

The AFEN Qualification: Agored Cymru Level 6 Diploma in Emergency Nursing (Associate Level of Faculty of Emergency Nursing has been developed from these competencies.

These are the Associate level competencies (AFEN) and provide the following nine discreet units:

- 1. Core the numbering system for all the subsequent competency sets reflects the numbers of the core competencies
- 2. Adult
- 3. Older adult
- 4. Children and Young People
- 5. Psychological care
- 6. Pre-hospital care
- 7. Major incident
- 8. Minor injuries
- 9. Major trauma

Each unit is divided into 4 sections:

- 1. Knowledge applicants must show what they know
- 2. Intervention applicants must show what they can do
- 3. Patient management applicants must show how they can apply their knowledge and skills to patient care
- 4. Management of self and others applicants must show how they manage their own workload and manage their relationships other staff

Core Competencies Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy & physiology	Have a comprehensive knowledge of normal anatomy and physiology for all body systems	Apply an understanding of anatomy and physiology of all body systems
1.1.2 Anatomy & physiology	Apply comprehensive knowledge of anatomy, physiology and psychology to recognised patterns of illness and injury	Apply an understanding of anatomy, physiology and psychology to recognised patterns of illness and injury
1.2.1 Clinical assessment	Undertake and document a comprehensive, systematic and accurate assessment of the physical, psychological, social and spiritual needs of a patient in an emergency situation	Show that you can undertake an accurate, comprehensive assessment for a patient requiring emergency care, using recognised assessment tools
1.2.2 Assessment frameworks	Use a structured approach to individual clinical assessment	Recognise frameworks that enable systematic assessment
1.3.1 Prioritising care	Understands how to use structured approach for prioritising patient care	Describe structured approaches for prioritising patient care
1.4.1	Recognise patients with life-threatening	Differentiate life-threatening
Critical illness or	presentations, and the need for	presentations and details appropriate



Competency Number & Theme	Competency	Learning outcome
injury	immediate intervention	responses
1.5.1 Emotional & psychological reactions	Identify a range of immediate emotional and psychological reactions by patients or those with them to sudden & exacerbation of illness or injury	Identify the immediate emotional and psychological impact of sudden or acute exacerbation of illness or injury on the patient and others, and suggests possible coping mechanisms
1.6.1 Pharmacology & medicines management	Use comprehensive knowledge of the relevant pharmacology and medicines management for emergency patients. Including: competence in drug calculation and drug administration, implications of exceeding the therapeutic range for a medicine, the interactions between medicines and herbal remedies, the differences illicit drug use and excess alcohol use will have on medication	Discuss the application of relevant pharmacology and medicines management to emergency patients
1.7.1 Care needs	Understands and can recognise care needs, based on patterns of the actual and predicted illness or injury	Discuss how to provide an appropriate level of care and identify further care needs
1.8.1 Monitoring equipment	Identify and selects appropriate monitoring equipment for individual patients including: vital signs, oxygen saturations, coma scales, pupil monitoring, limb assessment, peak flow, cardiac monitoring, ECG recording, urine output, invasive blood pressure (arterial line), central venous pressure, pregnancy test, peripheral blood sugar, visual acuity	Identify a range of appropriate clinical indicators for using monitoring equipment
1.9.1 Personal influences on care	Provide a rationale for the care you deliver, taking into account social, environmental, spiritual and cultural influences	Show how social, spiritual and cultural influences impact on holistic care, informed by robust evidence
1.10.1 External influences on care	Provide a rationale for care delivery that takes account of legal, professional, political and economic influences	Show the multiple external influences which impact on holistic care

Faculty of Emergency Nursing Associate Level (AFEN) Original Competencies [AFEN Qualification has been developed from these]



Competency Number & Theme	Competency	Learning outcome
1.11.1 Standards and guidance	Summarises standards and guidance used in emergency care provided by the relevant professional governing body, e.g. Nursing & Midwifery Council (NMC) or equivalent, National Institute for Clinical Excellence (NICE), etc.	Show that you understand the use of policies and guidance on clinical practice
1.12.1 Legal and ethical principles	Summarises relevant legal and ethical principles in clinical practice including: maintenance and limits of confidentiality, determining capacity, obtaining consent, safeguarding, acting in best interests.	Describe legal and ethical principles relevant to emergency practice
1.13.1 Risk assessment	Identify health and safety issues in the work environment, This could include: infection control, manual handling, use and maintenance of medical devices, inoculation injuries, communicable diseases, chemical decontamination.	Discuss health and safety at work through the provision of a safe environment, clinical risk assessments and interventions Identify and apply risk assessment and management strategies in practice. • inoculation injuries • infection control • manual handling • chemical decontamination • communicable diseases • use & maintenance of medical devices
1.15.1 Accountability	Understand how your national regulatory body Code of Conduct applies to your own professional practice and conduct	Discuss responsibility and accountability for your professional practice
1.16.1 Leadership	Identify the principles of leadership and use them to negotiate and plan your own practice	Discuss principles of leadership in negotiating your own practice or in delegating this care to appropriate colleagues
1.17.1 Communication	Identifies effective interaction and communication strategies with patients and the multi-professional team	Discuss application of effective communication strategies for patients and the multi-professional team



Core competencies Section 2: Interventions

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment frameworks	Assess and prioritise patients according to clinical and psycho-social need	Perform timely, appropriate and effective assessment and prioritisation
2.2.1 Observation and evaluation	Undertake accurate and appropriate observations and interventions and effectively evaluate impact of interventions and observations in order to plan care.	Measure, interpret and record vital signs and other appropriate observations within appropriate time scales, evaluate interventions and observations and respond appropriately to findings through care planning
2.3.1 Critical situations	Identify critical and/or life-threatening situations	Initiate appropriate interventions in response to critical and/or life-threatening situations
2.4.1 Therapeutic interventions	Provide safe management of therapeutic interventions	Demonstrate safe delivery and monitoring of therapeutic interventions
2.4.2 Essential care	Apply the principles of essential care having identified self-care deficit.	Demonstrate effective essential care in addition to therapeutic interventions
2.5.1 Disseminating information	Report information effectively to the patient and other members of the health care team	Demonstrate the ability to access, use and disseminate information from a wide variety of sources, within the department, on admission, transfer or discharge, to support effective co- ordination of a patient's journey through the health care process
2.6.1 Pain assessment	Assess a patient's pain, having selected and used appropriate pain assessment tool e.g. numeric ratings, pictorial scales abbey pain score	Demonstrate the ability to carry out pain assessment, using a range of appropriate pain assessment tools
2.6.2 Pain relief	Identify suitable pain relief options for emergency patients: analgesia/local anaesthesia either administering under protocol (e.g. Patient Group Direction (PGD), using non-pharmacological methods of pain relief or initiating intervention by a prescriber	Administer suitable analgesia/local anaesthetic under protocol or prescription and use of non- pharmacological pain-relieving measures
2.7.1 Psychological impact	Recognise the psychological impact of an emergency situation on a patient and family/carers, and instigate appropriate interventions	Recognise and respond appropriately to the psychological impact of an emergency on a patient and family/carers and instigate appropriate interventions



2.8.1 Health promotion	Initiate appropriate health promotion strategies when providing emergency health care Including: smoking, alcohol use, illicit drug use, healthy eating, pregnancy advice, sexually transmitted disease, immunization	Apply appropriate health promotion principles to emergency care practice and evaluate health advice given
2.9.1	Recognise trigger points for challenging,	Recognise trigger points for challenging,
Conflict resolution	aggressive and violent behaviour, and	aggressive and violent behaviour and de-
	manage violent incidents until further support arrives	escalate such situations, recognising your own limitations and seeking assistance as
		necessary
2.10.1	Initiate patients' journeys on appropriate	Show that you can anticipate and
Care pathways	 care pathways. This could include: asthma 	instigate the preliminary stages of access to the care pathway for a patient
	sepsis	to the care pathway for a patient
	diabetic ketoacidosis	
	• DVT	
	• PE	
	chest pain	
	 fractured neck of femur 	



Core competencies: Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Identify, assesses, plan and evaluate appropriate care for patients, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs	Show that you can plan and evaluate appropriate and timely care for patients, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs
3.2.1 Care delivery to vulnerable patients	Assess and identify appropriate emergency care needs for patients with care and support needs, including those with learning disabilities, cognitive impairment and those living in abusive or challenging social circumstances	Identify which individuals are vulnerable or potentially vulnerable and evaluate the needs of these patients, delivering appropriate care
3.3.1 Communication with patients	Use communication skills to rapidly form effective therapeutic relationships	Show you can communicate effectively and achieve therapeutic relationships with patients and carers
3.3.2 Communication with colleagues/other professionals	Apply the principles of negotiation to determining patient care outcomes with senior staff/mentors	Communicate effectively with other health care professionals and managers, to negotiate appropriate patient care outcomes
3.4.1 Equity and dignity	Assist in delivering and developing an emergency service that shows equity and respect to all patients and staff	Demonstrate provision of care that treats patients with equity and dignity. Respond appropriately when patients or staff are not treated with respect and dignity
3.5.1 Consent and advocacy	Uphold ethical and legal principles, particularly showing respect for patients' views and their right to self- determination when making decisions about their care across a range of age groups	Discuss the use of ethical and legal principles to underpin decision-making about patients' care and demonstrate the principles of advocacy in the emergency care setting across a range of age groups
3.6.1 Emotional resilience	Encourage patients and families/carers to use helping and coping strategies during critical events	Show that you can help patients and families/carers to use helping and coping strategies during critical events
3.7.1 Patient empowerment	Use the principles of empowering patients and families during patient care events	Apply the principles of support and empowering patients and families during patient care events
3.8.1 Managing loss and bereavement	Use research-based practice in managing relatives, staff and friends who are experiencing loss and sudden bereavement	Apply best practice guidelines in managing relatives' staff and friends experiencing loss and sudden bereavement
3.9.1 Prioritisation	Identify the unit's and patients' priorities for care and organise your workload appropriately	Show professionalism and awareness of the scope of your own role within the emergency team. Show that you can



