

Document Title: MDT7 Competency Assessment Training for the (please insert):



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Department: Nursing and Quality

Competency Assessment Number: MECP543

Procedure: Staff Training and Competency in the use of Medical Devices CORP/PROC 133.

Issue Date: (office use only)

Submitted to: Medical Devices Nurse Specialist.

Issued to: Trust Competency Assessment Database

How to write a competency assessment.

The pre-set sections provided are intended as a guide to ensure a standard of competency.

Please insert relevant questions about the device into the key sections provided throughout this document. Once these are inserted, enter the answers to each question in the adjacent box.

Please remember that your Competency Assessment should be peer reviewed and signed off for clinical content prior to submission to the Medical Devices Nurse Specialist (MDNS). Please provide the name of the author and professional colleague.

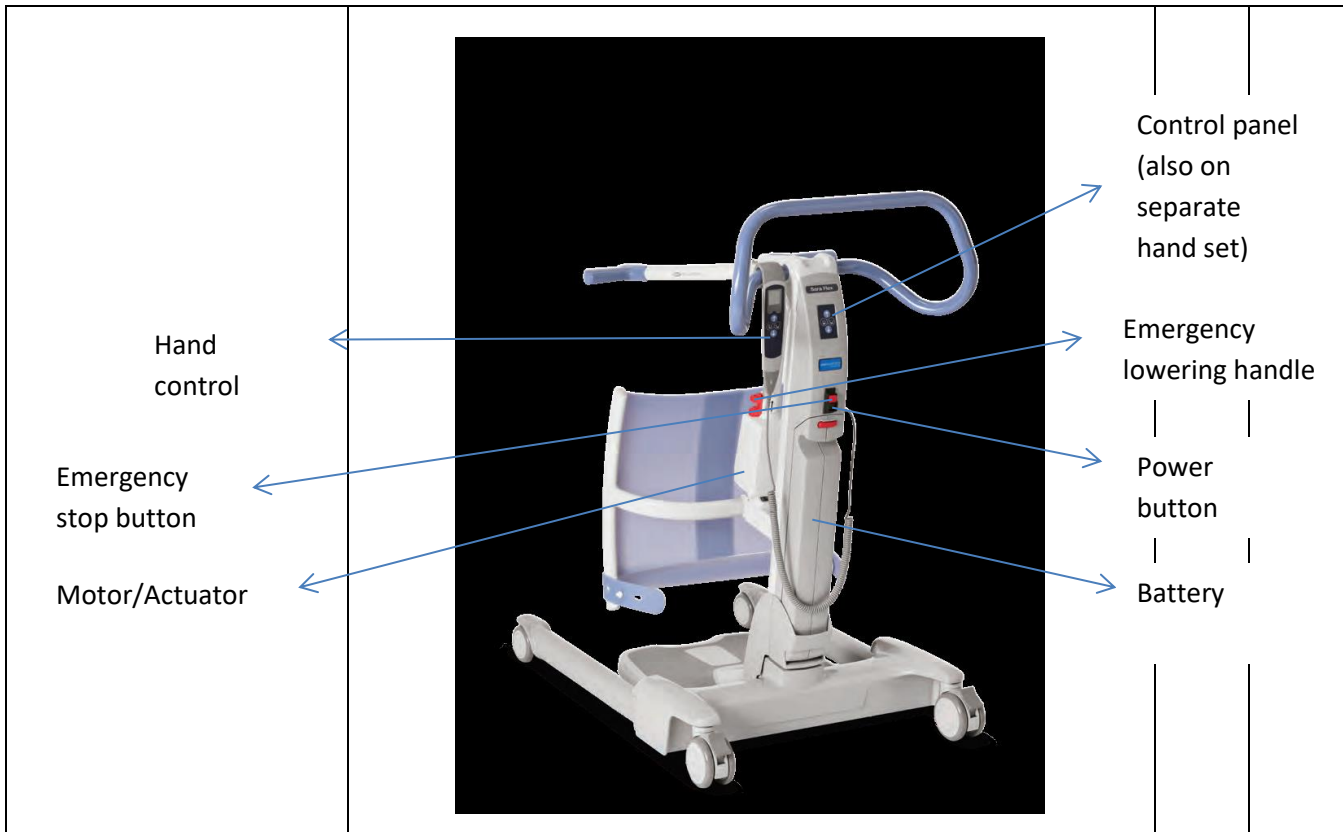
Have you done a risk assessment for this device? If not please make sure you submit a risk assessment with the competency to the MDNS.

