

Learning contract for N20 accreditation

Competency achieved by performing supervised nitrous oxide sedation in accordance with hospital guidelines & the accreditation tool

Objectives	Evidence	Accreditation Criteria	Evaluation
<p>Accreditation is achieved by applying the principles of the procedural sedation guidelines and meeting the following objectives.</p> <p>Resources RCH Intranet Comfort Kids website Hospital procedural sedation guidelines Procedural sedation learning guide The Quantiflex unit Procedural Sedation Leaders (PSL) CNE/CNF</p>	<p>Document evidence of how the objectives are achieved Example:</p> <p>Nitrous oxide education session undertaken on dd/mm/yy</p> <p>N20 administration explained to parent & child</p> <p>Demonstrate components of the Quantiflex unit</p>	<p>Perform supervised nitrous oxide sedation with a Procedural Sedation Leader</p> <p>Assessment completed with designated procedural sedation leader using nitrous oxide accreditation tool.</p> <p>Staff already accredited for nitrous oxide from ED or outside hospital should perform one sedation with PSL</p> <p>All remaining staff should perform min. of two-three sedations with PSL</p>	<p>Each supervised nitrous oxide sedation is documented using the accreditation tool & learning contract</p> <p>Include date and signature of the procedural sedation leader</p>
1. Uses educational resources prior to the administration of nitrous oxide		1	
2. Working knowledge of the "Record of Sedation"		2	
3. Demonstrate functional knowledge of the Quantiflex Unit		3	
4. Demonstrate preparation of equipment and perform safety checks		4	
5. Prepare child & parents for nitrous sedation		5	
6. Perform supervised nitrous oxide sedation		6	
7. Identify the rationale for continual monitoring of child UMSS, RR, SA02 & HR		7	
8. Identifies the appropriate action required for an adverse event(s)		8	
9. Appropriately documents the procedural sedation episode.		9	
10. Articulate how to order N20 cylinder, circuits & masks. Knows the location of the emergency N20 box		10	

I, _____ (name) have successfully completed the N20 Sedations as documented on the accreditation tool. I hereby declare that I feel confident performing nitrous oxide administration without further supervision. I will maintain written records of all nitrous oxide administrations to facilitate the review process annually

SIGN: _____ DATE: _____

Submit copies of the completed contract to the CNE in the department and Comfort Kids Program. PSL are to enter the accredited staff members name onto the Trendcare system under 'staff competencies'