



NATIONAL CLINICAL
PROGRAMME RESPIRATORY

National Clinical Programme Respiratory

A Self- Assessment Competency Framework for Pulmonary
Rehabilitation Services.

Part 1: CNS and candidate CNS working in Pulmonary
Rehabilitation for the first time.

Part 2: Experienced CNS working in Pulmonary Rehabilitation
Services.

October 2024



Introduction

This document has been created by the NCP Respiratory and a specialist respiratory nursing group to address the need to develop a Pulmonary Rehabilitation (PR) self-assessment competency framework for nursing staff working in this service. Competent health care professionals are essential to the successful delivery of a PR service, which meets the needs of the patient while promoting a high quality service. Pulmonary Rehabilitation, like a lot of other health services, had to adapt during the COVID 19 pandemic and developed into a “hybrid model”. This enabled the continuation of service delivery in a virtual format as well as face to face offerings, when public health guidelines allowed. This hybrid model supports increased accessibility of services and will remain in place going forward and hence, this document includes competencies pertaining to hybrid PR delivery.

It is acknowledged that individual PR teams can differ greatly in staffing, skill mix and roles; teams can also work differently depending on local pathways and patient demographics. To date there has been a single competency document providing a structured framework, meeting the needs of all service areas whilst avoiding duplication of competence assessment. With many full time Pulmonary Rehabilitation services now up and running in the Specialist Ambulatory Care Hubs there is a need to expand to include more specific competencies relating to both nursing and physiotherapy professionals.

Part 1 of this document specifically provides guidance on the core competencies for Clinical Nurse Specialists (CNSs) and candidate CNSs (cCNS) working for the first time or with limited experience in Pulmonary Rehabilitation services. Part 2 of this document is for the experienced CNS working in Pulmonary Rehabilitation. Competencies are required to ensure the use of best practice standards and guidelines for the delivery of Pulmonary Rehabilitation. This document uses a common framework of knowledge and skills.

The overall purpose is to:

- Identify core knowledge, skills and learning tasks required for Pulmonary Rehabilitation services.
- CNS/cCNS to identify their own learning and development needs.
- Guide continuing professional development (CPD).
- Serve as a document to support professional and clinical supervision.

This document should be used in conjunction with respective professional body guidelines and local policies, procedures, protocols and guidelines as well as other NCP Respiratory documents, including [models of care](#).

Further Considerations

This document contains a comprehensive set of knowledge and skill sets that can be used in full or adapted according to the individuals own competency needs. Healthcare professionals can use the document as part of their Continued Professional Development (CPD) portfolio.

Using this document

Each competency is laid out in a table format so that the response can be recorded easily and can be completed electronically or on a hard copy.

Within each competency there are a number of columns to complete including date when the competency was achieved.

Competence is understood as the attainment of knowledge, intellectual capacities, practice skills, integrity and professional and ethical values required for safe, accountable and effective practice as a registered nurse (NMBI 2015). Competence is also acknowledged as being fluid, and ongoing exposure to PR is required to maintain competence in this area. Therefore, the individual nurse must review and recognise if previous levels of competence previously achieved now require further development.

In order to gain competency in Pulmonary Rehabilitation for CNS/cNS who are working in this area for the first time the recommendations are:

1. Complete the certified e-Learning programme on Pulmonary Rehabilitation on [HSELand](#).
2. Complete the certified e-Learning programmes on COPD and Asthma on [HSELand](#).
3. Complete the mandatory reading identified in the Core Knowledge competency in section 1 of this document.
4. Complete on-the-job training (shadowing/assisting) in Pulmonary Rehabilitation. Nurses can gain practical experience working in a supernumerary capacity with experienced practitioners, which is essential for skill development in this area. This training must include:
 - A full course of Pulmonary Rehabilitation (length of programmes may differ locally).
 - A full quota of patients completing a course of Pulmonary Rehabilitation including all pre and post assessments (numbers may differ locally).

Working with other members of the multidisciplinary team (MDT) will assist the nurse in attainment of the required competency. Members of the MDT may include Advanced Nurse Practitioner (ANP), CNS, Clinical Specialist Pulmonary Rehabilitation Coordinator, senior physiotherapist and staff grade physiotherapists who have worked in Pulmonary Rehabilitation for a prolonged period of time (dependent on local structures and arrangements).

Recommendations in all sections of this document will assist the CNS/cNS to deem him-/her- self competent.

In the event that further support is required, the recommendation is that the prerequisites table must be completed and a specific plan formulated to achieve self-competency with appropriate input from other members of the Multidisciplinary Team (MDT). Support may also be available from PR programmes in other hubs for attainment of required competency.

This tool can be used over a period of time to self-monitor performance and professional development as required.

After successful self-assessment of attainment of the competencies, it is recommended that they be reviewed as part of the Professional Development Plan (PDP) process with professional reporting manager maintained in response to newly published evidence or guidelines.

Governance and Responsibility for Completing the Document

The competencies are a shared document between the nurse and their professional line manager. The nurse is responsible for ensuring their competency and maintaining an accurate record of their continued professional development and competency to carry out their role, in line with professional responsibilities. The professional line manager is responsible for discussing this with the nurse.

Creating a core competencies checklist for nurses working in a Pulmonary Rehabilitation environment requires synthesising guidelines and recommendations from authoritative sources such as the American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR), British Association for Cardiovascular Prevention and Rehabilitation (BACPR), British Thoracic Society (BTS), National Institute for Health and Care Excellence (NICE), and the American Thoracic Society/European Respiratory Society (ATS/ERS).

