



Yorkshire Neonatal Network Transport Team

Transport Retrieval Competency Assessment

Date of transfer Retrieval 1/2/3 please circle

Diagnosis

Assessor

Taking referral	Identifies key clinical issues	Y/N
	Structured approach to assessment	Y/N
	Gives appropriate clinical advice	Y/N
	Completes receiving form	Y/N.....
Organisation	Communicates with senior staff	Y/N
	Checks transport equipment with nurse	Y/N
	Establishes urgency of transfer	Y/N
	Phones referring hospital before departure	Y/N
Stabilization	Undertakes handover	Y/N
	Stabilizes ABCD	Y/N
	Appropriate management if needed	Y/N
	Familiar with transport equipment	Y/N
	Communicates to family	Y/N
	Secures equipment to patient with nurse	Y/N
	Prepares emergency equipment with nurse	Y/N

Packages patient and ensures safe transfer with nurse Y/N

Performs pre departure checks with nurse Y/N

During transport Ensures equipment securely loaded Y/N

Ensures appropriate road speed Y/N

Ensures adequate temperature control Y/N

Logical approach to troubleshooting Y/N

Handover Adequate handover Y/N

Completes documentation Y/N

Comments from assessor

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This assessment was completed satisfactorily Y/N.....

Please keep this form with a copy of the transport documentation in your portfolio.

Signed by supervisor.....Print name..... Date.....

Signed by trainee.....Print name..... Date.....