

The MFEN Qualification: Agored Cymru Level 7 Diploma in Emergency Nursing (Member Level of Faculty of Emergency Nursing is currently being developed from these competencies.

These are the Member level competencies (MFEN) 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:

- 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 and physiology	Critically appraise your knowledge of complex anatomy and physiology for all body systems, to identify different disease presentations.	Differentiate knowledge and apply this to various disease processes, seeking senior advice when necessary.
1.1.2 Anatomy and physiology	Critically appraise your knowledge of anatomy, physiology and psychology to enable you to differentiate patient problems, actual or potential, and identify appropriate care outcomes.	Apply your knowledge to recognised patterns of illness and injury and determine effective care outcomes.
1.2.1 Clinical Assessment	Apply various approaches to undertaking a comprehensive, systematic and accurate assessment of a patient in an emergency situation, assessing physical, psychological, social and spiritual needs.	Distinguish alternative methods of undertaking an accurate comprehensive assessment for a patient requiring emergency care, using recognised assessment tools.
1.2.2 Assessment frameworks	Distinguish different structured approaches required for individual clinical assessment for patients with complex care needs.	Determine and apply an appropriate, structured approach for individual clinical assessment for patients with complex care needs.
1.2.3 Assessment frameworks	Evaluate care delivery of clinical assessments, using structured approaches to determine an action plan.	Appraise structured approaches for clinical assessment to determine action plans.
1.3.1 Prioritising care	Analyse structured approaches to prioritising patient care, identifying strengths and weaknesses in the process and identifying alternative effective strategies.	Use a broad spectrum of knowledge to underpin decision-making about prioritising patient care and access to treatment.
1.4.1 Critical illness or injury	Review patients effectively, identifying their potential to become critically ill, advise the team and respond appropriately.	Use extensive knowledge to underpin your decisions when identifying patients who could become critically ill.
1.5.1 Emotional and psychological reactions	Analyse current evidence about the emotional and psychological impact of sudden or acute exacerbation of illness or injury on patients and others. Identify, select and apply different approaches to delivering care.	Interpret the evidence-base about the emotional and psychological impact of sudden or exacerbation of illness and injury.
1.6.1 Pharmacology and medicines management	Critically appraise the impact of the range of available pharmacology and medicines management appropriate to a patient's problem.	Differentiate the range, therapeutic value(s) and medicines management appropriate to the individual patient.
1.7.1 Care needs	Distinguishes different care needs, based on complex patterns of a patients' actual and perceived illness and injury.	Interpret patterns of the illness and/or injury of patients with complex care needs,



		identifying appropriate action and intervention strategies.
1.8.1 Monitoring equipment	Audit and appraise the effective deployment of appropriate monitoring equipment, teaching other staff how to use this equipment	Analyse and report on the effective use of monitoring equipment. Teach new staff to use this equipment.
1.9.1 Personal influences on care	Critically appraise the approaches available for care, taking into account social, spiritual and cultural influences and demonstrate decision-making skills effective in the delivery of this care.	Differentiate between a range of interventions, to develop informed and responsive interventions that take account of social, spiritual and cultural influences.
1.10.1 External influences on care	Critically appraise the approaches available for care delivery that take account of legal, professional, political and economic influences.	Differentiate and understand the influences which impact on holistic care.
1.11.1 Standards and guidance	Analyse new and current emergency practice against standards and guidance provided by the relevant professional governing body, e.g. NMC or equivalent, NIHCE, Department of Health etc. and corroborates to inform future policy and practice guidance.	Interpret current guidance from professional bodies e.g NMC, NIHCE, DH etc. and corroborates practice or to determine new practice.
1.12.1 Legal and ethical principles	Analyse and apply relevant legal and ethical principles in clinical practice.	Interpret and apply legal and ethical principles to emergency practice and to determining new practice, underpinned by awareness of quality of care, diversity issues and human rights.
1.13.1 Risk assessment	Apply clinical governance and risk management strategies for health and safety in practice.	Analyse and act on clinical governance and risk management strategies for health and safety in emergency care settings.
1.15.1 Accountabilit y	Understand the implications of responsibility for yourself and others and demonstrate this through your practice.	Demonstrate accountability for professional practice for yourself and others. Demonstrate personal proficiency in practice.
1.16.1 Leadership	Apply the principles of leadership and negotiation to directly influence patient care and staff development.	Demonstrate that you apply the principles of leadership and negotiation to influence patient care.

Core Competencies: Section 2: Intervention

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment	Undertake assessment of patients presenting with complex care needs and prioritise care, demonstrating clinical decision-making processes.	Determine appropriate priorities for patients with complex care needs.



2.2.1 Observation and Evaluation	Evaluate care within appropriate time scales for patients who have inconsistent clinical signs and symptoms, adapting and integrating various approaches to assessment.	Use your experience from a wide range of approaches to undertake proficient evaluations of patients with inconsistent signs and symptoms within appropriate time scales.
2.3.1 Critical situations	Select interventions for patients in critical and/or life-threatening situations.	Demonstrate use of a range of interventions for patients in critical and/or life-threatening situations.
2.4.1 Therapeutic interventions	Provide clinical care interventions for patients with complex care needs.	Identify and use appropriate interventions for patients with complex care needs.
2.5.1 Disseminating information	Apply the principles of essential care and handover this information effectively to other members of the health care team.	Access, use and disseminate information from a wide variety of sources, within the department, on admission, transfer or discharge.
		Supervise and facilitate others in disseminating information.
2.6.1 Pain assessment	Assess and manage patients' pain across a range of patient presentations.	Demonstrate how to assess and manage patients' pain, across a range of patient presentations and complexity.
2.6.2 Pain relief	Contribute to the introduction/review and application of pharmacological pain management initiatives.	Apply pharmacological principles to the development and review of pain management initiatives.
	Evaluate the effectiveness of pain management initiatives.	
2.7.1 Psychological impact	Assess the psychological condition of a patient and family/carers, instigate appropriate interventions and plan further	Demonstrate assessment of the psychological condition of a patient and their family/carers and instigate appropriate interventions.
	care.	Supervise others providing, evaluating and planning psychological care.
2.8.1 Health promotion	Integrate health promotion strategies into care delivery.	Integrate health promotion strategies into care delivered in the emergency setting.
2.9.1 Conflict resolution	De-escalates potential or actual aggressive/confrontational situations and assists those less experienced in managing such situations.	Outline the principles of de-escalating potential or actual aggressive confrontational situations and manage potential or actual violent incidents safely in practice.
	Manage actual or potential violent incidents safely.	



Core competencies: Section 3: Patient Management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Provide emergency care for patients which considers age, gender, ethnicity, culture, values and spiritual beliefs.	Demonstrate timely emergency care assessment, care planning and evaluation for patients with complex care problems, considering patients' age, gender, ethnicity, culture, values and spiritual beliefs.
		Interpret and challenge assumptions that affect the delivery of evidence-based emergency care.
3.1.2 Care delivery	Contribute to the development of practice, protocols, procedures, policies and guidelines to meet patients' care needs.	Assist in formulating new practices to meet patients' care needs in the emergency care setting.
3.2.1 Care delivery to vulnerable patients	Provide emergency care for vulnerable patients and those with complex learning needs.	Demonstrate timely and individualised emergency care assessment, provision and evaluation for vulnerable patients, ensuring that protection and risk assessment principles are applied.
3.2.2 Care delivery to vulnerable patients	Contribute to the development of practice to meet the needs of vulnerable patients.	Assist in formulating new practices to meet the needs of vulnerable patients in the emergency care setting.
3.3.1 Communication with patients	Communicate appropriately with patients, including those who have learning disabilities or communication problems.	Determine and use a range of communication techniques appropriately to meet the needs of all patients, including those with learning disabilities or communication difficulties.
3.3.2 Communication with colleagues	Negotiate patient outcomes with the multi- professional, multi-agency team, working across boundaries to effectively manage patients' journeys through the emergency care setting.	Communicate effectively with the multi- professional and multi-agency team to negotiate appropriate patient care outcomes and effectively manage patients' journeys through the emergency care setting.
3.3.3 Communication with wider healthcare team	Intervene positively in care delivery when other members of the health care team are experiencing difficulty communicating with patients.	Intervene in care delivery when other members of the health care team are experiencing difficulty communicating with patients, whilst being sensitive to the effect of your intervention on the team member.
3.4.1 Equity and dignity	Help to create an environment that offers equity and dignity to all patients and to the multi-professional team.	Evaluate how patients and team members are treated with equity and dignity in the workplace, developing a report with an action plan.
		Intervene to enable equity and dignity in the workplace.



