

NHSGGC CME T34/BODYGUARD T SYRINGE PUMP COMPETENCY FRAMEWORK for PALLIATIVE CARE in ADULTS

HOSPICES

In compliance with professional guidelines, NMC: The Code (2018): professional standards of practice and behaviour for nurses, midwives and nursing associates. Registered Nurses will be responsible for ensuring that they are competent to operate the BD T34/Bodyguard T syringe pump in their clinical area.

HOSPICE STAFF

Registered nurses must attend Medicines Management Update Days as designated by their site and local Mandatory Training Policy and must also complete the GGC 100 CME T34 Calculations (CPD). To complete training, registered nurses are required to have the BD T34/Bodyguard T competency framework signed off by the designated assessor in their clinical area.

The LearnPro© module and the competency framework must be successfully completed every three years.













REGISTERED NURSE

Name		
Base		
Designation		
LearnPro Module	Date completed	
Medicines Management Update Day	Date completed	

ASSESSOR

Name	
Base	
Designation	











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A. LEGISLATION

	MPETENCY wledge Area	OUTCOME/EXPECTATION	DATE	REGISTERED NURSE and ASSESSOR'S SIGNATURES
The registered nurse is able to locate and have a working knowledge of current NHSGGC Guidelines for the use of the T34 Ambulatory Syringe Pump by BD Medical for adults in palliative care.(2016)		Is able to refer to NHSGGC and local hospice guidelines and policies. Has clear understanding, demonstrated by verbally recounting updated and relevant sections of NHSGGC and local hospice policy on administering medication and use of syringe pumps including safeguarding with understanding of mental capacity and consent to ensure safe and effective person centered care.		
Th	e registered nurse understands:			
1.	Local Hospice Policy for Record Keeping NMC: The Code (2018): (section 10) Record Keeping Guidance	Demonstrates appropriate record keeping and completion of syringe pump documentation.		
	NMC: The Code (2018) professional standards of practice and behaviour for nurses, midwives and nursing associates.	Demonstrates knowledge and understanding for personal, professional accountability and standards to be maintained.		
	Caldicott Principles (2020)	Awareness and understanding of Caldicott Principles and the importance of safe and clear documentation.		
2.	Local medicine management and incident reporting policy	Safe effective practice with access to incident reporting systems as evidenced from observation of two patient scenarios and verbal explanation of incident reporting process.		
3.	Health Protection Scotland National Infection Prevention and Control Manual (2012)	Awareness and understanding of policies and has previously undertaken the appropriate training on these subjects. This could include discussion around a critical incident focusing on one of the IP&C policies or practices.		



B. PROFESSIONALISM / ACCOUNTABILITY

COMPETENCY Knowledge Area	OUTCOME/EXPECTATION	DATE	REGISTERED NURSE and ASSESSOR'S SIGNATURES
Reflection on own practice and maintaining clinical skills.	Ability to recognise own learning needs and identify how to meet these as set out in annual appraisal or learning plan. Takes responsibility for completing mandatory training and maintaining current knowledge and skills regarding the BD T34/Bodyguard T syringe pump. (LearnPro module – drug calculations)		



C. COMMUNICATION, CLINICAL SKILLS AND MEDICATION KNOWLEDGE

	MPETENCY owledge Area	OUTCOME/EXPECTATION	DATE	REGISTERED NURSE and ASSESSOR'S SIGNATURES
1.	The registered nurse: Understands the influence of culture, ethnicity, race and faith on patient and family decision making.	Demonstrates consideration of individual factors which are taken into account when planning and delivering care interventions: Outline from practice one example of when either cultural, race or family decision making influenced the plan of care.		
2.	Communicates effectively with the patient/carer and family. Provides clear information regarding the use of the BD T34/Bodyguard T syringe pump, taking into account patient/carer and family concerns and reservations. Gains and records verbal consent from patient/carer or family prior to setting up syringe pump. Provides written guidance on the syringe pump.	Creates awareness by documentation or verbal discussion of the purpose of the BD T34/Bodyguard T syringe pump and medication with clear explanation to patient/carer and family, addressing concerns and reservations (risks and benefits). Verbal consent obtained to commence BD T34/Bodyguard T syringe pump. Understands the importance of providing written information to patient/carer and family regarding the BD T34/Bodyguard T syringe pump. Demonstrates awareness of where to access patient information leaflet.		
3.	Have knowledge and understanding of appropriate equipment required, e.g. appropriate cannula for s/c medications, correct syringe make and size, infusion line and needle free device and that these are appropriate and compatible with the BD T34/Bodyguard T syringe pump and the drugs prescribed.	As observed, demonstrates knowledge of NHSGGC BD T34 Policy and Guidance (2016) relating to the selection of equipment required to deliver a s/c infusion via the BD T34/Bodyguard T syringe pump, ensuring safe care.		













