

CLINICAL COMPETENCY

3. 1 Chest therapy and airway clearance techniques

Name: _____ Date Commenced: _____ Role: RN SNA Physio Medical Dr

Aspect of Care/Clinical Skill: Respiratory Management (SCI) Method of assessment: Question, observation and case scenarios

<u>Observable criteria</u>	Tick assessment outcome						Outcome		Candidates/ Assessors Signature and Date	
	K/S	S/A	1	2	3	4	5	pass x		fail x
<u>3. Chest therapy and airway clearance techniques.</u>										
3.1. The participant will be able to optimise the patients breathing.										
3.1.1. To be able to identify the main aims of chest treatment for an acute spinal cord injured patient.	K									
3.1.2. To be able to demonstrate how to position a spinal cord injured patient to: <ul style="list-style-type: none"> • Postural drainage - lung anatomy • Optimise Intermittent positive pressure breathing (IPPB) • Maximise diaphragm function • Minimise Ventilation / perfusion mismatch (V/Q) 	S									
3.1.3. Able to educate a patient in the need for and the correct use of an incentive spirometer	S									
3.1.4. To be able to describe the indications, contraindications and benefits of intermittent positive pressure breathing (IPPB).	K									
3.1.5. Demonstrate the safe set up and use of IPPB with a patient.	S									
3.1.6. Demonstrate appropriate awareness of established guidelines for safe practice for chest shaking and assisted coughing.	K									
3.1.7. Demonstrate ability to recognise clinical indicators for chest shaking and assisted coughing.	S									

<u>Observable criteria</u>	Tick assessment outcome					Outcome		Candidates/ Assessors Signature and Date	
	K/S	S/A	1	2	3	4	5		pass x
<u>3. Chest therapy and airway clearance techniques.</u>									
3.1.8. Able to identify the potential complications of chest shaking and assisted coughing.	K								
3.1.9. Able to safely and effectively perform chest shaking as per spinal unit guideline demonstrating appropriate patient monitoring during the procedure.	S	Not for S/A							
3.1.10 Able to safely and effectively perform assisted coughing as per policy/protocol. <ul style="list-style-type: none"> Acute patient requiring shoulder hold Patient with stable spine in bed Patient sitting in a wheelchair 	S	Not for S/A							
3.1.11 Demonstrate appropriate awareness of established spinal unit guidelines for safe practice for manual hyperinflation (bagging).	K								
3.1.12. Demonstrate ability to recognise clinical indicators for manual hyperinflation (bagging).	S	Not for S/A							
3.1.13. Able to identify the potential complications of manual hyperinflation (bagging).	K								
3.1.14. Able to safely and effectively perform manual hyperinflation (bagging) as per spinal unit guidelines demonstrating appropriate patient monitoring during the procedure with <ul style="list-style-type: none"> A patient who is able to take breaths (working with the patient). A patient with no respiratory ability (on a ventilator). 	S	Not for S/A							

Learning log and Assessor's comments



To be completed by the assessor when all the sections above have been signed confirming that the above named person has been assessed as competent.

Assessment outcome: Pass Refer

Assessed by:

Name:

Job title:

Date: