

# **CLINICAL PHYSIOLOGISTS BOARD**

## **General Standards of Proficiency**

Version 1

## Introduction

This document sets out the standards of proficiency for safe and effective practice that we expect registrants to meet.

The generic standards explain the key obligations that we expect of each registrant. Some specific elements of those key obligations have been more closely defined. This is not an exhaustive lists of all the areas that each generic standard covers; we have simply highlighted specific elements where we think this will help the registrant to understand what we require of you.

If you are a trainee, you may only have practised under supervision and not independently. Nonetheless, you must be confident that you will be able to meet these standards when you begin to practise without supervision. Sometimes the standards relate to ongoing practice and normally your clinical placements will have given you the opportunity to demonstrate that you are capable of meeting these.

A note about our expectations of you

The standards of proficiency play a central role in how you can gain admission to, and remain on, the Register and thereby gain the right to use the title(s) of your profession. Therefore we expect you to be able to meet these standards.

We do recognise, though, that your practice will develop over time and that the practice of experienced registrants frequently becomes more focused and specialised than that of newly registered colleagues, because it relates to a particular client group, practice environment, employment sector or occupational role. Your particular scope of practice may mean that you are unable to demonstrate that you continue to meet each of the standards that apply for your profession. For instance, if you work with adults alone, then any standards that relate to how you must work with children will not apply to your day-to-day work. So long as you stay within your scope of practice and make reasonable efforts to stay up to date with the whole of these standards, this will not be problematic. However, if you want to move outside your scope of practice, you must be certain that you are capable of working safely and effectively, including undertaking any necessary training and experience. We can and will investigate if we have good reasons for believing that you might not meet the standards.

These standards are under continual review and will be updated to take into account changes in practice in the professions regulated by the Clinical Physiologists Board.

The Clinical Physiologists Board will publicise any changes to the standards that we make by informing the professional societies of the disciplines represented by the Board.

Acknowledgement is made to the UK Health Professions Council (HPC) whose work and publications have been extensively used in the development of these standards of proficiency.

## Generic Standards of Proficiency

### EXPECTATIONS OF A HEALTH PROFESSIONAL

#### 1a: Professional autonomy and accountability

Registrants must:

- 1a.1 Be able to practise within the legal and ethical boundaries of their profession.
  - Understand the need to respect, and so far as possible uphold, the rights, dignity and autonomy of every patient, client and user including their role in the diagnostic and therapeutic process.
- 1a.2 Be able to practise in a non-discriminatory manner.
- 1a.3 Be able to maintain confidentiality and obtain informed consent.
- 1a.4 Be able to exercise a professional duty of care.
- 1a.5 Know the limits of their practice and when to seek advice.
  - Be able to assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem
  - Be able to initiate resolution of problems and be able to exercise personal initiative.
- 1a.6 Recognise the need for effective self-management of workload and be able to practise accordingly.
- 1a.7 Understand the obligation to maintain fitness to practise.
  - Understand the importance of caring for themselves; including maintaining their health.
- 1a.8 Understand the need for career-long self-directed learning.

#### 1b: Professional relationships

Registrants must:

- 1b.1 Know the professional and personal scope of their practice and be able to make referrals.
- 1b.2 Be able to work, where appropriate, in partnership with other professionals, support staff, patients, clients and users, and their relatives and carers.
  - Understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team.
  - Understand the need to engage patients, clients, users and carers in planning and evaluating care.
- 1b.3 Be able to contribute effectively to work undertaken as part of a multi-disciplinary team.
- 1b.4 Be able to demonstrate effective and appropriate skills in communicating information, advice, instruction and professional opinion to colleagues, patients, clients, users, their relatives and carers.

- Be able to communicate in English to the standard equivalent to level 7 of the International English Language Testing System, with no element below 6.5.
  - Understand how communication skills affect the assessment of patients, clients and users, and how the means of communication should be modified to address and take account of factors such as age, physical and learning disability, culture and ethnicity.
  - Be able to select, move between and use appropriate forms of verbal and non-verbal communication with patients, clients, users and others.
  - Be aware of the characteristics and consequences of non-verbal communication and how this can be affected by culture, age, ethnicity, gender, religious beliefs and socio-economic status.
  - Understand the need to provide patients, clients and users (or people acting on their behalf) with the information necessary to enable them to make informed decisions.
  - Understand the need to use an appropriate interpreter to assist patients whose first language is not English, wherever possible.
  - Recognise that relationships with patients, clients and users should be based on mutual respect and trust, and be able to maintain high standards of care even in situations of personal incompatibility.
- 1b.5 Understand the need for effective communication throughout the care of the patient, client or user.
- Recognise the need to use interpersonal skills to encourage the active participation of patients, clients and users.