3.5.1 Consent and advocacy	Determine patients' capacity for decision- making, gaining consent and negotiating patient care with patients and the multi- professional team.	Demonstrate accurate assessment of patients' decision-making capacity, obtaining consent, respecting patients' right to self-determination while making decisions about their care. Act as a patients' advocate in emergency care
		delivery.
3.5.2 Consent and advocacy	Develop patient care guidelines that are underpinned by relevant legal and ethical principles, particularly in relation to patients' right of self-determination.	Develop patient care guidelines that are underpinned by relevant legal and ethical principles.
3.6.1 Emotional resilience	Encourage patients and families/carers to use helping and coping strategies during critical events.	Explain the principles of encouraging patients and families/carers to use helping and coping strategies during critical events.
3.7.1 Patient empowerment	Use the principles of support, empowerment and remaining person-centred when developing strategies for patient care and when supervising others.	Demonstrate that you apply the principles of empowerment and remaining personcentred when developing strategies for patient care and when supervising others.
3.7.2 Patient empowerment	Enable patients to make an informed decision.	Identify and deliver resources to enable patients to make informed decisions.
3.8.1 Managing loss and bereavement	Develop and/or evaluate the effectiveness of methods used to manage relatives and friends who are experiencing loss and sudden bereavement.	Critically analyse current practice against best practice guidelines on the management of relatives and friends experiencing loss and sudden bereavement.
3.9.1 Prioritisation	Ensure safety in prioritisation of patient care.	Consistently balance prioritising care for individuals, groups of patients and the service.
3.10.1 Documentation	Record patient history, assessments, interventions, evaluations and determine a plan of care for a range of patients, including those that have complex care needs and difficulties communicating.	Record succinct, relevant patient histories, assessments, interventions, evaluations and determine plans of care for patients with a range of complaints including those with complex care needs and difficulties in communicating.
3.12.1 Multi- professional	Contribute to and evaluate personal impact in the work of the multi-professional team. Delegate work to appropriately qualified	Demonstrate working as an effective multi- professional team member, showing sensitivity, support and motivational skills.
team working	colleagues Take patient and shift handovers Refer patients to appropriate specialist inpatient or community colleagues	Demonstrate that you can empower junior members of the multi-professional team.
3.12.2 Multi- professional team working	Activate a resuscitation or trauma team in advance. Function as team leader in an emergency situation.	Explain and demonstrate the principles of leading a team in an emergency situation.



3.12.3 Multi- professional team working	Modifies personal behaviour to contribute to or manage crisis situations.	Demonstrate modification of responses to support the multi-disciplinary team in crisis situations.
3.12.4 Multi- professional team working	Manage patient care in the emergency care setting or a designated area in the emergency care environment.	Demonstrate principles of patient care management in day-to-day management of the emergency care environment, or a designated area within it.
3.13.1 Inter-agency working	Work across agency boundaries to ensure safe discharge of patients.	Explain the principles, benefits and barriers to cross-boundary working, to ensure safe discharge of patients from the emergency care setting.
3.14.1 Clinical governance and care delivery	Contribute to clinical governance activities and/or leading on an aspect of research, evaluating findings and/or report writing.	Explain the rationale for clinical governance activities and/or research, evaluating findings and determining action plans.
3.15.1 Risk assessment	Use your unit/organisation's risk assessment and management strategies to underpin practice development.	Demonstrate application of the risk management strategies in developing practice, policies, procedures, protocols and guidelines.
3.16.1 Policy and practice development	Contribute to the overall management and policy development for the emergency care setting.	Negotiate further developments of the emergency service, including policy and practice development.



Core Competencies: Section 4: Management of Self and Others

Competency Number & Theme	Competency	Learning outcome
4.1.1 Reflective practice	Reflect in and on your 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 portfolio of evidence of progressing in your professional practice that depicts proficiency in emergency care.	Record your progressive practice in a professional portfolio of evidence that demonstrates proficiency in emergency care.
4.3.1 Personal development	Develop and maintain your personal development plan and actively manage your own professional development.	Write a personal development plan based on your action plan and record your professional development.
4.4.1 Education and preceptorship	Participate in education programmes providing preceptorship, facilitation, supervision and assessment of other staff.	Help to develop others, both in formal education and during clinical learning and assessment.
4.5.1 Mentorship	Mentor others, designing or evaluating a personal development plan for them and helping them to achieve an established action plan.	Mentor others as they develop and evaluate their personal development plan guiding them to achieve their targets.
4.5.2 Mentorship	Assess and provide written feedback evidence for practice portfolios for other staff.	Provide written portfolio evidence for others.
4.6.1 Emotional resilience	Be responsive to your own needs and others' in dealing with competing demands in a rapidly changing environment. Demonstrate effective coping skills in responding to these competing demands.	Demonstrate responsiveness to your needs and others' in dealing with competing demands in a rapidly changing environment.
4.6.2 Emotional resilience	Assist other health care professionals in encouraging patients and families to use helping and coping strategies during critical events.	Explain how to assist other health care professionals to encourage patients and families to use helping and coping strategies during critical events.
4.7.1 Stress	Apply best practice in identifying and managing the effects of stress on yourself and others. Demonstrates the ability to manage your own stress. Assist in managing stress in the workplace.	Manage work-related stress in yourself and identify it in others. Monitor and evaluate working practices to identify stressful situations early and intervene appropriately.
4.7.2 Stress	Manage conflict and provide constructive criticism to resolve it.	Demonstrate how to manage conflict and show the ability to provide constructive feedback to resolve it.



4.7.3	Assist others to develop consistent, calm, professional behaviour in response to the	Enable other staff to develop their own
Stress	emotional challenges of emergency care.	coping strategies for managing stress.
4.8.1 Workload and care organisation	Integrate organisational skills in planning own and others' work.	Demonstrate flexibility in organising own and others' work.
4.9.1 Leadership and development	Integrate the principles of leadership and negotiation into your practice, to directly influence patient care, your own and others' development.	Apply a range of leadership and negotiation skills to influence patient care, your own and others' development.
4.10.1 Role Modelling	Act as a role model in all areas of the emergency care settings.	Show evidence of being a role model to others in the emergency care setting.
4.11.1 Staff supervision	Supervise junior members of the team in making assessments and determining care needs.	Describe strategies for supervising junior members of the team to deliver safe patient care.
4.11.2 Staff supervision	Supervise others in undertaking delivery and evaluation of patient care needs.	Support other staff in evaluation and escalation of care needs.
4.12.1 Prioritisation	Assist others to develop their prioritisation skills.	Articulate how to guide others to develop competence in prioritising care on an individual and group basis.



