THE NEW BRUNSWICK ASSOCIATION OF RESPIRATORY THERAPISTS

STANDARDS OF PRACTICE

New Brunswick Association of Respiratory Therapists

STANDARDS OF PRACTICE

TABLE OF CONTENTS

1.	DEFINI	ITIONS
1.		

- 2: INTRODUCTION
- 3: NBART STATEMENT OF ETHICS AND PROFESSIONAL CONDUCT
- 4: EXECUTIVE SUMMARY OF STANDARDS
- 5: STANDARD I SPECIALIZED BODY OF KNOWLEDGE
- 6: STANDARD II INTERVENTION AND APPLICATION OF KNOWLEDGE
- 7: STANDARD II INTERVENTION AND APPLICATION OF KNOWLEDGE
- 8: STANDARD III PROFESSIONAL ACCOUNTABILITY
- 9: STANDARD IV SAFE PRACTICE AND APPLIED TECHNOLOGY
- 10: STANDARD V ASSESSMENT
- 11: STANDARD VI PLANNING
- 12: STANDARD VII EVALUATION

New Brunswick Association of Respiratory Therapists STANDARDS OF PRACTICE

DEFINITIONS

N.B.A.R.T. New Brunswick Association of Respiratory Therapists

R.R.T. a Registered Respiratory Therapist who maintains membership

in good standing with the N.B.A.R.T.

MEMBER a R. R. T. as defined above

ANALYSIS the ability to use abstract ideas; to break down and identify

elements, factors and relationships; to apply principles; and to differentiate and discriminate among ideas and concepts.

CURRENT generally accepted, used, practiced or prevalent at the moment.

DATA factual information used as a basis for reasoning, discussion or

calculation.

ETHICAL of or relating to accepted professional standard of conduct; of or

relating to principles of right and wrong behaviour.

EXPERTISE having, involving or displaying skills and knowledge derived

from education or experience.

PEER another member of the R.R.T. profession.

PROMOTES as patient/client advocate, assisting with the goal of obtaining or

maintaining the patient/client's optimal level of function.

RELEVANT having significant and demonstrable bearing on the

patient/client's health.

SOUND exhibiting or based on thorough knowledge and experience;

agreeing with accepted views; logically valid.

UNDERSTANDING the ability to recall facts, to apply criteria, to explain, to

summarize, and to generalize from specific situation to like

situations.

New Brunswick Association of Respiratory Therapists STANDARDS OF PRACTICE

INTRODUCTION

The goals of the New Brunswick Association of Respiratory Therapists, as they relate to practice standards include:

- safe practice
- appropriate practice
- practice regulated by therapists in the public interest

These goals can be achieved by:

- promoting best practices
- preventing improper or unsafe practices
- identifying improper practice and intervening when identified improper practice is unacceptable

What are Standards of Practice?

A Standard of Practice document is a living document open to revision. Written standards reflect the values of the profession, and they clarify for both the public and the membership, expectations for practicing Registered Respiratory Therapists.

Standards of Practice will provide:

- i) A desired and achievable level of performance against which actual performance can be compared.
- ii) A benchmark, below which professional performance is unacceptable
- iii) Regulation of practice of Respiratory Therapy
- iv) Assistance in the development of policy and procedures, and to provide guidelines for the profession
- v) Provision of a legal reference for reasonable and prudent practice
- vi) Documentation to assist health professionals in interpreting expectations of Respiratory Therapy practice

NBART Statement of Ethics and Professional Conduct

In the conduct of their professional activities the Registered Respiratory Therapist shall be bound by the following ethical and professional principles. Registered Respiratory Therapists shall:

- Demonstrate behaviour that reflects integrity, supports objectivity and fosters trust in the profession and its professionals.
- Actively maintain and continually improve their professional competence, and represent that competence accurately.
- Perform only those procedures or functions in which they are individually competent and which are within the scope of accepted and responsible practice.
- Respect and protect the legal and personal rights of patients they treat, including the right to informed consent and refusal of treatment.
- Divulge no confidential information regarding any patient or family unless disclosure is required for responsible performance of duty, or required by law.
- Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.
- Promote disease prevention and wellness.
- Never falsely impugn the reputation of any colleague.
- Refuse to participate in illegal or unethical acts, and shall refuse to conceal illegal, unethical or incompetent acts of others.
- Follow sound scientific procedures and ethical principles in research.
- Comply with provincial, territorial or federal laws which govern and relate to their practice.
- Avoid any form of conduct that creates a conflict of interest, and shall follow the principles
 of ethical business behaviour
- Promote the positive evolution of the profession, and health care in general, through improvement of the access, efficacy, and cost of patient care.
- Refrain from the indiscriminate and unnecessary use of resources, both economical and natural.
- Render assistance to any person, where an urgent need for health care exists.
- Uphold the Constitution and Bylaws of professional associations of which he is a member.

