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| **Unit Title:** | Administration of a Saline Flush at the time of Intravenous Cannulation |
| **Level:** | 3 |
| **Credit:** | 3 |
| **Sector:** | 1.3 |
| **Sub-sector:** |  |
| **If an age restriction is required, please specify age and rationale:**18+ |
| **Does the unit require pre-requisite learning? If yes, please provide a rationale:**? |
| **Does the unit need to be translated (Welsh/English)?** (*if yes, please give a justification including the approximate number of learners that will benefit from the translation)*Yes |
| **Is the unit to be restricted? If yes, please provide a rationale.** |
| ***Agored Cymru use only:*** |
| **Unit Prefix Code** | PE7 | **Unit Review Cohort (QALL)** |  | **Expiry Date****(QALL)** |  |

| **Purpose and** **Aim of the Unit:** | This unit is for those who prepare for and administer pre-filled saline flushes at the time of intravenous cannula insertion. |
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| **LEARNING OUTCOMES** | **ASSESSMENT CRITERIA** |
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| **The learner will:** | **The learner can:** |
| 1. Understand how to safely administer a pre-filled saline flush via an intravenous cannula.
 | * 1. Identify the pre-filled saline flush device relevant to learner’s current role.
	2. Describe the infection, prevention and control measures required to administer the pre-filled saline flush via an intravenous cannula.
	3. Describe any signs or symptoms that would prevent a saline flush being given.
	4. Identify any adverse reactions that would require administration to be stopped immediately, and the escalation and reporting requirements.
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| 1. Be able to prepare for the administration of a pre-filled saline flush.
 | * 1. Demonstrate Aseptic Non-Touch Technique (ANTT).
	2. Confirm the appropriate timing of the flush.
	3. Obtain the individuals informed consent.
	4. Select, check and prepare the pre-filled saline flush device for use at the time of intravenous cannula insertion, in accordance with local policies and procedures
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| 1. Be able to administer saline flush and monitor the individual during the procedure.
 | * 1. Safely administer the pre-filled saline flush:a) in line with legislation and local policies

b) in a way which minimises pain, discomfort and trauma to the individualc) performing and responding appropriately to any required baseline physiological measurements prior to administration.* 1. Monitor the individual’s condition during saline flush.
	2. Check the individual’s condition post saline flush.
	3. Record and report the administration of the saline flush, in accordance with local policies and procedures.
	4. Dispose of out of date / part-used saline flushes in accordance with legal and organisational requirements.
	5. Mange and dispose of sharps in accordance with local policies and procedures.
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| **Assessment Information:** |
| Please indicate below any specific assessment information to be used with this unit, explaining range statements and minimum requirements within assessment criteria. |
|  | * The practical aspects of this unit must be completed within a controlled workplace environment on a minimum of three occasions.
* **Administration to only be carried out using prefilled syringe medical devices.**

AC1.3 This could include, for example, signs of infection, inflammation, incorrect positioning. Reference should be made to IV administration checklist.AC3.2 To include:* the recognition of any adverse effects, and taking any appropriate action as required when these occur
* any post administration observations.
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| If not specifically stated in the assessment information, **a plural statement in any assessment criteria means a minimum of two**. |

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| **Prescribed Assessment Methods:** |
| Should there be any prescribed assessment methods for this unit? If yes, please specify: |

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| **Assessor Requirements:** |
| Should there be any specific assessor requirements to be used with this unit? If yes, please specify:This unit must only be assessed by a registered practitioner who is occupationally competent in the administration of medication. |

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| **Unit breakdown** | **Contact time for learning delivery** | **Contact time for supervised assessment** | **Independent Study /****Skills Application /****Preparation for Assessment** | **Total Time** |
| **Hours** | 7 | 6 | 17 | 30 |
|  | **GLH = 13** | **AASDAT = 17** | **TUCT = 30** |
|  | **Credits (TUCT / 10) =** | **3** |
| **Number of credits allocated to competency within the unit =** | **2** |
| **Number of credits allocated to knowledge within the unit =** | **1** |

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| **Mappings:** |
| Please indicate below any links to [NOS](https://www.ukstandards.org.uk/), [National Curriculum Standards](http://wales.gov.uk/topics/educationandskills/schoolshome/curriculuminwales/arevisedcurriculumforwales/nationalcurriculum/?lang=en), or [KSF](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4090843) other standards: |