		manage yourself and your personal workload in this rapidly changing environment
3.10.1 Documentation	Ensure all aspects of care are fully documented	Produce complete and appropriate documentation – paper-based, electronic or hybrid
3.11.1 Health education	Discern which patients could self-care	Explain to patients/ carers how to self- care and where and when to seek further help
3.12.1 Collaborative team working	Contribute to effective multi-disciplinary team working and care delivery	Share workload, involving other team members in providing care and referring to team members for help and advice. Use best evidence on communication and team working to deliver optimum care
3.12.2 Multi-disciplinary team working	Be an effective team member in an emergency situation	Show that you can function effectively as a member of a team in an emergency situation
3.13.1 Inter-agency working	Work effectively with other health professionals and social care teams to ensure safe discharge or transfer of patients	Ensure safe discharge or transfer for patients who require support from other health or social care teams. Demonstrate effective communication with community support teams to facilitate continuity of care
3.14.1 Clinical governance and care delivery	Participate in clinical governance activities or research to develop practice in emergency care. e.g. complete an audit.	Participate in clinical governance activities and/or research processes to develop practice in emergency care.
3.15.1 Risk management	Use information/ protocols / procedures/ strategies to inform practice e.g. complete a risk assessment	Use risk management protocols/procedures/ strategies in practice



Core competencies: Section 4: Management of self and others

Competency Number & Theme	Competency	Learning outcome
4.1.1 Reflective practice	Apply a reflective approach to delivering care and analyse your own practice	Apply a reflective approach to your own practice, identifying strengths and weakness in your knowledge, skills attitudes and care delivery and plans of action to respond to these
4.2.1 Portfolio	Reflect on your care delivery, developing a progressive portfolio of evidence of your professional practice	Record your progressive practice in a professional portfolio of evidence and achievement of the competencies appropriate to your level of practice
4.3.1 Personal development	Negotiate and work with a mentor to develop a personal development plan, determining an action plan for achievement	Record a personal development plan and action plan to meet set targets, showing progressive achievement
4.4.1 Education and preceptorship	Undertake a preceptorship programme/period in the emergency care environment	Use appropriate teaching and learning principles to develop your own knowledge and skill in the emergency environment, and support other junior staff
4.5.1 Mentorship	Provide support to junior members of the team and actively encourage their development	Apply the principles of mentorship in your own professional practice
4.6.1 Emotional resilience	Identify the potential impact of working in emergency care settings on your own values and emotions, and use recognised emotional resilience strategies to respond appropriately	Show self-awareness about the potential impact of the range of emotions that can be provoked in the emergency environment. Demonstrate best practice & professionalism in your response
4.7.1 Stress	Identify ways to reduce the effects of stress on yourself and others in the team	Develop coping strategies to manage stress in yourself and others, showing an ability to provide supporting mechanisms to prevent and alleviate stress in others
4.8.1 Workload organisation	Use appropriate organisational techniques to plan and organise your own workload	Show you can plan, organise and deliver own workload effectively
4.9.1 Leadership and development	Use the principles of leadership to negotiate and plan your own practice	Use the principles of leadership in negotiating your own practice
4.10.1 Role modeling	Act as a role model in the emergency care setting	Show that you can work as a role model



Adult competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy & physiology	 Have a comprehensive knowledge of normal adult anatomy and physiology for all body systems: Respiratory Cardiovascular Neurological Gastrointestinal Genitourinary Reproductive Endocrine Musculo-skeletal Skin ENT Ophthalmic Immune 	Demonstrate a comprehensive understanding of anatomy and physiology of all body systems
1.1.2 Anatomy & physiology	Apply comprehensive knowledge of anatomy, physiology and psychology to recognised adult patterns of illness:• Non-traumatic airway obstruction• breathing difficulties• thromboembolic problems• cardiac problems• gastrointestinal disturbances• shock (all 4 types)• vascular problems• reduced level of consciousness• acute abdominal pain• diabetes• gynaecological problems• obstetric problems	Demonstrate and apply a comprehensive understanding of anatomy, physiology and psychology to recognised patterns of adult illness
1.2.1 Clinical assessment	Undertake and document a comprehensive, systematic and accurate assessment of the physical, psychological, social and spiritual needs of an adult patient in an emergency situation, as listed in 1.1.2 above	Undertake an accurate, comprehensive assessment for an adult patient requiring emergency care, using recognised assessment tools
1.2.2 Assessment frameworks	Use a structured approach to individual clinical assessment to manage a range of presentations as listed in 1.1.2. above	Recognise frameworks that enable systematic assessment of adult patients presenting with conditions listed in 1.1.2



1.3.1Prioritising care1.4.1Critical illness orinjury	Understands how to use structured approaches for prioritising care between adult patients presenting with common conditions (1.1.2 above) Recognise patients with life-threatening presentations and the need for immediate intervention. Including: • pneumothorax • tension pneumothorax • pericardial tamponade • cardiovascular compromise	Describes structured approaches for prioritising adult patient care. Differentiate life-threatening presentations for adult patients and details appropriate responses
	 septicaemia thromboembolus ectopic pregnancy electrolyte imbalance aneurysm AMI Meningococcal disease subarachnoid haemorrhage endocrine crises 	
1.5.1 Emotional & psychological reactions	Identify a range of immediate emotional and psychological reactions by adult patients or those with them	Identify the immediate emotional and psychological impact on the adult patient and others, and suggest possible coping mechanisms Discuss particular concerns of illness /injury on a working age adult e.g. • Inability to work • Inability to provide care for children or other dependents • Loss of usual role in life
1.7.1 Care needs	Provide care and anticipate needs for adult patients, based on patterns of the actual and predicted illness or injury (1.1.2 above)	Discuss how to provide an appropriate level of care and identify further care needs for adult patients presenting with complaints detailed in 1.1.2



Adult competencies: Section 2: Interventions

Competency Number & Theme	Competency	Learning outcome
2.2.1 Observation and evaluation	Undertake accurate and appropriate observations (from 1.8.1. above) and interventions (see 2.4.1 below) and effectively evaluate impact of interventions and observations in order to plan care.	Measure, interpret and record vital signs and other appropriate observations within appropriate time scales, and evaluate interventions and observations and respond appropriately to findings through care planning for conditions listed in 1.2.1 & 1.4.1, including reporting & escalating concerns
2.3.1 Critical situations	 Identify critical and/or life threatening situation. Including: Management of non-traumatic airway obstruction Management of the adult with breathing difficulties Management of the adult with life-threatening arrhythmias Management of the adult in shock Management of the adult with an altered level of consciousness Manage unexpected labour until the arrival of midwives 	Initiate appropriate interventions in response to critical and/or life threatening situations as identified in competency
2.4.1 Therapeutic interventions	Provide safe management of therapeutic interventions, which could include: airway management tracheostomy care venous cannulae arterial cannulae intravenous fluid & medication blood transfusion chest drains naso-gastric tube urethral or suprapubic catheters	Demonstrate safe delivery and monitoring of therapeutic interventions as listed in competency.



Adult competencies Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.2.1 Care delivery to vulnerable patients	Assess and identify appropriate emergency care needs for adults with care and support needs, including those with learning disabilities, cognitive impairment and those living in abusive or challenging social circumstances	Identify which adults are vulnerable or potentially vulnerable and evaluate the needs of these patients, delivering appropriate care
3.8.1 Managing loss and bereavement	Use research-based practice in managing relatives, staff and friends who are experiencing loss and sudden bereavement of an adult of working age	Apply best practice guidelines in managing relatives staff and friends experiencing loss and sudden bereavement of a working age adult
3.12.2 Multi-disciplinary team working	Be an effective team member in an emergency situation – initiate immediate management of an adult who suddenly deteriorates	Show you can function effectively as a member of a team in an emergency situation for an adult patient
3.13.1 Inter-agency working	Work effectively with other health professionals and social care teams to ensure safe discharge or transfer of patients	Ensure safe discharge or transfer for patients who require support from other health or social care teams. Demonstrate effective communication with community support teams to facilitate continuity of care



Older adult competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy & physiology	Identifies the impact of ageing on the anatomy and physiology of the body • Respiratory • Cardiovascular • Neurological • Gastrointestinal • Genitourinary • Reproductive • Endocrine • Musculo-skeletal • Skin • ENT • Ophthalmic • Immune	Demonstrate and apply an understanding of how the ageing process impacts on the anatomy and physiology of each body system
1.1.2 Anatomy & physiology	Apply an understanding of physiological and psychological responses of ageing to acute presentations:Non-traumatic airway obstructionbreathing difficultiesthromboembolic problemscardiac problemsgastrointestinal disturbancesshock (all 4 types)vascular problems (Inc. Aneurysm)reduced level of consciousnessacute abdominal paindiabetesgenitourinary problemsThromboembolic eventsOphthalmic problems i.e. visual problemsproblemsAural problems i.e. hearing problemsThermoregulatory problemsCollapseDecreased mobilityAcute and chronic confusion Anxiety	Integrate knowledge of the impact of ageing into patient care for a range of diagnoses which underpin presentations listed in competency
1.2.1 Clinical assessment	Undertake an accurate comprehensive assessment for the older person requiring emergency care, including:	Show you can use recognised assessment tools for a range of presenting complaints as listed in 1.2



