

AFEN Learning Outcomes

	Core Competencies for Working in Emergency Care Settings	Psychological Care of Patients in Emergency Care Settings	Care of Adults and Older People (AOP) In Emergency Care Settings	Care of Children and Young People in Emergency Care Settings
<i>Anatomy & Physiology</i>		1. Understand how to apply knowledge of pathophysiology and psychology to recognised patterns of illness and injury.	1. Understand the anatomy and physiology of the body systems of adults and older people	1. Understand the normal development of anatomy and physiology of the body systems of children and young people
<i>Anatomy & Physiology Application</i>				2. Understand how to apply knowledge of anatomy, physiology and psychology to recognised patterns of illness and injury in children and young people.
<i>Clinical Assessment</i>		2. Understand how to undertake a focused mental health assessment for an individual requiring emergency care.	17. Be able to undertake a focused assessment for adults and older people requiring emergency care.	15. Be able to undertake a focused assessment for a child or young person requiring emergency care.
<i>Assessment frameworks</i>			2. Understand the use of assessment tools to manage a range of presentations.	3. Understand how assessment tools are used and how they enable systematic assessment of children and young people
<i>Prioritising Care</i>		3. Understand the structured approaches to prioritising for psychological care.	2. Understand the structured approaches for prioritising patient care.	4. Understand the structured approaches for prioritising patient care.
<i>Critical Patient</i>		4. Understand life-threatening presentations related to mental distress, problems and disorders.	4 Understand life-threatening presentations in adults and how to manage them.	5. Understand life-threatening presentations in children and young people and how to manage them
<i>Critical Patient</i>			5 Understand life-threatening presentations in older people and how to manage them	
<i>Emotional and Psychological Reactions</i>		5. Understand the immediate emotional and psychological impact of sudden or acute exacerbation of illness or injury.	6. Understand the immediate emotional and psychological impact of sudden or acute exacerbation of illness.	6. Understand the immediate emotional and psychological impact of sudden or acute exacerbation of illness or injury in children and young people.

Assessment criteria which provide the detail are included in the individual units and are available to members

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<i>Pharmacology and Medicine Management</i>		6. Understand the impact of medication used for mental health problems and disorders.	7. Understand the application of relevant pharmacology and medicines management to adults in the emergency department.	7. Understand the application of relevant pharmacology and medicines management to children and young people in the emergency department.
<i>Care Needs</i>	1. Understand how to provide care and how to identify further care needs.		8. Understand how to provide care for adults and older people and how to identify further care needs.	8. Understand how to provide care for children and young people and how to identify further care needs.
<i>Monitoring Equipment</i>		7. Understand how to use clinical indicators for deploying monitoring equipment and how to support an individual requiring the monitoring.	9. Understand how to assess physiological parameters and identify clinical indicators for using monitoring equipment.	9. Understand how to identify clinical indicators for using monitoring equipment
<i>Personal Influences on Care</i>		8. Understand how social, spiritual and cultural influences impact on holistic care.	10. Understand how social, spiritual and cultural influences impact on holistic care.	10. Understand how social, spiritual and cultural influences impact on holistic care of children and young people.
<i>External Influences on Care</i>		12. Understand the multiple external influences which impact on holistic care.	11. Understand the multiple external influences which impact on holistic care.	11. Understand the multiple external influences which impact on holistic care of children and young people.
<i>Standards and Guides</i>		14. Understand how the use of local policies and guidance impact on clinical practice when delivering care.	12. Understand how the use of policies and guidance impact on clinical practice when delivering emergency care for adults and older people.	12. Understand how the use of policies and guidance impact on clinical practice when delivering emergency care for children and young people.
<i>Legal and Ethical Principles</i>		9. Understand the legal and ethical principles relevant to emergency practice.	13. Understand the legal and ethical principles relevant to safeguarding adults and older people in emergency practice.	27. Understand the ethical and legal principles of caring for children and young people
<i>Risk Assessment</i>	2. Be able to implement health and safety procedures within a clinical environment.	13. Understand the need for the provision of a safe environment for individuals with mental distress, problems and disorders.		