Name of the Device: Sara Flex Standing Hoist

Model of Device & Number: Sara Flex

When assessing a candidate please insert a tick for each successful response against the section required.

Question	Answer	Yes	No
1. Clinical Purpose			
What is the clinical purpose of the device?	Mobile standing and raising aid with safe working load of 200kg (440lb). To lift and transfer patients from one place to another e.g. to and or from chair, wheelchair, bedside, bath, toilet/commode.		
2. Preparation and Safety			
Know where the information and directions for the use of the equipment is stored?	Instructions for all medical devices used in an area should be kept on the area or can be accessed via the Trust competency assessment database. http://fcsp.xfyldcoast.nhs.uk/M-/medicaldevices/Lists/Device%20List/Listed%20By%20Type.aspx		
Know the procedure to report any faults/ broken machinery?	All broken or faulty machinery should be reported to ATLAS medical engineering via the Trust intranet home page tab. http://bfwnet/departments/medical_physics/		
Understand and can explain how to clean the machine?	All hoists should be cleaned and maintained between patients and at regular intervals while in use by the area responsible. Either Clinell wipes or alcohol wipes (70-90%) can be used to clean the hoist. To clean place the hoist in a suitable working position.		
3. Clinical Application			
Demonstrate the safety checks and precautions prior to use?	Visually inspect. If anything is damaged, DO NOT USE and report to ATLAS Estates. Check the battery level – this is critical!		
Show awareness of the appropriate equipment for use with this device (if applicable).	Allowed Slings with Sara Flex The following slings are compatible with Sara Flex. Active Slings (See Fig. 10) • TSS.500 (S) • TSS.501 (M) • TSS.502 (L) • TSS.503 (XL) • TSS.504 (XXL)		
4. Anatomy of the Device			
Know the component parts of the device and indicate which consumables/attachments are required to operate it?			



5. Setting up and Operating the Device

6. Correct use of Controls

Emergency Stop Button

To Activate

Press the red emergency stop button to cut all power to all electrical components.

To Deactivate

Press the green power button to power on the equipment again.

Power Button

The green power button is located next to the stop button. Press the power button to switch on *Sara Flex*.

Usage Counter

The usage counter shows the total added amount of time (in hours) that the lift's lifting arm has been raised or lowered.

The usage counter will increase in increments of 0.1 hours whenever an additional six minutes have been added.

NOTE

The usage counter only records during movement of the lifting arm.

The maintenance symbol is a reminder for the yearly maintenance requirements for the product.

The maintenance symbol is shown after a 125 hours of usage. This is the average time a lift is used during one year. When the maintenance symbol appears, the unit will still be safe to use, but the yearly maintenance should be performed as soon as possible.

Brakes - the brakes should be deployed before using the Sara Flex.

Castor Brakes

The rear castors brakes are foot operated to keep *Sara Flex* in position.

Apply the brakes :

Press down on the gray castor brake lever.

Release the brakes

Slightly kick up the gray castor brake lever

Leg Support

The leg support is made out of silicone.

This material adjusts itself based on the pressure applied by the patient knees

Leg Strap

The leg strap is located under the silicone leg support.

The leg strap is used to make sure that the patient's legs stay close to the leg support.

To fasten the leg strap attach it to the attachment point on either side of the leg support.

Emergency Lowering

The Emergency Lowering allows the lifting arm to be lowered in the event of a main control failure.

In the event of a hand control or control panel failure, find the red handle on the actuator.

Gradually pull the red handle up and hold it until the lifting arm is lowered to the desired level. The force applied by pulling the red handle and the patient weight affects the speed of lowering.

The handle is spring loaded and will return to its original position. It stops the lowering process once the red handle is released.