1.2.2 Assessment frameworks	 falls assessment nutritional assessment pressure area risk assessment cognitive assessment functional assessment social assessment frailty/risk assessment Use appropriate assessment tools used in the older person to manage a range of medical and surgical complaints as listed in 1.2 (AFEN) 	Apply recognised assessment frameworks in the care of the older patient
1.3.1 Prioritising care	Use a structured approach for prioritising older patient care	Use a broad spectrum of knowledge to underpin decision making in the prioritisation of the older person presenting with the common complaints listed in 1.2 (AFEN)
1.4.1 Critical illness or injury	Identify the normal, abnormal and life threatening presentations in the Older Person and respond appropriately: pneumothorax tension pneumothorax pericardial tamponade cardiovascular compromise septicaemia thromboembolus ectopic pregnancy electrolyte imbalance aneurysm AMI Meningococcal disease subarachnoid haemorrahge endocrine crises poisoning	Explain and differentiate between the common misdiagnosed conditions listed in the competency
1.5.1 Emotional & psychological reactions	Identify a range of immediate emotional and psychological reactions by patients or those with them to sudden & exacerbation of illness or injury	Discuss the immediate emotional and psychological impact of illness on the older person and their carers and dependents Discuss responses and coping mechanisms resulting from illness relating to the older patient and their carers or dependents Discuss particular aspects of illness /behavioural changes on the older person e.g. • Loss of independence • Loss of confidence • Potential change of environment • Loss of ability to provide care for



		a partner or dependent
1.6.1 Pharmacology & medicines management	Use comprehensive knowledge of the relevant pharmacology for older emergency patients Demonstrate safe administration & dispensing of medicines for an older person	Apply relevant pharmodynamics and pharmokinetics of common older person presentations as listed in 1.2 & 1.4 (AFEN) . Discuss recognised clinical guidelines to facilitate effective pharmacological treatments for the older person Discuss the impact of exceeding the therapeutic range of medications Explain the problems related to multiple drug taking due to the interactions of medicines and herbal remedies with other medicines List the presenting signs and symptoms for patients presenting having taken an excess of a drug, an illicit drug or an excess alcohol
1.7.1 Care needs	Provide care and anticipate needs, based on patterns of the actual and predicted illness or injury in the older patient	 Anticipate and provide an appropriate level of care for the common complaints identified for the older person as listed in 1.2 & 1.4 (AFEN) Discuss interpretation and planning of appropriate nursing interventions to monitor the older adult patients conditions as listed in 1.2 and 1.4; these would include: Vital signs Glasgow coma scale Sedation scales e.g. Edinburgh Coma Score Pupil monitoring Limb assessment
		 Taking into account professional and legal frameworks, demonstrate an understanding of the principles for managing & monitoring care for older persons undergoing the following procedures: CVP monitoring Arterial pressure monitoring Insertion of chest drain Insertion of urethral or suprapubic catheters Insertion of nasogastric tube Rectal and vaginal examination



1.8.1 Monitoring equipment	 Select and deploy appropriate monitoring devices for individual older patient, including: Vital signs Oxygen saturation End tidal CO2 Arterial blood gas Peak flow Central venous pressure Cardiac monitoring 12 lead ECG Arterial line 	Discuss the clinical indications for using devices to monitor the older person's condition
1.9.1 Personal influences on care	Provide a rationale for the care you deliver, taking into account social, environmental, spiritual and cultural influences	Discusses the provision of individualised care that takes into account the patients' beliefs, cultural propensities and social situations for older people presenting with a range of complaints as listed in 1.2 and 1.4
1.10.1 External influences on care	Provide a rationale for care to older adult patients that takes account of legal, professional, political and economic influences	 Show how social, spiritual & cultural influences impact on holistic care for the older person, informed by robust evidence Discuss the implications of acting as an advocate for the older person Discuss the implications that the following National Service Frameworks have had on care delivery for the older person: coronary heart disease diabetes
1.11.1 Standards and guidance	Summarises standards and guidance used in emergency care provided by the relevant professional governing body, e.g. Nursing & Midwifery Council (NMC) or equivalent, National Institute for Clinical Excellence (NIHCE), etc.	 Show how policies and guidance are used in clinical practice with older patients Apply an extended scope of practice to caring for the older person Illustrate how local and national policies impact on caring for the older person e.g.: RCEM guidance on older people NICE Head Injury Guidance British Thoracic Society Guidelines on Asthma or COPD national guidance for condition - specific guidance



		Explain how economic issues impact on the older person
1.12.1 Legal and ethical principles	Summarises relevant legal and ethical principles in clinical practice including maintenance and limits of confidentiality, determining capacity, obtaining consent, safeguarding, acting in best interests.	Identify the social, spiritual and legal needs of the older adult, which may include isolation, physical disability, reduced mental capacity, loneliness Explain the legal & professional implications of providing a <i>duty of care</i> - on-care delivery for the older adult Explain the factors influencing and the legal implications of maintaining confidentiality for the older adult Demonstrate how to determine capacity in the older adult Explain how to obtain consent in the older adult. Explain the reporting mechanisms for suspected and actual safeguarding issues.
1.17.1 Communication	Demonstrate effective interaction and communication with older adults and the multiprofessional team	Communicate and develop therapeutic relationships with older adults presenting with a range of complaints, Demonstrate an ability to reassure friends and relatives of the older adult Form effective relationships with the multiprofessional team that facilitates evidence-based care for older adults

Older adult competencies: Section 2: Interventions

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment frameworks	Assess and prioritise older adult patients according to clinical and psycho-social need	Use assessment tools and frameworks designed for older adults to assessment and prioritisation of patients Identify and record potential triggers and 'red flags' which may lead to distress in older adults.
		Use other potential information sources where it is not possible for the patient to give an accurate history
2.2.1 Observation and evaluation	Undertake accurate and appropriate observations and interventions and effectively evaluate impact of interventions and observations in order to plan care for an older adult.	Record and interpret the following observations for a range of presenting complaints as listed in AFEN 1.2, underpinned by the older adult patient's own history and normal parameters: • Vital signs • Glasgow Coma Score • Oxygen saturations • Peak flow • Cardiac monitoring • 12 lead ECG • Invasive monitoring • Urine output (including fluid balance)
2.3.1 Critical Situations	Identify critical and/or life-threatening situations	 Initiate appropriate action in response to critical and/or life-threatening situations for the older person including: management of the airway management of the patient with breathing difficulties management of the patient with a life-threatening arrhythmia management of the patient with shock management of the patient with altered conscious level
2.4.1 Therapeutic interventions	Provide safe management of therapeutic interventions including drug and fluid calculation administration in the older adult patient.	For the following show that you understand how and why to use each, how to maintain patient safety and that you have the skill to provide the intervention or the ability to assist a senior clinician to provide the intervention

Faculty of Emergency Nursing Associate level competencies



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		 Airway adjuncts Intubation Oxygen and aerosol drug delivery CVP monitoring Insertion of chest drain Venepuncture & cannulation Arterial pressure monitoring Insertion of urethral and suprapubic catheters Insertion of nasogastric tube Rectal and vaginal examination Barrier and reverse barrier nursing Lumbar puncture
2.4.2 Essential care	Apply the principles of essential care having identified self-care deficit.	Demonstrate provision and planning for safe management of essential care needs for the older person including: • Self-care • Pain relief • Pressure ulcer risk assessment & management • Privacy and dignity • Personal and oral hygiene • Food & nutrition • Continence, bladder and bowel care
2.6.1 Pain assessment	Discuss the available pain assessment tools that could be used to care for the older person and choose the most appropriate for the individual patient, rationalising your choice.	Demonstrate the ability to carry out pain assessment, using a range of appropriate pain assessment tools
2.6.2 Pain relief	Discuss a range of non-invasive and therapeutic methods for assisting pain management for the older adult Choose the most appropriate medicine and administrative route for managing pain in an older adult	Administer suitable analgesia/local anaesthetic under protocol or prescription and use of non- pharmacological pain-relieving measures
2.7.1 Psychological impact	Provide effective psychological support to the older adult and their family during and following an emergency.	Recognise and respond appropriately to the psychological impact of an emergency on an older adult patient and their family/carers and instigate appropriate interventions
2.8.1 Health promotion	Discuss and evaluate the appropriate health promotion strategies for managing the health of older adults. E.g. • Immunisations	Apply appropriate health promotion principles to emergency care practice and evaluate health advice given



	 Falls prevention Hearing loss smoking alcohol use drug use/ dependency healthy eating 	
2.10.1 Care pathways	 Anticipate and instigate the preliminary stages of access to the care pathway for an older adult presenting to an emergency care setting. E.g. acute coronary syndrome fractured neck of femur stroke falls prevention 	Show that you can anticipate and instigate the preliminary stages of access to the care pathway for a patient



