



How to ... design a Training Program for POCT



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Establishing the need for training

- ❖ Accurate results
 - Device and sample suitability
 - “no result is better than the wrong result”
- ❖ Regulatory compliance
 - CPA, ISO; ACB, IBMS, BCSH
 - MHRA & NHSLA
- ❖ Password access on devices



Train the Trainer

❖ Different Learners

- Listening, seeing, touching

❖ Adult learners

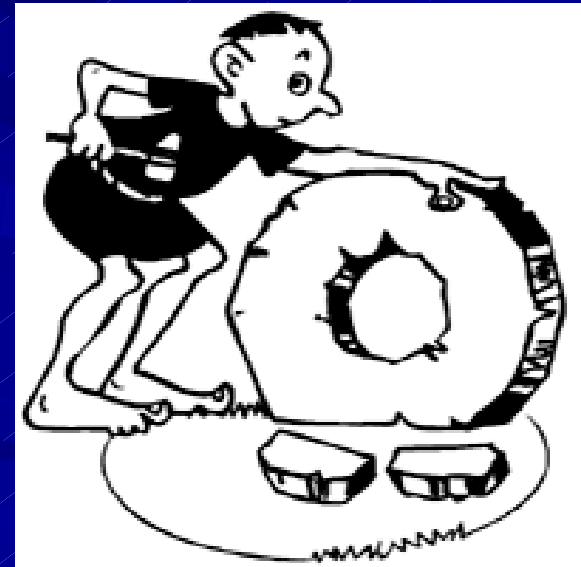
- The need to learn
- Unlearning
- Interaction

❖ Presentation skills



Who designs Training Sessions?

- ❖ Assess what is already available
- ❖ Vendor with POCTc input
 - Widely used tests
 - Don't reinvent the wheel... add a couple of spokes!
 - Challenge incomplete training
- ❖ POCTc with vendor input
 - Less frequently used tests
 - Utilise "how to" videos etc
- ❖ Clinical area input



Training content

- ❖ MHRA, ISO
 - theory and practice learning
- ❖ Introduction
 - Incident involving pre-analytical factors
- ❖ Principles of measurement
- ❖ Clinical utility and limitations
- ❖ Consequences of improper use / technical limitations
- ❖ Reagent storage and supplies



Training content

(2/3)

- ❖ Sample collection
- ❖ Calibration, quality control and quality assurance
- ❖ Running a patient test /analytical expertise



Training content

(3/3)

- ❖ Results falling outside predetermined limits
- ❖ Documentation/data collection & maintenance
- ❖ Health and safety aspects
- ❖ Infection control
- ❖ Information sources
- ❖ Questions



Paperwork

❖ Training Record

- POCT archives
- Review for trainee
- Emphasise specific points
- QC results

❖ Certificate of attendance

- Trainees takes for KSF file

Central Manchester and Manchester Children's University Hospitals NHS Trust

Point of Care Testing

Name: _____
NHS/Unit: _____
Staff Grade: _____ Date: _____

Pre-Analytical Issues

- Correct blood gas machine syringe technique
- Preparation of blood gases (not 5-10-10-10-10)
- Sample mixing & air bubbles in sample
- Minimum volume
- Labelling sample
- Sample storage - 30sec 10 min for samples

Sample Analysis

- Placing sample in analyser
- Placing code strip in syringe, checking for bar code
- Placing Patient Test
- Checking sample path for code and bubbles

Analyser Check & Data Handling

- Check maintenance log for calibrations, tests, troubleshooting
- Check reagents including expiry, storage
- Running Control CD (if present)
- Running Patient Check (if present)
- Printing/print results

Post-analysis and Interpreting the result

- Check appearance of result
- Recording result in patient notes/letter
- Hand a POCT & biochemistry requests
- QC - 1 sample
- Handed CAP, not used
- Verbal sample, when relevant

Health and Safety

- Spillage sample not loaded with full test results
- Checking whether CD can help with the analysis
- Check to Hand Washing

Risk Management and Clinical Governance

Central Manchester and Manchester Children's University Hospitals NHS Trust


Point of Care Testing

glucose

Certificate of Attendance

Name: _____
NHS/Unit: _____
Hospital: _____
Date: _____

The person named above has attended training for the Optium Xceed Glucose Meter



Strategy for Implementation

❖ Communication with Lead Nurses

- Courtesy/empowerment
- Competing issues

❖ Timetable

- Targeted training/open
- Pre-booking/open

❖ Advertise

- Targeted and general

❖ Secret sessions



Delivering the training

❖ Who?

- POCTc, Link Workers or Vendor?

❖ Where?

- Outside clinical area

❖ When?

- During protected time
 - e.g. audit days, training
- Shift handover
- Night and weekend shifts
- 15 past the hour



Continuing education

- ❖ Recertification of operators
- ❖ Monitor operator performance
 - PT, EQA, IQC/observation
- ❖ Retraining intervals
 - E-learning
 - Theoretical aspects
 - Cost effective
 - 24/7
 - Knowledge tests



References

- ❖ Management and use of IVD Point of Care devices, MDA DB 2002(03)
- ❖ Point of Care Testing (POCT) – requirements for quality and competence BS EN ISO: 22870:2006
- ❖ Nursing strategies for POCT in *Principles and Practice of POCT* S Storto Poe and D Case Comer
- ❖ Tips for developing training materials with the help of vendors. G Lundstrom. www.acutecaretesting.org

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