

Correct Use of Point of Care Testing Devices North Tees and Hartlepool NHS Foundation Trust NTH POCT 016

Correct Use of Point of Care Testing Devices

The Point of Care Testing (POCT) Policy has been produced to clarify the responsibilities of all users of POCT devices and is available to all staff via the Trust Policies section of the SharePoint site.

As a user of POCT equipment you will be required to perform testing in line with the Point of Care Testing Policy. This document reinforces the core principles of the Point of Care Testing (POCT) Policy to confirm that all staff are aware of their responsibilities.

Correct Use of Access Barcodes

As stated, both within the Policy and during your training session, access to POCT devices is restricted to staff who have received appropriate training. Please be aware that the access barcode issued following training is for <u>your personal use</u> only and must <u>never</u> be used by anyone else. This includes other members of staff, even if they are authorised users of the system. You are reminded that gaining unauthorised access to the system, or allowing your barcode to be used by another party, either willfully or recklessly, is a serious breach of the Policy.

The use of barcodes is subject to regular audit, and misuse will lead to deactivation. Repeated misuse may lead to disciplinary proceedings.

Correct Patient Identification

In order to ensure patient safety, and to maintain complete records, patients must be correctly identified on Point of Care Testing devices using their unique <u>Hospital Number</u>. If there is an <u>urgent clinical need</u> and this information is not known then 000000 should be entered.

Patient Identification is subject to regular audit and incorrect use will result in deactivation of individual operators. Repeated misuse may lead to disciplinary proceedings.

Declaration

- I confirm that I have received training and understand the Trust's policy relating to the use of my personal Point of Care Testing Barcode and Correct Patient Identification on Point of Care Devices
- I confirm that I will abide by the Point of Care policy.

Name	Signature
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Barcode No	Date