



Radiography & Diagnostic Imaging,  
School of Medicine,  
University College Dublin

in collaboration with the



Irish Institute of Radiography and Radiation  
Therapy (IIRRT)

## **Clinical Practice Portfolio**

**Rectal intubation and Insufflation by Radiographers  
for CT Colonography examinations**

General Information	
Name of Clinical Site*	
Learner Name and contact details	<p>Name: _____</p> <p>Current Position: _____</p> <p>CORU Registration No: _____</p> <p>Tel.: _____</p> <p>E-mail: _____</p>
Mentor Name and contact details	<p>Name: _____</p> <p>Current Position: _____</p> <p>Irish Medical Council P.I.N. No: _____</p> <p>Tel.: _____</p> <p>E-mail: _____</p>

**\*Clinical Site** – The term clinical site is used throughout this document to refer to hospital, healthcare institute, community or primary care setting where the Radiographer is employed in clinical practice.

## CLINICAL PRACTICE PORTFOLIO

The learner will be eligible to commence the clinical practice element, only following a) completion of the online theoretical modules b) creation and sign off of a local governance protocol and c) agreement of a local radiologist to supervise and mentor the learner during training. The learner must complete the Clinical Practice Portfolio, which includes a final competency assessment before being deemed competent to practice.

The aim of this programme is to ensure that Radiographers become competent and confident in their ability to both cannulate and insufflate the large bowel at the point of completion and have embraced a philosophy of life-long learning in order that they continue to deliver competent, responsive and flexible care in a variety of clinical settings.

### **Aims**

- The programme aims to ensure that upon successful completion, the learner is equipped with the knowledge, skills and competence to perform rectal intubation and insufflation appropriately within his/her scope of practice.
- Learners will enhance their skills of critical analysis, problem-solving, decision-making and reflection essential to the art and science of radiography in this expanded role.

### **Learning Outcomes**

At the end of this programme, and following a period of self-directed learning, learners will be able to:

- demonstrate an understanding of the indications and contraindications for performing bowel insufflation for CT colonography examinations;
- critically utilise evidence-based knowledge and the skill of patient/service user assessment and consultation to achieve a holistic approach to patient/service user care in performing rectal intubation and insufflation;
- apply clinical decision making skills in relation to radiographer performed rectal intubation and insufflation within her/his scope of practice;

- demonstrate effective communication skills and knowledge of multi-disciplinary management in the safe and appropriate performance of rectal intubation and insufflation.

### ***Supervised Practice***

The learner undertaking this programme must engage in a period of supervised practice of 20 procedures prior to undertaking clinical competency assessment. Each learner must have an identified clinical supervisor in his/her specific area of practice. The clinical supervisor will be a registered radiologist agreed locally.

### ***Responsibilities of the Clinical Supervisor***

The clinical supervisor will be responsible for:

- Providing support, teaching and learning opportunities in the clinical practicum;
- Facilitating learning by encouraging critical thinking and reflection;
- Providing dedicated time and opportunities for the radiographer to perform rectal intubation and insufflation on a range of patients;
- Promoting the integration of theory with practice;
- Verifying and documenting all supervised practice documentation for the duration of the training programme;
- Meeting formally with the learner to review progress;
- Formally assessing the learner's competence in the clinical practicum using the Clinical Competency Assessment Tool;
- Documenting that the learner is competent or not competent to perform rectal intubation and insufflation;

### **Review Meetings**

An **initial meeting** will take place between the learner and clinical supervisor **in Week 1** of the supervised practice period during which a plan for achievement of the learning outcomes of the programme, and development of competency, will be agreed and recorded.

In order to facilitate the Competence Assessment process, a formal **intermediate meeting** should take place **following 10 supervised procedures** during which the clinical supervisor and learner review progress to date regarding the learner's achievement of competence. Formal feedback is provided to the learner in relation to areas of good practice and areas of practice where the learner needs to improve. During this review meeting, the *Supervised Practice Record* and the corresponding *Case Synopsis* records will provide the framework for discussion and feedback. In the event the learner is not progressing satisfactorily at this stage, the clinical supervisor and learner should devise an Action Plan.

A **final meeting** will take place between the clinical supervisor and learner **following completion of 20 procedures** to complete the *Clinical Competency Assessment Tool*, and deem the learner either competent or not competent to perform rectal intubation and insufflation. Prior to this final meeting the learner is responsible for ensuring the Clinical Practice Portfolio is completed in full and all requirements are met. In the event the learner is deemed not competent at this stage, an Action Plan is initiated with clearly stipulated review dates.

