Mid Essex Hospital Services NHS
NHS Trust

MEDICAL EQUIPMENT TRAINING POLICY	**Policy** **Register No: 10010** **Status: Public**

Developed in response to:	Best practice
Contributes to CQC Regulation:	15

Consulted With:	**Post/Committee/Group:**	**Date:**
	Medical Devices Group	20th September 2017
	Associate Directors of Nursing	20th September 2017
R Martin	Deputy Medical Director	24th September 2017
K Gammage	Head of Medical Resources	20th September 2017
Professionally Approved by	Elmarie Swanepoel	24th September 2017

Version Number	4.0
Issuing Directorate	Facilities Management
Ratified by:	DRAG Chairmans Action
Ratified on:	2nd January 2018
Executive Group Sign Off Date	February 2018
Implementation Date	30th January 2018
Next Review Date	December 2020
Author/Contact for Information	Helen Clarke, Head of Governance
Policy to be followed by (target staff)	All staff required to use diagnostic and therapeutic medical equipment
Distribution Method	Intranet, website
Related Trust Policies (to be read in conjunction with)	04066 Medical Equipment Policy 08079 Induction Policy 04090 Decontamination Policy

Document Review History:

Version No:	**Authored/Reviewed by:**	**Active Date:**
1.0	Helen Clarke	August 2011
2.0	Helen Clarke	August 2011
3.0	Helen Clarke	August 2014
4.0	Helen Clarke	30 January 2018

INDEX

1.0 Purpose

1.1 The purpose of this policy is to:

- Describe the processes in place within the Trust to ensure staff are trained to safely and effectively use the diagnostic and therapeutic equipment appropriate to their role.

- Ensure that managers and individual members of staff are aware of their responsibilities in relation to diagnostic and therapeutic medical equipment.

1.2 The requirements of this policy support the successful implementation of the Medical Equipment Policy.

2.0 Background

2.1 The appropriate management and control of medical devices within Mid Essex Hospitals NHS Trust (MEHT) is a fundamental component in ensuring the health and wellbeing of both staff and patients. The delivery of safe and effective treatment in healthcare settings is dependant on the proper use of a range of diagnostic and therapeutic medical equipment. Health care professionals play a vital role in ensuring that equipment is used safely and for the purpose of which it was intended.

2.2 Inappropriate use of medical equipment can cause harm to patients and the Trust therefore has a responsibility to ensure that any person operating this equipment is competent to do so.

3.0 Equality and Diversity

3.1 Mid Essex Hospital Services NHS Trust is committed to the provision of a service that is fair, accessible and meets the needs of all individuals

4.0 Scope

4.1 This policy complements the Medical Equipment Policy which describes the process for acquiring, receiving, maintaining and decommissioning diagnostic and therapeutic equipment.

4.2 This policy applies to all permanent and temporary staff required to use medical equipment in their role within the Trust and no member of staff should use diagnostic and therapeutic medical equipment independently unless they have been assessed as competent to do so.

5.0 Definitions

5.1 Medical device

A medical device can be defined as any instrument, apparatus, appliance, material or health care product, excluding drugs, used for a patient or client for the purpose of:

- Diagnosis, prevention, monitoring, treatment or alleviation of disease.
- Diagnosis, monitoring, treatment, or alleviation of, or compensation for, an injury or handicap.

- Investigation, replacement or modification of the anatomy or of a physiological process.
- Control of conception.
- Rehabilitation aids, prostheses, continence aids, contact lenses, hospital beds and wheelchairs are also medical devices.

For the purpose of this policy, the term 'equipment' is used to describe any medical device.

5.2 Training levels

The level of training required on individual medical devices will normally be identified as part of the procurement process and may be:

High one to one or group training delivered by the equipment's manufacturer / supply company ensuring all participants have an active attempt to carry out the necessary actions involved in competent use of the equipment.

Medium one to one or group training delivered by the equipment's manufacturer / supply company or by an identified 'super-user' previously trained by the manufacturer / supplying company. This may be similar in length to the above, but an overall demonstration should be sufficient to impart the relevant knowledge and skills required for competent use of equipment.

Low demonstration by colleague who has been deemed competent in the use of the particular piece of equipment

6.0 Roles and Responsibilities

6.1 Site Director Estates and Facilities

Responsible for ensuring there are processes in place to manage the risks associated with the safe use of medical equipment including overseeing the facilitation and successful operation of the Medical Devices Group.

