FP0P 04 (CHS223) Fit healthcare equipment, medical devices, assistive technology, or products to meet individuals' clinical needs

About this Unit

This standard relates to working with individuals, relevant others and members of a multi-disciplinary team, as appropriate, to fit equipment, medical devices, assistive technology and products to meet the clinical and user's needs.

Fitting involves handing over and checking the fit of the equipment or device meets the needs of the individual or their circumstances in accordance with the manufacturer's instruction and the prescription. This may take place in a variety of clinical and non-clinical settings. The process may include a trial use of the equipment and/or device in the user environment.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Your **knowledge and understanding** will be specifically related to legal requirements and codes of practice and conduct applicable to your job, and the NHS Knowledge and Skills Framework. This will relate to your work activities; the job you are doing, and the setting, eg in hospital and community, domiciliary, residential care, and the individuals you are working with.

Values — the values underpinning this Unit are embedded within the 2009 NHS Code of Conduct for Health Care Support Workers. These are stated in full within the Assessment Strategy and Guidance document for the awards.

Key Words and Concepts — a glossary of definitions, key words and concepts used in this Unit is contained in the Assessment Strategy and Guidance document.

In occupational standards it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. **You should read the Assessment Strategy and Guidance document before you begin working with the standards and refer to it if you are unsure about anything in the Unit.**

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Specific Evidence Requirements for the Unit
It is essential that you adhere to the Evidence Requirements for this Unit

SPECIFIC EVIDENCE REQUIREMENTS FOR THIS UNIT
Simulation:
♦ Simulation is **NOT** permitted for any part of this Unit.
♦ **The following forms of evidence ARE mandatory:**
♦ **Direct Observation:** Your assessor or expert witness must observe you in real work activities. Their confirmation of your practice will provide evidence for a significant amount of the performance criteria in this Unit. **For example**, check that the device is suitable by ensuring fit and size for the individuals comfort, needs and clinical requirements. ♦ **Professional discussion:** Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. **For example**, discuss with your assessor/expert witness the different types of equipment/devices you are responsible to fit and the limits of use for each type. Discuss who you will seek advice from when equipment/devices do not work or fit.
Competence of performance and knowledge could also be demonstrated using a variety of evidence from the following:
♦ **Reflective Account:** These are written pieces of work which allow you to reflect on the course of action you took in a specific situation to identify any learning from the piece of work and to describe what you might do differently in the light of your new knowledge. ♦ **Questioning/professional discussion**: May be used to provide evidence of knowledge, legislation, policies and procedures which cannot be fully evidenced through direct observation or reflective accounts. In addition your assessor/mentor or expert witness may also ask questions to clarify aspects of your practice. ♦ **Expert Witness**: A designated expert witness, eg a senior member of staff, may provide a direct observation of your practice, or record a professional discussion they have held with you on a specific piece of practice. ♦ **Witness Testimony**: Can be a confirmation or authentication of the activities described in your evidence which your assessor or mentor has not seen. ♦ **Products:** These can be any record that you would normally use within your normal role, eg you should not put confidential records in your portfolio; they can remain where they are normally stored and be checked by your assessor and internal verifier. ♦ **Prior Learning:** You may be able to use recorded prior learning from a course of training you have attended within the last two years. Discussion on the relevance of this should form part of your assessment plan for each Unit. ♦ **Simulation:** There may be times when you have to demonstrate you are competent in a situation that does not arise naturally through your work role, eg dealing with violent or abusive behaviour. The Evidence Requirements in each Unit provide specific guidance regarding the use of simulation.
GENERAL GUIDANCE
♦ Prior to commencing this Unit you should agree and complete an assessment plan with your assessor which details the assessment methods you will be using, and the tasks you will be undertaking to demonstrate your competence. ♦ Evidence must be provided for ALL of the performance criteria, ALL of the knowledge. ♦ The evidence must reflect the policies and procedures of your workplace and be linked to current legislation, values and the principles of best practice within the Health Care sector. This will include the National Service Standards for your areas of work. ♦ All evidence must relate to your own work practice.

KNOWLEDGE SPECIFICATION FOR THIS UNIT

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Competent practice is a combination of the application of skills and knowledge informed by values and ethics. This specification details the knowledge and understanding required to carry out competent practice in the performance described in this Unit.

When using this specification **it is important to read the knowledge requirements in relation to expectations and requirements of your job role**.

You need to provide evidence for ALL knowledge points listed below. There are a variety of ways this can be achieved so it is essential that you read the 'knowledge evidence' section of the Assessment Guidance.