Older adult competencies: Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Identify, assesses, plan and evaluate appropriate care for older adults, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs	Show that you can plan and evaluate appropriate and timely care for older adults, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs
3.2.1 Care delivery to vulnerable patients	 Provide care for the special needs and sensitivities of the older adult with: sensory impairment physical disabilities learning disabilities protection issues including domestic violence complex care needs. 	Distinguish which individuals are vulnerable or potentially vulnerable Evaluate the care of patients who are vulnerable Write comprehensive care plans for vulnerable patients, including protection issues
3.3.1 Communication with patients	Discuss the principles of effective therapeutic communication with the older person, their carers and dependents. Demonstrate that you can quickly develop a therapeutic relationship with the older person with a) a sudden acute illness b) an acute on chronic complaint c) a life altering condition e.g. a cerebrovascular accident	Show that you can communicate effectively and achieve therapeutic relationships with patients and carers
3.3.2 Communication with colleagues/other professionals	Show you can negotiate evidence care outcomes for a variety of presenting complaints specific to the older adult	Communicate effectively with other health care professionals and managers, to negotiate appropriate patient care outcomes
3.4.1 Equity and dignity	Act as the patient's advocate, ensuring that care for the older adult is equitable and underpinned by principles of respect, privacy and dignity	Demonstrate provision of care that treats patients with equity and dignity. Challenge others when patients or staff are not treated with respect and dignity
3.5.1 Consent and advocacy	Discuss how the principles of advocacy apply to the issue of using restraint in confused older adults.	Discuss the use of ethical and legal principles to underpin decision-making about patient's care Discuss the principles of advocacy in the emergency care setting
3.7.1 Patient empowerment	Consistently develop a timely, therapeutic relationship with older adults and their families and empower them to play an	Apply the principles of support and empowering patients and families during patient care events



	integral role of the consent and care plan.	
3.8.1 Managing loss and bereavement	Demonstrate the social implications of having a partner or parent die e.g. a) council property lease for offspring when parent dies b) organiser of household management	Apply best practice guidelines in managing relatives staff and friends experiencing loss and sudden bereavement
3.9.1 Prioritisation	Identify a range of conditions which place the older adult at high clinical risk for rapid deterioration. Working from a limited patient history and interventions, prioritise the care for older adults who require critical, urgent and non-urgent interventions.	Show professionalism and awareness of the scope of your own role within the emergency team. Show that you can manage yourself and your personal workload in this rapidly changing environment
3.12.2 Multi-disciplinary team working	Be an effective team member in an emergency situation, initiating immediate management of an older adult who suddenly deteriorates	Show that you can function effectively as a member of a team in an emergency situation with an older adult
3.13.1 Inter-agency working	Work with other health professionals and social care teams to ensure safe discharge or transfer of older adults	Ensure safe discharge or transfer for older adults who require support from other health or social care teams. Demonstrate effective communication with community support teams to facilitate continuity of care



Children & Young People competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy & physiology	 Have a comprehensive knowledge of normal development of anatomy and physiology for all body systems; highlighting differences between adult and child: Respiratory Cardiovascular Neurological Gastrointestinal Genitourinary Reproductive Endocrine Musculo-skeletal Skin ENT Ophthalmic Immune 	Apply an understanding of the normal development of anatomy and physiology of all body systems
1.1.2 Anatomy & physiology	Apply comprehensive knowledge of anatomy, physiology and psychology to recognised patterns of illness in children of all ages:• Non-traumatic airway obstruction • breathing difficulties • thromboembolic problems • cardiac problems • gastrointestinal disturbances • shock (all 4 types) • vascular problems • reduced level of consciousness • acute abdominal pain • diabetes and other endocrine and metabolic disorders • genitourinary problems	Demonstrate and apply a comprehensive understanding of anatomy, physiology and psychology to recognised patterns of illness in children of all ages
1.2.1 Clinical assessment	Undertake and document a comprehensive, systematic and accurate assessment of the physical, psychological, social and spiritual needs of children/ young people in an emergency situation, as listed in 1.1.2 above	Demonstrate the ability to undertake an accurate, comprehensive assessment for children/young people requiring emergency care, using recognised assessment tools
1.2.2 Assessment frameworks	Use a structured approach to individual clinical assessment to manage a range of presentations as listed in 1.1.2. above	Recognise frameworks that enable systematic assessment of children/young people presenting with conditions listed



		in 1.1.2
1.3.1 Prioritising care	Understands how to use structured approaches for prioritising patient care between unwell children/ young people presenting with common conditions (1.1.2 above)	Describes structured approaches for prioritising care of children/young people
1.4.1 Critical illness or injury	Recognise children/young people with life-threatening presentations and the need for immediate intervention. Including: pneumothorax tension pneumothorax cardiovascular compromise septicaemia subarachnoid haemorrhage endocrine crises	Differentiate life-threatening presentations for children/young people and detail appropriate responses
1.5.1 Emotional & psychological reactions	Identify a range of immediate emotional and psychological reactions by unwell or injured children/young people or those with them	Identify the immediate emotional and psychological impact on unwell or injured children/young people and others, and suggests possible coping mechanisms
1.6.1 Pharmacology & medicines management	 Use comprehensive knowledge of the relevant pharmacology and medicines management for children/young people. Including: competence in drug calculation and drug administration fluid calculations and fluid administration implications of exceeding the therapeutic range for a medicine the interactions between medicines and herbal remedies the differences illicit drug use and excess alcohol use will have on medication 	Discuss the application of relevant pharmacology and medicines management for children/young people
1.7.1 Care needs	Provide care and anticipate needs for children/young people, based on their age and patterns of the actual and predicted illness or injury (1.1.2 above)	Discusses how to provide and adjust levels of care and identifying further care needs for children/young people presenting with complaints detailed in 1.1.2
1.8.1 Monitoring equipment	Identify and select appropriate monitoring equipment for individual patients including: • vital signs	Identify a range of appropriate clinical indicators for using monitoring equipment, including modifications required to achieve compliance with

Faculty of Emergency Nursing Associate Level (AFEN) Original Competencies [AFEN Qualification has been developed from these]



1.12.1 Legal and ethical principles	 oxygen saturations coma scales pupil monitoring limb assessment peak flow cardiac monitoring ECG recording urine output urinalysis pregnancy test peripheral blood sugar visual acuity Summarises relevant legal and ethical principles in clinical practice including: maintenance and limits of confidentiality determining capacity determining craser competence obtaining consent safeguarding 	monitoring from children/young people Describes legal and ethical principles relevant to emergency practice and age of the children/young person
1.17.1 Communication	Identify effective interaction and communication strategies with children, young people, their parents/carers, siblings and the multi-professional team	Discuss application of effective communication strategies for children, young people, their parents, siblings and the multi-professional team



Competency Number & Theme	Competency	Learning outcome
2.2.1 Observation and evaluation	Undertake accurate and appropriate observations (from 1.8.1. above) and interventions (see 2.4.1 below) and effectively evaluate impact of interventions and observations in order to plan care.	Measure, interpret and record vital signs and other appropriate observations within appropriate time scales, and evaluate interventions and observations and respond appropriately to findings through care planning for conditions listed in 1.2.1 & 1.4.1, including reporting & escalating concerns
2.3.1 Critical situations	 Identify critical and/or life-threatening situation. Including: Management of a child with non-traumatic airway obstruction management of the child with breathing difficulties management of the child in shock management of the child with an altered level of consciousness 	Initiate appropriate interventions in response to critical and/or life- threatening situations as identified in competency.
2.4.1 Therapeutic interventions	Provide safe management of therapeutic interventions, which could include:	Demonstrate safe delivery and monitoring of therapeutic interventions as listed in competency.
2.4.2 Essential care	Apply the principles of essential care having identified child's/young person's level of physical and emotional development and ability of parents to assist with this.	Demonstrate effective essential care in addition to therapeutic interventions
2.5.1 Disseminating information	Report information effectively to the patient and other members of the health care team	Demonstrate the ability to access, use and disseminate information from a wide variety of sources, within the department, on admission, transfer or discharge, to support effective co- ordination of a child/young person's journey through the health care process

Children & Young People competencies: Section 2: Intervention



2.6.1 Pain assessment	Assess a child or young person's pain, having selected and applied appropriate pain assessment tool e.g. numeric ratings, pictorial scales.	Carry out pain assessments on children/young people, rationalising the choice of pain assessment tool
2.10.1 Care pathways	Initiate patients' journeys on appropriate care pathways. This could include:	Demonstrate the ability to anticipate and instigate the preliminary stages of access to the care pathway for a child/young person



Children & Young people competencies: Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.2.1 Care delivery to vulnerable patients	Assess and identify appropriate emergency care needs for children and young people who have physical or learning disabilities or are living in abusive or challenging social circumstances	Demonstrate the ability to distinguish which children/young people are vulnerable or potentially vulnerable and evaluate effectively the needs of these patients delivering appropriate care
3.3.1 Communication with patients	Use communication skills to rapidly form effective therapeutic relationships with children/young people of various ages; using techniques such as play, distraction, preparation.	Demonstrate the ability to communicate effectively and achieve therapeutic relationships with children, young people and their carers
3.5.1 Consent and advocacy	Uphold ethical and legal principles, particularly showing respect for children's and parents' views and their respective rights to making decisions about their care across a range of age groups	Discuss the use of ethical and legal principles to underpin decision-making about patient's care and explain the principles of advocacy in the emergency care setting across a range of age groups
3.8.1 Managing loss and bereavement	Use the principles of research-based practice in managing relatives, staff and friends who are experiencing loss and sudden death of a child/young person	Demonstrate that you apply best practice guidelines in managing relatives' staff and friends experiencing loss and sudden death of a child/young person
3.12.2 Multi-disciplinary team working	Be an effective team member in an emergency situation – initiate immediate management of an acutely unwell or injured child/young person	Demonstrate the ability to function effectively as a member of a team in an emergency situation for a child/young person