Below is a comprehensive checklist structured around key competencies required for nurses in this setting. This checklist provides a structured approach to ensuring that nurses working in Pulmonary Rehabilitation have the necessary skills and knowledge to deliver high-quality care. Regular review and adherence to evidence-based guidelines will be essential in maintaining and enhancing these competencies.

Part 1: CNS and candidate CNS working in Pulmonary Rehabilitation for the first time.

Competence is understood as the attainment of knowledge, intellectual capacities, practice skills, integrity and professional and ethical values required for safe, accountable and effective practice as a registered nurse.

(NMBI 2015)

On certified completion of e-Learning Pulmonary Rehabilitation programme on HSELand, the registered nurse:

- Deems him/her self-competent using this “Self-Assessment of Competency for a Registered Nurse in Pulmonary Rehabilitation”.
- In the event that further support is required, complete the “Prerequisite to Pulmonary Rehabilitation” form as per section 14 below and formulate a specific plan to achieve self-competency.

Competency 1: Core knowledge – This section is a prerequisite for all other sections

No.	Criteria	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
The first five resources identified are mandatory and must be completed before starting work in Pulmonary Rehabilitation.				
In relation to Core Knowledge the CNS/cCNS will:				
	Complete the HSELand modules on COPD and Asthma			
	Complete the HSELand module on Pulmonary rehabilitation			
	Read the NCP Respiratory Guidance document for setting up Pulmonary Rehabilitation (also Guidance document for setting up virtual Pulmonary Rehabilitation if appropriate) .			
	Read Irish Guidelines on Long Term Oxygen Therapy (LTOT) in Adults 2015			

	Read American Thoracic Society Guidelines for 6 Minute Walk Test. and How to carry out a field walking test in chronic respiratory disease Anne E. Holland, Martijn A. Spruit, Sally J. Singh Breathe Jun 2015, 11 (2) 128-139; DOI: 10.1183/20734735.021314		
	Have knowledge and an understanding of Chronic Lung Disease (CLD) risk factors.		
	Have knowledge and an understanding of timescales for recovery from exacerbation relevant to Pulmonary Rehabilitation & exacerbation risks factors.		
	Have knowledge and an understanding of pulmonary assessments, diagnostics tests & procedures, staging of CLD.		
	Have knowledge and an understanding of the inclusion & exclusion criteria for PR.		
	Have knowledge and an understanding of exercise physiology and effects of exercise on respiratory & cardiovascular systems.		
	Have knowledge and an understanding of benefits and potential risks of exercise for respiratory disease.		
	Have knowledge and an understanding of physiological response (normal and abnormal) to exercise and adaptations required.		
	Have knowledge and an understanding of exercise prescription methodology for cardiovascular endurance and resistance training for a patient with CLD.		
	Have knowledge and an understanding of absolute and relative contraindications to exercise and indications to terminate and exercise session.		
	Have knowledge and an understanding of common comorbidities that may limit an individual's ability to exercise or exercise safely, in particular Uncontrolled Cardiac/Diabetes/falls risk.		
	Have knowledge and an understanding of current recommendations for exercise activity for individuals with CLD.		
	Have knowledge and an understanding of tailored rehabilitation interventions to meet the needs of the CLD patient.		
	Have knowledge and an understanding of pharmacological therapy for CLD including knowledge on inhaler devices and how to demonstrate correct inhaler technique.		

Have knowledge and an understanding of the role of other Health Care Professionals (HCPs) in self-management & the education component of PR.			
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Competency 2 Clinical Assessment & Triage

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to clinical assessment and triage the CNS/cNS will:				
	Mandatory Learning Task : Observe 1 pre-assessment, conduct 1 pre-assessment with a member of the PR Multidisciplinary Team (MDT).			
	Have the necessary skills to explain what a pulmonary rehabilitation programme (PRP) is and the benefits of it to an individual.			
	Have the necessary skills to explain the assessment process to individuals.			
	Have knowledge and an understanding of adherence to consent and GDPR policies.			
	Have the necessary skills to collate and interpret information prior to assessment including Pulmonary Function Tests (PFTs).			
	Have the necessary skills to perform a detailed symptom history focusing on respiratory symptoms, previous history and comorbidities and functional status.			
	Have the necessary skills to identify patients with frailty, sarcopenia and falls in patients and risk assess for pulmonary rehabilitation.			
	Have the necessary skills to identify and understand the effects of malnutrition on patients with pulmonary disease and impact on physical activity and exercise prescription. Demonstrate an ability to teach an understanding of the effects of being under-weight or overweight with CLD when participating in PR.			
	Have the necessary skills to ascertain inappropriate referrals based on absolute and relative contraindications to exercise.			

