b>9.7</b> Demonstrates assisting the registered practitioner with the care of the patient Pre-operatively to include: <ul style="list-style-type: none"> <li>• Preparing the theatre</li> <li>• Collecting the patient</li> <li>• Supporting in the anaesthetic room as required</li> </ul> |                                                                            |                              |      |
| <b>9.8</b> Demonstrates assisting the registered practitioner with the care of the patient intraoperatively to include: <ul style="list-style-type: none"> <li>• Circulating</li> <li>• Maintaining sterile field</li> </ul>                                                                 |                                                                            |                              |      |

|             |                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |
|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| <b>9.9</b>  | Demonstrates participation in circulating duties to include but limited to: <ul style="list-style-type: none"> <li>• Moving and preparing patient for theatre</li> <li>• Opening sterile consumables</li> <li>• Counting and adding extra items to count board during procedure</li> <li>• To carry out all theatre duties in line with theatre LocSipps</li> </ul>                   |  |  |  |
| <b>9.10</b> | Demonstrates assisting the registered practitioner with the care of the patient Post-operatively to include: <ul style="list-style-type: none"> <li>• Assisting with transfer of the patient from table to bed</li> <li>• Moving the patient from theatre to recovery</li> <li>• Supporting in recovery as required</li> <li>• Assisting transferring patient back to ward</li> </ul> |  |  |  |
| <b>9.11</b> | Demonstrate liaising with sterile services to ensure surgical instruments are available for procedures.                                                                                                                                                                                                                                                                               |  |  |  |
| <b>9.12</b> | Demonstrate the correct checking an instrument set pre and post use with a designated person to include: <ul style="list-style-type: none"> <li>• Items are as specified</li> <li>• Documentation completion</li> <li>• Reporting missing or damaged items to the appropriate person and completing the required documentation</li> </ul>                                             |  |  |  |
| <b>9.13</b> | Discusses the 5 Steps to Safer Surgery.                                                                                                                                                                                                                                                                                                                                               |  |  |  |
| <b>9.14</b> | Demonstrate participation in the 5 Steps to Safer Surgery where appropriate e.g. brief, debrief and World Health organisation checklist.                                                                                                                                                                                                                                              |  |  |  |
| <b>9.15</b> | Demonstrate assisting the scrub practitioner whilst maintaining the sterile field to include: <ul style="list-style-type: none"> <li>• Communication</li> <li>• Identification of compromise to the sterile field</li> </ul>                                                                                                                                                          |  |  |  |
| <b>9.16</b> | Demonstrate the correct counting and recording of items on the swab board and the complete documentation in line with Trust Policy.                                                                                                                                                                                                                                                   |  |  |  |

|                 |                                                                                                                                                                                                                                                                           |  |       |  |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------|--|
| <b>9.17</b>     | Discuss the action to take in the event of an incorrect swab, needle, and instrument count.                                                                                                                                                                               |  |       |  |
| <b>9.18</b>     | Demonstrate the checking of the prosthesis during a surgical to ensure: <ul style="list-style-type: none"> <li>• The correct prosthesis is picked</li> <li>• That it is checked with the operating surgeon and scrub nurse</li> <li>• That it is still in date</li> </ul> |  |       |  |
| <b>9.19</b>     | Demonstrate the chaperoning of a patient/carer/relative in line with Trust policy.                                                                                                                                                                                        |  |       |  |
| <b>9.20</b>     | Demonstrate assisting registered practitioners in the application of patient monitoring and electro-surgical equipment.                                                                                                                                                   |  |       |  |
| <b>9.21</b>     | Discuss the action to be taken in the event of an accident or incident involving self, patients or others.                                                                                                                                                                |  |       |  |
| <b>TSA</b>      | Print and sign:                                                                                                                                                                                                                                                           |  | Date: |  |
| <b>Assessor</b> | Print and sign:                                                                                                                                                                                                                                                           |  | Date: |  |