Adult Competencies: Section 1: Knowledge

Competency Number &	Competency	Learning outcome
1.1.1 Anatomy and physiology	Have a comprehensive understanding of adult anatomy and pathophysiology for all body systems: Respiratory, Cardiovascular, Neurological, Gastrointestinal, Genitourinary, Reproductive, Endocrine, Musculo-skeletal, Skin, ENT, ophthalmic, and immune systems.	Consistently demonstrate a working knowledge of pathophysiology of all body systems together with the symptoms and major warning signs (red flags) for common complaints of each.
1.1.2 Anatomy and physiology	Critically appraise your knowledge of adult anatomy, physiology, pathophysiology and psychology to enable you to diagnose patient problems, actual or potential, identifying appropriate care outcomes.	Apply your knowledge of recognised patterns of adult illness to determine effective care outcomes.
1.2.1 Clinical assessment	Apply various approaches to undertaking a comprehensive, systematic and accurate assessment of a patient in an emergency situation, assessing physical, psychological, social and spiritual needs including those with co-morbidities.	Distinguish alternative methods of undertaking an accurate comprehensive assessment for a patient requiring emergency care, using recognised assessment tools, paying particular attention to those with co-morbidities.
1.2.2 Assessment frameworks	Distinguish different structured approaches required for individual clinical assessment for adult patients with complex care needs.	Determine and apply an appropriate, structured approach for individual clinical assessment for adult patients with complex care needs.
1.2.3 Assessment frameworks	Evaluate clinical assessments and care delivery to adults, using structured approaches to determine and modify action plans.	Appraise structured approaches for evaluating clinical assessment for adult patients to determine and modify action plans.
1.3.1 Prioritising care	Analyse structured approaches to prioritising adult patient care, identifying strengths and weaknesses in the process and identifying alternative effective strategies including reprioritisation.	Use a broad spectrum of knowledge to underpin decision-making in relation to prioritising adult patient care and timely access to treatment.
1.4.1 Critical illness or injury	Review adult patients effectively, risk assessing their potential to become critically ill, advise the team and respond appropriately.	Use extensive knowledge to underpin your decisions when identifying adult patients who could become critically ill.
1.5.1 Emotional and psychological responses	Analyse current evidence about the emotional, psychological and economic impact of sudden or acute exacerbation of illness or injury on the individual adult patients and family.	Interpret the evidence-base about the emotional, psychological and economic impact of sudden illness or injury. Demonstrate compassion for the patients in your care.



1.6.1 Pharmacology and medicines management	Critically appraise the impact of the range of available pharmacology and medicines management appropriate to an adult patient's problem and the care setting.	Differentiate the range and impact of available pharmacology and medicines management appropriate to the individual adult patient, including analgesia, antibiotics and medical gases; applying current legal frameworks for drug administration.
1.7.1 Care needs	Distinguishes different care needs, based on complex patterns of an adult patients' actual and perceived illness.	Interpret illness patterns of adult patients with complex care needs, identifying appropriate action and intervention strategies.
1.8.1 Monitoring equipment	Evaluate and appraise the effective deployment of monitoring equipment. Ensure junior colleagues are competent to use such equipment.	Evaluate the deployment and use of medical devices by junior colleagues.
1.11.1 Standard and guidance	Analyse new and current unscheduled care practice against emerging standards and guidance provided by the relevant professional governing body, e.g. NMC or equivalent, NIHCE, Department of Health, etc. corroborating to inform future policy and practice guidance.	Interpret current guidance from professional bodies e.g. NMC, NICE, Department of Health etc. interpret new evidence and assessment criteria and incorporate into practice.
1.12.1 Legal and ethical principles	Analyse and apply relevant legal and ethical principles in clinical practice, including consent, confidentiality and its limits, capacity; practising in the best interests of the patient.	Interpret and apply legal and ethical principles to urgent and emergency practice and to determining new practice, underpinned by awareness of quality of care, diversity issues and human rights.
1.13.1 Risk assessment	Effectively apply clinical governance and risk management strategies on health and safety in practice, including environmental, manual handling and personal safety risk assessments.	Analyse and act on clinical governance and risk management strategies on health and safety in urgent and emergency care settings.



Adult Competencies: Section 2: Patient Intervention

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. Respond appropriately to findings through care planning for conditions listed in 1.2.1 and 1.4.1, including reporting and 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 the woman in labour until 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 and tracheostomy care venous and arterial cannulae intravenous fluid and 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
3.1.2 Care delivery	Contribute to the development of practice and protocols to meet adult patients' essential needs.	Assist in formulating new practices to meet adult patients' essential care needs in the emergency care setting.
3.2.1 Care delivery to vulnerable patients	Provide care for adults with care and support needs and those living in abusive or challenging circumstances.	Demonstrate flexibility in emergency care assessment, provision and evaluation for vulnerable adult patients, ensuring that protection and risk assessment principles are applied.
3.2.2 Care delivery to vulnerable patients	Contribute to the development of practice to meet the needs of vulnerable adult patients.	Assist in formulating new practices to meet the needs of vulnerable patients in the emergency care setting.
3.3.1 Communication with patients	Communicate effectively with adult patients, including those who have communication difficulties. Rapidly establish therapeutic relationships with patients and relatives/carers.	Determine and use a range of communication techniques appropriately to meet the needs of all patients, including those with communication difficulties.
3.5.1 Consent and advocacy	Determine adult patients' capacity for decision-making, gaining consent and negotiating care with patients and the multiprofessional team.	Assess adult patients' decision-making capacity; obtain valid consent, respecting patients' right to self-determination while making decisions about their care.
		Act as a patients' advocate in emergency care delivery, especially when patients make questionable decisions.
3.8.1 Managing loss and bereavement	Develop and/or evaluate the effectiveness of methods used to manage relatives and friends who are experiencing loss and sudden bereavement of an adult.	Critically analyse current practice against best practice guidelines on the management of relatives and friends experiencing loss and sudden bereavement of an adult.
3.10.1 Documentation	Record patient histories, assessments, interventions, evaluations and in determining a plan of care for a range of adult patients, including discharge planning, safety-netting and after care advice for adult patients with particular reference to those that have complex care needs and difficulties in communicating.	Record succinct, relevant patient histories, assessments, interventions, evaluations and determining of care plan including those for discharge for adult patients, with a range of complaints including those with complex care needs and difficulties in communicating.
3.12.2 Multi- disciplinary team working	Provide nursing expertise as part of the multi-professional team with adult patients.	Demonstrate working as an effective multi- professional team member, showing sensitivity, support and motivational skills when working as a team member.

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		Demonstrate that you can empower junior members of the multi-professional team.
3.12.2 Multi- disciplinary team working	Function as team leader in an emergency situation for an adult patient.	Demonstrates the ability to function as team leader in an emergency situation for an adult patient.
3.13.1 Inter-agency working	Work across agency boundaries, to ensure safe discharge of adult patients.	Be proficient in cross-boundary working, to ensure safe discharge of adult patients from the emergency care setting.

Older Person Competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy and physiology	Critically appraise your knowledge of complex anatomy and physiology for all body systems, to identify different disease presentations in the older patient.	Differentiate knowledge of anatomy and physiology and apply this to various disease processes.
1.1.2 Anatomy and physiology	Critically appraise your knowledge of anatomy, physiology and psychology of the older patient to enable you to diagnose patient problems, actual or potential, and identify appropriate care outcomes.	Explain the impact of ageing on multiple body systems.
1.3.1 Prioritising care	Analyse structured approaches to prioritising older patient care, identifying strengths and weaknesses in the process and identifying alternative strategies.	Critically appraise the theoretical principles of decision making in the priorisation of older patients presenting with complex pathologies and co-morbidities.
1.4.1 Critical illness or injury	Review older patients effectively, identifying their potential to become critically ill, advise the team and respond appropriately.	Utilise knowledge of clinical examination and investigations to underpin decisions for older patients, with complex care needs in order to identify potential critically illness.
1.5.1 Emotional and psychological reactions	Analyse current evidence about the emotional and psychological impact of sudden and exacerbation of illness and injury on elderly patients and others.	Interpret evidence-base on emotional and psychological impact of sudden illness and injury on the older person and advise on approaches to care delivery.
	Identify, select and apply different approaches to delivering care.	Demonstrate recognition of fear and anxiety in the older person and apply appropriate strategies for managing it.
1.6.1 Pharmacology	Critically appraise the impact of the range of available pharmacology and medicines management appropriate to an older person's presenting problem.	Differentiate the range and impact of available pharmaceutical products appropriate for the individual older person.