	Have knowledge and an understanding of current medications; types, indications, contraindications and their implications for exercise.		
	<p>Have the necessary skills to perform risk stratification including:</p> <ul style="list-style-type: none"> • Triage patients based on disease severity, comorbidities, and functional capacity using validated tools. • Identify patients who require urgent medical intervention versus those suitable for pulmonary rehabilitation. • Risk stratification according to assessment include falls risk and risk of exercise –induced hypoxia. Consider risk factors for severe disease, including current smoking and poor inhaler adherence, particularly important in asthma population. 		
	Have the necessary skills to perform physiological baseline measures to guide in determining suitability for PR: Heart rate, blood pressure, respiratory rate, temperature, oxygen saturations, height and weight and estimate body mass index (BMI) and electrocardiogram if deemed necessary locally.		
	Have the necessary skills to perform measures of dyspnoea: Modified BORG Score, Modified Medical Research Council Score for Breathlessness (mMRC).		
	<p>Have the necessary skills to conduct and interpret six-minute walk tests (6MWT).</p> <p>All functional testing must be in line with clinical guidelines to determine Ambulatory Oxygen Therapy requirements for patients participating in pulmonary rehabilitation</p> <p>Mandatory Learning Tasks for completion with peer support:</p> <ul style="list-style-type: none"> • Observe 6MWT and complete 5 tests with a member of the PR MDT. • Read ATS Guidelines for 6MWT. • Read Irish Oxygen guidelines. • Discuss any concerns re Ambulatory Oxygen Therapy (AOT) with physiotherapist. 		

	<p>Have the necessary skills to conduct and interpret Incremental Shuttle Walk Test (ISWT) (if relevant locally).</p> <p>All functional testing must be in line with clinical guidelines to determine ambulatory oxygen therapy requirements for patients participating in pulmonary rehabilitation.</p> <p>Mandatory Learning Tasks to be completed with peer support :</p> <ul style="list-style-type: none"> • Observe ISWT and complete 5 tests with a member of PR MDT. • Read Guidelines for ISWT • Read Irish Oxygen guidelines • Discuss any concerns re AOT with physiotherapist 			
	<p>Have the necessary skills to perform measures of co-ordination: such as the Finger Nose Test, Shin Test. Have the skills to perform measure of balance: such as the 3 or 4 Point Balance Test.</p> <p>Mandatory Learning Task with peer support :</p> <ul style="list-style-type: none"> • Observe relevant identified balance test and complete 5 tests with a member of the PR MDT. 			
	<p>Have the necessary skills to perform measures of strength:</p> <ul style="list-style-type: none"> ➤ Manual Muscle Testing (MMT) (Grade 0-5) or 1Rep Max. ➤ Grip Strength using a dynamometer. ➤ 5-Sit to Stand. ➤ Timed Up Go. <p>Mandatory Learning Task for completion with peer support:</p> <ul style="list-style-type: none"> • Observe relevant identified tests for strength and complete 5 tests with a member of the PR MDT. 			
	<p>Have the necessary skills to identify and screen for frailty when appropriate using the Clinical Frailty Score. Assess for need for walking aid if appropriate.</p>			

	Have the necessary skills to critically evaluate the information collected to determine exercise prescription and a physical activity plan in conjunction with the physiotherapist.			
	<p>Have the necessary skills to screen and interpret for symptoms/health status using validated tools such as:</p> <ul style="list-style-type: none"> ➤ The COPD Assessment Test (CAT). ➤ Asthma Control Test (ACT) ➤ Psychiatric Questionnaires. ➤ The Hospital Anxiety and Depression scale (HADs.) ➤ General Anxiety Disorder 7-item (GAD-7). ➤ The Patient Health Questionnaire (PHQ-9). ➤ Generic QOL Questionnaire. ➤ The EuroQoL 5D-5L (EQ-5D-5L). ➤ Screening for malnutrition risk using the Mini Nutritional Assessment (MNA). <p>Mandatory Learning Task for completion with peer support:</p> <ul style="list-style-type: none"> • Observe relevant identified tools and complete 1 test with a member of the PR MDT. 			
	Have knowledge and an understanding of Mean Clinical Importance Difference (MCID) scores for each tool used.			
	Have the necessary skills to complete the Making Every Contact Count (MECC) training and apply it to the assessment process with patient consent in the areas of physical activity, smoking cessation and alcohol use. Refer onto specialist services when appropriate			
	Have knowledge and an understanding of referral criteria and referral processes to other health professionals for input following outcomes of the screening.			
	Have the necessary skills to quantify patient outcomes through pre and post assessment.			
	Have the necessary skills to communicate with referring physician.			

Competency 3: Dyspnoea assessment and management

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to dyspnoea assessment and management the CNS/cCNS will:				
	<p>Have knowledge and an understanding of the causes & physiology of dyspnoea in patients with CLD.</p> <p>Mandatory Learning Task :</p> <ul style="list-style-type: none"> Read American Thoracic Society (1999) 'Dyspnea: mechanisms, assessment, and management: a consensus statement', American Journal in Respiratory Critical Care Medicine, 159, pp.321-340. 			
	<p>Have knowledge and an understanding of appropriate tools to measure dyspnoea – mMRC, modified BORG, CRDQ (dyspnoea domain), Dyspnoea 12 and multidimensional dyspnea profile covering functioning, breathing and psychological. This list is not exhaustive, please consult with the consultant providing clinical governance for the service to discuss the most appropriate test.</p>			
	<p>Have knowledge and an understanding of and be able to provide patient and carer education on:</p> <ul style="list-style-type: none"> ➤ Breathing strategies/ dysfunctional breathing. ➤ Pharmacological /psychological treatment of dyspnea. ➤ Pharmacological therapy-e.g. bronchodilators. ➤ Cognitive Behavioural Therapy (CBT). ➤ Non- pharmacological approaches- breathing retraining, Non Invasive Ventilation (NIV), Purse Lip Breathing (PLB). ➤ Positions of Ease of Breathlessness (PoE). 			
	<p>Have knowledge and understanding of the Breathing, Thinking Functioning Model.</p> <p>Mandatory Learning Task:</p> <ul style="list-style-type: none"> Read Spathis A, Booth S, Moffat C, Hurst R, Ryan R, Chin C, et al. The Breathing, Thinking, Functioning clinical model: a proposal to facilitate 			