All meetings are recorded in the meeting record sheets and entries must be dated and signed by the clinical supervisor and learner.

#### Action Plan

In the event that the learner is not achieving competence, an action plan must be devised to address the identified needs of the learner. An action plan may be required at any stage during the period of supervised training and involves collaboration between the learner and the clinical supervisor and may require additional review of the theoretical components or hands on training.

#### Management of the Clinical Practice Portfolio

The learner is responsible for ensuring that the *Clinical Practice Portfolio* is fully complete prior to presenting for clinical competency assessment on completion of the supervised practice component. The *Clinical Practice Portfolio* must provide evidence of supervised practice and incremental progression by the

learner over the period. Each learner must complete a minimum of five different reflections on episodes of practice. The Learner is responsible for the security and maintenance of the *Clinical Practice Portfolio* and should be used as evidence of Continuing Professional Development as required by CORU, the state regulator.

<b>INITIAL MEETING RECORD</b>
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- To be completed by the Clinical Supervisor in partnership with the learner in Week 1 of the clinical practice programme.
- The Clinical Supervisor and learner agree a plan for facilitating the learner to achieve the learning outcomes of the programme, and clinical competence in performing rectal intubation and insufflation. This plan must take account of the learning needs of the learner, learning opportunities within the practice setting, resources available, and strategies to be employed to enable the achievement of competence by the learner.
- The *Competence Assessment Tool* to be reviewed and expectations of both the Clinical Supervisor and learner clarified.

Comments	
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[illegible]

**Signature of Learner:** \_\_\_\_\_

Date: \_\_\_\_\_

**Signature of Clinical Supervisor:** \_\_\_\_\_

Date: \_\_\_\_\_

## SUPERVISED PRACTICE RECORD

Professional/Ethical Practice	Indicator	Achieved (Yes / No)
	Practices within the professional regulation and guidelines relevant to her/his scope of practice and care setting	
	Integrates accurate and comprehensive knowledge of ethical principles and the CORU Code of Professional Conduct and Ethics (2013) for Radiographers	
	Accepts personal accountability for performing rectal intubation and insufflation	
	Recognises own abilities and level of professional competence	
	Conducts self audit of practice incorporating reflective practice/thinking to identify competence to perform rectal intubation and insufflation within the radiographers scope of practice	
	Maintains current knowledge of advances in practice and patient safety concerns related to performing rectal intubation and insufflation.	
	Consults appropriately with the radiologist / medical practitioner for a patient when the individual radiographer perceives limitations in her/his knowledge or scope of practice	
	Identifies a mechanism to support continuing professional development needs to ensure continued competence	
	Adheres to legislation, professional regulation and guidelines and employing organisation's standards/policies for performing rectal intubation and insufflation	
	Complies with the requirements/policies of the employing organisation for: <ul style="list-style-type: none"> <li>• reporting errors/incidents and near misses</li> <li>• audit of practices</li> </ul>	

	Indicator	Achieved (Yes / No)
<b>Holistic Approaches to Care and Integration of Knowledge</b>	Evaluates referrals for justification and appropriateness of the examination prior to commencement.	
	Performs an assessment of the patient encompassing history taking, physical examination and identification of health risk factors	
	Involves patient or carer as active participants in the decision making process and plan of care that is mutually agreed	
	Initiates appropriate and timely consultation and/or referral when the problem exceeds the radiographers' scope of practice and expertise	
	Implements care based on knowledge, skills and competence within her/his scope of practice	
	Considers appropriate alternative diagnostic examinations when necessary	
	Provides guidance and advice regarding the agreed procedure to the patient	
	Evaluates and provides evidence based rationale for clinical decision making	
	Identifies when rectal intubation and insufflation may be contra-indicated and plans care accordingly	
	Identifies and integrates appropriate monitoring systems for safe performance of rectal intubation and insufflation	
	Applies the principles of evidence-based practice and cost effectiveness when performing rectal intubation and insufflation	
<b>Interpersonal Relationships</b>	Assesses the patient's understanding of the planned examination recognising relevant individual patient characteristics (i.e. age, gender, co-morbidity, culture) and expectations, involving carers where appropriate	
	Communicates sensitively, respecting patient's emotions and concerns	
	Identifies the roles and responsibilities of other health care professionals in the performance of rectal intubation and insufflation	
	Establishes relationships with other health care professionals based on understanding and mutual respect	

