

Trust logo

Heated, Humidified High Flow Nasal Cannula Oxygen Competency (HHHFT)

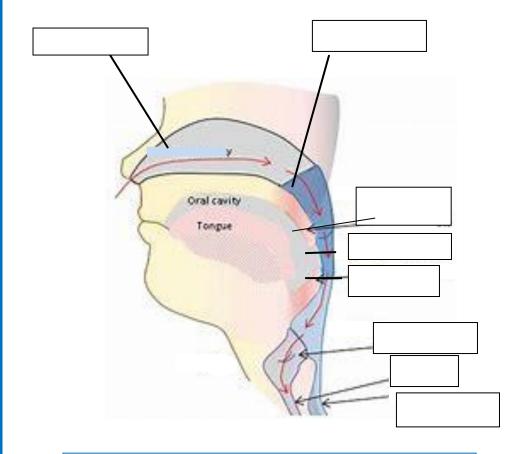
To be used in conjunction with the East of England Paediatric Critical Care HHHFT educational resource and the clinical guideline, all available on our website

https://www.networks.nhs.uk/nhs-networks/east-of-england-paediatric-critical-care

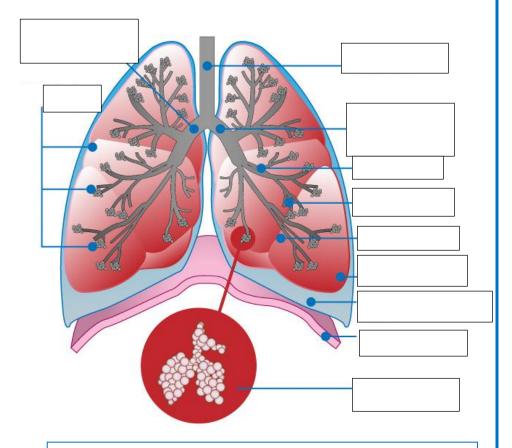
Name:	
Unit:	
Date commenced:	Date returned:
Added to local training database: []	

Supervisors Name	Sample signature	Sample initials

Label the diagram of the respiratory anatomy



epiglottis oesophagus trachea
nasal Cavity oropharynx vocal chords
nasopharynx soft palate



alveoli left main bronchus right main bronchus
bronchi lobes trachea
bronchioles pleura
diaphragm pleural fluid

	Date & Sign staff	Date & sign PDN / supervisor
Identify which device is used in your trust for delivery of HHHFT		
5.0 28 -331		
Where is it stored?		
What pre use checks should be completed?		
Give 3 clinical indications for HHHFT		
•		
•		
Give 2 contraindications for HHHFT with rationale		
•		
•		

Describe 4 benefits of HHHFT over nasal cannula oxygen or face mask oxygen	
•	
•	
•	
•	
Describe what clinical changes in your patient you would expect to see once they have started	
on HHHFT	
•	
•	
What would you do if this does not happen or the child is deteriorating despite HHHFT?	
Describe how you would select the correct interface for your patient.	
Why is the size important?	
with is the size important:	
What monitoring is required for a child on HHHFT?	
•	
•	
•	
•	

What information about HHHFT should be recorded and how often?	
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•	
•	
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•	
What should you consider in terms of patient comfort and safety?	
•	
•	
•	
•	
•	
When might you place a gastric tube in a patient receiving HHHFT?	
•	
•	
What are the options for temperature settings?	
•	
•	
Why might I adjust the temperature settings?	
Why should I never deliver HHHFT with the temperature turned off?	
How can the temperature be adjusted?	
now can the temperature be adjusted:	
How should you administer a nebuliser to a patient receiving HHHFT?	
Tion chould you definition a hobalicor to a patient roserving thin 11	

What would I consider if my patient on HHHFT needs to be transferred (internal transfer)? Who makes the decision to wean from HHHFT on the unit? Describe how a patient should be weaned from HHHFT.	
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Describe now a patient should be wearied from Firm 1.	
Mile of a delicional informacion management to be a social and do	
What additional information may need to be considered?	
When and how should the device be cleaned?	
Equipment competency	
Staff should be made aware of the validity period of the equipment competency.	
Equipment competency Tick box once staff have also complete the relevant trust equipment competency for the device []	

Supplementary Competency for units that support the use of in line nebulisers with their HHHFT	Date & Sign staff	Date & sign PDN / supervisor
At the time of writing, the Fisher Paykal in line set up is only authorised for use with optiflow devices and not Airvo2 circuits. Staff should be aware that any other application although use is widespread is off license and purely at the clinical discretion of staff.		
What patients are suitable for in line nebulisers via HHHFT circuits?		
Identify the equipment needed to give nebulisers via the HHHFT circuit		
Describe the method and adjustments required to the set up to run a nebuliser via the circuit		

Supplementary competency for units that support the use of vibrating mesh nebulisers with HHHFT	Date & Sign staff	Date & sign PDN / supervisor
What patients are suitable for vibrating mesh nebulisers with HHHFT?		
What medications are licensed for use via the vibrating mesh nebuliser?		
Identify the equipment needed to give nebulisers via the vibrating mesh system.		
Describe the method and adjustments required to set up and run a nebuliser via the vibrating mesh system.		
How long can the consumables be used for a single patient?		

Supplementary competency for units that support the use of HHHFT via tracheostomy	Date & Sign staff	Date & sign PDN / supervisor
How does the selection of interface differ for a tracheostomy?		
What is the minimum / maximum flow for delivery of HHHFT via tracheostomy?		

Supplementary competency for units that support the use of an Uninterrupted Power Supply with their device.	Date & Sign staff	Date & sign PDN / supervisor
What is the charging time for the UPS on the HHHFT devices?		
How long will the device run on a UPS that has a maximum charge?		
What is the local policy for transferring children on HHHFT with a UPS		
What additional considerations are there for transferring a patient within the trust using a UPS		
Tick box once staff have also complete the relevant trust equipment competency for the device [] Staff should be made aware of the validity period of the equipment competency.		