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(March 1997

Chief Executive Officer Each Health Board

Chief Executive/ Secretary/Manager
Each Joint Board/Public Voluntary Hospital

DEPARTMENT
OF HEALTH
AN ROINN

an roinn Sláinte

Shaping a Healthier Future

Re: Phlebotomists

Dear Sir/Madam

Please find attached for your information a copy of the Code of Practice of the recently formed Phlebotomists' Association of Ireland.

The Department is pleased to recognise this Association as the representative body for Phlebotomists and acknowledge their efforts in drawing up this document.

Any observations on the attached which you could offer from a service perspective would be very much appreciated, and should be forwarded to the undersigned before 4 April 1997. Comments would be particularly welcome on the area of training of Phlebotomists.

Yours sincerely

Deirdre Walsh

Personnel Management & Development



PHLEBOTOMISTS ASSOCIATION OF IRELAND

Code of Practice 1996 The Phlebotomists Association of Ireland (PAI) was set up in March 1995 by members of the phlebotomy profession, to look at and address various issues of concern to the profession and to meet the needs of phlebotomists throughout the country.

The aims of the PAI are mainly:-

- 1. To establish uniformity of standards within the profession.
- To formalise a recognised training programme for phlebotomists leading to professional accreditation and to regulate entry into the profession.
- 3. To impose standards of behaviour and conduct on members of the association and to provide for accreditation for those already working in the profession provided that they satisfy a minimum requirement criterion.
- To provide ongoing education through organised lectures, seminars and exchange of information.
- 5. To liaise with the Department of Health (with the aid of representatives from the major unions) in order to improve conditions, status and salary.
- 6. To negotiate with employers for support and recognition as a profession in its own right.

We appreciate that the phlebotomist must be recognised as being an independent practitioner who must be allowed to use his/her skills and judgement which can only be developed when training is combined with experience gained in the workplace.

However, we, the committee members of the PAI, feel that a code of practice is required to standardise conduct within the profession which would act as a reference for the phlebotomist and serve to enhance the professionalism of its members.

This code provides but a guide, a framework for the phlebotomist which may be used by each individual member of the profession while carrying out his/her responsibilities, to promote high standards of conduct while exercising individual judgement.

. his code is intended for the phlebotomist whether or not he/she performs any functions other than venepuncture. It is also intended for those working in a hospital, clinic or other environment, with inpatients or outpatients and whether the client is a patient or attending for blood testing for any other reasons. It is hoped that more specific guidelines may be set out as recognised training standards are formalised which we hope will lead to uniformity of standards.

Professionalism and Accountability

- 1.1 Like any profession, the phlebotomy profession demands a high standard of behaviour from its members and must uphold the standards and quality required within the healthcare system.
- 1.2 Although the employer is liable for the wrongs of his employee if they are committed within the scope of their employment, the phlebotomist remains accountable individually for his/her actions. This means that he/she must comply with the accepted standards of his/her profession and that there are no foreseeable defects in the procedure carried out. When in doubt, this standard would be based upon conformity with a responsible body of opinion within the profession. So, once trained and practised, the phlebotomist holds him/herself out as possessing a special skill. He/she is obliged to use reasonable skill in the performance of his/her duties and be proficient in the skill he/she holds him/herself out as possessing. The standard expected is that he/she exercises the ordinary skill of an ordinary competent person exercising that skill.
- 1.3 The phlebotomist must follow safe practices of patient identification and sample labelling as specific by his/her employing authority.
- 1.4 He/she must adhere to health and safety guidelines and infection control laid down by his/her employing authority (see paragraph 2).
- 1.5 He/she must follow responsible venepuncture practices based on the training provided by the employing authority.
- 1.6 The phlebotomist must be adequately trained and assessed to be competent before carrying out any procedure. He/she must not perform any tasks that he/she has not been trained to perform or that he/she does not feel competent to perform.
- 1.7 Where difficulties arise in obtaining a sample the phlebotomist must observe the policy of the employing authority regarding referral of the patient/client to the appropriate healthcare worker or inform the person ordering the blood test of the difficulty.
- 1.8 The phlebotomist must be aware of the legal and ethical principles applicable to his/her profession.

Health, Safety and Infection Control

2.1 Each employer has a duty to take responsible care for the health, safety and welfare of his/her employees in the workplace and not to expose him/her to any unnecessary risks.

Safety in the workplace is governed by the Safety, Health and Welfare Act 1989. Section 6 (1) and (2) provide that the employer must ensure that any place of work, its design and maintenance under his/her control must be reasonably practicable, safe and without risk to health. He/she must provide safe systems of work and also information, instruction, training and supervision necessary to ensure the safety and health of employees. In circumstances where it is not reasonably practicable to control or eliminate hazards, the employer must provide and maintain suitable protective clothing or equipment to ensure health and safety of employees. The employer must also provide and maintain facilities and arrangements for employees' welfare at work and personnel to ensure this. Each hospital of health board should have a regularly updated policy on health, safety and infection control which can be referred to by the phlebotomist. This should be easily available and understood by the phlebotomist. This must deal with issues such as the policy relating to blood spillage, reporting of incidents and accidents, and high risk management. It should include advice, counselling and follow-up services. Management should also have a "sharps policy" which should include a method of disposal, collection procedure of a prevention for sharps injury and provision of Hepatitis B vaccination for all healthcare workers as risk. Attention must be given to universal precautions for blood and bodily fluids for all healthcare workers.