New Brunswick Association of Respiratory Therapists STANDARDS OF PRACTICE

EXECUTIVE SUMMARY of STANDARDS

Standard

- I: SPECIALIZED BODY OF KNOWLEDGE the member possesses a specialized body of knowledge and bases the performance of his/her duties on respiratory therapy theory and practice. The member demonstrates continued learning throughout his/her professional life.
- II: INTERVENTION AND APPLICATION OF KNOWLEDGE the member in consultation with the patient/client, peers, and other health care providers; safely and effectively performs interventions and promotes strategies.
- III: PROFESSIONAL ACCOUNTABILITY the member is accountable for meeting the ethical and legal requirements of professional practice.
- IV: SAFE PRACTICE AND APPLIED TECHNOLOGY the member, in consultation with equipment manuals, CSA guidelines, peers, and relevant others; selects, maintains, and operates equipment to provide safe, effective care. The member evaluates and monitors equipment performance to determine its ongoing effectiveness and consistency with the goals of therapy.
- V: ASSESSMENT the member, in consultation with the patient/client, peers, or other health care providers; assesses the patient, collects and records relevant patient and technological information to facilitate intervention and care planning.
- VI: PLANNING the member, in consultation with the patient/client, peers, and other health care providers, identifies priorities, sets goals, and determines strategies and interventions.
- VII: EVALUATION the member in consultation with the patient/client, peers, and other health care providers; determines the effectiveness of the interventions and strategies. The member continuously evaluates his/her performance of individual procedure and overall practice.

STANDARD I : SPECIALIZED BODY OF KNOWLEDGE

The member possesses a specialized body of knowledge and bases the performance of his/her duties on respiratory therapy theory and practice. The member demonstrates continued learning throughout his/her professional life.

The Registered Respiratory Therapist demonstrates understanding and analysis of:

- 1. the role of the Registered Respiratory Therapist;
- 2. the relationships of the Registered Respiratory Therapist with the patient/client and family, groups, and the community;
- 3. the relationship of Respiratory Therapy with other health disciplines;
- 4. the equipment used in cardio-respiratory care;
- 5. medical gas systems and contingency plans;
- 6. the underlying principles, practices and associated risks of procedures, interventions and research in respiratory, anaesthesia and cardiac technologies;
- 7. the concepts of normal function, acute and chronic illness and situations of risk;
- 8. conditions of general body function, dysfunction and associated risk factors as well as detailed cardio-respiratory function, dysfunction and associated risk factors;
- 9. blood gas procurement and analysis;
- 10. cardiopulmonary function tests and assessments;
- 11. cardiac dysrhythmias recognition;
- 12. variations in normal and abnormal results applicable to Respiratory Therapy;
- 13. general health maintenance and promotion;
- 14. major issues in Respiratory Therapy and health;
- 15. the ethical and legislative framework that influences the practice of Respiratory Therapy; and
- 16. major issues in health care delivery systems and resource management.

STANDARD II: INTERVENTION AND APPLICATION OF KNOWLEDGE

The member, in accordance with physician's orders and facility policy and procedures; safely and effectively performs strategies and interventions.