4.	Demonstrate required safety	Demonstrates knowledge of safety checks, explaining		
	checks, ensuring the BD	causes of alarms and the required actions needed to		
	T34/Bodyguard T syringe pump	safely set up the BD T34/Bodyguard T syringe pump.		
	is clean, visually intact, in			
	working order and that	Ensure safe, harm free care.		
	it is asset tagged and has been			
	serviced within the last year.			
5.	Demonstrates that the current	Demonstrates knowledge of safe prescribing especially		
	prescription is both legal and	pertaining to controlled drugs and correct completion of		
	clinically appropriate on the	Palliative Care Subcutaneous Infusion Prescription and		
	Palliative Care Subcutaneous	Monitoring Chart / Medicine Kardex for syringe pump and		
	Infusion Prescription and	the 'as required' prescription sheet by observation of the		
	Monitoring Chart / Medicine	assessor in clinical scenario – real or simulated.		
	Kardex for Syringe Pumps and			
	the 'as required' prescription	Confirms that dose conversions are appropriate and has		
	sheet.	recognised compatibilities of drugs and diluents.		
		Advises colleagues, notes and reports any errors.		
		Demonstrates knowledge of opioid conversions.		
6.	Sourcing knowledge for	Demonstrates knowledge of available resources.		
	medication advice.			
		Can state from whom and where to seek further advice.		
7.	Select and safely insert needle	Demonstrates knowledge by observation in a clinical or		
	free cannula.	simulated scenario setting of :		
	On-going maintenance of site.	Selection of appropriate comfortable site		
		Correct insertion and securing of s/c needle free		
		cannula		
		 Frequency of replacing s/c cannula, infusion line 		
		and needle free device as per NHSGGC		
		guidelines		
		Is able to utilise clinical judgement and justify decision		
		making when appropriate		
		I making when appropriate	1	













8.	Demonstrate the knowledge, understanding and skill in the preparation, setting up, monitoring and closing down of the BD T34/Bodyguard T syringe pump. Demonstrates safe use of lock box for BD T34/Bodyguard T syringe pump.	Successfully demonstrate the procedure to set up a BD T34 syringe pump under supervision on three occasions in clinical practice. Will be able to provide evidence using the "Procedure to set up a BD T34 syringe pump" documentation signed off and dated by designated assessor for each occasion.	
9.	Disposal of sharps and clinical waste following local hospice policy.	Demonstrates knowledge of the policies and procedures relating to the safe handling and disposal of sharps and clinical waste.	
10.	Maintaining accurate documentation.	Evidences the correct documentation has been completed accurately.	
11.	Storage and decontamination of used equipment.	 Able to demonstrate procedure for local area: Removing from stock Returning to stock Lending out BD T34/Bodyguard T syringe pump Returning BD T34/Bodyguard T syringe pump to rightful owner Sending BD T34/Bodyguard T syringe pump to medical physics Decontamination before returning to stock 	











D. CLINICAL JUDGEMENT

	PETENCY vledge Area	OUTCOME/EXPECTATION	DATE	REGISTERED NURSE and ASSESSOR'S SIGNATURES
of sy	registered nurse has knowledge mptom assessment and agement and is able to:	Demonstrates the ability to assess and monitor symptoms and plan for appropriate interventions.		
1.	Monitor continuous subcutaneous infusion for any malfunction which may affect symptom management.	Able to give rationale for carrying out the checks. Able to say how frequently these checks should be carried out.		
2.	Monitor for any change in patient's symptom control. Determine appropriate intervention and administer breakthrough medication as prescribed, when necessary.	Demonstrates knowledge of individual patient's symptoms and their management. Effective symptom management as per NHS Scotland Scottish Palliative Care Guidelines (2020) and can state from whom and where to seek further advice.		
3.	Monitor for side effects of medication and undertake appropriate responsive action. This includes seeking advice from medical and multi- disciplinary colleagues.	Demonstrates early recognition of potential adverse effects of medication administered via s/c infusion. Patient's safety and comfort maintained and symptom management optimised.		











