

West of Scotland Paediatric Gastroenterology, Hepatology and Nutrition Network

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**Competency based training for nurses  
in the management of children receiving  
Infliximab Infusions**

# Record of achieving competency

## **Purpose**

This document will provide a record of the learner's clinical performance indicating when competency in the management of children receiving Infliximab infusions is attained.

## **Definition of Competence**

Competence is a simultaneous integration of the knowledge, judgement, skills, experience and attitudes that are required for performance in a designated role and setting (Roach, 1992).

## **Completion**

The learner (named below) is responsible for completion of this document. To be deemed competent in the management of children receiving Infliximab infusions, a record of achievement in all five competencies must be completed and signed by both learner and assessor.

## **Assessment**

During the assessment period, competency will be determined by discussion, questioning and direct observation of practice by a designated trainer/ assessor.

## **Learner Details**

**Name** .....

**Ward/Dept** .....

**Hospital** .....

**DesignatedTrainer/Assessor**.....

## Competency Level Guidelines

In order to meet your learning needs and enable you to develop your clinical skills in this area, the following rating scale will be used when assessing your competence.

<b>RATING SCALE</b>	<b>LEVEL OF COMPETENCE</b>
<b>1</b>	Has attended theoretical session. Has only observed practice. Cannot perform this procedure unsupervised
<b>2</b>	Can link theory to practice. Has assisted in this area. Still requires close guidance.
<b>3</b>	Can link theory to practice. Requires direct supervision in this area and still requires prompting and guidance.
<b>4</b>	Links theory to practice. Safely undertakes this procedure and delivers care to the patient throughout procedure as per guidelines, with no prompting and guidance. Can perform this procedure without supervision and/or assistance. All steps are performed in order and correctly.
<b>5</b>	Links theory to practice and is able to use initiative in response to adverse effects or technical problems during and after procedure. Can demonstrate and explain this area of practice to others.

Adapted from Steinaker and Bell 1979 – The Experiential Taxonomy: A new approach to teaching and learning, London Academic Press.

By the end of your assessment period, you are expected to have achieved competency level 5 in order to be deemed competent.

NB: it is expected that you will achieve all the competencies within a six-month period.

However, this will be dependent upon your opportunities to practice. If this is limited within your own clinical area, you should liaise with the ward manager and your designated trainer/assessor to access further opportunities to practice.

To achieve and demonstrate your competence in managing a child receiving an Infliximab infusion you will require to attend training sessions with the Clinical Nurse Educator and have regular meetings with your trainer/assessor to discuss and practice the procedure.

You will be formally assessed three times - initial, interim and final. On each occasion the assessment will be by questioning, discussion and direct observation.

Once your trainer/assessor has confirmed your competence you will receive a certificate of achievement. Both you and your ward manager will keep copies. Thereafter it is your responsibility to review your practices on an annual basis. This will require attending in-service updating sessions and other training opportunities.

**Summary table to record levels achieved in competences by learner at formal assessments**

**Agreed level of Competence 1-5 as per rating scale above**

	<b>Performance Criteria</b> The learner will be able to:	<b>Assessment</b>	<b>Competence level</b>	<b>Date achieved</b>	<b>Learner signature</b>	<b>Trainer/assessor signature</b>
1	Demonstrate an understanding of the drug Infliximab, its therapeutic properties, method of administration, including patient dosage, induction and treatment regimes relevant to inflammatory bowel disease.	Initial				
		Interim				
		Final				
2	Demonstrate how to complete a pre-infusion assessment checklist prior to commencing each infusion including the 'weighted Paediatric Crohn's Disease Assessment Index' (wPCDAI)/ Paediatric Ulcerative Colitis Activity Index (PUCIA) tool and describe the reasons for completing these.	Initial				
		Interim				
		Final				
3	Demonstrate how to reconstitute and prepare Infliximab for IV administration to the child as per pharmaceutical and hospital IV guidelines.	Initial				
		Interim				
		Final				
4	Demonstrate an awareness of the possible signs and symptoms of adverse effects or IV line/pump problems during administration of IV Infliximab and how to manage them including treatment of anaphylaxis.	Initial				
		Interim				
		Final				
5	Demonstrate the safe administration of Infliximab infusions and monitoring of the child's condition throughout treatment and afterwards.	Initial				
		Interim				
		Final				

