About this Unit

This standard covers examination of the individual's external ear only. It does not include further treatment that might be recommended following examination of the ear.

The examination could be carried out in a variety of care settings, including hospitals — both for in and out patients, GP surgeries, nursing and residential homes, and in the individuals own home.

The term 'individuals' is intended to cover adults and children, though there may be internal policies and protocols which restrict the group on whom you can perform ear examinations. Likewise this standard covers all care groups including the elderly, those with long term mental health problems, and those with learning disabilities.

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.

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**, how you hold the pinna in the correct way to straighten the external ear canal and insert the otoscope gently and view the external ear, looking for any abnormalities.
- Professional discussion: Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. For example, the anatomy of the middle and inner ear and why it is important you examine the outer ear.

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

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.

| | need to show that you know, understand and can apply in ctice: | Enter Evidence Numbers |
|----|--|------------------------------|
| 1 | The current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to undertaking examination of the external ear. | |
| 2 | Your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols and Clinical/Corporate Governance. | |
| 3 | The duty to report any acts or omissions in care that could be detrimental to yourself, other individuals or your employer. | |
| 4 | The importance of applying standard precautions to undertake examination of the external ear and the potential consequences of poor practice. | |
| 5 | The importance of working within your own sphere of competence and seeking advice when faced with situations outside your sphere of competence. | |
| 6 | The anatomy of the external ear. | |
| 7 | The anatomy of the middle and inner ear. | |
| 8 | Why it is important to examine the external ear only. | |
| 9 | The signs and symptoms an individual may complain of which leads you and others to suspect a problem with the external ear. | |
| 10 | The types of hearing loss and how to improve communication with individuals who are hard of hearing. | |
| 11 | Why you need to tell the individual what you are doing. | |
| 12 | The purpose of an otoscope and how it works. | |
| 13 | What you would do if the otoscope was not functioning properly. | |
| 14 | How to clean all types of re-useable equipment. | |
| 15 | Why it is important to position the individual and yourself correctly for the examination. | |
| 16 | The safe way to hold and use the equipment and why this is important. | |
| 17 | Why it is important to examine the external ear only. | |
| 18 | Why it is necessary to record all your findings, and what you should record. | |

| | u need to show that you know, understand and can apply in ctice: | Enter Evidence Numbers | | |
|----|---|------------------------------|--|--|
| 19 | The importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff. | | | |

| Performance Criteria | | DO | RA | EW | Q | Р | WT | PD |
|----------------------|---|----|----|----|---|---|----|----|
| 1 | Apply standard precautions for infection prevention and control and other relevant health and safety measures. | | | | | • | "" | |
| 2 | Check the individual's identity and confirm the planned action. | | | | | | | |
| 3 | Give the individual relevant information, support and reassurance in a manner which is sensitive to their needs and concerns. | | | | | | | |
| 4 | Gain valid consent to carry out the planned activity. | | | | | | | |
| 5 | Collect the equipment, ensure that it is in good working order, particularly ensuring that the batteries in the otoscope have sufficient power to produce a white light and securely attach a disposable or clean re-useable ear piece. | | | | | | | |
| 6 | Report immediately to an appropriate member of staff any reasons why you cannot continue with the examination. | | | | | | | |
| 7 | Position: (a) the individual in such a way as to enable easy access to the ear for the examination (b) yourself at the same level as the individual and in such a way as to be able to undertake the examination with the individuals safety and your comfort in mind | | | | | | | |
| 8 | Hold the equipment in a correct manner to ensure complete safety and comfort for the individual and allow the best visual field for you. | | | | | | | |
| 9 | Look at the condition of the external ear and surrounding skin and note any abnormalities. | | | | | | | |
| 10 | Choose the correct size speculum according to the size of the ear canal and attach it firmly to the otoscope. | | | | | | | |
| 11 | Hold the pinna in the correct way to straighten the external ear canal and insert the otoscope gently and view the external ear, looking for any abnormalities. | | | | | | | |
| 12 | Ensure you examine the ear thoroughly and cause as little discomfort as possible. | | | | | | | |
| 13 | Remove the otoscope from the ear and remove the speculum and place ready for cleaning. | | | | | | | |

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| Dor | formance Criteria | | | | | | | |
|-----|---|--|----|----|---|---|----|----|
| Per | Performance Criteria | | RA | EW | Q | Р | WT | PD |
| 14 | Tell the individual what you have done and if the ears are clear of occlusive blockage. | | | | | | | |
| 15 | Note your findings, document these if appropriate, and report your findings to an appropriate member of staff for further action if there is a blockage of the canal. | | | | | | | |
| 16 | Ensure the individual has suffered no adverse effects and allow them to return to an appropriate place and ensure they are comfortable. | | | | | | | |

DO = Direct Observation

FW = Expert Witness

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

| 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 |
| |
| |
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| |
| 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: |