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<i>Communication</i>		10. Understand the principles of effective communication strategies for individuals and the multi-professional team	15. Understand the principles of effective communication strategies for communicating with patients and the multi-professional team	13. Understands the principles of effective communication strategies for patients and the multi-professional team.
<i>Assessment Frameworks</i>		15. Be able to undertake timely, focused and effective assessment and prioritisation of individuals requiring psychological care.	16. Be able to undertake assessment and prioritisation of adults and older people in emergency settings.	14. Be able to undertake assessment and prioritisation of children and young people in emergency settings.
<i>Clinical Assessment</i>			17. Be able to undertake a focused assessment for adults and older people requiring emergency care	15. Be able to undertake a focused assessment for a child or young person requiring emergency care
<i>Observation & Evaluation</i>		16. Be able to initiate monitoring of an individual that may require psychological care.	18. Be able to undertake observations and interventions for adults and older people requiring emergency care.	16. Be able to undertake observations and interventions for children and young people requiring emergency care
<i>Critical and Life Threatening Situations</i>		17. Be able to initiate interventions in response to critical and/or life threatening situations.	19. Be able to initiate interventions and care in response to critical and/or life-threatening situations.	17. Be able to understand and initiate appropriate interventions in response to critical and/or life threatening situations.
<i>Therapeutic Interventions</i>		18. Be able to provide safe delivery and monitoring of therapeutic interventions.	20. Be able to provide safe delivery and monitoring of therapeutic interventions.	18. Be able to provide safe delivery and monitoring of therapeutic interventions.
<i>Disseminating Information</i>	3. Be able to access, record and share information in an emergency setting			
<i>Pain Assessment</i>			22. Be able to undertake a pain assessment for adults and older people	20. Be able to undertake a pain assessment for a child.

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<i>Pain Relief / Management</i>			23. Be able to administer pain relief to adults and older people.	21. Be able to administer pain relief for a child
<i>Psychological Impact</i>			24. Be able to identify and respond to the psychological impact of an emergency on an individual and the family/carers.	22. Be able to identify and respond to the psychological impact of an emergency on a child/young person and the family/carers.
<i>Health Promotion</i>			25. Be able to provide individualised health promotion advice to adults and older people in emergency care	23. Be able to apply health promotion principles to emergency care practice.
<i>Conflict Resolution</i>	4. Be able to identify trigger points for challenging, aggressive and violent behaviour and be able to safely use de-escalation and other techniques to defuse or manage situations	19 Be able to identify trigger points for challenging, aggressive and violent behaviour.		
<i>Care Pathways</i>			26. Be able to instigate the preliminary stages of access to the care pathway for adults and older people.	24. Be able to instigate the preliminary stages of access to the care pathway for a child or young person.
<i>Essential Care</i>			21. Be able to undertake essential care for ageing adults in addition to therapeutic interventions.	19. Be able to understand and provide essential / basic care requirements in addition to delivering therapeutic
<i>Care Delivery</i>	5. Understand how to provide essential nursing care that responds to patient need.	20. Be able to assess, plan and evaluate emergency care for individuals.	27. Be able to assess, plan and evaluate emergency care for adults and older people.	25. Be able to assess, plan and evaluate emergency care for children and young people.

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<i>Care delivery to vulnerable patients</i>	6. Understand how to identify and manage individuals that are vulnerable or potentially vulnerable			
<i>Communicating with Patients</i>		11. Be able to communicate effectively and achieve therapeutic rapport with patients and carers.	14. Be able to communicate effectively and develop therapeutic relationships with patients and carers	26. Be able to use communication to develop therapeutic relationships with children and young people and their carers.
<i>Communication with Colleagues / Other Professionals</i>	8 Be able to communicate with colleagues to support patient outcomes.	21. Be able to collaborate and negotiate with senior staff / mentors / other professionals to determine patient care.		
<i>Equity & Dignity</i>	9. Understand how to treat colleagues and patients with equity and dignity.			
<i>Consent & Advocacy</i>			28. Be able to uphold ethical and legal principles when making decisions about the care and advocating for adults and older people.	
<i>Emotional Resilience / Coping Strategies</i>	10. Understand how to encourage patients and families/carers to use helping and coping strategies during critical events.			
<i>Patient Empowerment</i>	11. Understand how to support and empower patients and families during patient care events			