1.7.1 Care needs	Distinguish between different care needs, based on complex patterns of a patient's actual and perceived illness and injury.	Interpret patterns of illness and injury of patients with complex care needs in the older person, identifying appropriate actions and intervention strategies.
1.8.1 Monitoring equipment	Audit and appraise the deployment of monitoring devices for the older patient.	Analyse and report on the effective use of monitoring devices in the older person.
1.9.1 Personal influences on care	Critically appraise the approaches available for nursing care for the older patient, taking into account social, spiritual and cultural influences and demonstrate decision-making skills in the delivery of this care.	Differentiate between a range of interventions, to develop informed and responsive strategies taking account of social, spiritual and cultural issues which impact on the older person.
1.10.1 External influences on care	Critically appraise the approaches available for nursing care delivery for the older patient that take account of legal, professional, political and economic influences demonstrate decision-making skills in the delivery of this care.	Differentiate between the influences external to the older person which impact on their holistic care.
1.11.1 Standards and guidance	Analyse the regulatory and government policy influences impacting on holistic care of the older person.	Interpret current guidance professional bodies e.g NMC, NICE, Department of Health and corroborate practice or determine new practice. Implement/ review national guidelines for older persons from healthcare professions and government.
1.12.1 Legal and ethical	Creatively explore solutions to ethical and legal dilemmas relating to the emergency care of the older person.	Interpret and apply ethical and legal principles to emergency practice underpinned by awareness of equality, diversity and human rights, corroborating practice or determining new approaches to care.
1.13.1 Risk assessment	Analyse current clinical governance and risk management strategies to ensure health and safety requirements in the emergency care setting are suitable for older persons.	Actively manage the clinical environment to minimise the physical and psychological risk for older people including patients with memory loss/confusion.



Older Person Competencies: Section 2: Patient Intervention

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment	Demonstrate rapid assessment and on-going monitoring of the older person, initiating interventions based on that assessment. Undertake clinical examination of patients.	Use underlying principles and assessment tools to determine priorities for patients with complex care needs including older people with acute or life-threatening illness or injury.
2.1.2 Assessment	Supervise junior members of the team in making assessments and determining priorities for the older patient.	Supervise junior members of the team in prioritisation of care needs for older people.
2.2.1 Observation and evaluation	Evaluate older patients who have inconsistent clinical signs and symptoms, adapting and integrating various approaches to assessment.	Use experience from a wide range of approaches to undertake evaluations of the older patient with inconsistent signs and symptoms complex care needs co-morbidity
2.3.1 Critical situations	Select and justify the interventions for older patients with complex needs.	Demonstrates use of a range of interventions for patients in critical and/or life-threatening situations including the care of • patients undergoing invasive and non-invasive ventilation • patients undergoing cardioversion
2.4.1 Therapeutic interventions	Identify and use interventions for older patients with complex care needs which address their essential care needs as well as technical interventions to prevent deterioration or restore normal function.	Evaluate therapeutic interventions and subsequent revision of care plans Show sensitivity to the psychosocial needs of the older patients presenting to the emergency department Create a supportive and sensitive environment for the care of vulnerable older adult groups.
2.5.1 Disseminating information	Undertake an evaluation of patients who have inconsistent clinical signs and symptoms, adapting and integrating various approaches to assessment.	Demonstrate how sensory and memory impairments, physical disabilities and complex health needs are assessed and accommodated.
2.6.1 Pain assessment	Assess and manage older patients' pain in the emergency care environment.	Manage patients' pain effectively. Initiate non-pharmacological pain management strategies for older people.
2.6.2 Pain relief	Contribute to the introduction and application of PGD and non-medical prescribing pain management initiatives.	Review pharmacological pain management strategies used for older people in emergency care environments

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	Evaluate the effectiveness of PGD and non- medical prescribing pain management initiatives.	
2.7.1 Psychological impact	Assess the psychological condition of an older patient and family/carers, instigate appropriate interventions and plan further care.	Respond to the psychological impact of the emergency on the older person and their carers and instigate appropriate interventions wherever possible.
2.8.1 Health promotion	Integrate health promotion strategies for older patients into care delivery.	Proactively promote falls and accident prevention strategies to the older person and their carers.

Older Person Competencies: Section 3: Patient Management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Provide emergency care for older patients, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs.	Demonstrate emergency care assessment, care planning and evaluation for older patients with complex care problems taking into account the age, gender, ethnicity, culture, values and spiritual beliefs of the patient. Interpret and challenge assumptions that affect the delivery of evidence-based
3.1.2 Care delivery	Contribute to the development of practice and protocols to meet older patients' needs.	Assist in the formulation of new practices to meet the care needs of older adults in the emergency care setting.
3.2.1 Care delivery to vulnerable patients	Evaluate emergency care provision for older patients who are vulnerable, including those with learning disabilities.	Demonstrate emergency care assessment, evaluation and care planning for patients who are vulnerable, ensuring application of protection and risk assessment principles. Consider and implement the principles of older person protection (including domestic violence) and related local protocols. Support others and provide supervision in the implementation of older person
3.3.1 Communication	Modify communication with older patients, including those who have learning disabilities or communication problems.	protection procedures. Determine and use a range of communication techniques to meet the needs of all patients presenting including those with learning disabilities or communication difficulties.



3.3.2 Communication	Negotiate care outcomes for older adults with the multi-professional, multi-agency team, working across boundaries to smooth patients' journeys through the emergency care setting.	Plan and co-ordinate safe transfer of older people to wards/ specialist units.
3.3.3 Communication	Intervene in care delivery when other members of the health care team are experiencing difficulty communicating with older patients.	Intervene in care delivery when other members of the health care team are experiencing difficulty communicating with patients, whilst being sensitive to the psychological effect on the individual health care professional.
3.7.1 Patient empowerment	Emphasise support and empowerment when developing strategies for older patient care, and when supervising others.	Evidence the application of the principles of support and empowerment when developing strategies for older patient care and when supervising others.
3.8.1 Managing relatives' loss	Evaluate current practice of the management of relatives and friends experiencing loss and sudden bereavement in the older person using best practice guidelines.	Contribute to the development/re view of practice/guidelines for the care of the older adult who has experienced the sudden loss of a relative / friend.
3.13.1 Inter-agency working	Show cross boundary working to ensure safe discharge of older patients from the emergency care setting or arrange such services directly.	Develop robust pathways and monitor discharges of the older adult from emergency care setting. Signpost older people and their carers to access local support services.



Child and Young Person Competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.2 Anatomy and physiology	Critically appraise your knowledge of child anatomy, physiology, pathophysiology and psychology to enable you to diagnose patient problems, actual or potential, identifying appropriate care outcomes.	Apply your knowledge of recognised patterns of childhood illness to determine effective care outcomes.
1.2.1 Clinical assessment	Use various approaches to undertaking a comprehensive, systematic and accurate assessment of a child or young person in an emergency situation, assessing physical, psychological, social and spiritual needs, including those with disabilities from birth.	Distinguish alternative methods of undertaking an accurate comprehensive assessment for a child or young person requiring emergency care, using recognised assessment tools, paying particular attention to those with long-standing disabilities.
1.2.2 Clinical assessment	Distinguish different structured approaches required for individual clinical assessment for children or young people with complex care needs.	Determine and apply an age-appropriate, structured approach for individual clinical assessment for children and young people with complex care needs.
1.2.3 Assessment frameworks	Evaluate clinical assessments and care delivery to children and young people, using structured approaches to determine and modify action plans.	Appraise structured approaches for evaluating clinical assessment for children and young people to determine and modify action plans.
1.3.1 Prioritising care	Analyse structured approaches to prioritising care of children and young people, identifying strengths and weaknesses in the process and selecting alternative effective strategies including reprioritisation.	Use a broad spectrum of knowledge to underpin decision-making about prioritising care and timely access to treatment for children and young people.
1.4.1 Critical illness and injury	Review children and young people effectively, identifying their potential to become critically ill, advise the team and respond appropriately.	Use extensive knowledge of patterns of illness and injury to underpin your decisions when identifying children or young people who could become critically ill.
1.5.1 Emotional and psychological reactions	Analyse current evidence about the emotional, psychological and economic impact of sudden or acute exacerbation of illness or injury on the individual child or young person and their family.	Interpret the evidence-base about the emotional, psychological and economic impact of sudden or exacerbation of illness or injury on a child or on their family.
1.6.1 Pharmacology and medicines management	Critically appraise the impact of the range of available pharmacology and medicines management appropriate to a child or young person's problem and the care setting.	Differentiate the range and impact of available pharmacology and medicines management appropriate to the individual child or young person, including analgesia, antibiotics and medical gases; applying current legal frameworks for drug administration.