	evidence-based breathlessness management in chronic respiratory disease. Primary Care Respiratory Medicine. 2017; 27 (1):27.			
	Have the necessary skills to identify the need for alternate testing e.g. Arterial Blood Gas (ABG) and referral for long term oxygen assessment and collaborate with respiratory Consultant and other HCP for optimal prescription for Long Term Oxygen Therapy (LTOT) if indicated.			
	Have the necessary skills to titrate oxygen or modifying devices 'as per patient prescription with consultation with the prescriber if a change is necessary. Nurses who have completed their prescribing course may use this for oxygen therapy within their scope of practice.			
	Have the necessary skills to promote patient understanding of the uses, benefits and risk of oxygen therapy.			

Competency 4: Exercise training & prescription

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to exercise training and prescription the CNS/cNS through support and guidance from other members of the MDT will:				
	Have knowledge and an understanding of specific pathophysiologic factors limiting exercise tolerance in CLD.			
	Have knowledge and an understanding of the basis of exercise training in CLD including reduction in peripheral muscle mass predominantly in the quadriceps and distal lower limbs, presence of sarcopenia and cachexia.			
	Have knowledge and an understanding of the safety precautions for exercise training.			
	Have knowledge and an understanding of an individual exercise plan with Specific Measureable Achievable Relevant Timed (SMART) goals including Activities of Daily Living (ADL) and a home exercise programme.			

	Have knowledge and an understanding of the prescription and adaptation of safe and effective exercise to the individuals needs in line with guidelines and exercise principles and using monitoring tools.			
	Have knowledge and an understanding of exercise principles including overload principle & the Frequency Intensity Time Type (FITT) principle, adaptation, specificity, reversibility variation and recovery and individual response.			
	Have the necessary skills to develop an individualised and effective exercise prescription including endurance, strengthening and flexibility components.			
	Have the necessary skills to use shared decision making with the patient to provide a treatment plan and achievable goals.			
	Have the necessary skills to modify an exercise plan due to pain, breathlessness or drop in oxygen levels.			
	Have the necessary skills to use objective physiological measures to inform individualised exercise prescription e.g. Rate Perceived Exertion.			
	Have the necessary skills to encourage effective use of resources to help individual meet goals and objectives-e.g. activity diary.			
	Have the necessary skills to recognise signs and symptoms of exercise intolerance.			
	Have the necessary skills to educate and support safe exercise signs and symptoms of overexertion or under achievement and activities to avoid.			
	Have the necessary skills to review and adapt the exercise plan and prescription in response to the individuals' motivation, needs and abilities and progress or regress.			
	Have the necessary skills to ensure familiarity with the participant's medical history and risk assessment.			

Competency 5: Prepare the individual for supervised exercise

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to preparing the individual for supervised exercise the CNS/cNS with support and guidance from other members of the MDT will :				
	Have the necessary skills to ensure the individual understands the purpose, structure, procedures and objectives of their session and how they link to their goals.			
	Have the necessary skills to identify and respond to any information the individual provides in response to their previous sessions or any change in their condition through pre- class screening and clinical measures.			
	Have the necessary skills to agree and record with the individual any changes to their planned session's activities.			
	Have the necessary skills to ensure individuals have any necessary medications prior to class.			
	Have the necessary skills to reinforce safety measures at all times.			
	Have the necessary skills to ensure individuals are appropriately dressed and equipped for exercise e.g. footwear.			

Competency 6: Supervision of Pulmonary Rehabilitation

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to leading and delivering the supervised exercise session the CNS/cNS will:				
	Have the necessary skills to tailor exercise programs to individual patient needs, ensuring safety and efficacy			
	Have the necessary skills to teach review and adapt individual and group exercise in response to changing circumstances and individual's response to exercise.			

	Have the necessary skills to utilise other members of the team appropriately during exercise to ensure safe and effective class management.			
	Have the necessary skills to lead exercise sessions in line with the exercise principles appropriate to individual needs and functional abilities.			
	Have the necessary skills to provide individuals with warm up and cool down exercises that are appropriate to their clinical status and ability. Mandatory Learning Task with peer support: <ul style="list-style-type: none"> Observe warm up and cool down and complete 1 session with a member of the PR MDT. 			
	Have the necessary skills to provide instruction, explanation and exercise demonstration. Mandatory Learning Task with peer support : <ul style="list-style-type: none"> Observe a complete class and complete 2 sessions with a member of the PR MDT. 			
	Have the necessary skills to: <ul style="list-style-type: none"> Monitor patient responses during exercise, including heart rate, oxygen saturation, and perceived exertion. Be aware of the individuals' responses to exercise and taking appropriate action as required. Modify exercise intensity and type based on patient progress and tolerance. Observe individuals throughout the exercise session and take appropriate action as required including correcting technique and positive reinforcement. Mandatory Learning Task with peer support: <ul style="list-style-type: none"> Observe class and complete 2 classes with a member of the PR MDT. 			
	Have the necessary skills to perform: <ul style="list-style-type: none"> ➤ Endurance exercise. ➤ Resistance exercise. ➤ Flexibility. ➤ Balance and coordination etc. 			