Psychological care competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy & physiology	Have a comprehensive knowledge of anatomy and physiology for all body systems and the impact on psychological/mental health symptoms/behaviours	Demonstrate and apply knowledge of anatomy and physiology and the impact on psychological/mental health symptoms/behaviours
1.1.2 Anatomy & physiology	Have knowledge of the International Classification of Diseases (Mental Health most recent publication) in relation to patient's presentation.	Apply the physiological and psychological responses to illness to patient care Discuss patients presenting in an emergency setting with mental health symptoms that may have a physical cause and patients who have physical illness masked by their mental health symptoms
1.2.1 Clinical assessment	Identifies the appropriate assessment tools to undertake a comprehensive, systematic and accurate nursing assessment of the psychosocial needs of the patient in an emergency situation	Discuss the rationale for the application of systematic assessment tools, used in the care of patients with mental health issues in line with best practice guideline
1.3.1 Prioritising care	Identify local and national frameworks to determine prioritisation of care of those presenting with evidence of psychological/mental health issues	Describe current frameworks and discuss how they underpin the decision making and to take subsequent actions
1.4.1 Critical illness or injury	Recognise that the patient with mental ill health can be critical ill and be aware of the associated risk factors	Discuss the relationship between mental health and life-threatening presentations
1.5.1 Emotional & psychological reactions	Identify a range of more specific perceived emotional and psychological reactions of those presenting with Mental Health, Psychological and Learning Disability to the Emergency Department.Identify the common presentations including the symptoms, behaviours and risk factors (red flags) of those presenting to your department	List the possible triggers which may result in psychological distress in all patients Discuss presenting physical signs and symptoms which may be indicative of an underlying psychological issue: e.g. pain, inappropriate behaviour, culture, confusion
1.6.1 Pharmacology & medicines management	In relation to mental health issues, explain: polypharmacology therapeutic drug levels & importance of patient compliance Interaction of alcohol &	Discuss the application of relevant pharmacology for the patient with mental health/psychological care presentations and the appropriateness of this in the emergency care setting. Discuss the application of relevant



1.0.1	 polypharmacology Pharmacology & co morbidity 	pharmacodynamics and pharmacokinetics identifying the impact of not achieving or exceeding the therapeutic range of medications List the presenting signs and symptoms for patients presenting having taken an excess of a drug, an illicit drug or an excess alcohol
1.8.1 Monitoring equipment	Identify the psychological impact of utilising monitoring equipment on patients with mental health issues	Select strategies to engage and inform in order to engage and inform the patient in order to reduce the stressors of applying monitoring equipment
1.9.1 Personal influences on care	Identify person centred nursing framework to take into account patients strengths in participation of their own care	Discuss influences from National Strategies in Mental Health care provision Discuss the application of effective communication skills for patients and the multi-professional team Discuss the provision of person centred care that takes into account the patients' beliefs, cultural propensities and social situations
1.10.1 External influences on care	Identify social, spiritual & cultural influences that impact on person centred care for the patient with mental health/psychological care needs.	Identify relevant legal and mental health frameworks in Emergency Care with particular reference to: Mental Health Act Human Rights Act Mental Capacity Act Consent to Share. Discuss the availability of self-directed resources and signposting to relevant agencies for those presenting with Mental Health issues
1.11.1 Standards and guidance	Describe local and national policies impacting on care for the patient with mental health/psychological needs.	Discuss the duty of care and ethical and professional principles that underpin nursing practice with reference to relevant Mental Health evidence-based practice
1.12.1 Legal and ethical principles	Identify the principles of respect, equality & diversity in relation to the nursing care of those patients with mental health/psychological care needs.	Discuss the nurse's responsibilities and accountability for those patients who decline treatment Discuss the balance between 'human



		rights' and issues of detention against the patient's wishes in relation to Mental Health legislation Recognise and articulate how these principles show respect for the patient's ability & capability in decision making and identify the need to advocate when appropriate
1.13.1 Risk assessment	Identifies the need for the provision of a safe environment for patients with mental health issues, staff and others	 Describe the potential impact of the environment on those patients with mental health/psychological care needs learning difficulties developmental and pre-existing neurological deficit, including dementia psychoses Identify risk assessment frameworks for patients with Mental Health, Learning Disability or psychological needs
1.15.1 Accountability	Identify own limitations when caring for patients with mental health/psychological care needs and identify future learning needs	Discuss the duty of care of the nurse to provide safe care for patients with mental health/psychological care needs with reference to their own limitations as outlined in the code of conduct
1.16.1 Leadership	Identify the principles of leadership in determining care outcomes for patients with mental health or psychological care needs	Define the concepts of negotiating, delegating, influencing, advocacy and other aspects of leadership to ensure safe and effective care of those patients with mental health/psychological needs
1.17.1 Communication	Identify the relevant literature in relation to the impact of the attitudes of nurse and other Health Care Professionals on patients with mental health/psychological needs.	Demonstrate how you modify your own attitude, behaviour and language when interacting with other professionals/agencies in order to respectively meet the needs of those presenting with mental ill-health, psychological disturbance and learning disability



Psychological Care competencies: Section 2: Interventions

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment frameworks	Undertake an accurate clinical history, nursing assessment, evaluate, prioritise and appropriately plan care to meet the person centred care needs of the patient with mental health /psychological needs and those with learning difficulties.	Use appropriate mental health assessment tools and frameworks to undertake an effective assessment and prioritisation of patients Identify and record potential triggers and 'red flags' which may lead to psychological distress in patients. Utilise other potential sources to obtain information where it is not possible for the patient to give an accurate history and document these
2.2.1 Observation and evaluation	Identify and initiate observations which are appropriate to the care of a patient with mental health and psychological care needs	Initiate appropriate monitoring of the individual, including physiological parameters, or those pertaining to psychological presentation i.e. conversational content, behaviour responses.
2.3.1 Critical situations	Recognise when you need expert help in critical situations relating to patients with mental health /psychological needs and those with learning difficulties	Identify and seek appropriate assistance whilst maintaining safety for a patient with mental health /psychological needs in a critical situation and other life- threatening situations following local policy
2.4.1 Therapeutic interventions	Discuss barriers to and strategies used to develop the therapeutic relationship for those patients with mental health/ psychological needs and learning disability	 Demonstrate skills of: Empathy Respect/Dignity Inclusion of patients and others to develop therapeutic relationship. Provide safe and effective care for the patient who lacks mental capacity or who is a recipient of care against their wishes (a patient detained under the mental health act) applying the principles of respect and advocacy
2.9.1 Conflict resolution	Discuss the impact behaviours, attitudes and limitations that may escalate/de- escalate conflict situations with particular reference to patients with mental health/ psychological needs and learning	Identify mental health, psychological triggers that impact on conflict Recognise own limitations and take action to ensure safety of self, patient, others



disability	and environment



Psychological Care competencies: Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Identify which individuals are vulnerable or potentially vulnerable and their care needs and initiate action.	Use structured processes to develop a comprehensive care plan for vulnerable patients, including protection issues.
		Instigate and evaluate the care of patients who are vulnerable
3.2.1 Care delivery to vulnerable patients	Identify clinical situations which predispose to vulnerability i.e. alcohol withdrawal, drug detoxification /overdose	Select the specific actions required to protect the vulnerable and minimise risk. Initiate immediate management of the patient who is perceived to be at
		risk/deterioration due to vulnerability i.e. alcohol withdrawal, drug detoxification/overdose
3.3.1 Communication with patients	Discuss the principles of therapeutic communication with the person with mental health/ psychological care needs	Recognise psychological distress for those patients with mental health/ psychological needs and learning disability.
		Utilize communication skills to intervene to minimise distress
3.3.2 Communication with colleagues/ other professionals	Demonstrate the ability to negotiate with other healthcare professionals/organisations to facilitate evidence-based care outcomes for	Apply the principles of negotiation with other agencies and AHP's to develop a care pathway for the patient with mental health/psychological needs.
	patients with mental health/psychological needs. Apply the principles of engagement with the patient to determine physical and	Utilise a range of verbal and non –verbal skills to support the development of a therapeutic relationship, and recognise the impact of the nurse's own behaviour
	psychological care that will minimise the impact on patient's distress response	
3.8.1 Managing loss and bereavement	Interpret the psychological and social implications of suicide and the impact the death has on family and friends	Demonstrate compassion in care to the family, friends and staff
3.10.1 Documentation	Apply mental health frameworks to provide a comprehensive documentation of the patient of care which reflects the physical and psychological presentation and care planning	Produce complete and appropriate documentation for patients with mental health/psychological needs. Demonstrate compliance with relevant legal frameworks



3.13.1 Inter-agency working	Articulate how the different roles can impact on the patient's care plan and	Demonstrate effective communication with mental health liaison teams,
	outcome for patients with mental	community psychiatric nurses and other
	health/psychological needs	health care providers to promote continuity of care and safe discharge



Psychological Care competencies: Section 4: Management of self and others

Competency Number & Theme	Competency	Learning outcome
4.4.1 Education and preceptorship	Identify own educational and development needs in the care of the patient with mental health/psychological care needs	Reflect on own strengths and learning needs in relation to the patient with mental health/psychological care needs and develop a personal learning plan
4.5.1 Mentorship	Identify the needs of students and junior staff in relation to the care of the patient with mental health and psychological care needs	Recognise the needs of students /junior staff in relation to patients with mental health/psychological care needs Promote the use of relevant evidence- based practice
4.6.1 Emotional resilience	Demonstrate awareness and regulation of own attitude and emotions when caring for patients with mental health/psychological care needs	Reflect on own attitudes and behaviours in regard to mental illness Identify own coping strategies for managing these emotions and seeking support and development
4.7.1 Stress	Recognises the impact caring for patients with mental health/psychological care needs has on the emotions of others	Identify and apply available support and coping strategies which can be utilised personally and by others