10.0 Falls Prevention

| Performance Criteria                                                                                | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| 10.1 Discuss the key factors that contribute to the risk of patients falling.                       |                                                                            |                              |      |
| 10.2 Identify potential environmental hazards and the action required to eliminate them.            |                                                                            |                              |      |
| 10.3 Demonstrates awareness of the Falls Prevention Policy and interventions required.              |                                                                            |                              |      |
| 10.4 Demonstrate accurate completion of the patient documentation with regards to falls prevention. |                                                                            |                              |      |
| 10.5 Discuss the action to take following a patient falling.                                        |                                                                            |                              |      |
| TSA<br>Print and sign:                                                                              |                                                                            | Date:                        |      |
| Assessor<br>Print and sign:                                                                         |                                                                            | Date:                        |      |

## 11.0 Tissue Viability

| Performance Criteria                                                                                                      | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| 11.1 Discuss factors that may cause deterioration of skin.                                                                |                                                                            |                              |      |
| 11.2 Demonstrate ability to recognise pressure damage.                                                                    |                                                                            |                              |      |
| 11.3 Discuss the action to take if a skins changes are detected.                                                          |                                                                            |                              |      |
| 11.4 Identify areas of the body prone to pressure ulcer development.                                                      |                                                                            |                              |      |
| 11.5 Demonstrate correct positioning of patients in bed/chair to maintain comfort and reduce risks of skin deterioration. |                                                                            |                              |      |
| 11.6 Explain how to obtain pressure relieving equipment.                                                                  |                                                                            |                              |      |
| 11.7 Identify and discuss different pressure relieving equipment including its function and how it is used.               |                                                                            |                              |      |
| <b>TSA</b><br>Print and sign:                                                                                             |                                                                            | Date:                        |      |
| <b>Assessor</b><br>Print and sign:                                                                                        |                                                                            | Date:                        |      |

## 12.0 Emergencies

| Performance Criteria                                                                                                                                                                                                                                                                                 | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>12.1</b> Discusses and demonstrates the ability to recognise visible changes in the patients physical or psychological needs and escalates to the registered practitioner.                                                                                                                        |                                                                            |                              |      |
| <b>12.2</b> Identify and discuss the emergency telephone number.                                                                                                                                                                                                                                     |                                                                            |                              |      |
| <b>12.3</b> Demonstrate correct use of the call bell system and emergency telephone number including information to be given.                                                                                                                                                                        |                                                                            |                              |      |
| <b>12.4</b> Discuss how you would ascertain that the individual's circulation and breathing has stopped and establish the need for basic life support (DR ABC).                                                                                                                                      |                                                                            |                              |      |
| <b>12.5</b> Demonstrate an awareness of the RESPECT policy.                                                                                                                                                                                                                                          |                                                                            |                              |      |
| <b>12.6</b> Demonstrate the ability to check that all the appropriate equipment is in good working order.                                                                                                                                                                                            |                                                                            |                              |      |
| <b>12.7</b> Demonstrates a knowledge of the different clinical emergencies that might occur in theatre and where the appropriate emergency equipment is stored and aware that storage is different within each suite                                                                                 |                                                                            |                              |      |
| <b>12.8</b> Discuss the immediate action to deal with health and environmental emergencies, including: <ul style="list-style-type: none"> <li>• Fire.</li> <li>• Security.</li> <li>• Serious and minor accidents.</li> <li>• Cardiac/Respiratory Arrest</li> <li>• Location of equipment</li> </ul> |                                                                            |                              |      |
| <b>12.9</b> Discuss the appropriate action to take on hearing a fire alarm/discovering of a fire.                                                                                                                                                                                                    |                                                                            |                              |      |

|                                    |                                                                   |  |       |  |
|------------------------------------|-------------------------------------------------------------------|--|-------|--|
| <b>12.10</b>                       | Discuss the evacuation procedure, fire escape and assembly point. |  |       |  |
| <b>12.11</b>                       | Locate the fire equipment.                                        |  |       |  |
| <b>12.12</b>                       | Discuss items which pose significant risk of fire.                |  |       |  |
| <b>TSA</b><br>Print and sign:      |                                                                   |  | Date: |  |
| <b>Assessor</b><br>Print and sign: |                                                                   |  | Date: |  |

