

SPECIALISM YEAR

CLINICAL ENGINEERING

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MY EXPERIENCE

NHS Highlands Trainee- based in Inverness

Clinical Engineering Trainee specialising in
Rehabilitation Engineering

- Wheelchairs
- Seating
- Environmental Controls

Experience working in a small service in one of the
smaller health boards

FOUNDATION YEAR



**Continue Training
Progression and
Professional
Development**



**Innovation
Project**



**Apply and
Achieve
AHCS
Equivalence**

TRAINING AND PROFESSIONAL DEVELOPMENT

More real work—Expectation that you will contribute

Embedded in a department

Increasing complexity of work you do

Increasing level of independence and responsibility

Training components are still important!



Education
for
Scotland



Highland
na Gàidhealtachd



Specialist Seating



Stability Assessments



Specialist Controls

Equipment Purchase Advisory Group NHSX Ver 1.2 NHS
Highland

	powered footcass, system shutting off, and on a few occasions, shutting off and requiring full control reset to turn on.
Support Arrangement Change Please note any changes in maintenance and/or support that are during this bid: is the equipment on contract still supported by the supplier?	This chair model is no longer being produced and spare parts are expected to be no longer accessible in the next three years.
Similar Items How many similar items of this type would be accessible to the service (by sharing with other services?), if this item or items were not replaced?	0
Disposal Please sign to acknowledge that you agree to the old equipment being removed and disposed of (e-Signature is accepted). If for any reason you wish to retain the old equipment following replacement, please state why in this space.	<i>[Signature]</i> If any parts are usable for other patients, these will be removed and appropriately checked and cleaned.

SECTION C1: Justification

Reasons for replacement, see Table 1. Check all that apply	R	SE	SL	SE	EE	L	R	U	F	NI
Clinical Lead supporting replacement:	x									x
Directorate Priority										
Patient Numbers equipment is used on (per annum, for quantity requested above)	1									

Small notes on Pathway of patient numbers above: breakdown of pathway detail if necessary

(For non-medical equipment, please simply provide details of the onward impact on patients, where this may not be readily obvious)
The patient has used their previous chair for 10 years and is still in very good cosmetic shape, indicating they took good care of it. It can be presumed they will take care of the new chair and it will last them many years.

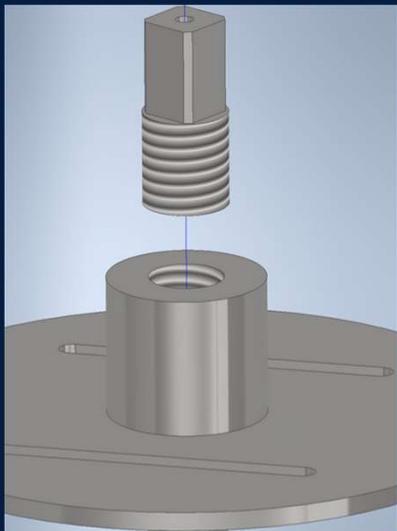
Risk Assessments



Device Assessments



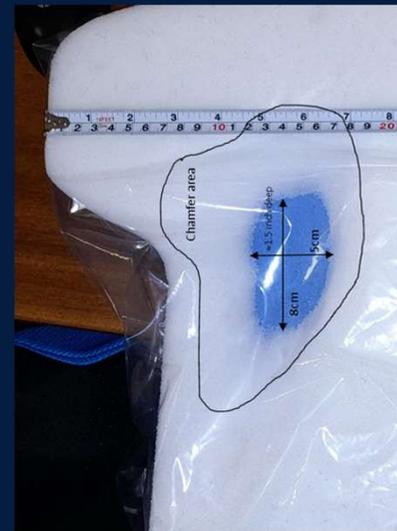
Environmental Controls



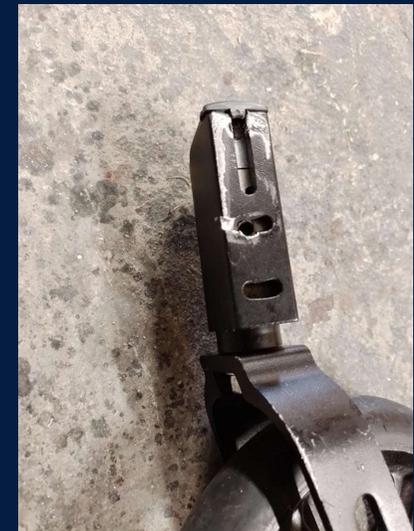
Design & Development



Custom Devices



Modification



Adverse Incidents

KEEPING ON TRACK

Less structured compared to foundation year

Balancing long term projects and everyday work

Stay on top of training requirements, and keep records of everything

Regular meetings with supervisor

You are responsible for your own training

Level of Clinical Practice		
1	Joint	Trainee and supervisor attended appointment with trainee assisting supervisor
2	Leading	Trainee and supervisor attended appointment with trainee leading and requesting supervisors assistance when out of their scope
3	Supervised	Trainee and supervisor attended appointment with trainee conducting the appointment and supervisor observing only
4	Independent but discussed after	Trainee attended appointment with full appointment debriefed with supervisor as case discussions.
5	Independent but decisions approved	Trainee attended appointment and created plan for next steps. Plan approved by supervisor
6	Independent with remote supervision available	Trainee attended appointment and worked full case, requesting meetings or additional help when needed.