6.2 Divisional Directors / Associate Directors of Nursing / Matrons / Department Managers

Responsible for ensuring that processes are in place to allow staff in their area to access training in the use of relevant medical equipment and that staff only use medical devices if they have been assessed as competent to do so.

6.3 Clinical Supervisors / Matrons / Department Managers / Line Managers

6.3.1 Responsible for compiling and maintaining the Trust Medical Equipment Competency Statement Index of diagnostic and therapeutic equipment for which specialist training is required. The inventory must include the staff groups who will use the equipment, the level of training and will be made available on the Trust intranet site.

6.3.2 Responsible for ensuring Competency Statements are developed for all equipment in use in their areas as part of the purchasing process and forwarded to the Estates and Facilities, Project Manager. Refer to template in appendix 2.

6.3.3 Responsible for developing and maintaining a ward / department / specialty specific equipment competency list identifying which staff groups are authorised to use specific equipment based on post requirements, qualifications and individual experience / competence and annually reviewing the requirements. This list should cross reference to the appropriate competency statements to give assurance that competency is adequately assessed. Refer to appendix 3.

6.3.4 Responsible with support from the Department of Clinical Technology in some instances for ensuring appropriate and relevant training is provided for staff required to use medical equipment on a one-off basis as part of the induction process in accordance with the Induction Policy.

6.3.6 Responsible with individual members of staff for determining how identified additional training needs will be met. Line managers will review training competency during the staff appraisal process.

6.3.7 Competency records for staff will be retained by the local manager who should maintain a department summary of all staff – refer to appendix 5.

6.4 Healthcare professionals

All Healthcare professionals have a professional responsibility to ensure:

- That they only use medical equipment if they are competent and authorised to do so.
- They undertake competency self-assessment as part of their induction process. Completing an individual record of equipment competency – refer to appendix 4. If staff identify additional training needs or subsequently do not feel competent to use equipment and feel that their training needs have not been met, they have a responsibility to ensure that this is raised with their line manager.
- They follow relevant protocols regarding the management and use of equipment.
- All equipment is appropriately decontaminated after every patient contact following equipment specific guidance in accordance with the Decontamination Policy.

6.5 Department of Clinical Technology

Responsible for ensuring appropriate and relevant training is available for staff working in specialist areas or with specialist equipment.

6.6 Medical Device Group

The Medical Devices Group is a sub group of the Health and Safety Group which in turn reports to the Patent Safety and Quality Committee which reports to the Trust Board. It has delegated responsibility to ensure the following:

- Training provision is identified and in place prior to a medical equipment purchasing decision.
- Effective mechanisms are in place to train staff required to use medical equipment.
- An effective monitoring programme is in place to ensure that appropriate training is provided to all users where appropriate.

- To ensure Infection Prevention and Control and decontamination are addressed in the use of medical devices.

6.7 **Biomedical Engineering Department**

Responsible for maintaining the Trust Medical Equipment Competency Statement Master Index ensuring that Competency Statements are fit for purpose and in the appropriate format, logged and made available on the Trust Intranet.
(Refer to competency statement template in appendix 2)

7.0 Training in the Safe use of Diagnostic and Therapeutic Equipment Process

7.1 Procurement process

7.1.1 Please refer to the Medical Equipment policy for full details of the procurement process. As part of this process, training requirements and level of training, as described in section 4.2, for medical equipment will be identified pre-procurement and documented on the Medical Equipment Purchase Request Form and recorded on the Medical Devices database.
(Refer to the Medical Equipment Purchase Request Form is included in appendix 1)

7.1.2 The Clinical Leads/ Matron / DCT lead responsible for the purchase of new medical equipment will ensure that a competency statement based on the Trust template is available / developed and forwarded to the Governance Assistant for registration prior to purchase or use within the Trust (refer to appendix 2). The Competency Statement should include assessment of the following:

- The purpose of the medical equipment
- The purpose / effects of the controls, connections and adjustments
- Set up procedures including user maintenance
- How to use the device safely and effectively
- How to store the device when it is not in use
- How to clean or decontaminate the device
- Where appropriate showing the service user how to use the device
- Fault reporting to DCCT.

7.1.3 The Clinical Leads/ Matron / DCT lead will also ensure that an appropriate training programme is developed as part of the procurement process. In order to ensure that training for new equipment is cascaded appropriately, delivery will be monitored as follows:

- **Global purchase** – Matrons will collate and feedback training numbers on a monthly basis to the Medical Devices Group who will monitor delivery of the training programme and report progress to the Group and to relevant Clinical Leads/ Matron / DCT lead.

