

## Appendix H - Urinary catheterisation clinical competencies

Name:	Role:
Base:	Date initial training completed: Date Aseptic Technique E assessment completed

### Competency Statement:

The participant demonstrates clinical knowledge and skill in urinary catheterisation without assistance and/or direct supervision (level 3 - see level descriptors). Assessment in practice must be by a Registered Nurse who can demonstrate competence at level 4 or above.

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
<b>The Participant will be able to:</b>				
<b>1.Demonstrate knowledge and skill in urinary catheterisation</b>				
a) State when it is appropriate to utilise an indwelling urinary catheter	Questioning			
b) State when this should be reviewed	Questioning			
c) Discuss what must be considered when selecting the right catheter for the patient	Questioning/observation			
d) Demonstrate an understanding of the terms: i) <input type="checkbox"/> Intermittent ii) <input type="checkbox"/> Short term iii) <input type="checkbox"/> Medium term iv) Long term v) <input type="checkbox"/> Foley catheter vi) Nelaton catheter in reference to catheter use	Questioning			
e) Discuss types and demonstrate an understanding of the materials used to make catheters and the circumstances that they are most appropriately used. i) PVC or Plastic (Indwelling) ii) <input type="checkbox"/> Latex (non-coated) iii) PTFE (Teflon) coated Latex iv) <input type="checkbox"/> Silicone elastomer-coated Latex v) <input type="checkbox"/> 100% silicone vi) <input type="checkbox"/> Hydrogel-coated Latex	Questioning			
f) Demonstrate an understanding of the range of catheter length and appropriate, safe choice for patients: i) <input type="checkbox"/> Short ii) Standard iii) Paediatric	Questioning			

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
g) Discuss knowledge and demonstrate an understanding of the range of balloon size and safe and appropriate use: Demonstrate understanding of the range of balloon sizes and safe and appropriate use i) 5 ml ii) 10 ml iii) 30 ml iv) Balloon inflation	Questioning/observation			
h) Demonstrate understanding of the process used to select Charriere size.	Questioning/observation			
i) Discuss the mechanism and appropriate use of <b>Suprapubic</b> catheters	Questioning/ observation			
j) Discuss the options of drainage systems, considerations and appropriate choices for the patient	Questioning/ observation			
k) Discuss the use of catheter valves and the criteria for use in the individual patient	Questioning/ observation			
l) Describe the process of deflating catheter balloon and safe actions to take if the balloon fails to deflate	Questioning/ observation			
m ) Discuss/demonstrate the principles of safe, effective: i) <input type="checkbox"/> catheter maintenance ii) <input type="checkbox"/> routines for changing a catheter  Discuss the causes and solutions to catheter blockage: i) Mucosal occlusion ii)Hydrostatic suction iii) Occlusion due to spasm iv) <input type="checkbox"/> Mechanical causes v) <input type="checkbox"/> Encrustation	Questioning/ observation			
n) Discuss the causes for and solutions to: i) <input type="checkbox"/> Bypassing ii) Cramping pain iii) <input type="checkbox"/> Urethral discomfort iv) <input type="checkbox"/> Haematuria v) Purple Bag syndrome vi) <input type="checkbox"/> Pain on removal	Questioning			
o) States what information must be documented following insertion of a urinary catheter	Questioning/ observation			

Performance Criteria	Assessment Method	Level achieved	Date	Assessor/self assessed
<b>2. Demonstrate practical skill in clinical catheterisation procedures</b>				
a) Female catheterisation	Direct observation			
b) Male catheterisation	Direct observation			
c) Suprapubic catheterisation	Direct observation			
d) Bladder irrigation	Direct observation			
e) Urine collection and analysis	Direct observation			
f) Catheter removal	Direct observation			

Source Urinary Catheter Care Guidelines 2016 Southern Health Foundation Trust

Date all elements of Competency Tool completed to level 3 \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Status \_\_\_\_\_ Date \_\_\_\_\_

I confirm that I have assessed the above named individual and can verify that he/she demonstrates competency in urinary catheterisation

Assessor \_\_\_\_\_ Signature \_\_\_\_\_ Status \_\_\_\_\_ Date \_\_\_\_\_

Review Dates:	Competent Yes / No:	Registered Nurse Signature:	Verifier signature:	Comments:

### Levels of competency Rating Scale

	Level of achievement	Level
Novice	Cannot perform this activity satisfactorily to the level required in order to participate in the clinical environment	0
↓	Can perform this activity but not without constant supervision and assistance	1
	Can perform this activity with a basic understanding of theory and practice principles, but requires some supervision and assistance	2
<b>Competent Practitioner</b>	Can perform this activity with understanding of theory and practice principles without assistance and/or direct supervision	3
↓	Can perform this activity with understanding of theory and practice principles without assistance and/or direct supervision, at an appropriate pace and adhering to evidence based practice  At this level competence will have been maintained for at least 6 months and/or is used frequently (2-3 times /week) The practitioner will demonstrate confidence and proficiency and show fluency and dexterity in practice <b>This is the minimum level required to be able to assess practitioners as competent</b>	4
	Can perform this activity with understanding of theory and practice principles without assistance and/or direct supervision, at an appropriate pace and adhering to evidence based practice.	5
	At this level the practitioner will be able to adapt knowledge and skill to special/ novel situations where there maybe increased levels of complexity and/or risk	
Expert	Can perform this activity with understanding of theory and practice principles without assistance and/or direct supervision, at an appropriate pace and adhering to evidence based practice. Demonstrate initiative and adaptability to special problem situations, and can lead others in performing this activity  At this level the practitioner is able to co-ordinate, lead and assesses others who are assessing competence. Ideally they will have a teaching and /or mentor qualification	6

Adapted from: Herman GD, Kenyon RJ (1987) Competency-Based Vocational Education. A Case Study, Shaftsbury, FEU, Blackmore Press, cited in Fearon, M. (1998) Assessment and measurement of competence in practice, *Nursing Standard* 12(22), pp43-47