	<p>Mandatory Learning Task with peer support:</p> <ul style="list-style-type: none"> Observe and perform relevant exercises over the course of the pulmonary rehabilitation programme (PRP). 			
	Have the necessary skills to effectively use verbal instruction, demonstration and audio and visual cues and motivational techniques when delivering group exercise.			
	Have the necessary skills to provide individuals with an appropriate period of post exercise supervision.			
	<p>Have the necessary skills to deliver educational sessions on topics such as lung anatomy, disease progression, medication use, and the benefits of physical activity.</p> <p>Use evidence-based resources and guidelines to inform education content.</p> <p>Mandatory Learning Task with peer support :</p> <ul style="list-style-type: none"> Observe education session and perform 2 educations sessions over the course of the PRP. 			

Competency 7: Managing the unwell patient

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to managing the unwell patient the CNS/cNS will:				
	Have evidence of BLS certification in line with job description/professional registration requirements.			
	Have the necessary skills to identify and treat life-threatening situations or adverse events.			
	Have knowledge and an understanding of the appropriate emergency response to changing signs and symptoms.			
	Learn to recognise and manage adverse events such as falls, sprains and fractures, muscle weakness, poor balance.			

	Have the necessary skills to act in a calm, sensitive efficient manner when dealing with an unwell individual and know when to escalate adverse events.			
	Have the necessary skills and use the support of colleagues when managing an unwell individual, be able to adapt your role within the team in response to the developing situation and ensure other group participants are managed appropriately.			
	Have the necessary skills to assess for signs and symptoms which may indicate a change in respiratory status and take appropriate action.			
	Have the necessary skills to recognise other signs and symptoms which may indicate a new condition or change in an underlying condition and take appropriate action.			
	Have the necessary skills to deal appropriately with individuals who present with medical complications that require intervention but do not necessarily require exclusion from exercise e.g. angina, poor diabetic control, hypotension, slow or fast heart rate.			
	Have the necessary skills to be familiar with and describe the local emergencies protocols for summing assistance when individual becomes unwell.			
	Have the necessary skills to give a concise and accurate handover to Health Care Professionals and complete appropriate documentation.			

Competency 8: Collaborative self – management & psychosocial management & MDT Education

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to collaborative self-management the CNS/cNS will:				
	Have the necessary skills to be aware of whole-system supports for self-management including maintenance exercise programmes, Peer Support Groups, the Living Well Programme, Social Prescribing.			

	Have the necessary skills to practise and reinforce techniques to promote self-management behaviour change, increase patient knowledge, goal setting, problem solving and shared decision making.			
	Have the necessary skills to understand the need to provide individuals with information necessary to enable them to make informed decisions about all aspects of PR.			
	Have the necessary skills to be able to identify impairments to learning and behaviour change and tailor class to meet patient need.			
	Have knowledge and understanding of behaviour change.			
	Have the necessary skills to teach strategies for prevention, early recognition and treatment of exacerbations including an action plan.			
	Have knowledge and an understanding of and be able to teach the effects of smoking or passive smoking on CLD. Have knowledge of local smoking cessation supports. Identify the need and facilitate onward referrals to other services where appropriate.			
	Have knowledge and an understanding of nutritional counselling. Identify the need and facilitate onward referrals to other services where appropriate.			
	Have knowledge and an understanding of effective behavioural change strategies. Identify the need and facilitate onward referrals to other services where appropriate.			
	Have the necessary skills to teach airway clearance techniques.			
	Have the necessary skills to explain and provide an approved self-management plan and alter as required.			
	Have the necessary skills to teach energy conservation. Identify the need and facilitate onward referrals to other services where appropriate.			
	Have knowledge and an understanding of CLD and emotional functioning especially anxiety and depression. Identify the need and facilitate onward referrals to other services where appropriate.			
	Have knowledge and an understanding of CLD and social relationships and quality of life.			

	Have knowledge and an understanding of CLD and cognitive function & socioeconomic factors.			
	Have knowledge and an understanding of pharmacological agents that can be used to treat psychological distress.			
	Have knowledge and an understanding of other services for onward referral to address psychosocial distress or cognitive concerns.			
	Have the necessary skills to perform individual or group education to address stress management and effective coping strategies.			

Competency 9: Post Assessments and Forward Planning

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to forward planning the CNS/cNS will:				
	Mandatory Learning Task with peer support: Observe 1 post-assessment, conduct 1 post-assessment with a member of the PR MDT Establish a discharge plan for the individual and ensure this is shared with the patients GP.			
	Have the necessary skills to provide information on future options for continued activity including home based exercise, support groups and maintenance classes if available. Reinforce ongoing Self-management and tools to support same.			
	Have the necessary skills to reinforce the benefits of long term exercise.			
	Have the necessary skills to enable the individual to carry out self-monitoring to continue to exercise, and to continue to live well with their condition.			
	Have the necessary skills to discuss onward referrals to other services where appropriate.			