Pre-hospital Care competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.2 Anatomy & physiology	Integrate knowledge of the range of pre- hospital care settings, describing the impact that these may have on different pathophysiology and psychopathology	Use knowledge of pre-hospital care settings, to recognise patterns of illness and injury
1.2.1 Clinical assessment	Demonstrate a comprehensive knowledge of assessment of the physical, psychological, social and spiritual needs of patients in pre-hospital care settings	Using recognised assessment tools, extract relevant information from a range of pre-hospital documentation to inform the undertaking of accurate, comprehensive assessment of patients requiring emergency care.
1.2.2 Assessment frameworks	Demonstrate sound knowledge of clinical assessment frameworks in pre-hospital settings (BASICS, FPHC, JR CALC Guidelines)	Integrate sound knowledge of clinical assessment frameworks in pre-hospital settings (BASICS, FPHC, JR CALC guidelines), relating this to a structured approach to clinical assessment for a range of patients with complex needs; identify the MIMMS principles i.e. CSACTTT, command levels, METHANE
1.3.1 Prioritising care	Demonstrate knowledge of factors which influence prioritisation in pre-hospital settings: e.g. Triage (telephone, face to face) NHS Cas, AMPDS, CBD.	Identifies factors which influence prioritisation in pre-hospital settings: e.g. Triage (telephone, face to face), NHS Cas, AMPDS, CBD.
1.6.1 Pharmacology & medicines management	Demonstrate knowledge of common pharmacological agents that are given in pre-hospital care settings identifying the appropriate management of them. Demonstrate knowledge of current protocols for the administration of pain relief in pre-hospital care settings	Identify specific pharmacological agents that will be used in pre-hospital care settings
1.8.1 Monitoring equipment	Describe equipment & resource limitations with regard to the environment e.g. heat, safety,	Select equipment & resources, identifying the limitations of these with regard to the environment (e.g. heat and safety), and the appropriate monitoring of patients, in pre-hospital care
1.10.1 External influences on care	Demonstrate an awareness of pre- hospital providers' roles and responsibilities, and their accountability. Summarise the roles of professionals working in pre-hospital settings (e.g. fire,	Given a selection of pre-hospital care scenarios, identify pre-hospital providers' roles and responsibilities, to identify different approaches to patient care within the pre-hospital care team.



	police, emergency medical services), identifying the legal and ethical frameworks that govern their practice	
1.13.1 Risk assessment	Describe the principles of 'scene' safety and management within pre-hospital incident environments. Discuss additional measures to be taken when in or near a crime scene (e.g	Using patient scenarios, identify the principles of 'scene' safety and management within pre-hospital incident scenarios, and identify measures to ensure the safety of patients, self and other MDT members.
	preservation of evidence in a crime scene such as RTA, terrorist incident, serious assault, major incident). Identify the underpinning principles of	Identify added measures to be taken when in or near a crime scene (e.g. preservation of evidence in a crime scene such as RTA, terrorist incident, serious
	rescue, extraction and transportation procedures.	assault, major incident).
	Identify a range of transportation methods available for transport and transfer.	Identify rescue, extraction and transportation procedures to plan appropriate responses.
	Describe methods of transportation, e.g. by road, air or boat, for patients within the pre-hospital care setting, and apply	Using patient scenarios, discuss methods of transportation for a range of patient situations
	the principles of safe in-transit care.	Select the correct principles of in-transit safety and management within pre- hospital incident environments
1.14.1 Procedural frameworks	Describe regional and national emergency medical systems	Apply knowledge of EMS to identify the options for providing care to patients in pre-hospital care settings



Pre-hospital Care competencies: Section 2: Interventions

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment frameworks	Apply the principles of pre-hospital care triage systems to assess and prioritise patients in pre-hospital care settings	Perform timely, appropriate and effective assessment and prioritisation
2.2.1 Observation and evaluation	Demonstrate how to undertake appropriate observations and nursing interventions, and evaluate the impact of those interventions on patients in pre- hospital care settings	Measure, interpret and record vital signs and other appropriate observations within appropriate time scales, evaluate interventions and observations and respond appropriately to findings through care planning
2.4.1 Therapeutic interventions	 Demonstrate safe delivery of essential therapeutic interventions and monitoring of them, for patients in prehospital care settings, including: stabilisation of life-threatening injuries splintage and support for injuries provision of effective pain relief strategies 	Demonstrate safe delivery and monitoring of therapeutic interventions.
2.4.2 Essential care	Show how to care for patients who have suffered entrapment, and use the resources, roles and capabilities of others to manage patients in an entrapment	Demonstrate effective essential care in addition to therapeutic interventions
2.7.1 Psychological impact	Recognise the psychological impact of pre-hospital care on the individual and the family/carer, and instigate appropriate interventions wherever possible	Recognise and respond appropriately to the psychological impact of an emergency on a patient and family/carers and instigate appropriate interventions



Pre-hospital Care competencies: Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Show you can plan and evaluate appropriate and timely care for patients, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs and vulnerability	Show that you can plan and evaluate appropriate and timely care for patients, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs
3.3.2 Communication with colleagues/other professionals	Describe the challenges of communicating with other health care professionals and patients about care outcomes in pre-hospital care settings, indicating methods of overcoming them	Communicate effectively with other health care professionals and managers, to negotiate appropriate patient care outcomes
3.6.1 Emotional resilience	Identify factors which may influence the development of PTSD as a result of pre- hospital care events	Show that you can help patients and families/carers to use helping and coping strategies during critical events
3.12.1 Collaborative team working	Explain MDT working within pre-hospital care settings Apply the principles of effective communication and team working when delivering care, to identifying own role and responsibilities within this team	Share workload, involving other team members in providing care and referring to team members for help and advice. Use best evidence on communication and team working to deliver optimum care



Major incident competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.2 Anatomy & physiology	Use clinical knowledge to assess patients attending as a result of a major incident	Describe the mechanisms of injury and their potential impact on the anatomy and physiology of individuals affected by major incidents e.g. chemical incidents, major terrorist firearms attacks (MTFA), maritime incidents. Describe their impact on patterns of illness and injury presenting in these situations
1.2.1 Clinical assessment	Incorporate knowledge of major incident triage/ assessment tools	Describe the range of patient triage / assessment tools used in major incidents
1.2.2 Assessment frameworks	Identify the structured approaches to clinical assessment of patients in major incidents	Describe accepted triage principles specific to major incidents; identify the initial assessment and triage appropriate to the incidents and explain the principles of the record keeping used
1.3.1 Prioritising care	Identify the triage systems applicable to major incidents	Identify current policies and procedures adopted for the prioritisation of patients in major incidents. Articulate the underpinning structures and skills required to undertake: • triage labeling • triage sieve • triage sort • Trauma Revised Triage Score Explain how the major incident triage process in the prioritisation of patients differs from triage in an emergency care setting
1.4.1 Critical illness or injury	Integrate knowledge of life threatening presentations and the need for immediate intervention in major incident situations	Identify how patients present in life threatening situations during major incidents Initiate basic life support Communicate essential information to lead nurses in allocated areas to enable essential interventions to take place
1.5.1 Emotional & psychological reactions	Recognise the emotional/psychological reactions that may occur in patients, staff and families/carers during and after major incidents	Describe the emotional/psychological reactions that may occur in patients and families/carers during and after a major incident and the appropriate



		interventions that should be employed to support them
1.6.1 Pharmacology & medicines management	List the drugs designated for use in patients involved in major incidents, prior to their arrival in the emergency department and explain why these are made ready.	Explain which drugs are designated for use in patients involved in major incidents, prior to their arrival in the emergency department and what effects these might have.
1.7.1 Care needs	Identify the appropriate level of care and anticipate further care needs for individual patients in major incidents	Explain the appropriate level of care and anticipate further care needs for individual patients in major incidents
1.8.1 Monitoring equipment	Identify the governance for the use of patient monitoring equipment during major incidents	Discuss the impact major incidents have on access to resources with the emergency department. Describe the use of equipment specific to major incidents e.g. protective clothing, mobile team, radio, casualty labeling system etc. Explain their use in practice during major incidents
1.10.1 External influences on care	Select the ethical and nationally approved frameworks to support decision making and prioritisation in major incidents	Explain why it is important to use ethical and nationally approved frameworks to support decision making and prioritisation in major incidents. Describe how these legal and ethical principles are applied in a major incident situation
1.11.1 Standards and guidance	Demonstrate how responsibility and accountability for professional practice of registered nurses alters during major incidents and how the governance frameworks of professional bodies and regional emergency services underpin it	Describe the governance principles which apply to emergency nurses involved in major incidents and the governance frameworks of the professional bodies and regional emergency services
1.13.1 Risk assessment	Discuss the selection and use of appropriate protective equipment and describe the decontamination process in major incident settings	Describe the decontamination process used in major incidents for chemical or radioactively contaminated patients. Locate essential equipment and prepare a decontamination area from a hazardous material for patients. Describe how to access organisational and partner agency resources for dealing with HAZMAT and CBRN decontamination
1.13.2 Risk assessment	Identify the current principles and policies for regional and national major incident emergency planning.	Differentiate between emergency and disaster, natural and man-made incidents.