2.2 However, the phlebotomist also has responsibilities as an employee under the 1989 legislation. The phlebotomist must recognise that there is potential risk involved in dealing with patients/clients with possible communicable diseases. This risk is inherent in the profession and he/she must take all precautions recommended for protection against such risk. Under Section 9 of the 1989 Act, the employee has a duty to care for his/her own safety at work and also that of co-workers and any other persons who may be affected by his/her acts or omissions while at work.

The employee must co-operate with the employer and any other person to such an extent as will enable his/her employer/other person to comply with the relevant statutory provisions.

The employee must use any protective clothing or equipment provided for use (by him/her alone or in common with other) in the manner intended to secure his/her safety, health and welfare while at work.

He/she also has an obligation to report to his/her employer or immediate supervisor, without unreasonable delay, any defect in equipment, place of work or system of work which might endanger safety, health or welfare of which he/she becomes aware.

.o-operation with Co-workers

3.1 Co-operation with other healthcare workers (e.g. laboratory staff, doctors and nurses) is essential in order to enhance the overall level of professionalism. Where the phlebotomist suspects or recognises an error or discrepancy in the instructions given, he/she should call this to the attention of the healthcare worker ordering the test.

Professional Conduct

- 4.1 The phlebotomist must be familiar with and observe the ethical principles applicable to a healthcare profession and at all times behave in a professional manner.
- 4.2 If a phlebotomist suspects that he/she may be infected with a serious communicable condition (e.g. Hepatitis B or HIV) he/she must seek diagnostic testing and medical assistance and inform the appropriate authority.
- 4.3 Under no circumstances may the phlebotomist practice while under the influence of alcohol or any other non prescribed or approved drugs.
- 4.4 The phlebotomist must not engage in inappropriate conduct toward the patient/client.
- 4.5 The phlebotomist must not partake in any behaviour which would be considered to be professional misconduct. This is defined as conduct which members of that profession with experience, competence and good repute consider disgraceful or dishonourable.

Confidentiality

- 5.1 The phlebotomist must be aware of the ethical problems involved in disclosure of information about a patient/client.
- 5.2 The patient/client imparts information to the healthcare worker in good faith and on the understanding of confidentiality.
 - The phlebotomist must respect the patient/client's privacy and prevent disclosure of information learned in the course of professional practice and must not divulge such information otherwise that for the purpose of which it was intended. The phlebotomist must use his/her professional judgement in deciding if information needs to be disclosed to relevant medical personnel directly concerned with the patient/client's care.
- Especially given the phlebotomists close involvement with the diagnosis and treatment of conditions such as HIV/AIDS he/she must maintain confidentiality at all times.

- 5.4 The phlebotomist must also be aware of the potential dangers to confidentiality of computers and electronic processing in the health services administration area where this applies to his/her work situation.
- 5.5 The principles of confidentiality and consent (see paragraph 6) must be observed also when the patient/client is taking part in research.

Consent

- 6.1 To touch a person without consent constitutes battery or trespass to the person.
 - Therefore, in general consent must be obtained from a patient/client before any treatment is carried out. For consent to be valid the patient/client must have the capacity to give consent, i.e. be of adult years and of sound mind. He/she must have been informed by the person ordering a blood test of the nature and purpose of the testing and then consent must be given voluntarily. However, consent may be express or implied.
- 6.2 It is not the phlebotomists role to discuss the patient's condition or to inform him/her initially about the tests which he/she is to have carried out. However, the phlebotomist must interact with the patient/client and can clarify the tests ordered to help him/her to understand and to promote compliance with any necessary instructions. Further queries, however, should be referred to the appropriate medical staff.
- 6.3 The phlebotomist must approach each patient/client with dignity and respect and queries must be answered in a courteous manner. Although it is not the phlebotomists role to inform the patient/client of the need for blood testing and its purpose, nonetheless the phlebotomist must obtain the patient/client's consent prior to carrying out the venepuncture procedure except in cases of urgent necessity. The patient/client has the right to refuse to have this procedure performed and this refusal must be respected and documented and the doctor or appropriate healthcare worker informed according to the individual employing authority's policy
- 6.4 Special care must be exercised where children, mentally ill, unconscious patients or persons with learning disabilities are involved. In general in such cases consent may be obtained from next-of-kin. However, the procedure must be explained to any person capable of understanding and the patient/client must be approached with the same dignity and respect as any patient/client.

 In the case of young adults, while it is prudent to obtain patient/guardian consent, the competency of the patient/client to consent must be assessed and establishing consent to procedure.
- 6.5 Blood to be taken for HIV testing in accordance with hospital policy.

caining and Education

- 7.1 Should it be required, the phlebotomist must assist in training and continuing education by co-operation in passing on the skill, knowledge and professional behaviour which he/she has acquired.2

 The phlebotomist must be aware of his/her responsibilities towards trainees and ensure that any tasks delegated to them are appropriate to their skill, experience and competency.
- 7.2 Members of the profession must keep themselves informed of current advances which affect their profession. It is the personal responsibility of each phlebotomist to maintain his/her level of competency in practice remain updated and assume responsibility for this.
- 7.3 In order to establish and maintain professionalism it is hoped that each phlebotomist will accept responsibility for adopting the minimum standards set out and participate in the profession's attempts to attain the highest standards of practice.
 - 1 Subject to adjustment when a recognised training programme is introduced. At that time we hope for uniformity of venepuncture policies.
 - 2 This is subject to an approved training programme being set up which may involve in-service training and will depend upon the structure of the programme and negotiation with the employing authorities and phlebotomist's approval.