## Competency statement 1

**Demonstrate an understanding of the drug Infliximab, its therapeutic properties, method of administration, including patient dosage, induction and treatment regimes relevant to inflammatory bowel disease.**

Performance Criteria	Initial			Interim			Final		
	SA	TA	AC	SA	TA	AC	SA	TA	AC
<b>SA- Self Assessment</b> <b>TA – Trainer Assessment</b> <b>AC – Agreed level of competence</b>									
1. Describe eligible children for treatment with Infliximab including age group									
2. Describe what Infliximab is and how it works									
3. Describe the therapeutic dose for children and how to calculate this									
4. Describe the induction programme for Infliximab									
5. Describe how Infliximab is administered									
6. Describe pre treatment tests and reasons for these									
7. Describe the information given to child and family by the consultant before starting on Infliximab ie Adverse effects, patient information leaflet									
8. List other important factors to be considered prior to starting treatment with Infliximab									
9. List relevant documentation and explain reasons for completion ie: Biologics Register, wPCDAI/PUCAI, Impact 3 questionnaire									
10. Describe reasons for Infliximab being administered under supervision and steps for treatment of hypersensitivity									

## Competency statement 2

Demonstrate how to complete a pre infusion assessment checklist prior to commencing each infusion including the wPCDAI /PUCIA tool and describe the reasons for completing these.

Performance Criteria	Initial			Interim			Final		
	SA	TA	AC	SA	TA	AC	SA	TA	AC
SA- Self Assessment TA – Trainer Assessment AC – Agreed level of competence									
1. Demonstrate how to greet child (and parent if present) and orientate them to ward and treatment area									
2. Explain to child and family what is going to happen									
3. Weigh child, record and check with record on drug kardex									
4. Record baseline observations of pulse, blood pressure, temperature and urinalysis									
5. Describe reasons for checking for signs of current infection									
6. Describe reasons for excluding pregnancy in young adults									
7. Demonstrate completion of pre-infusion checklist and provide reasons for doing this									
8. Check for any history of previous side effects during or after infusion and note patients response and severity									
9. Ensures routine blood tests have been carried out and results checked									
10. Completes wPCDAI/PUCIAI tool with child/ parent and Impact 3 if required									
11. Arrange for insertion of cannula and obtain bloods for U&Es, FBC, CRP, LFTs and ESR									

**Competency statement 3:**

**Demonstrate how to store, reconstitute and prepare the Infliximab for IV administration to the child as per pharmaceutical and hospital IV guidelines.**

Performance Criteria	Initial			Interim			Final		
	SA	TA	AC	SA	TA	AC	SA	TA	AC
<b>SA- Self Assessment</b> <b>TA – Trainer Assessment</b> <b>AC – Agreed level of competence</b>									
1. Explain correct storage of Infliximab and the reasons for this									
2. Demonstrate how to calculate the correct dose for patient and reconstitute Infliximab									
3. Check drug with another registered nurse									
4. Demonstrate how to reconstitute Infliximab and explain shelf life of drug									
5. Demonstrate how to prime IV line and filter, ensuring no air in line									
6. Demonstrate how to set up pump and set volume/ rate for infusion									

**Competency statement 4:**

**Demonstrate an awareness of the possible signs and symptoms of adverse effects or IV line/pump problems during administration of IV Infliximab and how to manage them including treatment of anaphylaxis.**

Performance Criteria	Initial			Interim			Final		
	SA	TA	AC	SA	TA	AC	SA	TA	AC
<b>SA- Self Assessment</b> <b>TA – Trainer Assessment</b> <b>AC – Agreed level of competence</b>									
1. Describe the signs and symptoms of infusion reaction and anaphylaxis									
2. Describe the management of any adverse reaction/anaphylaxis following locally agreed procedures									
3. Demonstrate how to trouble shoot for IV lines, filter and pumps									
4. Demonstrate what to do in a clinical emergency and know where phone and emergency trolley are situated									



**Competency statement 5:**

**Demonstrate the safe administration of Infliximab infusions and monitor child's condition throughout treatment and afterwards.**

Performance Criteria	Initial			Interim			Final		
	SA	TA	AC	SA	TA	AC	SA	TA	AC
<b>SA- Self Assessment</b> <b>TA – Trainer Assessment</b> <b>AC – Agreed level of competence</b>									
1. Explain checks to be carried out on child's drug kardex prior to preparing infusion									
2. List possible other drugs to be given prior to starting infusion and describe reasons for administering these									
3. Ensure all pre-treatment screening tests have been carried out and results are available prior to 1 <sup>st</sup> infusion									
4. Check patient weight against that recorded on prescription									
5. Explain reasons for monitoring patient when infusion started and frequency									
6. Explain why patient must be monitored for 1-2 hours post infusion									
7. Demonstrate discharge of child from unit after arrangements are made for next visit for treatment									