Place Patient in *Sara Flex* (10 Steps)

1. Select and apply sling, see respective sling *IFU*.
2. Open chassis legs if needed to accommodate the width of the chair, bed, etc.
3. Apply brakes to the wheelchair (if applicable).
4. Ask or assist the patient to place his/hers feet on the foot plate.
5. Push *Sara Flex* towards the patient until it gently touches the patient's shins.
6. Ask or assist patient to place his/hers hands on the patient/resident handles.

Transfer from Wheelchair to *Sara Flex*

1. Select and apply sling, see respective sling *IFU*.
2. Open chassis legs if needed to accommodate the width of the chair, bed, etc.
3. Apply brakes to the wheelchair (if applicable).
4. Ask or assist the patient to place his/hers feet on the foot plate.
5. Push *Sara Flex* towards the patient until it gently touches the patient's shins.
6. Ask or assist patient to place his/hers hands on the patient/resident handles

7. Attach sling clips to attachment points on the Sara Flex lifting arm.
8. Make sure the clips are attached securely.
9. When using a transfer sling, also attach the loops on the central hook (accessory) located right under the lifting arm.
10. Attach the leg strap to support the patient's legs, if needed.

Raise a Patient to Standing Position

NOTE

- When raising the patient with transfer sling, he/she should not help out while being raised.
- When using the transfer sling, do not raise the patient higher than seating position. A higher position will not be comfortable for the patient.

(5 Steps)

1. Stand next to the patient and inform him/her that the *Sara Flex* will be raised to a standing position.
2. Check attachment points to make sure the *Sara Flex* is ready.
3. Use the hand control to raise patient from sitting position to standing position.
4. While the patient is standing check the supports.
5. Tighten safety straps around the abdomen, if needed.

Patient Transfer

(2 Steps)

1. Pull *Sara Flex* away from the wheelchair, using the manoeuvring handle.
2. Close the chassis legs if needed.

Transfer from *Sara Flex* to Toilet

1. Using the manoeuvring handle, position patient in front of the toilet/commode or device that patient will sit on.
2. Adjust chassis legs if needed.
3. While the patient is standing caregiver can help with the patient's clothing (i.e., dressing, undressing or toileting tasks etc.).
4. Position the patient over the toilet/commode.
Press the down arrow on the hand control to lower the patient to a sitting position.
5. Stand next to the patient while he/she is being lowered.

WARNING

To avoid pinching of genitals and skin, make sure there is enough clearance during movement.

6. Apply the castor brakes to keep *Sara Flex* in position once the patient is sitting on the toilet.
7. Have the patient release their hands from the patient/resident handles.
8. Remove sling clips from *Sara Flex*.
9. Detach leg straps.
10. Remove sling, if needed.
11. Allow privacy for the patient, but make sure the patient is not left unattended.
12. After providing personal hygiene care, reapply sling, if removed.
13. Raise the patient slightly and apply any necessary incontinent products and adjust clothing.
14. Release the brakes.

	<p>Transfer from Sara Flex to Bed/Chair</p> <ol style="list-style-type: none"> 1. Adjust chassis legs if needed to go around bed/ chair. 2. Apply the brakes on the wheelchair, if applicable. 3. Lower the patient onto the surface of bed/chair. 4. Make sure the patient is positioned correctly on the bed/chair. 5. Have the patient release their hands from patient/resident handles. 6. Detach the sling from Sara Flex and remove the sling from the patient. 7. Detach leg straps, if applicable. 8. Have the patient lift his/her feet off the footplate, assist if needed. 9. Pull the Sara Flex away from the patient. 10. Clean the Sara Flex after the transfer is complete. 		
<p>7. Correct use and Knowledge of any alarms/errors.</p>	<p>Sara Flex uses sealed lead-acid batteries mounted below the control panel. The LCD screen only shuts down after 2 minutes of inactivity. The rest of the electronics shuts down after 10 minutes of inactivity, to prevent battery damage or drainage while the lift is in the stand-by mode.</p> <p>Low Battery Warning Sara Flex has a battery charge indicator on the hand control.</p> <p>0.0 kg 0.0</p> <p>The battery indicator on the hand control will show if the batteries for Sara Flex is close to being empty and it will beep two times every minute. Complete the transfer and charge the battery. If the battery is low, the unit will beep 3 times and the lift will go into sleep mode.</p> <p>When trying to use the lift with an almost empty battery:</p> <ul style="list-style-type: none"> • The unit will beep 3 times. • The hand control will briefly display the low battery icon. • The unit will go back to sleep mode. • The lift will not be operable until the battery is recharged or replaced. <p>Storage of Battery</p> <ul style="list-style-type: none"> • The battery is delivered charged but it's recommend to recharge the battery when received, due to a slow self-discharge. • The battery will slowly self-discharge when not used. • A battery not in use should be stored in a temperature range of -0°C (32°F) to + 30°C (86°F). • For maximum battery performance do not store the battery above 50°C (122°F). <p>Charging Intervals</p> <ul style="list-style-type: none"> • To prolong the life of the battery, charge it at regular intervals, e.g. every night. • It is recommended to use two batteries, one in operation and one as a stand-by in the charger. • It is recommended that the battery not in use is left in the charger. There is no risk of overcharging the battery. • It is recommended to remove the battery from the Sara Flex when it is not used for an extended period of time. 		