	Maintains comprehensive documentation and patient records	
	Participates in interdisciplinary team collaboration relating to the patient's examination	
	Demonstrates quality assurance and quality management in the performance of rectal intubation and insufflation through a structure of audit and report	
	Integrates the principles of clinical risk management and health and safety in the performance of rectal intubation and insufflation.	
Personal & Professional Development	Demonstrates a commitment to life-long learning	
	Accepts personal responsibility for professional development and the maintenance of professional competence	
	Maintains current knowledge of advances in scope of practice associated with the performance of rectal intubation and insufflation	
	Develops professional links with others practising in the same specialist area	
	Uses the outcomes of audit of prescribing practices to improve service provision and develop own practice	
	<b>Clinical Supervisor's signature</b>	
	<b>Learner's Signature</b>	

LOGBOOK OF PROCEDURES			
Exam	Indication	Assisted/Unassisted	Comment
1			
2			
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20			
Learner's signature			
Date			
Medical Supervisor's signature			Irish Medical Council P.I.N. No:
Date			

RECTAL INTUBATION AND INSUFFLATION: EPISODE 1	
Date	
Patient Assessment (identification of risk factors)	
Justification of examination	
Any issues in cannulation / insufflation?	
<b>Reflection on Episode 1 (minimum number of words 200)</b> <ul style="list-style-type: none"> <li>• What have I learned from the experience? (skills, knowledge, professional attitudes, other)</li> <li>• How can this learning impact on my professional practice and the delivery of service to my service users?</li> <li>• Has this learning activity highlighted any areas for development and new learning needs for me?</li> <li>• My action plan resulting from this experience is:</li> </ul>	
Learner's signature	Date
Medical Supervisor's signature	Irish Medical Council P.I.N. No:
Date	

RECTAL INTUBATION AND INSUFFLATION: EPISODE 2	
Date	
Patient Assessment (identification of risk factors)	
Justification of examination	
Any issues in cannulation / insufflation?	
<b>Reflection on Episode 1 (minimum number of words 200)</b> <ul style="list-style-type: none"> <li>What have I learned from the experience? (skills, knowledge, professional attitudes, other)</li> <li>How can this learning impact on my professional practice and the delivery of service to my service users?</li> <li>Has this learning activity highlighted any areas for development and new learning needs for me?</li> <li>My action plan resulting from this experience is:</li> </ul>	
Learner's signature	Date
Medical Supervisor's signature	Irish Medical Council P.I.N. No:
Date	

RECTAL INTUBATION AND INSUFFLATION: EPISODE 3	
Date	
Patient Assessment (identification of risk factors)	
Justification of examination	
Any issues in cannulation / insufflation?	
<b>Reflection on Episode 1 (minimum number of words 200)</b> <ul style="list-style-type: none"> <li>What have I learned from the experience? (skills, knowledge, professional attitudes, other)</li> <li>How can this learning impact on my professional practice and the delivery of service to my service users?</li> <li>Has this learning activity highlighted any areas for development and new learning needs for me?</li> <li>My action plan resulting from this experience is:</li> </ul>	
Learner's signature	Date
Medical Supervisor's signature	Irish Medical Council P.I.N. No:
Date	

RECTAL INTUBATION AND INSUFFLATION: EPISODE 4	
Date	
Patient Assessment (identification of risk factors)	
Justification of examination	
Any issues in cannulation / insufflation?	
<b>Reflection on Episode 1 (minimum number of words 200)</b> <ul style="list-style-type: none"> <li>• What have I learned from the experience? (skills, knowledge, professional attitudes, other)</li> <li>• How can this learning impact on my professional practice and the delivery of service to my service users?</li> <li>• Has this learning activity highlighted any areas for development and new learning needs for me?</li> <li>• My action plan resulting from this experience is:</li> </ul>	
Learner's signature	Date
Medical Supervisor's signature	Irish Medical Council P.I.N. No:
Date	