Competency 10: Virtual Pulmonary Rehabilitation (VPR) If appropriate locally

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to virtual PR the CNS/cNS will:				
	<p>Have knowledge and an understanding of telerehabilitation, benefits, indications and criteria for use.</p> <p>Mandatory Learning Task :</p> <ul style="list-style-type: none"> Read NCP Respiratory Guidance on setting up Virtual Pulmonary Rehabilitation. 			
	<p>Have the necessary skills to evaluate relevant factors impacting the delivery of telerehabilitation, including patient digital literacy, reliable internet connection, and availability of suitable devices to support the video-conferencing platform.</p>			
	<p>Have knowledge and an understanding of telerehabilitation assessment of patient if unable to perform assessment face to face.</p> <p>Mandatory Learning Task with peer support :</p> <ul style="list-style-type: none"> Observe 1 assessment if different to previous learnings. 			
	<p>Have knowledge and an understanding of impact of telerehabilitation ability to monitor exercise safety.</p>			
	<p>Have knowledge and an understanding to identify assessment and monitoring tools appropriate for use with telerehabilitation.</p>			
	<p>Have the necessary skills to communicate effectively via telerehabilitation.</p>			
	<p>Have the necessary skills to adhere to local policies on GDPR and consent and security.</p>			
	<p>Have the necessary skills to put systems in place that will ensure the safe and effective delivery of a service.</p>			
	<p>Have the necessary skills to identify outcome measures which are safe and easy to collect via virtual technology.</p>			

	Have the necessary skills to identify outcome measures which should ideally be carried out in-person (e.g. exercise testing for the purpose of assessing desaturation).			
	Have knowledge and an understanding of the pathways/measures in place in the event of adverse reactions to exercise during VPR.			

Competency 11: Prepare, adapt environment and equipment

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to preparing and adapting the environment and equipment the CNS /cCNS will :				
	Have evidence of up to date mandatory training in infection control, health and safety.			
	Have the necessary skills to perform a full risk assessment of venue (to include medical gases i.e. oxygen) using the HSE Risk Assessment Matrix (please see HSE Document 'Risk Assessment Tool and Guidance including guidance on application). (Document Reference number OQR012).			
	Have the necessary skills to identify, organise and provide suitable location for the service with senior management.			
	Have the necessary skills to apply national health and safety guidelines and local operational policies when conducting environmental health and safety assessments.			
	Have the necessary skills to identify potential risks and minimise resulting hazards in the environment in which the session will take place- adequate heat, light, ventilation.			
	Have the necessary skills to ensure that any necessary equipment, furniture or resources are prepared, available and in a fit state and ready for use.			
	Have knowledge and understanding to follow local policies and procedures to report and record problems with the environment or equipment.			
	Have knowledge and understanding to ensure that when resuscitation equipment in place it is checked and ready to use.			

	Have knowledge and understanding to ensure that when oxygen equipment is in place it is checked and ready to use and stored appropriately.			
	Have the necessary skills to advise patients to bring their own rescue inhaler, angina medication, and portable oxygen to each class.			
	Have the necessary skills to adapt the exercise environment during exercise session as appropriate.			
	Have the necessary skills to ensure all equipment is cleansed as per local infection control guidelines. Local guidelines with regards to the disinfectant/sterilising agent to be used, the strength of the solution, safety wear when mixing solutions, storage and mixing area for chemicals, and individual equipment requirements.			
	Have the necessary skills to ensure all staff and patients are aware of HSE cough etiquette and hand washing instructions. Clinical staff should have completed mandatory HSE Land online training in this area.			
	Have the necessary skill to ensure all staff is aware of and compliant with applicable health and safety legislation, including incident reporting and be able to act accordingly.			

Competency 12: Service evaluation

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to service evaluation the CNS/cNS will :				
	Have the necessary skills to identify, develop and implement appropriate monitoring systems to enable a comprehensive service evaluation.			
	Have the necessary skills to identify and use appropriately valid and reliable quantitative and qualitative assessment tools to measure the value of the programme.			
	Have the necessary skills to collect and record individual patient outcome measures on a database.			

	Have the necessary skills to accurately collect and record key service data including referral information, attendance, and uptake records.			
	Have the necessary skills to ensure that service users have contributed to the evaluation process.			
	Have the necessary skills to analyse local service data using reliable methods and draw valid conclusions and make recommendations for the service.			

Competency 13: Continued Professional Development (CPD) and Quality Improvement

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to CPD the CNS/cNS will :				
	Engage in continuous professional development to stay updated on best practices in pulmonary rehabilitation.			
	Attend workshops, conferences, and training sessions relevant to respiratory care.			
	Participate in quality improvement projects aimed at enhancing the delivery and outcomes of pulmonary rehabilitation services.			
	Utilise audit data and patient feedback to refine and improve care pathways.			
	Analyse local service data using reliable methods and draw valid conclusions and make recommendations for the service.			

I have the required competence to undertake Pulmonary Rehabilitation, and I acknowledge my responsibility to maintain my own competence in line with the Scope of Nursing and Midwifery Practice and current best evidence.

Registered Nurse Signature: _____ NMBI PIN Number _____ Date: _____

OR

I require further support. I will complete the Prerequisite to Pulmonary Rehabilitation.

Registered Nurse Signature: _____ Date: _____

A copy of this completed self-assessment must be discussed with your professional line manager and a copy logged in your HR file. It is imperative that there is a local communication policy in place to support the 'Pulmonary rehabilitation service' before you take on the role.

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Section 14.

Prerequisite to Pulmonary Rehabilitation by a Registered Nurse		
Record of Supervised Practice		
1. Name and Initials	Job Title	Workplace
2. ADPHN/Name (& initials)		
1.	2.	
The registered nurse must be able to discuss the rationale for each of the actions and demonstrate Competence in the practical application of the skills below.		

