The aim of this skills assessment is to ensure that you have learnt how to correctly wash your hands, how to correctly use an Aseptic Non-Touch Technique (ANTT) for patient related procedures and the safe disposal of sharps. This is a generic assessment and also forms a part of many other assessments. It is placed as a separate assessment to ensure that every student has demonstrated proficiency in these basic skills. In addition, some Trusts are demanding that students can show documented proficiency in ANTT and this assessment will provide evidence of that.

Learning
You should first have all of the elements of the process explained to you. Some skills labs have videos and you should watch these as many times as necessary to ensure that you are fully aware of the correct way to wash hands, dispose of sharps and the rationale behind ANTT and the steps that it involves. Demonstrations may also have been arranged by the skills staff.

This assessment may take place in a real patient situation or in the skills lab. It may involve any practical procedure for which ANTT is an integral part of the process. It may also be linked to any other UPSA which requires these skills so that both this UPSA (M1) and the other UPSA can be assessed and signed off at the same time.

In preparation for the assessment you should watch the videos if available, practice and revise your skills in the skills lab then print out a blank UPSA M1 assessment sheet or locate and prepare an electronic copy ready for completion.

If using a real patient situation, you need to arrange with the medical or nursing (or other appropriate) staff to identify a patient who needs a practical procedure to be performed e.g. intravenous injection of a parenteral medication which has to be mixed before administering. The patient can be in virtually any situation – ward, outpatient clinic, operating theatre, GP surgery, etc.

If using the skills lab then you need to arrange a suitable session with one of the skills facilitators.

Assessment
You must perform the skill according to correct guidelines washing your hands correctly, observing strict ANTT protocols and disposing of sharps correctly. The patient must be treated with normal care and attention as must the model if this is in the skills lab. You must clear up after yourself. The patient must be treated with normal care and attention and thanked at the end. You must clear up after yourself.
While you are performing the task, the assessor will observe and grade your ability according to the guidelines for this skill.

Completion
Once the task is completed, student and assessor then discuss the procedure and complete the UPSA assessment printed sheet or electronic form. The assessor will allocate an appropriate grade. They will write comments and feedback for future learning, reflection and development on the form. If using a paper form the assessor must then sign it and insert their email address. If you are using the online version it should be possible for the assessor to verify it at the time of completion.

If using a paper copy you must then enter the contents of the UPSA assessment sheet onto Medlea as soon as possible. You must retain the paper copy for your portfolio. Once the data is on Medlea, the assessor will receive an email asking them to log on, check the entered information and verify it.

Summary

- This UPSA assessment verifies that you are capable of correctly washing hands, disposing of sharps and using ANTT in patient related tasks.

- You are advised to practise and to be informally assessed first to ensure that your technique is correct and that you feel confident.

- Each student must complete ONE successful assessment.

- This may be in a real patient situation or in the skills lab.

- The patient must be treated appropriately throughout.
UPSA M1 ASSESSMENT GUIDELINES

Gather equipment
1. Decide what procedure will be used for the assessment
2. Check prescription chart or patient notes as indicated
3. Wash hands correctly according to Trust policy
4. Ensure that all necessary equipment is available before the procedure is commenced. All equipment must be kept aseptic the packaging intact and within expiry date.
5. Select an appropriate non-porous tray / trolley of appropriate size and sharps bin if appropriate.
6. Clean procedure tray / trolley using 70% isopropyl alcohol wipe and allow to dry. If tray or trolley is visibly soiled, it should be cleaned with neutral detergent and water prior to cleaning with alcohol wipe.

Prepare equipment
1. Place and prepare all equipment necessary for the procedure in the tray or on the trolley.
2. Ensure that key parts remain protected using needles and sheaths or equivalent
3. Only handle non-key parts – do not touch parts that need to remain sterile.
4. Put on apron and non-sterile gloves if needed
5. Either (1) go straight to the patient and prepare both the patient and the site on the patient where you will carry out the procedure. For most procedures you will need to wear a pair of gloves appropriate for the task.
6. Or (2) wear non-sterile gloves and prepare medication in the clean area / utility room before going to the patient.

Procedure
1. Go to patient, introduce yourself & check patient’s ID
2. Check that this is the correct patient for the correct procedure
3. Explain what you would like to do & why & gain consent
4. Expose the area (e.g. the cannula).
5. Decontaminate key sites according to local trust policy.
6. Remove gloves, and wash hands according to Trust policy.
7. Re-glove appropriately.
8. Carry out the aseptic procedure using a non-touch technique protecting key parts of the equipment and ensuring only other key parts or sterile gloves touch these. (Key part= entry / exit point of an invasive device; sterile gauze; wounds; etc.)
9. Protect key sites from contamination throughout the procedure

Completion and Organisation
1. Dispose of empty syringes / sharps / etc safely and correctly
2. Discard all waste correctly and safely
3. Remove gloves
4. Wash hands or use alcogel.
5. Clean aseptic field (tray / trolley) and return to preparation area.
6. Document the procedure (e.g. complete cannula log, prescription chart, etc.)
7. Thank the patient and verbally check how the patient is.
8. Do not take an excessive time to complete the task
9. Have an organised approach