

Staff Rating System for Venipuncture Policy and Procedure

Purpose: To identify levels of cannulation expertise in patient care personnel in order to prevent infiltration, reduce hospitalization and complications, as well as prevent physical and emotional trauma to patients.

Policy: All patient care personnel will be rated according to the guidelines set forth in this procedure. Written documentation of staff competency will be kept with their education records. Patient care personnel ratings will be re-evaluated on a quarterly basis or more frequently, based on unit need.

Rating levels:

Employee Category	Access rating approved to cannulate
New employee with <u>no</u> previous experience	1
New employee with previous experience, or current employee advancing rating	1,2
Most experienced personnel	3

Definition of Levels:

Level 1

- Complete and pass a facility cannulation course, including demonstration of facility “Vascular Access Cannulation” procedure on vascular access practice arm.
- Under the supervision of an educator or Level 3 preceptor, cannulates ten (10) grafts successfully - using only two needles, achieving the prescribed blood flow rate, and having no infiltrations.
- Patient care personnel with this rating can only cannulate grafts.

Level 2

- Patient care personnel who have met all requirements of a Level 1 cannulator, in addition to:
- Under the supervision of an educator or Level 3 preceptor, cannulates ten (10) older developed fistulas (cannulated for at least six months) successfully – using only two needles, achieving the prescribed blood flow rate, and having no infiltrations.
- Patient care personnel with this rating can only cannulate grafts and older developed fistulas.

Level 3

- Patient care personnel who have met all requirements of a Level 2 cannulator, in addition to:
- Complete and pass a facility cannulation course, including demonstration of facility “Cannulation of New Fistula” procedure on vascular access practice arm.
- Under the supervision of an educator or Level 3 preceptor, cannulates five (5) new fistulas successfully – no more than two needles, achieving the prescribed blood flow rate, and having no infiltrations.
- Patient care personnel with this rating can cannulate all accesses.

**EXAMPLE OF STAFF COMPETENCY RATINGS
FOR NURSE MANAGER AND/OR EDUCATOR RECORDS**

Staff Member	Access Rating	Date of Original Rating	Date of re-evaluation and comments
Bell, B.	1	10/4/03	11/15/03 - ad. to level 2
Brown, J.	3	1/15/99	1/15/03 - no change
Carter, V.	2	3/30/02	3/30/03 – no change
Jones, C.	2	7/7/03	
Moss, D.	2	9/25/03	
Newton, H.	3	8/6/88	8/8/03 – no change
Smith, B.	1	10/4/03	
Thompson, W.	2	5/20/03	

Most staff members are rated “ones” and “twos.” If a new fistula is to be cannulated for the first time, it is automatically rated a three, and only Level 3 staff can cannulate it. If a staff member has had trouble with a particular fistula, please request that another staff member perform the access cannulation.

**EXAMPLE OF PATIENT FISTULA RATINGS
FOR NURSE MANAGER AND/OR STAFF NURSE RECORDS**

Treatment Area	Patient Name	Access Type (Staff rating)
1	Smith, B.	Graft (1)
1	Ralph, C.	Fistula (2)
2	Bacon, J.	New Fistula (3)
2	Jackson, M.	New Fistula (3)
3	Green, V.	Fistula (2)
3	Black, S.	Graft (1)
3	Johnson, P.	Fistula (Self)

Identification of the patient’s access type should be on the patient’s care plan and/or vascular access record. When changes occur (e.g., changing from a “new fistula” to a “mature, developed fistula,” or a graft to a fistula), both the staff and the patients need to be notified. If a “new fistula” patient has a catheter and has had six consecutive successful cannulations at the prescribed blood flow rate, a designated person needs obtain a physician’s order and make an appointment to have the catheter removed.