	Describe the basic principles of emergency major incident planning	 Explain the four phases of emergency planning: Preparedness Response Recovery Post –Incident activities
1.14.1 Procedural frameworks	Differentiate between the definitions/ terminology and rationale of major incidents, as applied by different agencies e.g. health service, ambulance, fire and police services	Articulate the definitions and rationale of major incidents, as applied by different agencies e.g. health service, ambulance, fire and police services
1.15.1 Leadership	Describe the NHS and EMS major incident plans for your region	 Explain the responses of emergency departments, the NHS and the EMS to major incidents. Outline the chain of command in these organisations during major incidents. Explain the emergency care setting plan relating it to the practice of registered nurses. Explain own specific role when a major incident plan is activated
1.17.1 Communication	Identify the communication principles and systems employed by the EMS and the emergency department during a major incident	Identify from whom directions might be received and to whom information must be communicated in a major incident. Explain the role of effective communication for patients, families and other team members in a major incident



Major incident competencies: Section 2: Interventions

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment frameworks	Apply the principles of patient assessment and triage in major incidents	Perform effective assessment and demonstrate the use of the major incident triage system in an emergency care setting
2.5.1 Disseminating information	Assess, use and disseminate information from key sources during a major incident, to ensure the effective co-ordination of patient admission, transfer and discharge from the emergency department	Assess, use and disseminate information from key sources during a major incident, contributing to the effective co- ordination of patient admission, transfer and discharge from the emergency department. Identify key personnel to refer to for issues beyond own knowledge/skills during a major incident
2.6.1 Pain assessment	Undertake rapid assessment of patients' pain levels using recognised pain assessment scores and select appropriate analgesia	Apply pain scoring assessment systems to patients in major incidents. Identify and access the appropriate pain management protocol for patients in major incidents
2.7.1 Psychological impact	Articulate the potential psychological impact of a major incident on patients, relatives and others identifying the care protocols used to support individuals	Initiate protocols for the psychological support of patient's relatives and others during a major incident
2.10.1 Care pathways	Describe the care pathways identified within the emergency department major incident plans	Apply the core competencies to major incident settings Explain the role of action cards within major incident and use them in caring for patients Apply the patient care pathways identified for use in the event of a major incident



Major incident competencies: Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Apply the emergency department major incident protocols to the assessment, planning and care of patients.	Assess, plan and evaluate care for patients in major incidents.
		Apply the principles of equality and diversity in the decision making and delivery of care to patients in major incidents
3.4.1 Equity and dignity	Explain the roles and responsibilities of other team members during major incidents, to ensure that the principles of equity and dignity are maintained	Describe the roles and responsibilities of self and other team members during major incidents, to ensure that the principles of equity and dignity are maintained
3.5.1 Consent and advocacy	Identify the legal and ethical principles which underpin decision making and advocacy, that apply in major incidents.	Explain the legal and ethical principles which underpin decision making and advocacy, and ensure the application of these principles in a major incident
3.8.1 Managing loss and bereavement	Apply the evidence base and compassionate care practices to inform the management of relatives and friends experiencing loss and bereavement as a result of a major incident	Integrate a Major Incident Plan for communication with relatives and the general public, with the principles of compassionate care. Apply protocols to manage loss and bereavement and to prevent the development of PTSD
3.9.1 Prioritisation	Apply your emergency care setting's procedures in the prioritisation of patients during a major incident/ exercise	Apply major incident protocols to the prioritisation of patients within the emergency department and to the organisation of own workload
3.10.1 Documentation	Apply the principles of accurate documentation when working with patients involved in major incidents	Explain the legal and governance principles for record keeping within a major incident scenario Systematically document all aspects of care, incorporating any special
3.12.1 Collaborative team working	Describe the roles and responsibilities of other members of the team during a major incident	Apply the principles of emergency department nursing practice during a major incident, interpreting own role, the role of other members of the emergency

Faculty of Emergency Nursing Associate level competencies



		department multi-disciplinary team, and the role of the emergency medical services Work in partnership with other members of the emergency department and the multi-disciplinary team, in the delivery of the protocols of care for patients
3.14.1 Clinical governance and care delivery	Participate in an emergency department major incident exercise evaluating the preparedness of the plans.	Describe the process of evaluating the emergency care setting for a major incident/exercise and identify appropriate responses to findings Explain why it is important to compare major incident exercise plans with performance Participate in regular preparation exercises and activities in relation to major incident planning
3.15.1 Risk management	Apply the principles of health and safety, confidentiality, and security during and after a major incident Explain the responsibilities for health and safety, and how this is maintained during major incident exercises	Identify how a registered nurse maintains key aspects of confidentiality and security during and after a major incident Describe the responsibilities of individual practitioners for health & safety, and articulates how this is maintained during major incident exercises to optimise the functioning of the emergency department

Minor injury competencies: Section 1: Knowledge

Competency	Competency	Learning outcome
Number & Theme		
1.1.1	Identifies the anatomy involved in:	Use your knowledge of anatomy and
Anatomy &	 Bones, joints and movements of 	physiology to identify common patterns
physiology	the limbs.	in minor injury presentation
	 Head and face 	
	• Eye	
	• Ear	
	throat	
	• Skin	
	• Trunk	
	and it relationship with mechanism of	



	injury	
1.2.1 Assessment frameworks	Define the anatomy of the upper & lower limb Head Face ENT Skin and landmarks to aid assessment, treatment and first aid	Using recognised assessment tools, explains the anatomy of the upper and lower limb, and identifies the land marking for the assessment of neurovascular status to support decision making
1.3.1 Prioritising care	Define the types of injuries or signs and symptoms that require urgent intervention (e.g,. limbs with neurovascular deficits, critical skin, significant injury)	Identify factors that influence the prioritisation of patients presenting with minor injuries (e.g. Neurological signs/ symptoms, mechanism of injury, pain, neurovascular status of limb)
1.5.1 Emotional & psychological reactions	Describe the range of emotions and anxieties that occur when individuals require an intervention for a minor injury (e.g. local anaesthetic, debridement of wound or burn, wound closure, casting, inoculations)	Identify the emotions and anxieties that occur from interventions to manage minor trauma Identify strategies to reduce psychological stress
1.6.1 Pharmacology & medicines management	List the common pharmacological interventions used in the management of minor injury presentations	Describe the common pharmacological interventions used in the management of minor injury presentations
1.7.1 Care needs	Define the principles of limb immobilisation using casts, splints, and slings and the potential complications and discharge considerations Describe when and how to provide the use of walking aids List the factors that influence wound healing and the components involved in	Integrate the knowledge of limb immobilisation to select the appropriate approach Select the correct walking aid and is able to explain the correct techniques for the measurement and use of walking aids and subsequent discharge advice Integrate the knowledge of wound care assessment and wound healing to select optimal wound care strategies
	wound assessment.	
1.11.1 Standards and guidance	Select the of key documents that influence care of the patient presenting with injuries (e.g. NICE Head Injury, CG 176, SIGN guidelines, thromboprophylaxis for lower limb casts (RCEM))	Apply the guidance provided by key documents to ensure optimal care of patients presenting with minor injuries



1.13.1 Risk assessment	Explain how key documents influence the care of patients presenting with minor injuries, including those detailed in the competency statement	Apply knowledge of the health and safety issues when delivering care to minor injury patients



Minor Injury Competencies: Section 2: Nursing intervention

Competency Number & Theme	Competency	Learning outcome
2.1 Assessment	Identify and select appropriate tools/methodology to underpin holistic and effective assessment and prioritisation for patients presenting with a minor injury (e.g. Manchester Triage, early warning scores, CWILTED, Pain scores)	Rationalise decisions for the depth and frequency of evaluations required to minimise clinical risk, for patients presenting with minor injury Apply the principles of the selected assessment tools to assess and prioritise minor injury patients. Identify minor injury patients that require immediate intervention or transfer
2.2.1 Observation & evaluation	Use appropriate strategies to undertake, measure, interpret and record vital signs in patients presenting with minor injuries Demonstrate the use of recognised tools to undertake vital sign monitoring Identify patients requiring vital sign recording & monitoring including GCS, oxygen saturation, pupil reaction, for patients with minor injuries Identify & undertake visual acuity assessments	Interpret vital signs & observations for patients presenting with minor injury and identify when action is required
2.3.1 Critical situations	Use knowledge of signs and symptoms of impending deterioration of health in the patient who presents initially with a minor injury	Apply knowledge, skills, timely assessment and intervention for the undiagnosed patient who presents with a minor injury but develops symptoms that require an emergency intervention to prevent deterioration
2.4.1 Therapeutic interventions	 Demonstrate ability to perform the following interventions: Application of first aid measures Application and removal of casts Splinting/strapping/bracing Trephining Administration of topical eye drops / ointments Testing the tears of the eye for pH, everting eye lid and undertaking an eye washout Cleaning and irrigating wounds Closing wounds using glue and steristrips 	Select and rationalise the choice of therapeutic interventions as listed in competency



	 Application and securing of primary and secondary dressings to wounds. 	
2.6.1 Pain assessment	Apply knowledge of pain assessment tools to effectively record a pain score for every patient	Choose appropriate pain-relieving measures to manage limb pain, including application of slings, splints, ice and analgesia Safely administer appropriate analgesia under PGD to manage patient pain
2.6.2 Pain relief	Identify appropriate analgesia and non- pharmacological measures to match patients pain	Safely administer appropriate analgesia under PGD to manage patient pain, including creams, ointments, liquids, tablets & gases
2.8.1 Health promotion	Select the appropriate health promotion strategies to safeguard, provide education about, and improve the health of patients presenting with a minor injury.	Access health promotion information and actively use opportunities to undertake health promotion