## Competency Based Training for the management of a child receiving an Infliximab infusion- Assessment and Action Plan

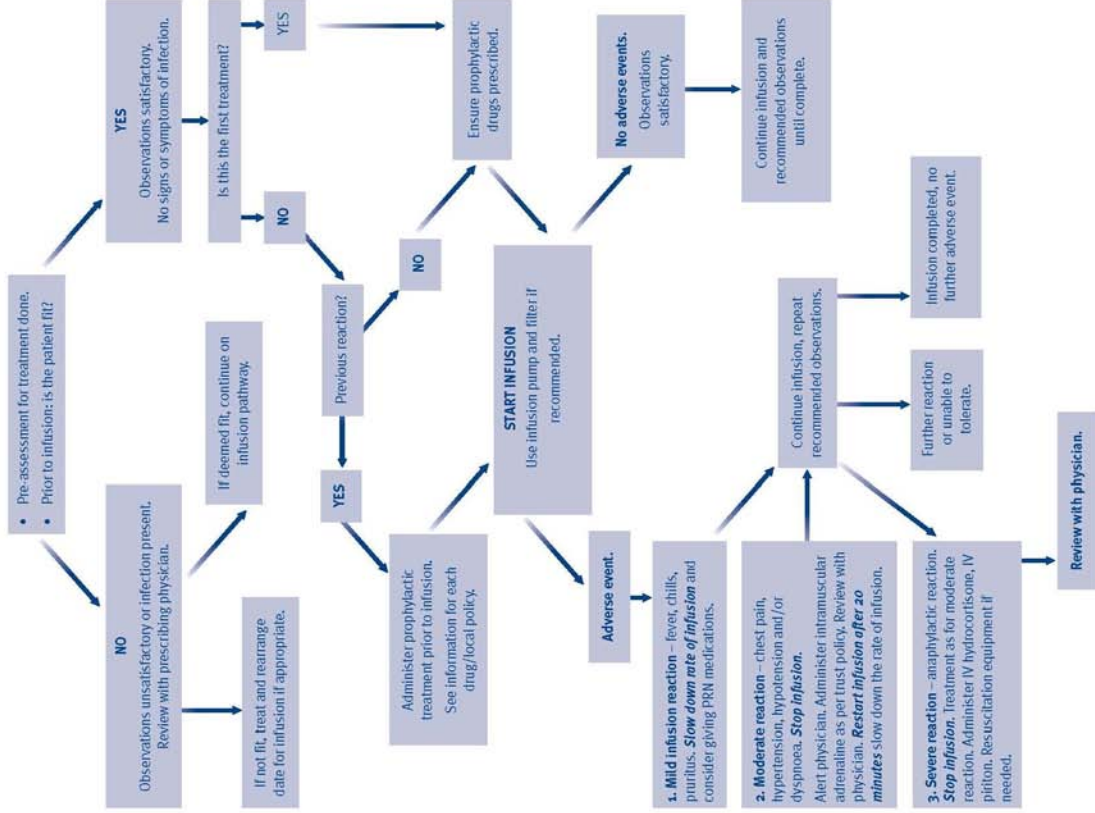
Learners should use this chart to record their progress towards attaining the clinical competencies required to safely manage a child receiving an infliximab infusion in a designated paediatric area within a hospital.

At each assessment, the learner and trainer will identify the steps in each of the five competencies that they have to attain. These will be recorded and an action plan agreed on how they will be addressed before the next assessment.

Initial Assessment	Summary of discussion and agreed action plan  Next assessment date:	Learner Signature	Trainer Signature
Interim Assessment	Summary of discussion and agreed action plan  Next Assessment date:		
Final Assessment	Summary of discussion and agreed action plan		

## Appendix 2

# Flow algorithm for patients receiving intravenous biologic therapy





Developed by West of Scotland Paediatric Gastroenterology, Hepatology and Nutrition Managed Clinical Network (WoSPGHaN).  
If you would like more information, visit the website [www.wospghan.scot.nhs.uk](http://www.wospghan.scot.nhs.uk)

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