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<i>Managing Loss & Bereavement</i>	12. Understand how to use best practice guidelines to manage and support the relatives, and friends of patients and own colleagues who are experiencing loss and sudden bereavement.			
<i>Prioritisation</i>	13. Be able to prioritise the care of patients that are at risk of rapid deterioration.		29. Be able to prioritise the care of adults and older people who are at risk of rapid deterioration.	28. Be able to prioritise patient care and organise and manage own workload.
<i>Documentation</i>	14. Understand the inclusion and exclusion of information capture in patient documentation	22. Be able to document all aspects of care.		
<i>Collaboration and Multiprofessional Team Working</i>	7. Understand how to contribute to multi-professional team working and care delivery			
<i>Interagency working</i>	16. Be able to work as part of the inter-agency team to ensure safe discharge or transfer of patients from an emergency department.	23. Be able to work as part of the inter-agency team to ensure safe discharge or transfer of patients.		
<i>Interagency working</i>		24. Be able to work with families / carers to ensure safe discharge of patients.		
<i>Clinical Governance & Care Delivery: Auditing and Monitoring Care</i>	17. Be able to participate in clinical governance activities and/or research processes to develop practice in emergency care			

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<i>Risk Assessment / Management</i>	18. Be able to use information, protocol and procedure strategies to inform practice.			
<i>Health Education</i>	15. Be able to use health education and promotion to empower patients / carers to manage their own health within emergency care.			
<i>Personal Development</i>	19. Be able to create a personal development plan			
<i>Education & Preceptorship</i>	20. Be able to undertake a learning period/ programme in the emergency care environment			
<i>Mentorship</i>	21. Be able to provide support to junior members of the team and actively encourage their development.			
<i>Emotional Resilience</i>	22. Understand the impact of working in emergency care settings can have on own values and emotions			

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<i>Stress</i>	23. Understand the impact that caring for patients can have on own stress levels and that of colleagues and identify coping strategies.			
<i>Workload and Care Organisation</i>	24. Be able to develop techniques to plan and organise own workload effectively			
<i>Leadership and Development</i>	25. Be able to identify and use the principles of leadership to plan own practice			
<i>Role Modelling</i>	26. Understand how to develop as a role model in the emergency care setting.			
<i>Accountability</i>	27. Understand responsibility and accountability in own professional practice			

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<p><i>Mandatory Assessment Method</i></p>	<p>1) Multisource feedback (MSF) from (should aim to have ten different sources):</p> <ul style="list-style-type: none"> a. Line manager/clinical supervisor b. Four nursing colleagues: different grades as available e.g. Sister/Charge nurse, ENP, ANP, Staff nurse, manager c. Five Multidisciplinary team members (e.g. doctor, physio, OT, health care support workers, receptionists, domestics, porters) if unable to gain MSF from registered professionals other than nurses, must indicate in unit and have it verified by line manager / clinical supervisor 	<p>1) A minimum of two focused analytical case reviews on care delivered. These cases must:</p> <ul style="list-style-type: none"> a) have anonymised and verified patient record attached b) present patients born in different decades c) present the following: <ul style="list-style-type: none"> * patient who has self-harmed * patient who has an acute mental health problem 	<p>1) A minimum of six focused analytical reflections on care delivered. These cases must:</p> <ul style="list-style-type: none"> a. be a mix of case reviews (minimum of two) and have detailed annotated records (minimum of two) b. have an anonymised and verified patient record attached c. present patients born in different decades d. have the main focus on six different body systems of learner's choice e. include safeguarding and domestic abuse/intimate partner violence and how this would be managed. This can be covered by professional discussion should there not be an incidence of domestic violence f. present the following (these do not need to be in six different patients): <ul style="list-style-type: none"> i. Adult with critical injury or illness ii. Vulnerable adult with capacity issues iii. Adult with urgent endocrine problem iv. Older adult with sepsis v. Older adult with dementia vi. Frail older adult. 	<p>1) A minimum of six focused analytical reflections on care delivered. These cases must:</p> <ul style="list-style-type: none"> a. be a mix of case reviews (minimum of two) and have detailed annotated records (minimum of two) b. have an anonymised and verified patient record attached c. present patients born in the following year limits: <ul style="list-style-type: none"> i. 0 to 6 months ii. 6 months to 2yr iii. 2yr to 5yr iv. 6yr to 11yr v. 12yr to 15yr vi. 16yr to 18yr d. have the main focus on six different body systems of learner's choice e. include safeguarding and exploitation plus domestic abuse/intimate partner violence and how these would be managed. This can be covered by professional discussion should there not be an incidence of domestic violence f. present the following (these do not need to be in six different patients): <ul style="list-style-type: none"> i. critical illness or injury; one must be sepsis <ul style="list-style-type: none"> 1. infant 2. primary school age 3. teenager ii. digestive complaint iii. neurological complaint iv. breathing complaint v. teenager with urgent endocrine problem