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E. PROCEDURE TO SET UP A BD T34/BODYGUARD T SYRINGE PUMP

COMPETENCY LEVEL REACHED	DATE / COMMENT ASSESSOR'S SIGNATURE	DATE / COMMENT ASSESSOR'S SIGNATURE	DATE / COMMENT ASSESSOR'S SIGNATURE
Able to demonstrate procedure for identification of correct patient and gain verbal consent from the patient or, if necessary, from carer/family.			
Demonstrates ability to select correct equipment to undertake the procedure. Knowledge that 3 rd edition T34 with updated software/Bodyguard T pumps are used in a hospice In Patient Unit and only 2 nd edition T34 pumps are transferred with patients to community settings.			
Demonstrates how to load a battery.			
Demonstrates correct procedure for insertion of the appropriate cannula for s/c medications and needle free device and able to state frequency of when to renew.			
Dependent on prescription able to identify correct size, luer lok and brand of 20ml or 30ml syringe required and understand the importance of correct identification during the set up process.			
Demonstrates ability to select and use the BD T34 infusion line.			
Demonstrates knowledge of where to find advice on medicines compatibilities.			
Demonstrates ability to prepare medication safely and correctly, including the maximum volume of fluid for syringe using 20ml, 30ml or 50ml syringe.			
Demonstrates how to correctly complete and secure the pink medication label for syringe.			
Demonstrates knowledge and skills to load the syringe correctly.			

	ARDGOWAN HODEC Tgether Nie Cere	Creater Glasgow and Clyde	The Prince & Princess of Wales Hospice	St. Vincent's	
Demonstrates when and why	a new infusion site may be re	equired.			













PROCEDURE TO SET UP A BD T34/BODYGUARD T SYRINGE PUMP (cont)

COMPETENCY LEVEL REACHED	DATE/COMMENT ASSESSOR'S SIGNATURE	DATE / COMMENT ASSESSOR'S SIGNATURE	DATE / COMMENT ASSESSOR'S SIGNATURE
Demonstrates how to start the infusion.			
Demonstrates knowledge and understanding of syphonage.			
Demonstrates how to lock key pad and check battery status.			
Correct disposal of sharps.			

F. KNOWLEDGE OF COMPLICATIONS

COMPETENCY LEVEL REACHED	DATE / COMMENT ASSESSOR'S SIGNATURE	DATE / COMMENT ASSESSOR'S SIGNATURE	DATE / COMMENT ASSESSOR'S SIGNATURE
Demonstrates knowledge and understanding of the different alarms and how to correctly deal with them.			
Demonstrates knowledge and understanding of what to do should the pump appear to malfunction, e.g. running fast/slow.			
Demonstrates knowledge of what to do should an error alarm show or the device appears to malfunction.			













G. DOCUMENTATION

COMPETENCY LEVEL REACHED	DATE / COMMENT ASSESSOR'S SIGNATURE	DATE / COMMENT ASSESSOR'S SIGNATURE	DATE / COMMENT ASSESSOR'S SIGNATURE
Demonstrates knowledge of and understands the importance of correct documentation.			
Able to correctly complete the NHSGGC Palliative Care Subcutaneous Infusion Prescription and Monitoring Chart / Medicine Kardex			
Describe what procedures are in place for lending out and returning a BD T34/Bodyguard T syringe pump.			
Demonstrate knowledge of how to order further supplies of syringe pump sundries and documentation.			











Appendix 1

PREPARATION AND SETTING UP OF BD T34/BODYGUARD T SYRINGE PUMP – Additional Notes

1.	CHOICE OF CANNULA	The Saf-T-Intima (single lumen) 22g cannula is the needle free s/c cannula of choice as:-
		Needle stick injury is reduced
		Less likely to cause site reactions
		Can remain in situ longer than other devices
2.	EQUIPMENT REQUIRED	 BD T34/Bodyguard T syringe pump designated for palliative care use and plastic lock box and key Holster for mobile patient
		1 x lock box and key
		 1 x [®]Duracell Plus / Panasonic Powerline 9v IEC 6LR61 alkaline battery
		 1 x 20ml or 30ml luer lok Braun Syringe - depending on quantity of drug/s and diluent to be drawn up (19ml in 20ml syringe; 22ml for a 30ml syringe). In exceptional circumstances a 50ml luer lok syringe may be used under the guidance of a palliative care pharmacist. The maximum practical fill volume in a 50ml syringe is 34ml (ensure appropriate lockbox is used).
		1 x s/c needle free cannula and needle free device
		 1 x infusion line with anti-siphon valve for use with T34/Bodyguard T ambulatory syringe pump for s/c infusions Prescribed medication, including correct diluent Transparent surgical dressing
		Pink medication label
		 Syringes and needles to prepare medication
		 Disposable gloves
		 1 x sharps box
		Patient's medication prescription form / medicine kardex
0	PROCEDURE FOR SETTING UP A	NHSGGC Palliative Care Subcutaneous Infusion Prescription and Monitoring Chart for Syringe Pumps The registered pump must check the antice preserve of acting up and commencing the continuous of a infusion
3.	BD T34 SYRINGE PUMP	The registered nurse must check the entire process of setting up and commencing the continuous s/c infusion
4.	SYRINGE PUMP	The BD T34/Bodyguard T syringe pump will automatically calculate the rate of administration based on the size of syringe inserted.
		For information on drug combinations, compatibilities and calculating dosages please see Palliative Care Guidelines on StaffNet or contact the local Specialist Palliative Care Team or Pharmacy
5.	OCCLUSIVE DRESSING	A 10cm x 10cm occlusive dressing allows observation of the site and prevents cannula movement.