Competence	Level of competence where you're happy with me doing it alone but would like to discuss/approve my decisions		Level of competence where you are happy with me to just go ahead and get it done	
	Competent with discussion		Fully Competent	
	Date	Signature	Date	Signature
Starting an appointment (introduction, history, reason for appointment, etc)			10-Jan-24	<i>B-mills</i>
Plinth assessment/interpretation	10/01/2024	<i>B-mills</i>		
Finger assessment/interpretation			10-Jan-24	<i>B-mills</i>
Head/chin assessment/interpretation	21/02/2024	<i>B-mills</i>	6-Jun-24	<i>B-mills</i>
Pressure mapping				
Mould casting/midfit	10/01/2024	<i>B-mills</i>		
Standard wheelchair handover/issuing appointment			10-Jan-24	<i>B-mills</i>
Linx programming	1/10/2024	<i>B-mills</i>	16-Oct-24	<i>B-mills</i>
Stability Rig assessment/interpretation	10/01/2024	<i>B-mills</i>		
screening EC referrals			10-Jan-24	<i>B-mills</i>
ordering and managing servicing contracts			10-Jan-24	<i>B-mills</i>
EC eligibility assessment/interpretation	10/01/2024	<i>B-mills</i>		

INNOVATION PROJECT

6 month project completed during your specialism year.

This project is presented at the DCPB symposium in November

My project was developing a testing and comparison method for wheelchair clamp-on lateral supports



REGISTRATION PATHWAY

1. Make an AHCS account and submit your “Intention to Submit” application.
2. Submit your equivalence portfolio to AHCS. This is 5000 words and approximately 60 pieces of evidence showing you meet all of the Good Scientific Practice (GSP) competencies
3. AHCS Viva to determine if you are safe to practice as your portfolio is an accurate reflection of your experience
4. Register with HCPC as a Clinical Scientist!



PROFESSIONAL PRACTICE

1.1	PATIENT-CENTRED CARE
	You put patients first and do the following: - Act in the interest of patients' safety and well-being at all times.
1.1.1	- Fulfil your duty of care if you have a concern about a patient's safety. - Fulfil your duty of candour if something goes wrong in a patient's care. - Adhere to safeguarding requirements and uphold the interests of vulnerable individuals in how you deliver care.
	You treat patients and their carers as individuals and do the following: - Champion equality, diversity and inclusion in how you address individual needs and contribute to service delivery.
1.1.2	- Share information with patients and their carers to support engagement in their care and shared decision-making about their care. - Respect individuals' rights, autonomy, values, beliefs and wishes about how they engage in diagnostic and therapeutic processes while in your care. - Maintain patients' dignity in how you deliver care.
1.1.3	You respect patients' privacy and only use and disclose confidential information about their care in accordance with legal, ethical and data protection requirements.
1.1.4	You support patients and the public to promote and manage their own health and well-being.
1.2	SCOPE OF PRACTICE
	You take responsibility for the following: - Understanding and engaging with your scope of practice, your personal competence and the parameters of your job role (recognising that these may be different and each will change, as you develop and service needs change).
1.2.1	- Your decisions and actions (and inactions) and explaining and justifying these when required to do so. - Working within your current scope of practice, competence and job role. - Being clear to others about the nature of your roles and responsibilities. - Identifying and taking appropriate action when a potential activity or area of decision-making falls outside your scope of practice and competence.
	You engage in continuing professional development (CPD) and do the following: - Maintain and develop your knowledge, understanding and skills in line with your practice and role, including in response to changes in patient need, the evidence base, technological advances and service delivery requirements.
1.2.2	- Identifying when planned changes to your job role or your broader plans for developing your career create CPD needs. - Keep a structured record of your CPD activity to evidence how you maintain and update your knowledge, understanding and skills in line with changing needs in patient care, service delivery and your job role. - Adhere to the specific CPD requirements of your regulatory and/or professional body.
	You engage with individual, team and service performance review and audit processes, including by doing the following: - Responding constructively to the outcomes of specific processes.
1.2.3	- Engaging in emergent learning and development activities to enhance individual and team performance, service delivery and patient care.
1.3	COMMUNICATIONS
	You listen to patients, carers, service users and colleagues to understand their needs, preferences and requests and take account of non-verbal cues to inform how you communicate and respond.
1.3.1	
	You communicate in ways that take account of the needs of your intended audience, adapting how you present information to seek to achieve relevance and clarity and to aid understanding.
1.3.2	

GSP MAPPING

5 Domains:

- Professional Practice
- Scientific Practice
- Clinical Practice
- Research, Development, and Innovation
- Clinical Leadership

Keep these in your head at all times!

Trainee network and collaborating with other trainees kept me going

OTHER COOL EXPERIENCES

Attending the Posture and Mobility Group exhibition, training, and conference in England

Being the Inverness centre rep and the Clinical Engineering Vice Chair on the SMPCETS Network Committee

Representing NHS Highland in the Scottish National Environmental Controls Group

Working with the University of the Highlands and Islands to design and develop accessories for their nanocoating device

Saw so much more of the beautiful rural Scottish Highlands on patient home visits



TIMELINE





THANK YOU

If you have any questions, please contact me on
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