

(This checklist has been adapted from the <u>PCRS-UK Respiratory Care Self Rating Scale for GPs</u>). It is designed as a self-rating scale to help to inform areas that community respiratory physiotherapists may wish to learn more about or study in more detail as part of their PDP and CPD programme).

| Name | |
|--------------------------|--|
| Date of this assessment | |
| Next planned review date | |

When you review this document it can be used to:

- a. discuss with a colleague / mentor / appraiser to clarify areas
- b. identify areas that are quick and easy to learn about now or in very near future
- c. identify areas that are "sticky" or need more work which would be suitable for one of the areas in your professional development plan (PDP)
- d. help to inform you producing a short reflection on your clinical practice in respiratory care for your portfolio

| | | ī | T | T | T |
|--|-----------|-----------|-----------|-----------|----------|
| Disease Areas | I feel | I feel | I need to | I need to | This is |
| | very | quite | learn a | learn a | not |
| | confident | confident | bit more | lot more | relevant |
| | about | about | about | about | to my |
| | this | this | this | this | practice |
| Asthma | | | | | |
| Prevalence, aetiology, pathophysiology | 0 | 0 | 0 | 0 | 0 |
| Diagnosis | 0 | 0 | 0 | 0 | 0 |
| Management | 0 | 0 | 0 | 0 | 0 |
| Differential diagnosis of asthma, | | | | | |
| including from other causes of wheeze | | | | | |
| such as vocal cord dysfunction, | | | | | |
| hyperventilation, laryngeal disease, | | | | | |
| foreign body, tumour, COPD and | | | 0 | 0 | 0 |
| obliterative bronchiolitis | | | | | |
| Use of investigations | 0 | 0 | 0 | 0 | 0 |
| Asthma self-management plans | 0 | 0 | 0 | 0 | 0 |
| Factors which may be associated with | | | | | |
| poor asthma control, including smoking, | | | | | |
| environmental factors, psychosocial | | | | | |
| factors, drugs, poor inhaler technique, | | | | | |
| poor compliance, chronic rhinosinusitis, | 0 | 0 | 0 | \circ | 0 |
| ABPA, bronchiectasis and gastro- | | | | | |
| oesophageal reflux | | | | | |
| | | | | | |
| Acthma and avaraisa / acthma and | | | | | |
| Asthma and exercise / asthma and | 0 | 0 | 0 | 0 | 0 |
| aspiring "elite" athletes | | | | | |
| | | | | | |



| | I feel | I feel | I need to | I need to | This is |
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| | about | about | about | about | to my |
| | this | this | this | this | practice |
| Factors impacting management at the | | | | | |
| transition between childhood/teenage | | \cap | \circ | | 0 |
| and adult care | O | 0 | | 0 | O |
| Acute asthma diagnosis | 0 | 0 | O | Q | 0 |
| Acute asthma management | 0 | 0 | 0 | 0 | 0 |
| Indications for admission in acute | | | | | |
| asthma | O | 0 | 0 | 0 | O |
| | | | | | |
| COPD | _ | | | | |
| Prevalence, aetiology, pathophysiology | Q | 0 | O | 0 | O |
| Diagnosis | Q | 0 | O | O | 0 |
| Management | Q | O | O | Q | 0 |
| Differential diagnosis | 0 | 0 | 0 | 0 | 0 |
| Management of acute exacerbation | | | | | |
| (including indications for admission) | O | 0 | 0 | O | 0 |
| Discussion and management of end of | | | | | |
| life care | 0 | 0 | 0 | 0 | 0 |
| When to use self-management plans | | | | | |
| and "Just in Case" medications | 0 | 0 | 0 | 0 | 0 |
| Principles of oxygen therapy | O | 0 | 0 | O | O |
| Inhaler devices | | | | | |
| Patient choice and use of inhaler | | | | | |
| devices | O | 0 | 0 | O | O |
| Teaching inhaler devices | 0 | 0 | 0 | 0 | 0 |
| Indications for differing devices | 0 | 0 | 0 | 0 | 0 |
| | | | | | |
| Smoking and smoking cessation | | | | | |
| Prevalence, aetiology, pathophysiology | 0 | \circ | \circ | | 0 |
| and demographics | | 0 | 0 | 0 | |
| Assessment and brief interventions | 0 | 0 | 0 | U | 0 |
| Smoking cessation pharmacology and | 0 | \cap | \circ | \cap | \circ |
| counselling | | | | | |
| Use (and abuse) of investigations | | | | | |
| Use of micro-spirometry and | _ | _ | _ | _ | _ |
| interpretation | 0 | 0 | 0 | 0 | O |
| Indications and contraindications for | | | | | |
| spirometry | O |) | 0 | O | |



