

NCCP Criteria for Acting as an Assessor of Competence – Intrathecal Chemotherapy

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1 Introduction

Competency assessment is essential in ensuring the delivery of a safe intrathecal chemotherapy service. In the absence of other guidelines¹ in this area the NCCP Intrathecal Chemotherapy Project Board consider the following staff initially capable and authorised to assess staff competency and, therefore, automatically competent, themselves:

- Consultant oncologists or haematologists, in the protocols relating to the tumour types they sub- specialise in – for prescribing and administration of intrathecal chemotherapy;
- Nurses who have completed a Postgraduate Diploma in Nursing (Oncology), or equivalent, at grade CNM or above or lead chemotherapy nurses - for checking of intrathecal chemotherapy;
- Designated oncology pharmacists - for prescription checking and dispensing of intrathecal chemotherapy.

In addition to the initial assessors, staff will be required to be authorised as assessors for the ongoing practice of the chemotherapy services – see Section 2.

Assessors would usually deal with members of their own profession, but there may be exceptions to this. Chemotherapy administration areas should keep an up to date register of unit/ward chemotherapy assessors. This may be included in the intrathecal chemotherapy register.

Assessors must be competent in the clinical skill which they are assessing. Competency to be an assessor will be assessed locally at each hospital. Completion of the hospital's training and assessment programme for a certain competency does not automatically make the individual an Assessor of Competence for other staff.

Assessors will be selected by the hospital's intrathecal chemotherapy designated lead and there may be multiple assessors in a tumour area or in a discipline and it is recommended that there are multiple assessors to ensure continuity during periods of leave etc.

¹ As and when national guidance from professional bodies becomes available, this should be used. NCCP Oncology Medication Safety Review *Implementation Resources*. Rec. 71 Intrathecal Policies. Published V2 December 2016
Contact: oncologydrugs@cancercontrol.ie

2 Criteria for acting as an assessor of competence

This section details the ongoing criteria necessary for a staff member (other than those considered initially capable as assessors) to be considered capable of assessing the competency of other staff to practice in the intrathecal chemotherapy services of the hospital.

2.1 Medical oncologists and Haematologists

An assessor of competence² should meet all the criteria below:

- Be a consultant haematologist/consultant medical oncologist / consultant paediatric oncologist/consultant paediatric haematologist, registered on the Specialist Division of the register of medical practitioners maintained by the Medical Council and competent to assess in the tumour types in which they sub-specialise, for prescribing.
- Be experienced and competent in the administration of intrathecal chemotherapy.
- Must hold relevant postgraduate teaching certificate or consultants registered as trainers with the RCPI.
- Must undertake regular continuing professional development in line with legislative and Medical Council requirements.
- Have no areas of concern with their practice.

2.2 Nursing staff

All nurses must have completed the hospital's chemotherapy education programme, the content of which should be agreed by the Hospital Leads for chemotherapy training and education. They must be deemed competent for pre-assessment, administration and all aspects of the care pathway.

The training should include, as a minimum:

- supervision and teaching
- assessment of practical competence
- assessment of underpinning knowledge

Those responsible for assessment must also meet the following criteria:

- Must be CNM or CNS grade or above

² Where necessary the prescribing and administration competencies may be assessed by different Consultants
NCCP Oncology Medication Safety Review *Implementation Resources*. Rec. 71 Intrathecal Policies.
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- Must be registered with the Nursing and Midwifery Board of Ireland
- Must work at least 50% of the time in clinical practice
- Must be certified as chemotherapy competent
- Must have administered chemotherapy for at least 2 years
- Must perform the intrathecal chemotherapy certified competencies at a minimum of 5 times per annum³
- In addition, it is desirable that the assessor holds an appropriate qualification in cancer management and treatment e.g. a Postgraduate Diploma in Nursing (Oncology) or equivalent
- Have no areas of concern with their practice

2.3 Pharmacy staff

Pharmacists who assess competency must be registered with the professional regulator, the Pharmaceutical Society of Ireland (PSI).

Pharmacists and pharmaceutical technicians must complete the hospital's training and assessment programme relevant to the task they will be assessing competence against, which include:

- Clinical verification of SACT prescriptions
- Checking of worksheets and labels prior to reconstitution of intrathecal chemotherapy
- Dispensing/reconstitution of intrathecal chemotherapy
- Checking and final release of intrathecal chemotherapy

In addition, the assessor must:

- undertake regular continuing professional development
- spend at least 50% of their time practising the competencies above with respect to systemic anti-cancer therapy (SACT), not purely intrathecal chemotherapy
- read the relevant standard operating procedures annually
- have no areas of concern with their practice

³ For intrathecal chemotherapy competency assessments
 NCCP Oncology Medication Safety Review *Implementation Resources*. Rec. 71 Intrathecal Policies.
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3 Review of competency and capability as an assessor

Once signed off as competent, individuals have a professional responsibility to ensure they maintain that competency.

Competency and authority to be an assessor should be assessed annually or following a break in a particular area of clinical practice of greater than or equal to six months.

Competency assessment is best undertaken using the “Direct Observation of Procedural Skills (DOPS)”⁴, which is a structured assessment of actual performance, covering the specific skills required for intrathecal chemotherapy administration. The following guidelines are provided:

- The assessor must be familiar with and experienced in the administration of intrathecal chemotherapy.
- Where a patient is involved, they must be made aware that a DOPS is taking place and the appropriate introductions made.
- Assessments must be undertaken under appropriate conditions, with all necessary equipment and in an appropriate environment for intrathecal chemotherapy administration.
- The assessor must provide feedback to the person being assessed for competency and competency should be recorded appropriately.

The assessment of competency should cover the following areas:

- Understanding of the procedure
- Consideration for the patient
- Preparation (safety checks, drug, equipment, supportive care etc.)
- Technical Ability
- Post-procedure documentation & monitoring
- Overall ability to perform procedure

⁴ E.g. similar to that employed by the RCPI for competency assessment of specialist trainees. RCPI have provided documentation to inform the development of this section but it has not been developed with or approved by RCPI.

Abbreviations

CNM – Clinical Nurse Manager

SACT - Systemic anti-cancer therapy

RCPI – Royal College of Physicians of Ireland