RECTAL INTUBATION AND INSUFFLATION: EPISODE 5	
Date	
Patient Assessment (identification of risk factors)	
Justification of examination	
Any issues in cannulation / insufflation?	
<b>Reflection on Episode 1 (minimum number of words 200)</b> <ul style="list-style-type: none"> <li>• What have I learned from the experience? (skills, knowledge, professional attitudes, other)</li> <li>• How can this learning impact on my professional practice and the delivery of service to my service users?</li> <li>• Has this learning activity highlighted any areas for development and new learning needs for me?</li> <li>• My action plan resulting from this experience is:</li> </ul>	
Learner's signature	Date
Medical Supervisor's signature	Irish Medical Council P.I.N. No:
Date	



## INTERMEDIATE MEETING RECORD

- To be completed by the Clinical Supervisor in partnership with the learner **following ten episodes** of supervised practice.
- The learner should review the Clinical Practice Portfolio, to ensure that at least two episodes of practice (including reflections) are recorded prior to the intermediate meeting:
- The Clinical Supervisor reviews the initial meeting record and plan for achievement of competence with the learner. Episodes 1 - 2 of the *Supervised Practice Record* are reviewed and discussed. The Clinical Supervisor provides feedback to the learner on progress to date and identifies areas for improvement.
- In the event that the learner is not progressing satisfactorily towards achieving competence an Action Plan should be devised and agreed.

Intermediate Meeting Comments

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Signature of Learner \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Clinical Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

ACTION PLAN				
Date	Identified Learning Need	Proposed Action	Assessment Methods	Review Date

Signature: \_\_\_\_\_ (Learner)

Date: \_\_\_\_\_

Signature: \_\_\_\_\_ (Supervisor)

Date: \_\_\_\_\_

ACTION PLAN REVIEW					
Date	Identified Learning Need for Review	Achieved	Not Achieved	Further Action	Review Date

Signature: \_\_\_\_\_ (Learner)

Signature: \_\_\_\_\_ (Supervisor)

Date: \_\_\_\_\_

Date: \_\_\_\_\_

## FINAL MEETING RECORD

- To be completed by the Clinical Supervisor in partnership with the learner **following 20 supervised procedures**.
- The learner should review the Clinical Practice Portfolio, to ensure all requirements are met prior to final competence assessment by the clinical supervisor
- The Clinical Supervisor reviews episodes 11-20 of the *Supervised Practice Record* with the learner prior to completing the *Clinical Competency Assessment Tool*, and deems the learner either competent or not competent to perform rectal intubation and insufflation.

Final Meeting Comments

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Signature of Learner \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Clinical Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

ACTION PLAN				
Date	Identified Learning Need	Proposed Action	Assessment Methods	Review Date

Signature: \_\_\_\_\_ (Learner)

Signature: \_\_\_\_\_ (Supervisor)

Date: \_\_\_\_\_

Date: \_\_\_\_\_

ACTION PLAN REVIEW					
Date	Identified Learning Need for Review	Achieved	Not Achieved	Further Action	Review Date

Signature: \_\_\_\_\_ (Learner)

Signature: \_\_\_\_\_ (Supervisor)

Date: \_\_\_\_\_

Date: \_\_\_\_\_

## CLINICAL COMPETENCY ASSESSMENT TOOL

A team and partnership approach will be applied when assessing the learner. The supervisor will consult with professional colleagues in determining the learner's competence. Learners are deemed to be either competent or not competent. There are no ratings in the verification of competence.

<b>Supervised Practice Record Complete</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
<b>Logbook of supervised cases Complete</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
<b>Reflections on five supervised cases Complete</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Domain 1	Professional/Ethical Practice	Supervisor Signs the Relevant Box		
		Competent	Not Competent	
1.1. Practices in accordance with legislation and professional guidance affecting practice	• Practices within the legislation and professional regulation and guidelines relevant to her/his scope of practice			
	• Integrates accurate and comprehensive knowledge of ethical principles and the CORU Code of Professional Conduct and Ethics (2013) for Radiographers			
	• Accepts personal accountability for performing rectal intubation and insufflation			
1.2 Practices within the limits of own competence and takes measures to develop and maintain own competence	• Recognises own abilities and level of professional competence			
	• Conducts self audit of practice incorporating reflective practice/thinking to identify competence to perform rectal intubation and insufflation			
	• Maintains current knowledge of advances in practice and radiation protection concerns related to performing rectal intubation and insufflation during CT colonography			
	• Consults appropriately with the radiologist for a patient when the individual radiographer perceives limitations in her/his knowledge or scope of practice of performing rectal intubation and insufflation			