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| | about | about | about | about | to my |
| | this | this | this | this | practice |
| Performing spirometry | O | 0 | 0 | 0 | O |
| Interpreting quality and results of | | | 0 | \circ | |
| spirometry | 0 | | | 0 | |
| Use of pulse oximetry | O | 0 | O | O | 0 |
| Use of peak flow meters in the | 0 | 0 | 0 | 0 | 0 |
| management of asthma | | | | | |
| Use and abuse of chest xray investigations | 0 | 0 | 0 | 0 | 0 |
| When to refer to GP for possible | | | | | |
| more complex imaging (HRCT) | 0 | 0 | 0 | 0 | 0 |
| more complex imaging (inter) | | | | | |
| Allergic Problems | | | | | |
| Allergic rhinitis | 0 | 0 | 0 | 0 | 0 |
| Food allergy and asthma | Ŏ | Ô | Ŏ | Ŏ | Ô |
| Anaphylaxis | Ŏ | Ô | Ŏ | Ŏ | Ŏ |
| RAST, IgE blood tests and skin prick tests | Ö | Ŏ | Ó | 0 | 0 |
| | | | | | |
| Symptoms in respiratory disease | | | | | |
| assessment, diagnosis to management | | | _ | | |
| Cough | O | 0 | 0 | 0 | 0 |
| Breathlessness | 0 | O | O | 0 | O |
| Chest pain (including pleuritic chest pain) | 0 | 0 | 0 | 0 | 0 |
| Fatigue | | \sim | 0 | 0 | |
| Prevalence, aetiology, pathophysiology | \sim | \sim | \sim | \sim | 0 |
| Early diagnosis | \sim | \sim | \sim | 0 | \sim |
| Management during treatment | \sim | ŏ | \sim | $\tilde{}$ | $\tilde{}$ |
| End of life care issues (inc SVCO etc) | Ŏ | Ŏ | \sim | \sim | ŏ |
| Zira or me dare issues (me or de ette) | | | | | |
| Dysfunctional Breathing and | | | | | |
| Psychological Aspects of Respiratory | | | | | |
| Symptoms | | | | | |
| Prevalence, aetiology, pathophysiology | 0 | 0 | 0 | 0 | 0 |
| Diagnosis | 0 | 0 | 0 | 0 | 0 |
| Management | 0 | 0 | 0 | 0 | 0 |
| Chest clearance techniques | 0 | 0 | 0 | 0 | 0 |
| | | | | | |
| Interstitial Lung Disease and other rare | | | | | |
| Providings actiology nathophysiology | | | | | |
| Prevalence, aetiology, pathophysiology Early symptoms and diagnosis | \sim | \vdash | 0 | 0 | |
| Management in primary care | \sim | $\stackrel{\smile}{\sim}$ | $\stackrel{\smile}{\sim}$ | \sim | \sim |
| ivianagement in primary care | | | | | \cup |