The Registered Respiratory Therapist:

- 1. exercises sound judgement in modifying implementation of the care plan to appropriate to the patient/client's requirements;
- 2. promotes ventilation and respiration by:
 - 2.1 performing cardiopulmonary resuscitation
 - 2.2 establishing and maintaining a patent airway
 - 2.3 suctioning the airways
 - administering oxygen and other therapeutic gas mixtures
 - 2.5 administering inhaled medications
 - 2.6 assisting with deep breathing, coughing and splinting
 - 2.7 performing chest physical therapy
 - 2.8 using manual resuscitation devices
 - 2.9 using mechanical ventilation devices and modalities
 - 2.10 applying positive pressure
 - 2.11 using drainage devices
 - 2.12 assisting with bronchoscopy procedures
 - 2.13 pacing the phrenic nerve
- 3. promotes haemodynamic stability by:
 - 3.1 inserting, stabilizing and removing cannulae
 - 3.2 manipulating and repositioning cannulae or cannulae ballons
 - 3.3 aspirating or sampling from a cannula;
 - 3.4 injecting liquids to measure cardiac output
- 4. administers medication by inhalation, through tubes, by injection, intravenously (including above the drip chambers), through natural body orifices and topically;
- 5. performs:
 - 5.1 pulmonary function testing
 - 5.2 bronchoprovocation
 - 5.3 cardiopulmonary function testing
 - 5.4 polysomnography
 - 5.5 metabolic studies
 - 5.6 skin tests for allergic response

STANDARD II: INTERVENTION AND APPLICATION OF KNOWLEDGE (cont'd)

- 6. samples, collects and handles blood and/or other appropriate specimens;
- 7. promotes safety by:
 - 7.1 using protective devices
 - 7.2 using universal precautions and isolation techniques
 - 7.3 modifying the immediate environment to reduce or eliminate hazards
 - 7.4 using risk management techniques
 - 7.5 advocating for the reduction and elimination of environmental hazards;
- 8. promotes tissue integrity by:
 - 8.1 providing tracheal stoma care
 - 8.2 using protective devices
 - 8.3 providing skin care in conjunction with respiratory therapy procedures;
- 9. promotes respiratory health and independence through education, coaching and counselling;
- 10. promotes body alignment by:
 - 10.1 assisting with positioning
 - 10.2 assisting with mobilization; and
- 11. promotes general well-being by:
 - 11.1 encouraging a balance between rest, sleep and activity
 - 11.2 supporting positive self concept and effective coping
 - 11.3 providing relevant nutritional instruction
 - 11.4 assisting the patient/client with hygiene
 - 11.5 advocating a healthful environment.

STANDARD III: PROFESSIONAL ACCOUNTABILITY

The member is accountable for meeting the ethical and legal requirements of professional Practice.

- 1. functions in accordance with the Standards of Practice of the New Brunswick Association of Respiratory Therapists and other applicable legislation;
- 2. demonstrates compassion, trust and honesty in his/her interactions in accordance with the CSRT Code of Ethics;
- 3. ensures the patient/clients' rights are protected and promoted by:
 - 3.1 facilitating access to information
 - 3.2 assisting the patient/client to understand relevant information
 - 3.3 obtaining informed and voluntary consent to care, treatment and participation in research
 - 3.4 maintaining privacy and ensuring confidentiality
 - 3.5 providing treatment with dignity
 - 3.6 facilitating/participating in decisions affecting their care;
- 4. is accountable for his/her own actions;
- demonstrates competence at the current level of knowledge and skills for the procedures he/she performs;
- 6 recognizes own knowledge or skill limitations and when necessary seeks the help, guidance and expertise of others;
- 7 does not practice beyond his/her competence;
- 8 appropriately collaborate with peers and other health care providers;
- 9 exercises sound judgement in implementing the prescribed plan of care;
- records and updates all information, strategies, interventions, conclusions and test results as soon as is practicable, including the transcription of orders;
- shares knowledge and expertise with others:
- intervenes in situations where the safety or well-being of the patient/client is unnecessarily at risk; and
- reports incidents of unsafe professional practice, professional misconduct or abuse of a patient/client by a peer or other health care provider to the appropriate authority.

STANDARD IV: SAFE PRACTICE & APPLIED TECHNOLOGY

The member, in consultation with equipment manuals, CSA guidelines, peers, and relevant others; selects, maintains, and operates equipment to provide safe, effective care. The member evaluates and monitors equipment performance to determine its on-going effectiveness and consistency with the goals of therapy.