Minor Injury Competencies: Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.9.1 Prioritisation	Know the common minor injuries presenting to the service, the appropriate initial observations required, and to whom to communicate any adverse findings	Accurately identify the more acutely injured at their point of arrival to the service, to query their pain score and clinical indication for early analgesia/anti- pyretic, to facilitate the dispensing of relevant medicine and/or first aid, and reports concerns appropriately



Major Trauma Competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.2 Anatomy & physiology	Apply comprehensive knowledge of anatomy, physiology and psychology to recognised patterns of injury	 Apply an understanding of anatomy, physiology and psychology to recognised patterns of injury: Frontal Impact RTA Side Impact RTA Rear Impact RTA Ejection RTA Falls from height Blunt trauma Penetrating trauma Crush injury
1.2. Assessment frameworks	Use a structured approach to individual clinical assessment	 Participate in the primary survey of trauma patients Airway patency Cervical Spine control Breathing / chest assessment Circulatory status including haemorrhage control Disability: Neurological status Exposure/ Environment Estimation of burns size Diagnostic interventions Participate in the secondary survey of trauma patients
1.3.1 Prioritising care	Understands how to use structured approach for prioritising elements of patient care, including how and when to activate a trauma call	Describe how major trauma care is structured and approaches to prioritising essential elements of patient care during the emergency care stage of trauma care
1.4.1 Critical illness or injury	 Recognise patients with life-threatening presentations, and the need for immediate intervention Airway obstruction Tension Pneumothorax Open Pneumothorax Massive Haemothorax Flail Chest Cardiac Tamponade Catastrophic haemorrhage Major burns Cold injuries Trauma in pregnancy 	Differentiate these life-threatening presentations and detail the appropriate responses for each



1.5.1 Emotional & psychological reactions	Identify a range of immediate emotional and psychological reactions by patients or those with them to traumatic injury	Identify the immediate emotional and psychological impact of sudden injury on the patient and others, and suggests possible coping mechanisms
1.6.1 Pharmacology & medicines management	Use comprehensive knowledge of the relevant pharmacology and medicines management for trauma patients Medical gases Resuscitation fluids Analgesia Tranexamic acid Major haemorrhage protocol blood products Anticoagulation reversal agents 	Discuss the application of relevant pharmacology and medicines management to trauma patients
1.7.1 Care needs	Understands and can recognise care needs, based on patterns of the actual and predicted injuries	Discuss how to provide an appropriate level of care and identify further care needs related to actual and predicted injuries
1.8.1 Monitoring equipment	Identify and select appropriate monitoring equipment for individual trauma patients including: • vital signs • oxygen saturations • pupil monitoring • cardiac monitoring • urine output • invasive blood pressure (arterial line) monitoring • central venous pressure monitoring • Rapid infusor/fluid warmer • Invasive temperature monitoring • Patient warming devices	Identify a range of appropriate clinical indicators for selecting monitoring equipment
1.10.1 External influences on care	Provide a rationale for care delivery that takes account of legal, professional, political and economic influences on trauma including structure of local trauma network	Show the multiple external influences which impact on holistic care
1.11.1 Standards and guidance	Summarises standards and guidance used for early trauma care provided by the local Trauma Network and NICE: • Secondary transfer • Bypass criteria • Isolated head injury	Show that you understand the use of policies and guidance on clinical practice



	 Spinal injury Burns Time critical transfer Major haemorrhage protocol Organ transplant guidance (NHS Blood & Transplant 2012 & 2013) 	
1.12.1 Legal and ethical principles	Summarises relevant legal and ethical principles in clinical trauma practice including: maintenance and limits of confidentiality determining capacity obtaining consent safeguarding road traffic legislation firearms legislation related to healthcare	Describe legal and ethical principles relevant to emergency trauma practice
1.13.1 Risk assessment	Identify health and safety issues related to trauma in the work environment. This could include: infection control manual handling whilst maintaining in-line spinal stabilization using nationally recognised equipment and techniques inoculation injuries chemical decontamination forensic procedures adjustments to usual procedures to accommodate bariatric patients	Discuss health and safety at work through the provision of a safe environment, clinical risk assessments and interventions Identify and apply risk assessment and management strategies in practice
1.17.1 Communication	Receive, record & escalate pre-alert calls Identify effective interaction and communication strategies with patients and the multi-professional team where a large team are working around an immobilized patient Identify options for structured handovers to other healthcare professionals	Discuss application of effective communication strategies for trauma patients and the large multi-professional team



Major Trauma Competencies: Section 2: Interventions

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment frameworks	Assess and prioritise trauma patients according to clinical and psycho-social need	Perform timely, appropriate and effective assessment and prioritisation Discuss structured assessment frameworks which can be used with trauma patients
2.2.1 Observation and evaluation	Undertake accurate and appropriate observations and interventions and effectively evaluate impact of interventions and observations in order to plan care. This will include: • Vital signs • Oxygen saturations • Capillary refill time • Glasgow Coma scale • Urine output • Fluid balance • Cardiac monitoring • 12 lead ECG • Invasive monitoring	Measure, interpret and record vital signs and other appropriate observations within appropriate time scales, evaluate interventions and observations and respond to findings
2.3.1 Critical situations	 Identify critical and/or life-threatening situations Airway obstruction (actual and potential) Oxygenation and ventilation difficulties Hypovolaemia Reduced conscious level Spine and Spinal cord trauma Neurogenic shock 	Initiate appropriate interventions in response to critical and/or life- threatening situations
2.4.1 Therapeutic interventions	 Assist in providing safe management of therapeutic interventions Use of airway adjuncts Suction Sedation Intubation/Rapid Sequence Induction (RSI) CO₂ monitoring (capnography/end tidal CO₂ measurement) Needle jet insufflation Creation of surgical airway Needle decompression Chest drain insertion 	Demonstrate preparation, safe delivery and monitoring of therapeutic interventions



	 Thoracotomy 3-sided dressing for open pneumothorax Intraosseus access Central venous access and monitoring Arterial pressure monitoring Trauma tourniquets Haemostatic agents Pelvic binder Femoral splints Primary burns dressings Nasogastric insertion Urethral and suprapubic catheters Traumatic perimortem caesarean section 	
2.4.2 Essential care	 Apply the principles of essential care having identified the self-care deficit and adjusting for the injuries sustained e.g. 15 – 30° head-up tilt in head injured patients 90° sitting position for facial burns Warming for hypothermic patients 30° lateral tilt for pregnant patients Altered reflexes and thermoregulation in spinal injured patients 	Demonstrate effective essential care in addition to therapeutic interventions
2.5.1 Disseminating information	Report information effectively to the patient and other members of the health care team	Demonstrate the ability to access, use and disseminate information from a wide variety of sources, within the department, on admission, transfer or discharge, to support effective co- ordination of a patient's journey through the health care process
2.6.1 Pain assessment	Assess a trauma patient's pain, having selected and used appropriate pain assessment tool e.g. numeric ratings, pictorial scales abbey pain score	Demonstrate the ability to carry out pain assessment, using a range of pain assessment tools available for trauma patients
2.6.2 Pain relief	 Identify suitable pain relief options for trauma patients taking account of altered physiology of injury: Dressings Positioning Splinting Pharmacological options 	Administer analgesia/local anaesthetic under protocol or prescription and use of non-pharmacological pain-relieving measures suitable for trauma patients
2.7.1	Recognise the psychological impact of a	Recognise and respond appropriately to



Psychological impact	traumatic injury on a patient and their family/carers, and instigate appropriate interventions	the psychological impact of a traumatic injury on a patient and family/carers and instigate appropriate interventions
2.9.1 Conflict resolution	Recognise trigger points for challenging, aggressive and violent behaviour related to sudden injury and/or disagreement on the way major trauma should be managed e.g. • Hypoxia • Hypovolaemia • Hypoglycaemia • Substance misuse • Pre-existing cognitive deficit • Use of c-spine collar	Recognise trigger points for challenging, aggressive and violent behaviour and de- escalate such situations, recognising your own limitations and seeking assistance as necessary
2.10.1 Care pathways	 Initiate patients' journeys on appropriate care pathways This could include: Preparation for early transfer to theatre/interventional radiology Preparation for internal hospital transfer Preparation for secondary transfer to another hospital 	Show that you can anticipate and instigate the preliminary stages of access to the care pathway for a patient



Major Trauma Competencies: Section 3: Patient management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Identify, assesses, plan and evaluate appropriate care for trauma patients, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs	Show that you can plan and evaluate appropriate and timely care for trauma patients, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs
3.2.1 Care delivery to vulnerable patients	Assess and identify appropriate emergency care needs for trauma patients with care and support needs, including those with learning disabilities, cognitive impairment and those living in abusive or challenging social circumstances	Identify which individuals are vulnerable or potentially vulnerable and evaluate the needs of these patients, delivering care that accounts for both their traumatic injury and their underlying needs
3.3.1 Communication with patients	Use communication skills to rapidly form effective therapeutic relationships with immobilized patients and their relatives	Show you can communicate effectively and achieve therapeutic relationships with immobilized patients and their relatives
3.3.2 Communication with colleagues/other professionals	Apply the principles of negotiation to determining patient care outcomes with senior staff/mentors Demonstrate structured handovers to next shift or next care location	Communicate effectively with other health care professionals and managers, to negotiate appropriate patient care outcomes
3.12.2 Multi-disciplinary team working	Be an effective team member in a major trauma situation	Show that you can function effectively as a member of a team in a major trauma situation

* The AFEN competencies include all elements of the national TQUINS Level 1 competencies