1.7.1 Care needs	Distinguish between different care needs, based on complex patterns of a child or young person's actual and perceived illness.	Interpret illness patterns of children and young people with complex care needs, identifying appropriate action and intervention strategies.
1.8.1 Monitoring equipment	Audit and appraise the deployment of monitoring equipment with children. Ensure junior colleagues are competent to use such equipment.	Analyse and report on the use of monitoring equipment, including by junior colleagues.
1.9.1 Standards and guidance	Analyse new and current urgent, emergency and acute care practice in reference to emerging standards and guidance provided by the relevant professional governing body, e.g NMC or equivalent, NIHCE, Department of Health, etc. to inform future policy and practice guidance.	Interpret current guidance from professional bodies e.g NMC, NIHCE, Department of Health etc. interpret new evidence and assessment criteria, incorporating these into practice.
1.12.1 Legal and ethical principles	Analyse and apply relevant legal and ethical principles in clinical practice, including parental responsibility, consent and confidentiality.	Interpret and apply legal and ethical principles of caring for children and young people to urgent and emergency practice to determine new practice, underpinned by awareness of quality of care, diversity issues and human rights.
1.13.1 Risk assessment	Apply clinical governance and risk management strategies on health and safety in practice, including environmental, manual handling and personal safety risk assessments, particularly to young people with challenging behaviour.	Analyse and act on clinical governance and risk management strategies in relation to health and safety in urgent and emergency care settings.



Child and Young Person Competencies: Section 2: Patient Intervention

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment	Take a systematic history for a child or young person, determining the seriousness of the presentation and who the most appropriate clinician/team would be to manage the patient.	Take a systematic history for children and young people showing skill and discernment in identifying the complexity that may require additional expertise.
2.2.1 Observation and evaluation	Evaluate the status of children and young people who have inconsistent clinical signs and symptoms, adapting and integrating approaches to assessment in a timely fashion.	Use your knowledge and experience to undertake evaluations of children and young people with inconsistent signs and symptoms within appropriate time scales.
2.3.1 Critical situations	Select appropriate interventions for children and young people in critical and/or lifethreatening situations, this could include airway management, breathing and circulatory support; whilst managing parents' reactions to situation.	Demonstrate proficient use of a range of interventions for children and young people in critical life-threatening situations e.g deteriorating patients and peri-arrest situations.
2.4.1 Therapeutic interventions	Deliver therapeutic interventions for children and young people with complex care needs, including advanced airway techniques, breathing and circulatory support, preparation and distraction	Identify and use appropriate interventions for children and young people with complex care needs.
2.6.1 Pain assessment	Assess and manage patients' pain in the urgent and emergency care environment, selecting and using tools appropriate for children and young people.	Confidently select and use pain assessment tools appropriate for children and young people and managing their pain.
2.6.2 Pain relief	Establish which First Aid measures or analgesia have already been provided.	Use pain assessment tool to offer/provide adequate analgesia for assessed level of pain.
2.7.1 Psychological impact	Assess the psychological condition of a child or young person and their family/carers, instigating appropriate interventions and planning further care.	Assess the psychological condition of a child or young person and their family/carers and instigate appropriate interventions. Supervise others providing, evaluating and planning psychological care.
2.8.1 Health promotion	Identify children and young people who may not appreciate the benefit of proposed treatment and employ person-centred strategies to mitigate and safety net the situation.	Integrate health promotion strategies and patient preferences to optimise health outcomes.

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2.8.2	Employ brief health promotion interventions on an opportunistic basis.	Discuss the steps that a child or young person and their parents can take to promote
Health	on an opportunistic basis.	their future health and wellbeing.
promotion		then ratare fleater and wellbeing.

Child and Young Person competencies: Section 3: Patient Management

Competency Number & Theme	Competency	Learning outcome
3.1.2 Care delivery	Contribute to the development of practice and protocols to meet the needs of children and young people.	Assist in formulating new practices to meet the care needs of children and young people in the emergency care setting.
3.2.1 Care delivery to vulnerable patients	Provide emergency care for children and young people with physical and/or learning disabilities and those living in abusive or challenging circumstances e.g. bullying, overcrowding, unwell parent/carer.	Assess, provide and evaluate emergency care for children and young people, ensuring that protection and risk assessment principles are applied.
3.2.2 Care delivery to vulnerable patients	Contribute to the development of practice to meet the needs of vulnerable children and young people.	Assist in formulating new practices to meet the needs of vulnerable children and young people in the emergency care setting.
3.3.1 Communication with patients	Rapidly establish therapeutic relationships with children, young people and their parents/carers, including those who have communication difficulties.	Choose and use a range of communication techniques selected to meet the needs of each child, young person or their parents/carers, including those with communication difficulties.
3.5.1 Consent and advocacy	Determine the ability of children, young people and their parents to understand the need for decision-making, gaining consent and negotiating care with the child, their parents and the multi-professional team.	Assess the ability of a child and their parents to understand what treatment is proposed and the need for the opinions of both to be respected while making decisions about their care.
		Act as a young patient's advocate in emergency care.
3.8.1 Managing loss and bereavement	Develop and/or evaluate the effectiveness of methods used to manage relatives and friends who are experiencing loss and sudden death of a child. Evaluate support available for emergency care teams following the death of a child.	Critically analyse current practice against best practice guidelines on: management of relatives and friends experiencing loss and sudden death of a child support of emergency care teams following the death of a child.
3.10.1 Documentation	Record patient histories, assessments, interventions, evaluations. Determine plans of care for a range of children and young people, including	After taking patient histories record this succinctly, including relevant assessments, interventions, and evaluations.

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	discharge planning and after care advice, including those that have complex care needs and difficulties communicating	Determine care plans for discharge for children and young people, with a range of complaints including those with complex care needs and difficulties in communicating.
3.12.1 Multi- professional team working	Work as part of the multi-professional team with children and young people, empowering junior healthcare professionals to contribute.	Demonstrate working as an effective multi- professional team member, showing sensitivity, support and motivational skills. Demonstrate that you can empower junior members of the multi-professional team.
3.12.2 Multi- professional team working	Function as team leader in an emergency situation for a child or young person.	Demonstrates the ability to function as team leader in an emergency situation for a child or young person.
3.13.1 Inter-agency working	Ensure safe discharge of children and young people from emergency care setting through cross-boundary working.	Establish cross-boundary working to ensure safe discharge of children and young people from the emergency care setting.

Psychological Competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy and physiology	Differentiate knowledge and apply to various disease processes in mental health and psychological care presentations.	Differentiates the pathophysiology which may impact upon on psychological/mental health symptoms/behaviour.
1.1.2 Anatomy and physiology	Critically appraise patterns of illness and behaviours which influence effective care outcomes for patients with mental health disorders.	Evaluate the patterns of illnesses and behaviours to identify appropriate care pathways for patients with mental health disorders.
	Demonstrate an understanding of comorbidity.	Differentiate potential organic and functional pathophysiology of mental illness. Differentiate the impact of co-morbidity in those presenting with mental health symptoms.
1.3.1 Prioritising care	Critically appraise the theoretical principles of decision making in the prioritisation of care patients presenting with mental health issues and co-morbidities.	Select appropriate frameworks for the prioritisation of care in patients with mental health issues and co-morbidities. Evaluate the rationale for the decision making and subsequent actions.
1.4.1 Critical illness or injury	Critically appraise underpinning evidence- base when patients in mental health or psychological crisis have been identified.	Recognise the presentation of patients in mental health /psychological crisis and identify the appropriate responses/intervention.



