



HEALTH HOLDING

HAFAER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Laboratory and Blood Bank		
Document:	Internal Policy and Procedure		
Title:	Personnel Orientation, Education, Training and Competency		
Applies To:	All Blood Bank Staff		
Preparation Date:	January 01, 2025	Index No:	LB-IPP-252
Approval Date:	January 15, 2025	Version:	1
Effective Date:	February 15, 2025	Replacement No.:	LB-IPP-252(N)
Review Date:	February 15, 2028	No. of Pages:	04

1. PURPOSE:

- 1.1 To assure that all staff are knowledgeable with each procedure they are expected to perform and practice each procedure according to written instructions in the department policy and procedure manuals.

2. DEFINITONS:

- 2.1 **Competence:** Ability of an individual to perform a specific task according to procedures.

3. POLICY:

- 3.1 It is the responsibility of the blood bank supervisor to orient staff about the organization and specific job responsibilities.
- 3.2 Orientation is applied to all newly hired employees and to any employees who are assigned new or unfamiliar with work and/or equipment .
- 3.3 Learning objectives must be met. If they are not met, additional training is required and must be completed before the trainee is allowed to perform without supervision the procedure described in the policy and procedure.
- 3.4 The orientation shall be documented in each employee's personnel file.
- 3.5 The Blood Bank maintains an adequate and competent staff.
- 3.6 Initial training is given to new personnel or those existing personnel who have been absent from the blood bank for greater than one year.
- 3.7 Refresher, Remedial, Ongoing and Continuing Education are given when indicated.
- 3.8 Competency of staff is done at the completion of training and monthly thereafter.

4. PROCEDURE:

4.1 Principle:

- 4.1.1 With respect to individuals, Qualification is the aspect of an individual's education, training, and experience that are necessary to successfully meet the requirements of a position.
- 4.1.2 Personnel performing critical tasks must be qualified to perform the assigned activities on the basis of appropriate education, training, and/ or experience.

4.2 Orientation:

- 4.2.1 Orientation: An introductory stage in the process of new employee assimilation and a part of his or her continuous socialization process in an organization. Major objectives of orientation are to:
 - 4.2.1.1 Gain employee commitment.
 - 4.2.1.2 Reduce his or her anxiety.
 - 4.2.1.3 Help him or her understand organization's expectations.
 - 4.2.1.4 Convey what he or she can expect from the job and the organization.
- 4.2.2 Section Orientation: Blood bank supervisor shall be responsible for unit orientation. The comprehensive departmental orientation includes but is not limited to the following processes:

- 4.2.2.3 Specific job description and responsibilities, including methods of evaluation.
- 4.2.2.4 Introduction to co-workers and work area.
- 4.2.2.5 Work Flow.
- 4.2.2.6 Knowing everything about personal protective equipment (PPE), biological and chemical spill kits regarding its places and values.
- 4.2.2.7 Hours of work including meal/rest breaks/ timekeeping procedure.
- 4.2.2.8 All new employees shall complete the initial hire employee checklist and return to supervisor.
- 4.2.2.9 The original copy of the initial hire employee checklist shall be kept in the laboratory staff file and keep the copy in orientation file in the unit.

4.3 Training:

- 4.3.1 There are many types of training mechanisms within the training system. This includes initial, refresher, remedial, and ongoing training as well as continuous education.
- 4.3.2 Initial training:
 - 4.3.2.1 Required training given to new personnel or those existing personnel who have been absent from the BB for greater than one year.
 - 4.3.2.2 the trainee shall :
 - 4.3.2.2.1 Read the policy and procedure.
 - 4.3.2.2.2 Read references, if available.
 - 4.3.2.2.3 Observe the trainer performing the procedure.
 - 4.3.2.2.4 Obtain practice material from the trainer (optional).
 - 4.3.2.2.5 Perform the procedure for practice.
 - 4.3.2.2.6 Perform the procedure for the trainer, who will complete the competency assessment checklist.
 - 4.3.2.2.7 Complete the written evaluation, if applicable.
 - 4.3.2.2.8 Review answers to the written evaluation questions with the trainer.
 - 4.3.2.3 The Competency Assessment Checklist (Training checklist) should be completed and signed by the trainer.
 - 4.3.2.4 The original copy of the Competency Assessment Checklist shall be kept in the laboratory staff file and keep the copy in orientation file in the unit.
- 4.3.3 Refresher training:
 - 4.3.3.1 Required training given to existing personnel who have been absent from the BB for less than one year.
- 4.3.4 Remedial training:
 - 4.3.4.1 Required training given to existing personnel in response to:
 - 4.3.4.1.1 A change in policy, process or procedure.
 - 4.3.4.1.2 An incident or occurrence that represents a deviation in process or procedure.
 - 4.3.4.1.3 Inability of personnel to meet defined objectives during direct observation assessment.
 - 4.3.4.1.4 Failure of personnel to meet requirements of other forms of assessment (e.g. Written quiz, etc.).
- 4.3.5 Ongoing training:
 - 4.3.5.1 Required training given to existing personnel on a yearly basis that reflects critical policies, processes and procedures that are used routinely within the blood bank. Each calendar year, each staff member shall complete the following:
 - 4.3.5.1.1 Review of department manuals: Policies and Procedures.
 - 4.3.5.1.2 Documented performance according to written procedures for specimen acceptance, ABO/Rh testing, compatibility testing, component preparation, blood release, QC testing and other daily routine duties.
 - 4.3.5.1.2.1 Acceptable performance is documented through direct observation by the supervisor, satisfactory performance of at least 80% of written tests of BB policy and procedure.
 - 4.3.5.1.3 Acknowledge review of all new or revised policies and procedures.

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4.3.6 Continuing education:

4.3.6.1 Blood Transfusion Service personnel are strongly encouraged to participate in a minimum of two continuing education activities per year.. Documentation of attendance at seminars, workshops, in-services or other educational programs is placed in the employee's file. A copy of the program certificate or the Continuing Education form are acceptable forms of documentation.

4.3.7 Personnel competency:

4.3.7.1 Evaluations of competence shall be performed before independent performance of assigned activities and at specified intervals.

4.3.7.2 Competency is done by:

4.3.7.2.1 Written tests.

4.3.7.2.2 Providing the employee with samples to test and comparing the employee result with the expected result.

4.3.7.2.3 Observing the employee.

4.3.7.3 Periodic documentation of employee competence is done (monthly).

4.3.7.4 Errors detected through tests are corrected by retraining and documentation.

4.3.7.5 Retraining must be completed before the staff member is permitted to work without direct supervision.

4.4 **Personnel records:**

4.4.1 Personnel records for each employee shall be maintained.

4.4.2 Records of names, signatures, initials or identification codes, competency and inclusive dates of employment shall be maintained with supervisor of blood bank technicians.

5. MATERIALS AND EQUIPMENT:

5.1 **Forms and Records:**

5.1.1 The Competency Assessment Checklist (= Training checklist)

5.1.2 Employee orientation checklist

5.1.3 Employee observation form

5.1.4 Personnel records

6. RESPONSIBILITIES:

6.1 All blood bank staff have to follow the policy and procedure.

7. APPENDICES:

N/A

8. REFERENCES:

8.1 The Unified Practical Procedure Manual For Blood Banks In The Arab Countries, 1434-2013.

8.2 The Standard Policy For Blood Banks In The Kingdom Of Saudi Arabia, 1st edition, 1435-2014.


8.3 National Standards For Clinical laboratories and Blood Banks, 1st edition, 2015.

8.4 AABB Technical manual, 18th edition, 2014.

8.5 AABB Standards for Blood Banks and Transfusion Services, 30th edition, 2016.

8.6 Joint Commission international Accreditation Standards for Hospitals. Staff Qualifications and Education Chapter, 4th edition, 2011.

9. APPROVALS:

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