### 13.0 Collection, Storage and Transport of Specimens

| Performance Criteria                                                                                                                                                                                                             | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>13.1</b> Work within your level of competence, responsibility, and accountability for obtaining and testing specimens.                                                                                                        |                                                                            |                              |      |
| <b>13.2</b> Demonstrate accurate labelling of specimens collected.                                                                                                                                                               |                                                                            |                              |      |
| <b>13.3</b> Explain the importance of accurate labelling of specimens.                                                                                                                                                           |                                                                            |                              |      |
| <b>13.4</b> Demonstrate the correct handling of specimens to include: <ul style="list-style-type: none"> <li>• Correct Personal Protective Equipment</li> <li>• Correct Labelling</li> <li>• Correct transport medium</li> </ul> |                                                                            |                              |      |
| <b>13.5</b> Demonstrate accurate completion of appropriate documentation.                                                                                                                                                        |                                                                            |                              |      |
| <b>13.6</b> Complete trust specific training regarding the collection of blood products.                                                                                                                                         |                                                                            |                              |      |
| <b>13.7</b> Complete trust specific competencies regarding the collection of blood products following training.                                                                                                                  |                                                                            |                              |      |
| <b>TSA</b><br>Print and sign:                                                                                                                                                                                                    |                                                                            | Date:                        |      |
| <b>Assessor</b><br>Print and sign:                                                                                                                                                                                               |                                                                            | Date:                        |      |



## 14.0 Stock Ordering/Re-stocking

| Performance Criteria                                                                                                                                                                                                                                                           | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>14.1</b> Discuss where stores/linen supplies are kept and where to locate key equipment to include ensuring stock is available.                                                                                                                                             |                                                                            |                              |      |
| <b>14.2</b> Discuss how theatre stocks are ordered.                                                                                                                                                                                                                            |                                                                            |                              |      |
| <b>14.3</b> Explain the importance of maintaining stock levels, stock room tidiness and medical gas cylinders.                                                                                                                                                                 |                                                                            |                              |      |
| <b>14.4</b> Demonstrate the accurate checking of consumable stocks to include: <ul style="list-style-type: none"> <li>• replenish appropriately maintaining stock rotation</li> <li>• date checking</li> <li>• Reporting faulty equipment in line with Trust policy</li> </ul> |                                                                            |                              |      |
| <b>14.5</b> Demonstrate assisting the practitioners in maintaining daily stock control and cleanliness in the recovery room.                                                                                                                                                   |                                                                            |                              |      |
| <b>TSA</b><br>Print and sign:                                                                                                                                                                                                                                                  |                                                                            | Date:                        |      |
| <b>Assessor</b><br>Print and sign:                                                                                                                                                                                                                                             |                                                                            | Date:                        |      |

## 15.0 Care after death

| Performance Criteria                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Evidence of assessment at assessed Level 3<br>(To be completed by the TSA) | Assessor Signature and Stamp | Date |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------|------|
| <b>15.1</b> Discuss importance of delivering Care after Death to include identification and adherence to cultural, spiritual and family beliefs.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                            |                              |      |
| <b>15.2</b> Discuss communication strategies and support techniques for significant others/bereaved individuals including team members.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                            |                              |      |
| <b>15.3</b> Discuss how to support family who want to participate in Care after Death to include: <ul style="list-style-type: none"> <li>• Communication</li> <li>• Recognition of emotions</li> <li>• Identify the level of participant that the family members wants to take</li> <li>• Confirm with family if hand prints, locks of hair or hand photographs are required and facilitates if requested</li> </ul>                                                                                                                                                                                                                                                                               |                                                                            |                              |      |
| <b>15.4</b> Demonstrate assisting in the delivery of Care after Death in line with the local trust policy/ procedure to include: <ul style="list-style-type: none"> <li>• Gathering equipment and documentation</li> <li>• Check for Infection Prevention precaution as per local trust policy</li> <li>• Do not shave a male patient unless requested by the family and risk discussed i.e. development of bruising</li> <li>• Maintains privacy and dignity at all times</li> <li>• Complete patient property sheet</li> <li>• Complete documentation in line with trust policy</li> <li>• Communicate with portering team to arrange transfer of patient to the Swan Suite/ Mortuary</li> </ul> |                                                                            |                              |      |
| <b>TSA</b><br>Print and sign:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                            | Date:                        |      |
| <b>Assessor</b><br>Print and sign:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                            | Date:                        |      |

BLANK PAGE NOT FOR COMPLETION

BLANK PAGE NOT FOR COMPLETION