# Doctors in training induction
# Learning objectives

### Blood transfusion
- Assess whether it is appropriate for the patient to receive a blood/blood component transfusion or an alternative.
- Carry out positive patient identification process and correctly label samples.
- Ensure that all the relevant details are included in the requesting procedure.
- Authorise blood components safely in accordance with the guidelines/protocols.
- Take samples correctly according to best practice (i.e. from an appropriate site and ensuring correct order of sample draw on multiple requests).
- Ensure patient safety through an understanding of basic ABO serology.
- Take appropriate action in an emergency where a transfusion is required.
- Complete the initial actions required to manage an adverse reaction/event.

### Consent
- Apply a knowledge of when consent is required and follow good practice for implied, oral and written consent gained in a timely manner.
- Give full and accurate information to enable a patient to make an informed decision concerning consent and only take consent for procedures that you are competent to undertake.
- Assess when an adult's refusal of consent is the result of lack of capacity to make that decision.
- Act on advice from relatives, carers, friends, welfare attorney, court appointed welfare deputies or independent mental capacity advocate (IMCA) where a patient lacks capacity.
- Consult appropriately when making best interests decisions for adults lacking capacity.

### Mental Capacity Act
- Support adult patients to make their own decisions by giving information that is clear and easy to understand, and take steps, where necessary to ensure communication, for example non-verbally.
- Apply, where needed, the Mental Capacity Act (MCA) 2-stage test of capacity to determine whether an adult patient lacks the mental capacity to make a specific decision concerning their health, at the time it needs to be made.
- Consider, where appropriate, whether an apparently unwise decision is being made with or without capacity by an adult and proceed appropriately.
- Use the best interests statutory checklist accurately when making a decision for or about an adult who lacks capacity and record its use.
- Contribute to providing care in a way that is the least restrictive of an adult's basic rights and freedoms.

- Recognise and advise when an adult lacking capacity to consent to proposed interventions is, or is likely to be, restrained or deprived of their liberty.

### Death certification
- Confirm (verify) that a patient has died using cardiorespiratory criteria and record this in a patient's record.
- Judge, based on common reasons, whether the death of a patient should be notified to a Coroner.
- Follow the process, within specified timeframes, after a death has occurred in a healthcare setting.
- Apply an understanding of roles and responsibilities in relation to the process following the death of a patient.
- Complete a death certificate avoiding common mistakes.
- Appropriately report to a coroner unnatural deaths and deaths where the cause is unknown.

### Safe prescribing
- Able to prescribe safely in a manner that complies with the prescribers ethical and legal responsibility to complete all elements of the prescription covered in the legislation (including route, volume, preparation and dose).
- Able to use resources such as BNF/BNFC to access information about drug treatments including dosage, interactions and writing prescriptions, whilst taking into account the limitations of each resource.
- Able to apply a knowledge of common interactions of medicines and able to mitigate the effects.
- Know where and how to recognise, manage, document and, where appropriate, report common adverse reactions.
- Able to involve the patient as an equal partner in the prescribing process and understand the reasons why this is necessary.

### VTE
- Able to recognise the main signs and symptoms of VTE.
- Able to undertake a risk assessment and take appropriate action to prevent VTE using the national VTE risk assessment tool or a local equivalent.
- Able to recognise and respond appropriately to specific clinical situations where there is an incident or an increased risk of VTE.
- Able to apply local quality standard for reducing the risk of VTE.

### Risk management
- Identify potential hazards to patient safety.
- Carry out on the job risk assessment, judging severity of impact and the likelihood of occurrence of risks to patient safety identified within their area of competence.
- Appropriately implement risk controls from on-the-job risk assessments.
- Follow the process for reporting incidents.
- Apply learning from safety incidents.

### Record keeping
- Apply standards of good record keeping (for example, the Royal College of Physicians Health Informatics Unit's standards of health record keeping).

- Ensure that patient records for clinical coding are accurate and comprehensive.
- Apply the Caldicott principles when making decisions on sharing information.
- Keep clinical records that ensure the Trust is able to comply with the principles of the General Data Protection Regulation (GDPR) (2018), Data Protection Act (2018) and the Freedom of Information Act (2000) within their area of competence.
- Minimise or avoid potential threats to the security of information.