1.5.1 Emotional or psychological reactions	Emotional or psychological impact of sudden illness and injury and advise on new approaches to care delivery	Evaluate the possible triggers which may result in psychological distress in all patients. Prioritise the key presenting signs and symptoms which may be indicative of an underlying psychological issue: e.g., pain,
		inappropriate behaviour, culture, confusion.
		Articulate the impact of fear and anxiety in the patient experiencing mental illness and identify appropriate strategies for managing it.
1.6.1 Pharmacology	Differentiate the range and impact of available pharmacology appropriate to the individual patient.	Evaluate the current pharmacological interventions for the patient with mental health / psychological care presentations.
		Evaluate the application of relevant pharmacodynamics and pharmacokinetics in the emergency setting.
		Adjust pharmacological interventions for patients presenting having taken an excess of a drug, an illicit drug or an excess alcohol.
1.9.1 Personal	Critically appraise specific psychological/mental health approaches to	Evaluate the influences from National Strategies in Mental Health care provision.
influences on care	influences on knowledge and skills into clinical	Appraise the impact of effective communication skills for patients and the multi-professional team.
		Evaluate person-centred care for the patent with mental health and psychological issues.
1.10.1 External influences on	Interpret relevant legal and mental health frameworks, corroborating practice or determining new practice.	Interpret relevant legal and mental health frameworks in Emergency Care with particular reference to legislation. e.g.
care		The Mental Health Act
		The Human Rights Act
		Capacity/incapacity
		Consent to share.
1.12.1 Legal and	Actively involved in local implementation / reviewing of national guidelines for patients	Interpret the principles of 'human rights' and Mental Health legislation.
ethical principles	with Mental Health / Psychological Care needs from professional and Department of Health sources (e.g NICE guidelines, national frameworks for Mental Health)	Interpret these principles in respect of the patient's ability and capability in decision making and identify the need to advocate when appropriate.
		Differentiate between the roles, responsibilities and accountability for those patients with mental health and psychological care issues.



Psychological Competencies: Section 2: Patient Intervention

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment	Identify and differentiate between available assessment tools to ensure appropriate assessment for patients with mental health and other psychological issues.	Use a range of appropriate mental health assessment tools and frameworks to undertake an effective assessment and prioritisation of patients.
		Evaluate potential triggers and major warning signs (red flags) which may lead to psychological distress in patients.
		Initiate appropriate interventions based on that assessment including detention under mental health legislation.
2.2.1 Observation and evaluation	Use experience from a wide range of approaches to undertake evaluations of patients with mental health and psychological care needs with: Complex care needs Co-morbidity.	Implement individualised appropriate observations including physiological parameters, or those pertaining to psychological presentation i.e. conversational content, behaviour responses. Selects appropriate monitoring of the individual in line with current local and
		national standards.
2.3.1 Critical situations	Select interventions for patients in crisis due to mental health or other psychological issues.	Initiate appropriate safety measures for a patient with mental health /psychological needs in a critical situation and other lifethreatening situations incorporating local policy.
		Initiate appropriate psychological care interventions and when necessary the use of legal frameworks.



Psychological Competencies: Section 3: Patient Management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Demonstrate assessment, evaluation and care planning for the patient in the emergency care setting with psychological /mental health needs who presents with complex problems.	Use structured processes to develop a comprehensive care plan for vulnerable patients, including protection issues. Instigate and evaluate the care of patients with psychological /mental health needs who present with complex problems. Interpret and challenge assumptions that affect the delivery of evidenced based
3.2.1 Care delivery to vulnerable patients	Demonstrate assessment, evaluation and care planning for patients who are vulnerable due to psychological/mental health needs who present with complex problems, ensuring application of risk assessment principles across the age continuum.	emergency care. Select the specific actions required to protect the vulnerable and minimise risk such as child protection, adult protection and adult with incapacity. Initiate immediate management of the patient who is perceived to be at risk /deteriorates due to vulnerability i.e. alcohol withdrawal, drug detoxification /overdose. Assess mental capacity and insight into illness and can apply this to the principles of vulnerability.
3.3.1 Communication	Choose from a range of communication techniques to meet the needs of patients who challenge communication skills such as those presenting with perception abnormality /thought disorder.	Adapt and utilise communication skills to minimise psychological distress for those patients with Mental Health/ Psychological needs and Learning Disability.
3.3.2 Communication	Negotiate with other healthcare professionals /organisations to facilitate evidence-based /appropriate care outcomes for patients with psychological / mental health needs.	Apply the principles of negotiation with other agencies and AHP's to develop care pathways for patients with psychological /mental health needs. Initiate communication with other professionals as required to determine an appropriate care pathway/safety for patients with psychological/ mental health needs.
3.3.3 Communication	Act as a role model /resource to others and intervene /facilitate effective care when other members of the health care team are experiencing difficulties communicating with patients.	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. Demonstrate sensitivity to the psychological effect on the individual healthcare professional, promoting a learning culture.
3.4.1	Contribute to the provision of appropriate environments for patients with mental health	Engage with the internal and external teams to promote and raise awareness of equity

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Equity and dignity	/psychological care needs in line with national recommendations.	and dignity to patients with psychological /mental health needs.
3.6.1 Coping strategies	Contribute to the use of person-centred coping strategies during critical events for patients with mental health/psychological care needs and their families.	Identify and initiate agreed pathways to empower the staff and patient to manage critical events for patients with mental health/psychological care needs.
3.7.1 Patient empowerment	Use the principles of support and empowerment when developing strategies for care of patients with mental health/psychological care needs.	Demonstrate and facilitate patient centred care for patients with mental health/ psychological care needs and their families; incorporating the principles of support and empowerment
3.9.1 Prioritisation	Identify learning outcomes for prioritisation skills for the care of individuals with mental health/ psychological care needs.	Identify own learning needs and develop an action plan to address personal deficits in ability to prioritise care for an individual or group of patients with mental health/psychological care needs.
3.10.1 Documentation	Record patient history, assessments, interventions, evaluations and in determining a care plan for a range of patients, including those that have complex care needs and	Produce complete and appropriate documentation for patients with psychological /mental health needs. Demonstrate compliance with relevant legal
	difficulties communicating.	frameworks.
3.11.1 Role modeling	Role model positive behaviour and attitudes towards patients with mental health/psychological care needs in the emergency care setting.	Analyse the impact of positive and negative behaviours and attitude on care provision with mental health/psychological care needs/self-harming behaviours.
		Display positive behaviours and attitudes towards those patients with mental health/psychological care needs.
		Challenge negative behaviours and attitudes towards those patients with mental health/psychological care needs.
3.14.1 Audit and monitoring	Contribute to undertaking audit and evaluating care for patients with mental health/psychological care needs and	Identify specific issues for audit in relation to patients with mental health and psychological care needs.
care	determine action plans.	Participate in audits related to patients with mental health and psychological care need.
		Evaluate and disseminate the results of the above audits.
3.16.1 Policy and practice development	Contribute to the development/ integration of policies, protocols and guidelines to practice in relation to patients with mental health and psychological care needs.	Evaluate evidence -based practice and recommendations in relation to patients with mental health /psychological care needs and integrate them into emergency care.
		Participate in the development of policies, protocols and guidelines locally in relation to patients with mental health/ psychological care needs and integrates them into emergency care.



	Implement appropriate changes to practice
	utilising relevant frameworks.

Pre-Hospital Care Competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.2 Anatomy and physiology	Critically analyse knowledge of the range of pre-hospital care settings, identifying the impact that these may have on different psychopathology and pathophysiology.	Systematically apply an understanding of physiological changes in relation to the following pre-hospital events Extremes of temperature Entrapment Hydrostatic pressures Diving emergencies Blast injuries Crush Injuries Penetrating trauma.
1.2.1 Clinical Assessment	Integrate a comprehensive knowledge of assessment of the physical, psychological, social and spiritual needs of a patient in a pre-hospital care setting. Identify specific pre-hospital clinical tools required to undertake patient assessments.	Distinguish between alternative methods of undertaking an accurate comprehensive assessment for patients requiring prehospital emergency care, using recognised assessment tools.
1.2.2 Assessment frameworks	Using patient scenarios can identify appropriate clinical assessment structures for patients in pre-hospital care settings.	Select different structured approaches for individual clinical assessments of a range of patients within pre-hospital care settings, including those with complex needs.
1.3.1 Prioritisation	Integrate knowledge of prioritisation of care decisions in a pre-hospital care setting (exercise), for a sequential group of patients.	Effectively rationalize the prioritisation of care decisions, for a sequential group of patients in a pre-hospital care setting, using the METHANE system.
1.6.1 Pharmacology	Critically appraise the impact of frequently used pharmacology appropriate to patients in pre-hospital care settings.	Explore the range of available pharmacology in pre-hospital care settings and their potential impact on patients. Determine the appropriate protocols for the administration and documentation of pain relief in pre-hospital care settings
1.8.1 Monitoring equipment	Appraise the challenges of monitoring patients in pre-hospital care settings, to decide on appropriate monitoring methods.	Evaluate the clinical effectiveness of monitoring devices used in the pre-hospital situation.