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| | very | quite | learn a | learn a | not |
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| | about | about | about | about | to my |
| | this | this | this | this | practice |
| Bronchiectasis | | | | | |
| Prevalence, aetiology, pathophysiology | 0 | Ö | 0 | 0 | 0 |
| Early diagnosis | Ö | Ö | 0 | O | 0 |
| Management | 0 | 0 | 0 | 0 | 0 |
| Chest clearance techniques | 0 | 0 | 0 | 0 | 0 |
| Respiratory failure | | | | | |
| Prevalence, aetiology, pathophysiology | 0 | | | 0 | 0 |
| Early diagnosis | Õ | \sim | Õ | 0 | 0 |
| Management including end of life care | | | | | |
| and involving specialist support | 0 | 0 | 0 | 0 | 0 |
| | | | | | |
| Sleep breathing disorders | | | | | |
| Prevalence, aetiology, pathophysiology | 0 | 0 | 0 | 0 | 0 |
| Early diagnosis / referral pathways | 0 | 0 | 0 | 0 | 0 |
| Long term management and co- | 0 | | | 0 | |
| morbidities | U | 0 | 0 | O | U |
| Distriction of the last of the | | | | | |
| Physiotherapy techniques Breathing control | | | | | |
| Understanding and knowledge | | | | | |
| | 0 | 0 | 0 | 0 | 0 |
| Able to teach and demonstrate | | | \circ | 0 | |
| technique(s) Contraindications | | | | | |
| | 0 | 0 | 0 | 0 | 0 |
| Pacing | | | | | |
| Understanding and knowledge | 0 | 0 | 0 | 0 | 0 |
| Able to teach and demonstrate | | | | | |
| technique(s) | O | O | 0 | O | O |
| Contraindications | 0 | 0 | 0 | 0 | 0 |
| Exercise | | | | | |
| Understanding of how to prescribe | | | | | |
| exercise | 0 | U | U | O | 0 |
| Understanding of contraindications of | 0 | \circ | \circ | 0 | 0 |
| using exercise as a treatment Pulmonary rehabilitation | | | | | |
| Understanding and knowledge of PR – | | | | | |
| what it is, what needs to be included | 0 | 0 | 0 | 0 | 0 |
| Inclusion and exclusion criteria for PR | 0 | | | | |
| How to prescribe exercise in PR | | | | | |
| Thow to presente exercise in Fix | 0 | 0 | 0 | 0 | 0 |
| | | | | | |



| | I feel very confident about this | I feel quite confident about this | I need to learn a bit more about this | I need to learn a lot more about this | This is not relevant to my practice |
|--|--|---|---|---|-------------------------------------|
| Understanding and knowledge of BORG | 0 | | 0 | 0 | |
| and breathlessness scores Able to lead PR sessions | 0 | | | U | 0 |
| Able to lead PR sessions | 0 | 0 | 0 | 0 | 0 |
| Infectious disease | | | | | |
| Childhood infections (measles, | | | | | |
| whooping cough, bronchiolitis) | 0 | 0 | 0 | 0 | 0 |
| Upper Respiratory Tract Infections | 0 | 0 | 0 | 0 | 0 |
| Tuberculosis | Ŏ | Ŏ | Ŏ | Ŏ | Ŏ |
| Influenza | Ŏ | Ŏ | 0 | Ŏ | Ö |
| Influenza and pneumococcal | | | | | |
| immunisation | 0 | 0 | 0 | 0 | 0 |
| Evidence based use of antibiotics | 0 | 0 | 0 | 0 | 0 |
| Bronchitis diagnosis and management | 0 | 0 | 0 | 0 | 0 |
| Pneumonia – diagnosis and management (including when to admit to hospital) | 0 | 0 | 0 | 0 | 0 |
| Co-morbidities | | | | | |
| Heart failure | 0 | 0 | 0 | 0 | 0 |
| Prevention of CHD | 0 | 0 | 0 | 0 | 0 |
| Detection of CHD (risk factors, early diagnosis, management) | 0 | 0 | 0 | 0 | 0 |
| Osteoporosis (risk factors, early diagnosis, management) | 0 | 0 | 0 | 0 | 0 |
| Anxiety (risk factors, early diagnosis, management) | 0 | 0 | 0 | 0 | 0 |
| Depression (risk factors, early diagnosis, management) | 0 | 0 | 0 | 0 | 0 |
| Ear, nose and throat problems | | | | | |
| The catarrhal child | | | | | |
| Tonsillitis / sore throat |) (| |) (| | |
| Sinusitis | 0 | 0 | 0 | | |
| Hoarseness | 0 | 0 | 0 | 0 | 0 |
| Hay fever / allergic rhinitis | 0 | 0 | 0 | 0 | 0 |