You need to show that you know, understand and can apply in practice:		**Enter Evidence Numbers**
1	Your own level of competence, authority and specialist knowledge base.	
2	How to liaise with key stakeholders and the user for fitting equipment, assistive technology, medical devices and products relevant to your work practice.	
3	How to work effectively as a member of a multi-disciplinary team where appropriate.	
4	How to communicate effectively in the appropriate medium to meet the individuals needs and preferences.	
5	The relevant anatomy, physiology and associated specialist knowledge applicable to the fitting of prescribed equipment, medical device, assistive technology, product and/or associated systems within your area of practice.	
6	The range, underpinning principles and applications of the equipment, medical devices, assistive technology, products and associated systems requiring fitting to the individual within your area of responsibility.	
7	The acceptable range of measurements and limits of use for each type of equipment, device, product and the associated systems to ensure safety and fitness for use prior to fitting and where to seek advice when this is outside your level of responsibility.	
8	The importance of fitting equipment, medical devices, products and associated systems with the individual within the appropriate environment and how to evaluate the user environment when applicable, for the fitting process.	
9	How to fit and make minor adjustments to ensure best fit and comfort for the equipment, medical devices, products and associated systems to meet individual needs and the prescription criteria.	
10	The importance of handover procedures and of informing users and relevant others in their responsibilities for the equipment, devices, products and associated systems.	

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You need to show that you know, understand and can apply in practice:	Enter Evidence Numbers
11 The types of information that should be documented and the importance of doing this accurately, completely, legibly in a required format with the appropriate level of detail for the target audience.	
12 The current national legislation, guidelines, local policies and protocols which affect your work practice.	
13 The policies and guidance that clarify your scope of practice, accountabilities and the working relationship between yourself and others.	

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Performance Criteria		DO	RA	EW	Q	P	WT	PD
1	Work within your level of competence, responsibility and accountability.							
2	Liaise and work with key stakeholders, individuals or agencies involved in the fitting process for the individual.							
3	Apply appropriate health and safety measures, infection prevention and control and personal protective equipment within the fitting process.							
4	Confirm the effective operation and safe working order of the equipment, device, product and associated system within expected performance parameters.							
5	Communicate effectively in the appropriate medium to meet the individual's needs and preferences when explaining the purpose and use of their prescribed item.							
6	Fit the equipment or attach the device or product to the individual and activate where necessary.							
7	Check operational safety and performance measurements.							
8	Confirm the suitability of fit and size of the equipment, device, product and associated system.							
9	Check the comfort and acceptance of the device or product and ensure it meets the individuals' needs and clinical requirements.							
10	Where adjustments are required to obtain best fit or comfort, obtain relevant measurements and other data and make adjustments in line with manufacturer's guidelines and within the prescribed specification or arrange for the adaptation to be undertaken by the appropriate person.							
11	When required, restrict device functions for initial or trial periods to enable the individual's familiarity and to ensure safety; agree relevant trial and review periods to develop its full functionality.							
12	Document and report the process and outcomes of fitting and any minor adjustments, ensuring that any arrangements for further action are implemented.							

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Performance Criteria	DO	RA	EW	Q	P	WT	PD
13 Handover the item to the user or relevant others and clearly explain their responsibilities and the mechanisms for detecting and reporting any system failure in line with legislation and organisational requirements.							
14 Confirm that individual and/or relevant others have all relevant documentation and inform them of the mechanisms for on-going maintenance management and review.							
15 Maintain full, accurate and legible records of information and store in correct location in line with current legislation, guidelines, local policies and protocols.							

DO = Direct Observation *RA = Reflective Account* *Q = Questions*
EW = Expert Witness *P = Product (Work)* *WT = Witness Testimony*
PD = Professional Discussion

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To be completed by the candidate
I SUBMIT THIS AS A COMPLETE UNIT

Candidate's name: ……

Candidate's signature: ……..

Date: ……..

To be completed by the assessor
It is a shared responsibility of both the candidate and assessor to claim evidence, however, it is the responsibility of the assessor to ensure the accuracy/validity of each evidence claim and make the final decision.

I CERTIFY THAT SUFFICIENT EVIDENCE HAS BEEN PRODUCED TO MEET ALL THE ELEMENTS, PCS AND KNOWLEDGE OF THIS UNIT.

Assessor's name: …….

Assessor's signature: …….

Date: ……..

Assessor/Internal verifier feedback

To be completed by the internal verifier if applicable
This section only needs to be completed if the Unit is sampled by the internal verifier

Internal verifier's name: ……

Internal verifier's signature: ……..

Date: ……..……..