	<ul style="list-style-type: none"> • To prolong the life of the battery, recharge it before it reaches a low level charge. <p>Inserting / Removing the Battery (see user manual for visual guide). The same method applies for inserting / removing the battery on the <i>Sara Flex</i> or the charger.</p> <p>Inserting the Battery (2 Steps) 1. Place the battery in the battery rack. 2. Push the top of the battery until it is in position.</p> <p>Removing the Battery (3 steps) 1. Push the release button. 2. Pull the battery out. 3. Lift the battery to detach it from the battery rack.</p>		
<p>8. Specialist Information</p>	<p>Problem Description Solution Hand control does not respond • Check that the Emergency stop button on the control box is not pushed.</p> <ul style="list-style-type: none"> • Check the connector on hand control cord. • Check the battery condition (replace with a fully charged battery pack). <p>UP and DOWN buttons on control box do not respond</p> <ul style="list-style-type: none"> • Check that the Emergency stop button on the control box is not pushed. • Check the battery condition (replace with a fully charged battery pack). <p>The control box beeps two times every 30 seconds. Battery is low. Replace with a freshly charged battery pack.</p> <p>The control box beeps three times and the lift shuts-off. Battery is low. Replace with a freshly charged battery pack.</p> <p>The control box beeps more than three times in conditions other than those mentioned above. Call ATLAS Estates for service. Actuators “stalls” during operation Battery is low. Replace with a freshly charged battery. Do not exceed the lifting capacity.</p>		
<p>9. Additional Information</p>	<p>Devices which are due for service/planned preventative maintenance (PPM) should be located, decontaminated and reported to ATLAS Medical Engineering by the Equipment Coordinator.</p>		

Medical Devices Verification of Competence for the (enter device title):

Enter the name and model (if applicable) for the device in the box above.

The statement below indicates that the user is competent to use this device. Responsibility for use remains with the user. If you are in any doubt concerning your competence to use the device, seek further training and education to improve your competency level. Select the appropriate statement below:-

- I have demonstrated competence and knowledge relevant to this device and I certify that I am aware of my professional responsibilities for continuing professional development and I am accountable for my own actions. I am competent to use this device without further training.

PRINT NAME:

Signature:

Date:

- I require further training before I can use this device in a competent manner.

PRINT NAME:

Signature:

Date:

All of the criteria within the assessment document must be achieved to gain competency.

By signing this document, the assessor and candidate agree that they have discussed and completed this competency assessment.

Date:	
Assessors Signature:	
Assessor –Print Name, Location and Job Title	

Candidate - Please ensure that you retain this form for your records and complete and update your Medical Device Training Record. Ensure that your Key Trainer enters the date of your training on the local training records spreadsheet held on your clinical area.

RETRAINING / FREQUENCY GUIDE

- High Risk every 3 years with Learning Needs Assessment (previously known as Annual Self-Verification of Training Need) annually
- Medium Risk every 5 years with Learning Needs Assessment annually
- Low Risk initial competency and then Learning Needs Assessment thereafter