## **THE SKILLS REQUIRED FOR THE APPLICATION OF PRACTICE**

### **2a: Identification and assessment of health and social care needs**

Registrants must:

- 2a.1 Be able to gather appropriate information.
- 2a.2 Be able to use appropriate assessment techniques.
- Be able to undertake and record a thorough, sensitive and detailed assessment, using appropriate techniques and equipment.
- 2a.3 Be able to undertake or arrange clinical investigations as appropriate.
- 2a.4 Be able to analyse and evaluate the information collected.

### **2b: Formulation and delivery of plans and strategies for meeting health and social care needs.**

Registrants must:

- 2b.1 Be able to use research, reasoning and problem solving skills (and, in the case of clinical physiologists, conduct fundamental research).
- Recognise the value of research to the systematic evaluation of practice.
  - Be able to conduct evidence-based practice, evaluate practice systematically, and participate in audit procedures.

- Be aware of methods commonly used in health and social care research.
  - Be able to demonstrate a logical and systematic approach to problem solving.
  - Be able to evaluate research and other evidence in order to inform their own practice.
- 2b.2 Be able to draw on appropriate knowledge and skills in order to make professional judgements.
- Be able to change their practice as needed to take account of new developments.
  - Be able to demonstrate a level of skill in the use of information technology appropriate to their profession.
- 2b.3 Be able to formulate specific and appropriate management plans including the setting of timescales.
- Understand the requirement to adapt practice to meet the needs of different client groups distinguished by, for example, physical, psychological, environmental, cultural or socio-economic factors.
- 2b.4 Be able to conduct appropriate diagnostic or monitoring procedures, treatment, therapy or other actions safely and skilfully.
- Understand the need to maintain the safety of patients, clients and users, and those involved in their care.
- 2b.5 Be able to maintain records appropriately.
- Be able to keep accurate, legible records and recognise the need to handle these records and all other clinical information in accordance with applicable legislation, protocols and guidelines.
  - Understand the need to use only accepted terminology (which includes abbreviations) in making clinical records.

2c: Critical evaluation of the impact of, or response to, the registrant's actions

Registrants must:

- 2c.1 Be able to monitor and review the ongoing effectiveness of planned activity and modify it accordingly.
- Be able to gather information, including qualitative and quantitative data that help to evaluate the responses of patients, clients and users to their care.
  - Be able to evaluate management plans against treatment milestones using recognised health outcome measures and revise the plans as necessary in conjunction with the patient, client or user.
  - Recognise the need to monitor and evaluate the quality of practice and the value of contributing to the generation of data for quality assurance and improvement programmes.
  - Be able to make reasoned decisions to initiate, continue, modify or cease treatment or the use of techniques or procedures, and record the decisions and reasoning appropriately.

- Understand that outcomes may not always conform to expectations but may still meet the needs of patients, clients or users.
- 2c.2 Be able to audit, reflect on and review practice.
- Understand the principles of quality control and quality assurance.
  - Be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures.
  - Be able to maintain an effective audit trail and work towards continual improvement.
  - Participate in quality assurance programmes, where appropriate.
  - Understand the value of reflection on clinical practice and the need to record the outcome of such reflection.
  - Recognise the value of case conferences and other methods of review.

## **KNOWLEDGE, UNDERSTANDING AND SKILLS**

3a:

Registrants must:

- 3a.1 Know the key concepts of the biological, physical, social, psychological and clinical sciences which are relevant to their profession-specific practice.
- Understand the structure and function of the human body, relevant to their practice, together with knowledge of health, disease, disorder and dysfunction.
  - Be aware of the principles and applications of scientific enquiry, including the evaluation of treatment efficacy and the research process.
  - Recognise the role of other professions in health and social care.
  - Understand the theoretical basis of, and the variety of approaches to, assessment and intervention.
- 3a.2 Know how professional principles are expressed and translated into action through a number of different approaches to practice, and how to select or modify approaches to meet the needs of an individual.
- 3a.3 Understand the need to establish and maintain a safe practice environment.
- Be aware of applicable health and safety legislation, and any relevant safety policies and procedures in force at the workplace, such as incident reporting, and be able to act in accordance with these.
  - Be able to work safely, including being able to select appropriate hazard control and risk management, reduction or elimination techniques in a safe manner in accordance with health and safety legislation.
  - Be able to select appropriate personal protective equipment and use it correctly.
  - Be able to establish safe environments for clinical practice, which minimises risks to patients, clients and users, those treating them, and others, including the use of hazard control and particularly infection control.