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PREPARATION AND SETTING UP OF BD T34 SYRINGE PUMP – Additional Notes (cont)

6.	SHARPS BOX	A sharps box should be readily available to dispose of sharps to reduce risk of injury.	
7.	NEEDLES	Green needles are required to draw up medication.	
8.	PRESCRIPTION CHART	A clearly written and signed prescription chart should be available. This should include the drug/s and diluent to be used. The BD T34/Bodyguard T syringe pump will automatically calculate the rate of infusion. In very rare circumstances a 50ml syringe may be used only with specialist advice.	
9.	BATTERY	 A [®]Duracell Plus / Panasonic Powerline 9v IEC 6LR61 alkaline battery is recommended. Batteries should always be readily available. The average battery life for the 3rd edition (with updated software) T34/Bodyguard T pump is approximately up to 48hrs. A new battery should be used at the start of an infusion. Always check the battery power before commencing the infusion BD have advised that the 3rd edition (with updated software) T34/Bodyguard T pump should be stored with the recommended 9v battery insitu. The average battery life for the 2nd edition T34 is approximately 3 days. The battery power should be checked daily and if less than 40% the battery should be changed. 	
10.	DRAWING UP THE MEDICATION	 Always wash your hands and wear gloves to draw up medications. Prescribed medication (starting with the smallest volume) and diluent should be drawn up into the syringe of suitable size, as directed by the signed prescription. The syringe should be gently inverted to ensure mixture of the contents. Check the solution for cloudiness or crystallisation. If in any doubt regarding medication compatibility, please contact specialist palliative care pharmacy team. Always attach a pink medication label to the syringe ensuring that it is still possible to read the amount of fluid in the syringe. Ensure the label contains patient identification, date, time, drugs in the syringe and is signed by those who have drawn up and checked the drugs. The label should be 'flagged' at the syringe tip end to ensure that it is clear of the barrel arm clamp sensor. 	
11.	PRIMING THE INFUSION LINE	At the commencement of using the syringe pump, or when the infusion site is changed, the infusion line is primed by hand, using approximately 0.5ml of syringe contents before inserting the cannula or starting the infusion. NOTE: ANY CHANGE in medication doses or type requires a change of infusion line.	











Appendix 2

PROBLEM SOLVING AND TROUBLE SHOOTING WHEN USING A SYRINGE PUMP – Additional Notes

PROBLEM	POSSIBLE CAUSE	SOLUTION
The syringe pump will not start	No battery present	Fit a battery
	Battery incorrectly inserted	Re-align battery terminals
	Cap on the battery terminal	Remove the cap
	Battery is depleted/very low	Fit a new battery
	Pump is faulty	Service is required
Infusion ended early/late	Drug incompatibility or site problems	Re-assess patient / consider need for PRN medications if infusion is running late
	Disconnection of syringe, line or cannula	Check placement of syringe, line and cannula
	Wrong syringe brand confirmed during setup or incorrect volume measured by pump	Set up a new infusion
	Syringe pump placed > 75cm above infusion site. This can lead to syphonage if the syringe is not secured.	If user error seek training (the syringe pump should be placed at the same level as, or lower than, the infusion site).
	Air is present in the syringe	Is the syringe barrel cracked
	Faulty pump	Send the pump for servicing
Infusion is running slow	The syringe pump may have stopped	Check if pump stopped at any point. Assess patient / consider need for PRN medications if infusion is running slow
	S/c cannula site needs changing	Change s/c cannula and needle free device. Set up a new infusion line if required or if there is a change in prescribed medication.
	Pressure on / kinking of infusion line	Check the line
	Disconnection of any part of the infusion – line, syringe, cannula	Reconnect infusion as per s/c guideline. If user error seek appropriate training. Return pump for servicing.
	Faulty pump	



PROBLEM SOLVING AND TROUBLE SHOOTING WHEN USING A SYRINGE PUMP – Additional Notes (cont)

PROBLEM	POSSIBLE CAUSE	SOLUTION
Cannula site requires frequent changes	ent Irritation from prescribed medication Use a larger syringe and dilute more. Discuss with specialist palliative care team. Review medications	
	Cannula insertion technique	If user error – seek appropriate training.
The pump has stopped before the syringe has emptiedBattery exhaustedFit new battery, turn syringe pum resume infusion.		Fit new battery, turn syringe pump on, confirm syringe size and brand and then resume infusion.
	Faulty syringe pump	Return pump for servicing.