For CNS or cCNS with no previous experience in Pulmonary rehabilitation		Skill Demonstrated	
		Date	Date
1.	Supervised course of PR and pre and post assessments completed Names of other members of MDT/Peer support:		
2	HSELand module on pulmonary Rehabilitation completed and cert available		
3.	HSELand module on COPD and Asthma completed and cert available		
4	Read NCP Respiratory Guidance on setting up Pulmonary Rehabilitation 2024		
5	Read relevant guidelines for 6MWT/ISWT		
6	Read Irish Thoracic Society Irish Oxygen guideline		
	Identify any outstanding support required and plan to address this below with a plan.		
7			
8			
9			
10			
I have read the "Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives" (NMBI 2021) <input type="checkbox"/>			
I have read the "Scope of Nursing and Midwifery Practice Framework" (NMBI 2015) <input type="checkbox"/>			
Registered Nurses Signature:		Date:	NMBI Pin No.:
I am satisfied that the above named person has completed the following: <ul style="list-style-type: none"> e-Learning programme 'Pulmonary rehabilitation On the job training for Pulmonary Rehabilitation including pre and post assessments Self-Assessment of Competency for Pulmonary rehabilitation and 		_____ Signature of ADPHN NMBI Pin No: Date:	

<ul style="list-style-type: none">• the prerequisite as outlined above	
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NATIONAL CLINICAL
PROGRAMME RESPIRATORY

National Clinical Programme Respiratory

A Self- Assessment Competency Framework for Pulmonary
Rehabilitation Services.

Part 2 Competency Framework for the experienced CNS working
in Pulmonary Rehabilitation Services.



Part 2 of this document is aimed at Clinical Nurse Specialists (CNS) who work regularly or full-time in Pulmonary Rehabilitation (PR).

For CNSs who are new to Pulmonary Rehabilitation, it is expected that they deem themselves competent in all areas of Part 1 of this document prior to commencing Part 2. One exception to this is the “Service Planning” Competency which is listed on the next page.

Of note, regardless of whether the CNS in PR is new to the role or experienced in PR, exercise testing can be done in conjunction with the Physiotherapist(s) and guidance relating to exercise can be sought whenever necessary.

For CNSs who work full-time in Pulmonary Rehabilitation (PR) it is expected that they will have completed the competencies in Part 1 over their time spent in PR. For those full-time CNSs in PR the main additional area for development is Service Planning. This competency is listed below.

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**Competence is understood as the attainment of knowledge, intellectual capacities, practice skills, integrity and professional and ethical values required for safe, accountable and effective practice as a registered nurse.
(NMBI 2015)**

No.	Competency	Completed Date & initials	Additional Practice Date & initials	Additional Theory Date & initials
In relation to service planning and management the CNS will :				
	Have the necessary skills to agree and establish clear service aims and objectives with measurable outcomes for exercise and quality of life.			
	Have the necessary skills to plan, develop and implement operational procedures and protocols for service delivery including inclusion criteria, exclusion criteria in line with evidence based practice.			
	Have the knowledge and understanding to review all protocols on regular basis.			
	Have the necessary skills to develop and implement system's to ensure service evaluation and development.			
	Have the necessary skills to record and submit national KPIs.			
	Have the necessary skills to provide effective operational management of the team prioritising workload, ensuring adequate staffing levels and skill mix to cover service provision.			
	Have the necessary skills to engage in effective teamwork to promote quality, continuity of care and a cost effective service.			
	Be accountable for implementation of health and safety legislation and policies and procedures.			
	Provide evidence of effective consultation with service users when planning and developing the service.			
	Have the necessary skills to provide timely and accurate reports and handovers to ensure seamless transition between service providers.			

	Have the necessary skills to contribute to the development of others by providing a wide range of CPD opportunities.			
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I have the required competence to undertake Pulmonary Rehabilitation, and I acknowledge my responsibility to maintain my own competence in line with the Scope of Nursing and Midwifery Practice and current best evidence.

Registered Nurse Signature: _____ NMBI PIN Number
 _____ Date: _____

OR

I require further support. I will complete the Prerequisite to Pulmonary Rehabilitation.

Registered Nurse Signature: _____ Date: _____

A copy of this completed self-assessment must be discussed with your professional line manager and a copy logged in your HR file. It is imperative that there is a local communication policy in place to support the 'Pulmonary rehabilitation service' before you take on the role.

Prerequisite to Pulmonary Rehabilitation by a Registered Nurse		
Record of Supervised Practice		
3. Name and Initials	Job Title	Workplace
4. ADPHN/Name (& initials)		
1.	2.	
The registered nurse must be able to discuss the rationale for each of the actions and demonstrate Competence in the practical application of the skills below.		

For CNS with experience in Pulmonary rehabilitation		Skill Demonstrated	
		Date	Date
1.	Service planning and management		
2.			
3.			
4.			
I have read the "Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives" (NMBI 2021) <input type="checkbox"/>			
I have read the "Scope of Nursing and Midwifery Practice Framework" (NMBI 2015) <input type="checkbox"/>			
Registered Nurses Signature:		Date:	NMBI Pin No.:

I am satisfied that the above named person has completed the following:

- Self-Assessment of Competency for Pulmonary rehabilitation and
- the prerequisite as outlined above

Signature of ADPHN
NMBI Pin No:

Date:

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References for evidence based practice