- 1.. selects equipment appropriate for its use, the patient/client and the goals of therapy;
- 2. verifies that equipment is appropriately clean and meets operations specifications prior to use;
- 3. monitors equipment throughout use to ensure continued safe and effective operation;
- 4. recognizes, and when appropriate, modifies or recommends modification of factors, agents, or situations that may influence the performance or application of equipment;
- 5. regularly and routinely checks, assesses and records:
 - 5.1 the patient/client's response to the applied technology
 - 5.2 that equipment is functioning and is properly connected
 - 5.3 that appropriate alarms are activated
 - 5.4 that inspired gas is properly heated, humidified and verified for oxygen concentration
 - 5.5 the equipment settings are consistent with the order or therapeutic objective
 - 5.6 that circuits, tubing and other equipment/supplies are changed at scheduled intervals
- 6. has current expertise regarding mechanical ventilation, modes of ventilation and options for respiratory support, including an understanding of physiological effects, so as to recommend, select, set, or adjust equipment for optimum efficacy;
- 7. verifies that equipment is properly maintained and calibrated by appropriately trained personnel: and
- 8. verifies that all equipment is appropriately cleaned, disinfected, or sterilized.

STANDARD V: ASSESSMENT

The member, in consultation with the patient/client, peers, or other health care providers; assesses the patient, collects and records relevant patient and technological information to facilitate intervention and care planning.

- 1. exercises sound judgement in modifying assessment parameters appropriate to the patient or situation;
- 2. collects relevant data about the patient or client's:
 - 2.1 perception of and satisfaction with his or her health
 - 2.2 goals and expectations as they relate to his or her health
 - 2.3 growth, development, physiological and mental status
 - 2.4 ability to perform activities of daily living
 - 2.5 methods and manner of communication
 - 2.6 physical, social, cultural, spiritual, and emotional environment;
- 3. collects data from:
 - 3.1 patient/client
 - 3.2 patient/client's family
 - 3.3 other health care providers
 - 3.4 relevant others
 - 3.5 records
 - 3.6 reference material
 - 3.7 diagnostic and monitoring equipment
 - 3.8 the member's own knowledge and experience;
- 4. collects data by:
 - 4.1 interviewing
 - 4.2 consulting
 - 4.3 auscultating
 - 4.4 percussing
 - 4.5 palpating
 - 4.6 observing
 - 4.7 monitoring
 - 4.8 measuring
- 5. records data to:
 - 5.1 identify in general and in detail the patient/client's level of function
 - 5.2 identify variations, patterns, trends, or changes in the patient/client's function
 - 5.3 identify relevant risks affecting and factors contributing to health;
- 6. confirms validity of the data collected through comparison with clinical findings, test results, and information obtained through communication with the patient/client and other health care providers; and
- 7. collects data about the human and material resources available and accessible for the care of the patient/client.

STANDARD VI: PLANNING

The member, in consultation with the patient/client, peers, and other health care providers; identifies priorities, sets goals, and promotes strategies and interventions.

- 1. exercises sound judgement in developing or modifying the care plan appropriate to the patient/client's requirements;
- 2. ensures that the goals of the care plan are acceptable to the patient/client;
- 3. considers which available resources are most effective and efficient for the care plan;
- 4. selects and sequences strategies or interventions according to their effectiveness, efficiency, feasibility, and suitability in relation to the priorities and goals of the care plan; and
- 5. contributes to the development of an individual care plan by determining:
 - 5.1 the best possible outcome in relation to respiratory therapy
 - 5.2 strategies or interventions
 - 5.3 target dates and review dates to determine progress.

STANDARD VII: EVALUATION

The member, in consultation with the patient/client, peers, and/or other health care providers, determines the effectiveness of strategies and interventions. The member also evaluates his/her performance of individual procedures and overall practice.

- 1. exercises sound judgement in evaluation of the care plan and, where necessary, modifies therapy appropriate to the needs of the patient;
- 2. determines whether the goals or objectives of the therapy have been met;
- 3. compares results with the best possible outcome and determines the extent to which they have been achieved;
- 4. confirms the validity of her observations, with clinical findings, test results, and information obtained from the patient/client or relevant others;
- 5. exercises sound judgement in modifying the care plan;
- 6. recommends discharge from respiratory care when it is no longer required;
- 7. participates in evaluating the quality of his/her practice;
- 8. participates in developing methods for evaluating the quality of respiratory care;
- 9. advocates improvement in policies and procedures related to patient/client care; and
- 10. advocates improvements in Respiratory Therapy or health care delivery systems.