	<ul style="list-style-type: none"> <li>Identifies a mechanism to support continuing professional development needs to ensure continued competence</li> </ul>		
1.3 Practices within a framework of professional accountability and responsibility in relation to performing rectal intubation and insufflation	<ul style="list-style-type: none"> <li>Adheres to legislation, professional regulation and guidelines and employing organisation's standards/policies for performing rectal intubation and insufflation</li> </ul>		
	<ul style="list-style-type: none"> <li>Complies with the requirements/policies of the employing organisation for: a) reporting errors/incidents and near misses and b) audit of practices</li> </ul>		
<b>Domain 2</b>	<b>Holistic Approaches to Care and Integration of Knowledge</b>		
2.1 Conducts a systematic holistic assessment of patient needs	<ul style="list-style-type: none"> <li>Performs an assessment of the patient encompassing history taking, physical examination and identification of health risk factors</li> </ul>		
2.2 Plans care in consultation with the patient taking into consideration the therapeutic regimes of all members of the interdisciplinary team	<ul style="list-style-type: none"> <li>Involves patient or carer as active participants in the decision making process and plan of care that is mutually agreed</li> </ul>		
	<ul style="list-style-type: none"> <li>Initiates appropriate and timely consultation when the problem exceeds the radiographers' scope of practice and expertise</li> </ul>		
<b>Domain 2</b>			
2.3 Implements planned care/ interventions to achieve the identified outcomes of the plan	<ul style="list-style-type: none"> <li>Performs examination based on knowledge, skills and competence within her/his scope of practice</li> </ul>		
	<ul style="list-style-type: none"> <li>Considers appropriate diagnostic and therapeutic interventions as part of ongoing plan</li> </ul>		

of care	of care within her/his scope of practice		
2.4 Demonstrates and integrates knowledge of rectal intubation and insufflation for safe practices	•Identifies when rectal intubation and insufflation may be contra-indicated and plans care accordingly		
	• Identifies and integrates appropriate monitoring systems for bowel insufflation safety and efficacy		
	•Applies the principles of evidence-based practice and cost-effectiveness when performing rectal intubation and insufflation		
<b>Domain 3</b>	<b>Interpersonal Relationships</b>		
3.1 Establishes and maintains caring interpersonal relationships for safe and effective performance of rectal intubation and insufflation	•Assesses the patient's understanding of his/her examination recognising relevant individual patient characteristics (i.e. age, gender, co-morbidity, culture) and expectations, involving carers where appropriate		
	• Communicates sensitively, respecting patient's emotions and concerns		
3.2 Collaborates with all members of the health care team and documents relevant Information	•Identifies the roles and responsibilities of other health care professionals in the performance of rectal intubation and insufflation		
	• Establishes relationships with other health care professionals based on understanding and mutual respect		
	• Maintains comprehensive documentation within a legal and ethical framework		
	• Participates in interdisciplinary team collaboration relating to the patient's examination		
	• Establishes mechanisms for referral pathways and consultation regarding practice		

	decisions including follow up		
<b>Domain 4</b>	<b>Organisation and Management of Care</b>		
4.1 Effectively manages the care of Patients	• Demonstrates quality assurance and quality management in performing rectal intubation and insufflation through a structure of audit and report		
	• Integrates the principles of clinical risk management and health and safety in performing rectal intubation and insufflation		
<b>Domain 5</b>	<b>Personal and Professional Development</b>		
5.1 Acts to enhance the personal and professional development of self and others	• Demonstrates a commitment to life-long learning		
	• Accepts personal responsibility for professional development and the maintenance of professional competence		
	• Maintains current knowledge of advances in scope of practice associated with performing rectal intubation and insufflation		
	• Develops professional links with others practicing in the same specialist area		
	• Uses the outcomes of audit of practice to improve service provision and develop own practice		

**COMPETENT**

I have observed: \_\_\_\_\_ in the performance of rectal intubation and insufflation. He/she has successfully achieved the identified domains of competence and is therefore competent to perform rectal intubation and insufflation

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Irish Medical Council No: \_\_\_\_\_

**OR**

**NOT COMPETENT**

I have observed: \_\_\_\_\_ in the performance of rectal intubation and insufflation. He/she has been unsuccessful in achieving the identified domains of competence and is therefore not competent to performance of rectal intubation and insufflation.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Irish Medical Council No: \_\_\_\_\_

Action Plan Developed                      Yes    ☐        No    ☐

Date: \_\_\_\_\_