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		Analyse priorities to optimise use of limited resources in pre-hospital care.
		Identify how improvisation may be employed to effectively monitor patients.
1.10.1 External influences on care	Critique the differences between pre-hospital and in-hospital patient care, and the impact of these on pre-hospital nursing practice, from a professional and accountability perspective.	Apply appropriate decision making in pre- hospital care settings using appropriate legal and professional guidance.
1.13.1 Risk assessment	Appraise risks to patients and the multi- disciplinary team of the pre-hospital care setting, using the principles of scene safety and management to develop responses.	Synthesise knowledge of scene management and the role of the pre-hospital nurse with respect to: • personal safety
		identification of hazardous conditions at an accident
		requirement of protective clothing
		the principles and safety factors involved in patient extrication.
		Outline the health and safety implications for both patients and care givers when performing interventions during transportation.
1.13.2 Risk assessment	Evaluate the available resources for transportation of patients in pre-hospital care settings.	Identify the resources available for transportation and transfer, selecting the mode of transport most suited to patients' condition.
		Rationalise the need for specific modes of transport in relation to the patients' condition.
		Identify physical, psychological and technical problems that may develop before and during transportation for:
		the ill or injured adult
		the ill or injured child
		the ill or injured elderly person.
		Instigate safe and effective interventions in preparation for such transport/transfer.



Pre-Hospital Care Competencies: Section 2: Patient Intervention

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment	Perform prioritisation in pre-hospital settings, using a recognised framework for treatment and transfer e.g triage sieve, triage sort Accurately and rapidly perform primary assessment and immediate resuscitation. Perform triage to manage a case load.	Synthesise knowledge of prioritisation tools or frameworks, identifying strategies for patients in pre-hospital care.
2.2.1 Observation and evaluation	Evaluate assessment findings in a timely fashion, for patients with complex care requirements as a direct result of their prehospital situation and/or environment.	Undertake evaluation of patients with inconsistent signs and symptoms, in prehospital care setting.
2.4.1 Therapeutic interventions	Provide interventions for the safe transport of trauma patients including: airway control and ventilation spinal and fracture immobilisation fluid resuscitation. Critically analyse entrapment situations and manage trapped patients safely. Provide interventions for the safe transport of acutely ill patients.	Differentiate between available approaches to care delivery for patients with complex needs in pre-hospital care settings, selecting appropriate interventions including: airway management immobilisation of patient release of entrapment.
2.6.2 Pain relief	Administer appropriate pain relief in a pre- hospital setting.	Determine the appropriate use of pain relief for patients in pre-hospital care.
2.7.1 Psychological impact	Monitor the psychological needs of patients and their family/carers in pre-hospital settings. Instigate appropriate interventions wherever	Use knowledge of psychological assessment tools to select those appropriate for the care of patients in pre-hospital care settings.
	possible within limits of entrapment or type of patient transport.	



Pre-Hospital Care Competencies: Section 3: Patient Management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Select emergency care for patients in the pre- hospital setting, taking into account their age, gender, ethnicity, culture, values and spiritual beliefs Demonstrate assessment, care planning and evaluation for patients with complex problems, taking into account the patients' age, gender, ethnicity, culture, values and spiritual beliefs. Interpret and challenge assumptions that affect the delivery of evidence-based emergency care.	Apply the appropriate pre-hospital assessment; care planning and evaluation for patients with complex problems, taking into account the patients' age, gender, ethnicity, culture, values and spiritual beliefs. Interpret and challenge assumptions that affect the delivery of evidence-based pre-hospital care.
3.2.2 Communication	Apply strategies to ensure effective communication with other members of the multi-professional team and the public, in pre-hospital care settings.	Communicate effectively with other professionals that form the team in the provision of pre-hospital care delivery. Manage others who may assist in scene management in pre-hospital settings.
3.6.1 Emotional resilience	Assist other health care professionals in encouraging patients and families to use helping and coping strategies during critical events in pre-hospital care settings.	Use recognised strategies to manage stress in patients or the public as a result of critical events in pre-hospital care settings.
3.12.1 Multi- professional team working	Select strategies that facilitate working as an effective multi-professional team member. Synthesise knowledge of team dynamics and inter-professional working to demonstrate sensitivity, support and motivational skills when working as a team member in prehospital care settings. Select appropriate methods to empower	Work as an effective multi-professional team member in pre-hospital care settings. Use sensitivity, support and motivational skills when working as a team member. Lead and empower junior members of the multi-professional team.
	hospital care settings.	



Major Incident Competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.2 Anatomy and physiology	Integrate knowledge of anatomy and physiology to underpin decision making for patients attending as a result of a major incident.	Distinguish the unique care needs of patients during a major incident and identify the protocols of care to support them; children the elderly pregnant women those with disabilities, individuals with mental illness those who are immuno-compromised.
1.2.1 Clinical assessment	Appraise structured approaches to the clinical assessment of patients, determining those which specifically apply in a major incident.	Using Major Incident scenarios; select and apply the protocols and tools for assessment used during a major incident to incorporate the physical, psychological, spiritual, cultural and language needs of patients.
1.2.2 Assessment frameworks	Determine and apply structured approaches to the assessment of patients with complex care needs anticipated as a result of a major incident.	Using Major Incident scenarios, determine the provision of emergency care for patients with complex needs, who require continuing management within the department during a major incident.
1.3.1 Prioritising care	Explain the importance of regularly analysing performance through undertaking major incident exercises and determine an action plan, to ensure the most effective strategies for the prioritisation of patients are implemented.	Participate in major incident exercises, undertaking initial assessment and triage of patients following incidents, to include: chemicals biological contamination radiological mixed or unknown.
1.4.1 Critical illness or injury	Reflect on previous knowledge and skills in trauma care and critical care to identify the correct care protocols for patients and apply insights to a major incident setting.	Determine the strategies for patient care and maintain a departmental overview during a major incident or exercise, identifying patients with complex care needs Evaluate the potential for patients in the emergency department to become critically ill during a major incident situation and identify action plans for supporting their care requirements.
1.5.1	Incorporate knowledge of the psychological impact of a major incident on patients, relatives and friends, identifying	During an ongoing major incident or exercise, identify in the emergency department immediate and post incident compassionate



Emotional and psychological reactions	compassionate care protocols for use within the emergency department to support them.	 the criteria to access support methods for the referral of patients the staff available to provide compassionate support.
1.6.1 Pharmacology	Differentiate the impact of the pharmacology available to the mobile team caring for the patient and identify any drug administered in the pre-hospital setting.	Using information about the pharmacological agents used in the prehospital setting, determine the patient's requirements for stabilisation and pain relief within the major incident setting and relate this to care in the emergency department.
1.7.1 Care needs	Identify the appropriate level of care and anticipate further care needs for individual patients in major incidents.	Evaluate the level of care and anticipate further care needs appropriate to individual patients in major incidents.
		Evaluate the resources within the emergency department to respond to patient care needs, identifying staff and other resources to be accessed.
1.8.1 Monitoring equipment	Audit and appraise the effective deployment of resources, including monitoring equipment.	Identify how to access additional equipment/resources during a major incident and communicates this to the appropriate authorities.
		Analyse and report on the effective use of monitoring equipment for a mobile team / staff within the emergency department, reporting these findings to the appropriate authorities.
1.10.1 Legal and ethical principles	Outline the legal and ethical issues arising from a major incident	Articulate the legal and ethical issues that are likely to arise during major incidents, identifying strategies to address these
1.11.1 Standards and guidance	Interpret current government guidance on dealing with major incidents, with particular reference to accessing knowledge and resources on dealing with incidents of a chemical, nuclear/radiological or biological	Liaise with the emergency planning officer and incorporate current government guidance on dealing with major incidents into emergency department policies. Access knowledge and resources on dealing
	nature.	with incidents of a chemical, nuclear/radiological or biological nature.
1.13.1 Risk Assessment	Analyse the risks arising from a major incident that have the potential to impact on the emergency department and prepares the department to respond to them.	Outline the safety issues for self, the team and patients within an emergency department in a major incident. Select the tools and protocols designed to
		assess risks and safeguard patients, staff and relatives within the emergency department.