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<p><i>Mandatory Assessment Methods</i></p>	<p>2) Minimum of two succinct analytical reflective accounts on the following:</p> <ul style="list-style-type: none"> a. Own emotional resilience management b. Supporting a junior colleague and role modelling 	<p>2) Five minicex assessments with annotated patient record including:</p> <ul style="list-style-type: none"> a) mini-mental health assessment b) patient who has taken an overdose c) patient who has deliberately self-harmed d) patient whose presentation makes them a high priority, requiring referral to mental health service 	<p>2) . A minimum of ten mini-clinical examinations (mini-cex) assessments. The mini-cex must:</p> <ul style="list-style-type: none"> a. Include three adults and three older people b. Present at least one patient from the following decade: teens, 20s, 30s, 40s, 50s, 60s, 70s, 80s. c. have the primary complaint on at least five different body systems d. be accompanied by a verified annotated record of the case or a case review on which the assessment took place. e. initial assessment and prioritisation for adult f. initial assessment and prioritisation for older adult g. episode of care provided for adult patient who requires resuscitation h. episode of care provided for an older adult who requires resuscitation i. episode of care provided for an adult/older adult who presents with a new acute complaint j. episode of care provided for an adult/older adult with an acute on chronic complaint k. episode of care for adult/older adult with cognitive impairment l. episode of care for an adult requiring emergency surgery 	<p>2) . A minimum of ten mini-clinical examinations (mini-cex) assessments. The mini-cex must:</p> <ul style="list-style-type: none"> a. include at least one from each of the following age ranges: <ul style="list-style-type: none"> i. 0 to 2yr ii. 2yr to 5yr iii. 6yr to 11yr iv. 12yr to 18yr b. have the primary complaint on at least five different body systems c. be accompanied by a verified annotated record / case review of the case on which the assessment took place d. include initial assessment and prioritisation for child under 2yr e. include initial assessment and prioritisation age 2yr to 5yr f. include initial assessment and prioritisation aged over 5yr g. include an episode of care provided for CYP who requires resuscitation which may include fluid resuscitation h. include an episode of care provided for a CYP who presents with a new acute complaint i. include an episode of care provided for a CYP with an acute on chronic complaint j. include an episode of care for a CYP requiring emergency surgery.

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<p><i>Mandatory Assessment Methods</i></p>	<p>3) Personal Development Plan and evaluation of progress</p>	<p>none</p>	<p>3) Demonstration of Procedural Skill (DOPS) assessments. The DOPS must be accompanied by a verified, annotated patient record of the case on which the assessment took place:</p> <ul style="list-style-type: none"> a. undertaking neurological assessment using GCS score b. undertaking neurological examination using GCS score on a patient with a recognised neurological deficit c. ECG recording d. Pain scoring including abbey pain scale e. Urinary catheterisation f. Venepuncture and cannulation g. Intravenous drug administration h. Set up and monitoring body warmer 	<p>3) . Demonstration of Procedural Skill (DOPS) assessments. The DOPS must be accompanied by a verified, annotated patient record of the case or a case review on which the assessment took place:</p> <ul style="list-style-type: none"> a. undertaking neurological assessment using GCS score in an infant under 2yr b. undertaking neurological assessment using GCS score in a child 2yr to 5yr c. undertaking neurological assessment using GCS score in a child 5yr to 11yr d. undertaking neurological assessment using GCS score in a child 12yr and older e. ECG recording f. pain scoring in children under 2yr g. pain scoring in children h. venepuncture and cannulae i. undertaking oxygen saturation recording in an infant under 2yr j. undertaking oxygen saturation in a child 2yr to 5yr

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