Ensuring Clinical Competence In The Intensive Care Unit: A Multi-Disciplinary Rehabilitation Competency Model

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Purpose: To provide the framework for an objective evaluation of clinical competence of rehabilitation professionals practicing in the intensive care units (ICU) of a large academic medical center.

Description: The University of Maryland Medical Center (UMMC) is a large tertiary care academic institution of approximately 800 beds, currently employing 64 rehabilitation staff (35 physical therapists, 21 occupational therapists, and 8 speech language pathologists). Of the 800 acute care beds, 153 are located in an intensive care unit (ICU). Due to the existing body of literature supporting the role of rehabilitation in the ICU setting and the high acuity of patients admitted at UMMC, the Department of Rehabilitation Services utilizes a structured objective model to ensure safe and competent clinical practice within the ICU.

Summary of Use: Due to the high percentage of ICU beds at UMMC, all staff are required to be able to provide care in this setting following a designated ICU orientation period. Once this orientation is completed, the competency process is initiated. The therapist is required to pass a written test which includes management of critical lines and tubes, principles of mechanical ventilation, and safe handling of the critically ill patient. Upon successful completion of the test, the therapist’s skills are assessed during an observed treatment session by a designated validator. Validators are advanced practitioners selected by department leaders and clinical specialists based on their highly developed clinical skills and ability to critically analyze performance. They are initially observed performing a staff assessment by a clinical specialist to ensure uniformity.
Validators utilize a scoring rubric to objectively measure therapist’s performance. This rubric integrates knowledge of the patient’s past medical history and hospital course, determination of tolerance to therapy, management of the ICU environment, equipment including critical lines and tubes, and communication with ICU staff. After receiving a passing score on the practical based assessment, the therapist is placed on an annual renewal cycle. If the therapist is unsuccessful, they are provided further mentorship in the ICU setting before retaking the assessment. The same methodology is utilized by the department to evaluate therapists’ ability to perform both open and in-line suctioning, skills necessary for comprehensive ICU practice.

**Importance to Members:** In the acute care setting it is imperative to ensure the clinical competence of rehabilitation therapists practicing in the ICU. In the current health care model, patient safety, quality, and satisfaction are paramount. This model was established to ensure that these standards of care are maintained and objectively measured in the ICU environment at UMMC. This model has the potential to be adapted to other acute care settings to provide consistency related to ICU patient care.