1. AACVPR Guidelines for Pulmonary Rehabilitation - Provides standards for the safe and effective delivery of pulmonary rehabilitation.
2. BACPR Standards and Core Components - Offers guidance on the delivery of comprehensive cardiovascular prevention and rehabilitation.
3. BTS Guidelines on Pulmonary Rehabilitation - Details best practices for the assessment, referral, and management of patients in pulmonary rehab.
4. NICE Guidelines on Chronic Obstructive Pulmonary Disease (COPD) - Offers evidence-based recommendations for the management of COPD, including pulmonary rehabilitation.
5. ATS/ERS Statement on Pulmonary Rehabilitation - Discusses the principles and outcomes of pulmonary rehabilitation for patients with chronic respiratory diseases
6. ATS Statement Guidelines for the Six-Minute Walk Test
<https://www.atsjournals.org/doi/10.1164/ajrccm.166.1.at1102>

Appendix 1: Pulmonary Rehabilitation Courses

In England and Ireland, several educational programs and courses provide nurses with the skill sets required for working in pulmonary rehabilitation. These programs are typically offered by universities, professional bodies, and healthcare organizations.

Below are some notable options:

1. Postgraduate Certificate/Diploma in Pulmonary Rehabilitation Ireland:

🇮🇪 University College Dublin (UCD) - Graduate Diploma in Respiratory Care:

This program includes modules on chronic respiratory disease management and pulmonary rehabilitation. It prepares nurses to assess and manage patients with respiratory conditions in a variety of settings, including pulmonary rehab.

Website: UCD

🇮🇪 Royal College of Surgeons in Ireland (RCSI) - MSc in Nursing (Respiratory Care):

This program is designed to enhance the knowledge and skills of nurses in respiratory care, including pulmonary rehabilitation. It covers comprehensive patient assessment, the development of care pathways, and evidence-based practice.

Website: RCSI

🚩 Royal College of Surgeons in Ireland (RCSI) – Online Certificate in Clinical Exercise:

A Certificate in Clinical Exercise is to enable clinicians to prescribe exercise as a disease preventative and treatment modality in a safe, effective, and scientific manner

Website: <https://www.tcd.ie/medicine/physiotherapy/postgraduate/online-certificate-in-clinical-exercise/>

🚩 NUIG – Masters in Cardiovascular and Pulmonary Rehabilitation

Website: <https://www.universityofgalway.ie>

2. Specialist Courses and Workshops

🚩 Wrights Foundation: Pulmonary Rehabilitation Level 4

The course boasts the most comprehensive syllabus for those seeking to advance their knowledge of exercise and pulmonary rehabilitation.

Exercise and health professionals wishing to undertake the qualification must hold the relevant gym-based pre-requisites:

E.g. Level 2 Fitness Instructor OR Level 3 Personal Trainer AND Level 3 Diploma in Exercise Referral

Website: <https://www.wrightfoundation.com/course/level-4-pulmonary-rehabilitation/>

🚩 Loughborough College: Exercise Training for Chronic Respiratory Disease Level 4

This course is for exercise professionals who are looking to develop their knowledge of safe and effective exercise programming for clients with respiratory disease.


Website: <https://www.loucoll.ac.uk/courses/level-4-certificate-in-exercise-training-for-chronic-respiratory-disease>

🚩 British Thoracic Society (BTS) Pulmonary Rehabilitation Course

Location: Offered periodically in various locations across the UK.

Description: This short course is designed for healthcare professionals involved in pulmonary rehabilitation. It covers the principles of exercise testing, program design, and patient education. The course is highly practical and focuses on current best practices.


Website: BTS

 Royal College of Nursing (RCN) Respiratory Nursing Workshops

Location: Various locations across the UK.

Description: The RCN offers workshops and short courses focused on respiratory care, including pulmonary rehabilitation. These are suitable for nurses looking to gain specific skills in this area.

Website: RCN


 American Association of Respiratory Care (AARC): Pulmonary Rehabilitation Certificate Course

Location: online

Description: This program, developed jointly by the AARC and AACVPR, provides pulmonary rehabilitation specialists the knowledge necessary to be an effective member of the pulmonary rehabilitation team.

Website: <https://www.aarc.org/education/pulmonary-rehabilitation-certificate-course/>

3. Professional Certifications

 American Association of Respiratory Care (AARC): Pulmonary Rehabilitation Certificate Course

Location: online

Description: This program, developed jointly by the AARC and AACVPR, provides pulmonary rehabilitation specialists the knowledge necessary to be an effective member of the pulmonary rehabilitation team.

Website: <https://www.aarc.org/education/pulmonary-rehabilitation-certificate-course/>

 National Institute for Health and Care Excellence (NICE) and BTS Online Resources

Location: Online.

Description: NICE and BTS offer online learning modules and resources that cover guidelines and best practices in pulmonary rehabilitation. These are useful for ongoing professional development.

Website: NICE | BTS

4. Clinical Placements and Practical Experience

- NHS Trusts and HSE (Health Service Executive) in Ireland:
- Many NHS Trusts and HSE sites offer clinical placements or on-the-job training in pulmonary rehabilitation. Nurses can gain practical experience under the supervision of experienced practitioners, which is essential for skill development in this area.

Summary

Nurses interested in specialising in pulmonary rehabilitation can pursue formal education through postgraduate certificates or diplomas in respiratory care offered by universities in England and Ireland. Additionally, short courses and workshops provided by professional bodies like the British Thoracic Society (BTS) and the Royal College of Nursing (RCN) offer focused training on specific competencies required for pulmonary rehab.

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NCP Working Group on this document

Susan Curtis, Programme Manager

Signed off by NCAGL Dr Sarah O' Brien 13/11/24