- **Local purchase** – the identified purchase lead, the lead nurse or line manager, will monitor training delivery and alert Group and to relevant Clinical Leads/ Matron / DCT lead as appropriate and the Medical Devices Group to any deficiencies

7.2 **Training process**

Training may be delivered and / or demonstrated through:

- a person's professional qualification
- training from the equipment's manufacturer / supply company – high level
- training by DCCT or a super-user deemed competent to do so through training or experience – medium level
- cascade training delivered by a colleague deemed competent to do so through training or experience – low level

7.3 **Competency Assessment**

7.3.1 Training and self assessment in competency to use relevant equipment will form part of the induction process for new staff (please refer to the Induction Policy). Each line manager will identify which medical equipment individual staff groups are authorised to use in their area of responsibility. Refer to appendix 3.

7.3.2 The line manager will provide an individual Diagnostic & Therapeutic Equipment Competency Record template listing the equipment relevant to the post (Refer to Appendix 4)

7.3.3 Once the member of staff has received training, they must locate the relevant competency statement and answer the questions designed to assess competence to use the equipment. The Trust Medical Equipment Competency Statement Index and individual competency statements are available on the Trust Intranet.

7.3.4 If the member of staff can answer yes to all questions including, where appropriate, how to decontaminate the equipment between uses, they should consider themselves competent to use the equipment. They should then sign and date the record. Self assessment is undertaken on a one-off basis but will be considered on an annual basis as part of the appraisal process.

7.3.5 If a member of staff is unable to answer all the required questions on the competency statement, they must identify with their manager / clinical supervisor, their training requirements and record these on their Diagnostic & Therapeutic Equipment Competency Record. Once any identified training needs have been met, they should sign and date the follow up assessment appropriately.

7.3.6 Medical staff should submit a copy of their Diagnostic & Therapeutic Equipment Competency Record to Medical Staffing who will retain the record in the staff member's personal file and monitor compliance.

7.3.7 Non medical staff records will be retained by their line manager who will also maintain a departmental Diagnostic & Therapeutic Equipment Competency Summary (appendix 3). Equipment competency will be assessed at the Local Induction review and as part of the annual appraisal process.

7.3.8 Staff must only use, maintain or manage equipment that they can demonstrate competency in through specific training.

8.0 Audit and Monitoring

8.1 The Medical Devices Group will review the procurement process in accordance with the Medical Equipment Policy to ensure that training requirements are taken into account when new medical equipment is purchased.

8.2 An audit of compliance with key requirements of this policy will be undertaken on an annual basis by the Estates and Clinical Audit teams.

8.3 The audit findings will be reported to the Medical Devices Group for review. Where any deficiencies are identified, actions will be developed with named leads and timescales and progress monitored at subsequent meetings. The key findings of the audit will be reported to the Health and Safety Group.

9.0 Review

9.1 This policy will be reviewed at 3 yearly intervals or earlier in response to local or national requirements.

10.0 Communication and implementation

10.1 The policy will be available to staff on the Trust's intranet site and website.

10.2 The Estates and Facilities Team will ensure this policy is disseminated to Divisional Directors / Associate Directors of Nursing / Matrons for further dissemination amongst their teams.

11.0 References

Medicines and Healthcare Products Regulatory Agency (MHRA) (2000) Equipped to Care: the safe use of medical devices in the 21st century Available at: www.mhra.gov.uk

Medicines and Healthcare Products Regulatory Agency (MHRA) (2006) Managing Medical Devices: guidance for healthcare and social services organisations. Available at: www.mhra.gov.uk

Medicines and Healthcare Products Regulatory Agency (MHRA), MDA/2009/001. All medical devices.

Appendix 1 Procurement form

Medical Equipment Purchase Request Form

Equipment Purchase Form

Appendix 2 – Competency statement

Template for Competency Statement

Competency Statement template

Appendix 3 – Ward / Department / Specialty Medical Equipment Competency Requirements lists

Template for ward / department equipment list

Ward dept equipment list templat

Medical specialty equipment list for doctors in training

Medical Specialty Equipment list

Appendix 4 – Individual competency records templates

Template for Diagnostic & Therapeutic Equipment Competency Record – Non Medical staff

Medical devices Equipment Competen

Template for Diagnostic & Therapeutic Equipment Competency Record – Doctors in training

Medical Staff Competency record J

Appendix 5 – Ward / department summary template

Diagnostic Therapeutic Equipmer