Obtain and maintain vascular access for, and cease access following, haemodialysis therapy



# Overview This standard covers obtaining and maintaining vascular access for haemodialysis therapy where this is accepted as appropriate according to the individual's condition and your employer's guidelines on this function.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

### Performance criteria

You must be able to:

- P1 apply standard precautions for infection prevention and control and other relevant health and safety measures
- P2 confirm the individual's identity and confirm the planned action
- P3 give the individual relevant information, support and reassurance in a manner which is sensitive to their needs and concerns
- P4 gain valid consent to carry out the planned activity
- P5 identify potential sites and types of vascular access correctly (if there is more than one) with the appropriate member of the care team, and assess using the relevant criteria and protocols which site is the most appropriate to use
- P6 recognise any problems with the vascular access and report them immediately to the appropriate member of the care team
- P7 prepare and clean the vascular access site effectively according to the plan of care and agreed protocols
- P8 insert the appropriate size and type of cannula(e) if cannulation is required, and secure them safely and correctly and in a manner which aims to cause minimum discomfort to the individual and to maximise the continuing viability of the vascular access
- P9 confirm effective blood flow, using the relevant criteria or protocols, before connecting the individual to the extra-corporeal circuit, taking appropriate action if the blood is not flowing effectively
- P10 administer the prescribed anti-coagulant if this is required according to the prescription and protocols
- P11 connect the cannula(e) or catheter and dialysis line according to protocol, correctly at the appropriate time in a manner likely to prevent infection
- P12 recognise adverse reactions to, and problems with, the procedure promptly and take the appropriate action to resolve them according to the individual, the setting and the problem and/or refer them to an appropriate member of the care team according to protocols
- P13 encourage individuals to recognise and report any unusual or unexpected change or feeling during therapy
- P14 monitor the patency of the vascular access effectively during haemodialysis therapy and make appropriate adjustments to maintain the effective flow of blood
- P15 recognise any problems with blood flow promptly and take action appropriate to the individual and the problem immediately
- P16 confirm the administration of products to avoid blood coagulation has occurred as specified in the plan of care
- P17 disconnect the cannula(e) or catheter and dialysis line(s) at the

Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

appropriate time and remove it in a manner which aims to cause minimum discomfort to the individual and maximise the continuing viability of the vascular access

P18 apply the appropriate dressing to the vascular access site according to the type of access and the plan of care

Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

### Knowledge and understanding

You need to know and understand:	K1	the current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to obtaining and maintaining vascular access for, and ceasing access
		following haemodialysis therapy
	K2	your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance
	K3	the duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer
	K4	the importance of working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence
	K5	the importance of applying standard precautions to the obtaining and maintaining of vascular access for, and ceasing access following, haemodialysis therapy and the potential consequences of poor practice
	K6	the structure of blood vessels
	K7	blood clotting processes and factors influencing blood clotting
	K8	how the individuals dignity might be compromised during access
		procedures and what measures to take to avoid this
	K9	how to provide support to individuals which is appropriate to their needs and concerns
	K10	the different types of vascular access and why different types of access are used for different individuals
	K11	what factors to consider when assessing and choosing the best site for cannulation, and why it is important to choose an appropriate site
	K12	the type and function of materials and equipment used to obtain, maintain and cease vascular access for haemodialysis
	K13	the particular requirements when dealing with new fistulas
		the importance of having close and effective observation of the individual, the vascular access site and the dialysis machine monitors when connecting the needle and the dialysis line
	K15	why it is important to maintain the safety, placement, and patency of access during dialysis
	K16	what to look for when assessing venous catheters
	K17	-
	K18	the types of problems that might occur in relation to blood flow and vascular access, how you would recognise them and what action you

## Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

would take

- K19 how to prepare different types of vascular access sites
- K20 how to insert and secure cannulae for dialysis
- K21 the importance of effective blood flow, how you would check it and what action you may take if there is poor blood flow
- K22 how to monitor blood flow, what to look for in terms of the individuals condition, the dialysis machine monitors and the vascular access site
- K23 how patency of access during therapy is maintained
- K24 how to disconnect lines and remove cannulae
- K25 when and how to treat and dress vascular access sites
- K26 the information that needs to be recorded and/or reported regarding:
  - K26.1 obtaining and maintaining vascular access for haemodialysis therapy

K26.2 on cessation of vascular access

- K27 the importance of completing documentation clearly, legibly and accurately
- K28 the importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff

Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

#### **Additional Information**

**External Links** This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB7 Interventions and treatments

Obtain and maintain vascular access for, and cease access following, haemodialysis therapy

Developed by	Skills for Health	
Version number	1	
Date approved	June 2010	
Indicative review date	June 2012	
Validity	Current	
Status	Original	
Originating organisation	Skills for Health	
Original URN	CHS30	
Relevant occupations	Health, Public Services and Care; Health and Social Care; Managers and Senior Officials; Associate Professionals and Technical Occupations; Health and Social Services Officers; Health Associate Professionals; Personal Service Occupations; Healthcare and Related Personal Services	
Suite	Clinical Health Skills	
Key words	venous catheter, cannula, effective blood flow, dialysis machine	