OTHER PROBLEMS:

1. Precipitation

Line becomes cloudy or changes colour. Stop the infusion. Seek advice from pharmacy, specialist palliative care team or medical team. Reasons may include: exposure to sunlight or direct heat, drug compatibility, or insufficient diluent. Assess patient, consider bolus dose medication.

2. The BD T34/Bodyguard T syringe pump alarms.

Alarm Conditions

(LED light turns

red)

LCD DISPLAY	ALARM TYPE 2 nd edition T34	ALARM TYPE 3 rd edition (with updated software)/Bodyguard T	POSSIBLE CAUSE	ACTION
Occlusion or syringe empty	Audible and visual alarm	High priority alarm. Operational LED flashes red	Patient cannula/line blocked, kinked. Occlusion. Actuator has reached minimum travel position	Remove occlusion and restart pump. Flush/change cannula as per NHSGGC policy. End of programme - switch pump off.
Syringe displaced	Audible and visual alarm, Intermittent beep	High priority alarm. Operation LED flashes red.	Syringe has been removed or displaced	Check and confirm syringe seated correctly and resume infusion. Syringe flanges need to be in the vertical position at all times.
Pump paused too long	Audible and visual alarm, Intermittent beep	Low priority alarm. Operation LED is solid yellow (not flashing)	Pump left or no key presses detected for 2 minutes	Start infusion, continue programming or switch off
Near end alert only (infusion doesn't stop)	Audible and visual alarm, Intermittent beep Function of flow rate before end	Low priority alarm. LED is solid yellow. Fixed to 3mins before end of infusion	Near end of infusion	Prepare to change syringe or switch off
End program Press YES to confirm	Audible and visual alarm, Intermittent beep	High priority alarm. LED flashes red.	Infusion complete	Pump will alarm. Press Yes to confirm end of program and change syringe or switch off.
Low battery alert only (infusion doesn't stop)	Visual alarm	Low priority alarm. LED is solid yellow.	Battery is almost depleted (30 minutes left)	Prepare to change battery
End battery	Visual alarm	High priority alarm. LED flashes red.	Battery is depleted	Change battery



FINAL SIGN-OFF

This confirms that reflective discussion has taken place and (Name)

has been deemed competent / not competent to set up a BD T34/Bodyguard T syringe pump independently. This follows one theoretical and three observed practical sessions.

If not deemed competent, further education and support will be required and agreed by your Line Manager.

REGISTERED NURSE

NAME	
SIGNATURE	
DATE	

ASSESSOR

NAME	
SIGNATURE	
DATE	













Websites

NHSGGC Guidelines for the use of the T34 Ambulatory Syringe Pump by BD Medical for adults in palliative care (2016) https://www.palliativecareggc.org.uk/wp-content/uploads/2013/10/T34Guideline_Oct2016.pdf

NMC The Code (2018) Professional standards of practice and behaviour for nurses, midwives and nursing associates.

https://www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/nmc-code.pdf

Caldicott Principles (2020)

https://www.gov.uk/government/publications/the-caldicott-principles

NHSGGC Infection Prevention and Control (2012) http://www.nhsggc.org.uk/content/default.asp?page=home_infectioncontrol [accessed August 2021]

Faith and Belief Communities Manual (2010) <u>http://www.staffnet.ggc.scot.nhs.uk/Info%20Centre/Documents/Complete%20Manual%20amended%20following%20proof%20from%20printer.pdf</u> [Accessed July 2021]

Equalities and Health <u>http://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga_20100015_en.pdf</u> [Accessed July 2021]

Scottish Palliative Care Guidelines (2020) https://www.palliativecareguidelines.scot.nhs.uk/

PLEASE NOTE THAT THE ABOVE STAFFNET LINKS CAN ONLY BE ACCESSED VIA AN N3 CONNECTED PC.

NHSGGC CME T34/Bodyguard T Syringe Pump Competencies – Hospices Updated August 2021; version 2 Jan 2022



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