| | I feel | I feel | I need to | I need to | This is |
|--|--------------------|--------------------|-------------------|-------------------|-------------------|
| | very | quite | learn a | learn a | not |
| | confident about | confident about | bit more about | lot more about | relevant to my |
| | this | this | this | this | practice |
| Carcinoma of the lung | | | | | 1 1 1 1 1 1 1 |
| Prevalence, aetiology, pathophysiology | 0 | 0 | 0 | 0 | 0 |
| Early diagnosis | 0 | 0 | 0 | 0 | 0 |
| Management during treatment | 0 | 0 | 0 | 0 | 0 |
| End-of-life issues (inc. SVCO etc.) | 0 | 0 | 0 | 0 | 0 |
| Occupational Lung Disease | | | | | |
| Early diagnosis | | | | | |
| Long term management | 0 | 0 | 0 | 0 | 0 |
| zong term management | 0 | 0 | 0 | 0 | 0 |
| Pleural effusion | | | | | |
| Prevalence, aetiology, pathophysiology | 0 | 0 | 0 | 0 | 0 |
| Early diagnosis | 0 | 0 | 0 | 0 | 0 |
| Pulmonary Embolus | | | | | |
| Prevalence, aetiology, pathophysiology | 0 | 0 | 0 | 0 | 0 |
| Early diagnosis / referral pathways | 0 | 0 | 0 | 0 | 0 |
| Wider aspects of care | | | | | |
| Outlines health needs of particular populations e.g. ethnic minorities, and recognises the impact of health beliefs, culture and ethnicity in presentations of physical and psychological conditions | 0 | 0 | 0 | 0 | 0 |
| Respects the rights of children, elderly, people with physical, mental, learning or communication difficulties | 0 | 0 | 0 | 0 | 0 |
| Recognises personal beliefs and biases and understands their impact on the delivery of health services | 0 | 0 | 0 | 0 | 0 |
| Local formulary and its use | 0 | 0 | 0 | 0 | 0 |
| Repeat prescribing and monitoring | 0 | 0 | 0 | 0 | 0 |
| Invalidity / disability benefits | 0 | 0 | 0 | 0 | 0 |
| Attendance allowance | 0 | 0 | 0 | 0 | 0 |
| Mobility allowance / motobility | 0 | 0 | 0 | 0 | 0 |



| | I feel very | I feel quite | I need to learn a | I need to learn a | This is not |
|--|----------------------------|----------------------------|---------------------------|---------------------------|-------------------------------|
| | confident about this | confident about this | bit more about this | lot more about this | relevant to my practice |
| Self Help Groups (BLF, Breathe Easy, Asthma UK) – local and national | 0 | 0 | 0 | 0 | 0 |
| Confidentiality of information | 0 | 0 | 0 | 0 | 0 |
| Rationing care | 0 | 0 | 0 | 0 | 0 |
| Role of others in care of respiratory patients | 0 | 0 | 0 | 0 | 0 |
| Travel | | | | | |
| Flying with lung disease | 0 | 0 | 0 | 0 | 0 |
| Diving with lung disease | 0 | 0 | 0 | 0 | 0 |
| Commissioning in Primary Care | | | | | |
| Current changes to commissioning and service delivery | 0 | 0 | 0 | 0 | 0 |
| Key stakeholders in respiratory medicine | 0 | 0 | 0 | 0 | 0 |
| Health inequality, variation and data to inform care in respiratory | 0 | 0 | 0 | 0 | 0 |
| Understand improvement methodology and analysis | 0 | 0 | 0 | 0 | 0 |
| Understand and be able to project manage | 0 | 0 | 0 | 0 | 0 |
| Understand and be able to manage change in organisations | 0 | 0 | 0 | 0 | 0 |
| Understand key drivers in system that influence commissioning in respiratory (guidelines, standards, frameworks) | 0 | 0 | 0 | 0 | 0 |

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