



# Perfusor<sup>®</sup> Space PCA Syringe Pump

## TRAINING RECORD

Hospital:.....

Ward:.....

Role:.....

Name:.....

The submission of personal data or business data (names) is done on an explicitly voluntary basis. This data will not be transmitted to B. Braun Medical Ltd or any third party unless you explicitly indicate that this is your wish. The data collected will be stored in line with your NHS Trust Privacy Policy.

# TRAINING RECORD

## COMPETENCY SELF ASSESSMENT

These competences are to aid the participant in demonstrating a practical knowledge and appropriate clinical use of the Perfusor® Space PCA Syringe Pump.

Name: ..... Date: .....

Hospital: ..... Unit/Ward: .....

These competences have been designed to help support the NHSLA Risk Management Standards for Acute Trusts (2006).

### STEP ONE: First Line Training

This Training session will be carried out by a B. Braun Clinical Education Specialist or your B. Braun Super User. The training session will take about 30 minutes, and will comprise of a demonstration session and some practice scenarios. This is to help ensure you have acquired the relevant knowledge and skills to commence using the PCA pump within your clinical setting.

### STEP TWO: Clinical Application

Whilst clinically using the PCA pumps within your unit/ward setting. Using the training received continue to complete the practice scenarios to re-enforce the knowledge gained during your training session. Use the reference material provided for further support.

### STEP THREE: Review: 3 Month/Annually

To ensure competence is being maintained your trainer will undertake an assessment. Following this you may be required to attend annual training updates and reviews.

# TRAINING RECORD

## COMPETENCY SELF ASSESSMENT

Self-assessment of competence should be measured against the following statements:

These statements are designed to indicate competence to use this device. Responsibility for use remains with the user, so if you are in any doubt regarding your competence to use the Perfusor® Space PCA Syringe Pump, you should seek education to bring about improvement. Various methods include, self-directed learning, coaching and if required, further formal training may be initiated. Consider local resources; product operating manual; short instructions for use; medical devices ward file; the intranet; discussion with colleagues; medical device coordinators or the wards Super User.

Questions to ask yourself: Can you...	Sign:	Date:
<ol style="list-style-type: none"><li>1. State the clinical application of the Perfusor® Space PCA Pump</li><li>2. Explain the safety checks and precautions to be taken prior to use including safely attaching and detaching the power cable</li><li>3. Demonstrate how to attach and remove the PCA handset from the Perfusor® Space PCA Pump</li><li>4. Securely fasten the pump into the PCA lockbox and attach to the dripstand</li><li>5. State the functions of the keys and indicators on the front panel</li><li>6. Demonstrate how to reset the infusion data</li><li>7. Demonstrate the correct insertion and removal of the disposables (attaching patient button and locking mechanisms)</li><li>8. Initiate and start a prescribed PCA infusion</li><li>9. Explain the information displayed on the screen whilst the pump is running</li><li>10. Demonstrate the ability to change the rate once the infusion has started</li><li>11. Demonstrate the correct administration of a prescribed bolus</li><li>12. Demonstrate how to check the patient PCA information</li><li>13. Demonstrate how to check the pumps battery status</li><li>14. Explain why the pressure indicator is important and demonstrate how to check and adjust the pressure level</li><li>15. Explain the difference between a AMBER and a RED alarm, and give an example of each</li><li>16. Demonstrate how to set the standby mode and resume operation</li><li>17. Turn the pump off and explain the correct cleaning and storage procedures</li></ol>		

I certify that I am aware of my professional responsibility for continuing professional development and realise that I am accountable for my actions. With this in mind I make the following statement:

I am competent to use the Perfusor® Space PCA Pump, and I am aware of the support material available to me.

Print name: .....

Date: .....

Signed: .....

# TRAINING RECORD

## COMPETENCY SELF ASSESSMENT

This form is to be completed by yourself and your Unit/Wards Super User (Cascade Trainer) during your assessment. The assessment is designed to establish that self-competence has been achieved within your clinical practice.

If you have any further questions or queries then please do not hesitate to ask your B. Braun Education Link or your B. Braun Clinical Super User.

Trainees Name: ..... Date: .....

Signed: .....

Assessors Name: ..... Date: .....

Signed: .....

This space is designed for your Trainer to note any action points, (if required) for further practice following your assessment. Your Trainer may also set a date that you may be required to attend an annual update or complete a further self-assessment.

Review Date	Notes/Training Update Required