1.13.2 Risk assessment	Outline the safety issues for self, the team and patients within an emergency department in a major incident. Select the protocols designed to assess risks and safeguard patients, staff and relatives within the emergency department.	Access up-to-date information about nuclear, biological and chemical incidents, explosive and incendiary devices, from the health emergency planning officer. Evaluate strategies for accessing and disseminating this information to staff within the emergency department.
1.14.1 Procedural frameworks	Analyse the procedural frameworks in the assessment of patients involved in major incidents: • scene management • organisation of the casualty clearing station • levels of command • roles of other emergency services • role of the Major Incident Officer.	Identify different agencies' anticipated responses in a major incident. Illustrate the procedures undertaken by emergency medical services during a major exercise in: scene management triage 'sieve' and 'sort' primary assessment secondary assessment. Evaluate the impact of these procedures on patients arriving at the emergency department.
1.14.2 Procedural frameworks	Analyse the organisation's response to a major incident and its interrelationship with the emergency care setting. Identify own role(s) and responsibilities in the event of a major incident.	Differentiate the responses of the organisations and the emergency care setting, in a major incident. Identify actions which ensure the organisation's response underpins the response of the emergency care setting. Co-ordinate roles and responsibilities for emergency staff, to meet the care needs of patients during a major incident. Explain the transition from emergency response to post-response in a major incident.
1.17.1 Communication	Evaluate the communication principles and systems employed by emergency medical staff and the emergency department during a major incident.	Explain the crucial role of effective communication in a major incident, both internally and externally, and the processes used to achieve it. Identify the people from whom directions might be received, and to whom information must be communicated, in a major incident.



Major Incident Competencies: Section 2: Patient Intervention

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment	Apply knowledge and skills to assessment of patients with complex needs, identifying the patients who have the potential to deteriorate in the emergency department during a major incident.	Using major incident scenarios, undertake initial assessment and triage following chemical incidents biological incidents radiological incidents mixed or unknown incidents contaminated or contagious patients. Identify and use the appropriate protocols of care for patients in these incidents
2.1.2 Assessment	Use knowledge and supervision strategies to manage and support staff in applying patient assessments and determining prioritisation during a major incident.	Supervise and co-ordinate junior and other staff in the assessment of patients and in determining prioritisation during a major incident /exercise. Delegate appropriate roles to junior staff within the emergency department
2.5.1 Disseminating information	Identify the communication and reporting strategies within emergency department major incident plans.	Communicate with other members of the multi-disciplinary team during a major incident exercise to facilitate patient care trajectories. Undertake efficient and effective communication with the emergency department control team and other staff/ services to ensure the appropriate dissemination of information.
2.6.1 Pain assessment	Integrate knowledge of pain relief strategies for patients in emergency department and pre-hospital care settings, to determine likely pain relief requirements in major incidents.	Monitor pain assessment and management in an emergency care environment. Evaluate pre-hospital care pain relief interventions undertaken during a major incident.
2.7.1 Psychological impact	Evaluate the potential psychological impact of a major incident on patients, relatives and others, identifying care protocols to support individuals and to determine the appropriate care interventions.	Co-ordinate and evaluate the use of protocols for the psychological support of patients, relatives and others during a major incident.
2.10.1 Care pathways	Select and apply care pathways for patients within pre-hospital care and emergency department settings, during a major incident.	Demonstrate consistent high quality care delivery during a major incident exercise. Co-ordinate emergency department staff in caring for patients during a major incident/exercise.



	Monitor and evaluates 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
3.1.2 Care delivery	Appraise the care protocols for emergency department patients involved in a major	Consistently apply care protocols for patients involved in a major incident.
,	incident, from a local and national perspective, and update them according to the evidence-base.	Contribute to the development, review and implementation of a major incident plan used in an emergency department setting.
3.4.1 Equity and dignity	Integrate the principles of equity and dignity into strategies for the co-ordination of patient care and the support of the multi-disciplinary team, in a major incident	Using major incident exercises, determine how the emergency department response during a major incident ensures that the principles of equity and dignity are applied.
	situation/exercise.	Support team members who experience challenges in the delivery of major incident protocols.
3.8.1 Managing relatives' loss	Critically appraise the evidence-base and best practice of the impact on and management of relatives and friends experiencing loss/ bereavement, as a result	Integrate a major incident plan for communication with relatives and the general public, adopting a compassionate approach to support loss.
	of a major incident.	Apply protocols to manage loss and bereavement and prevent the development of PTSD.
3.9.2 Prioritisation	Rationalise the choices made when prioritising care for individuals, groups of patients, and the service involved, in a major incident/exercise.	Quickly and accurately prioritise care of individuals and groups of patients in an emergency care setting in a table-top major incident exercise.
3.10.1 Documentation	Integrate the principles of care planning and documentation for patients involved in a major incident/exercise.	Using scenarios within exercises, integrate the principles of major incident documentation to ensure optimum patient care and clarity and to secure the chain of evidence.
3.11.1 Role modeling	Role model management of a major incident within an emergency department setting.	Effectively lead teams of staff within an emergency department during a major incident/exercise
3.12.1 Multi- professional team working	Work in partnership with other agencies during and after a major incident.	Collaborate with the incident command system from the emergency department, to ensure that the objectives of the major incident strategy are achieved.
3.12.2	Collaborate with the incident command system from the emergency department, to	Co-ordinate other members of a multi- disciplinary team in an emergency

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Multi- professional working	ensure that the objectives of the major incident strategy are achieved.	department during a major incident/ exercise to ensure overall objectives are achieved.
3.12.3 Multi- professional working	Evaluate own knowledge and skills in managing an emergency department, identify the approaches required in a major incident situation.	Provide organisational management for the emergency department staff during a major incident, using local and multi-agency exercises
3.14.1 Clinical governance in care delivery	Apply the principles of audit to the emergency department major incident plans and exercises and identify service development needs.	Facilitate and audit major incident plan exercises in an emergency setting and evaluate the outcomes to inform service development
3.15.1 Risk assessment	In conjunction with the local major incident planners evaluate risk assessment and preparation in relation to local and regional major incident plans.	Utilise risk management principles in the development of emergency department guidelines relating to: the impact of large numbers of critically ill patients fatality management social and religious issues evidence preservation a safe approach to decontamination.
3.16.1 Practice and policy development	Review local policies in relation to major incident planning and management, identifying areas for development.	Contribute to the development of major incident policies for the emergency department.



Minor Injuries Competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy and physiology	 Critically analyse the anatomy, across the full age range, of: Bones, joints, muscle groups and movements of the limbs (adult and children) Axial skeleton Eye, ear, nose throat and mouth The skin to enable identification of actual or potential problems from injuries that will affect the care planning and safe discharge of patients. 	Integrate an in-depth knowledge of the anatomy and physiology (adult and child) into rational clinical decisions affecting the assessment and treatment of patients with minor injuries.
1.2.1 Clinical assessment	Integrate a comprehensive knowledge of minor injury assessment, including physical, psychological, social and spiritual needs of the patients.	Distinguish between methods of undertaking an accurate assessment of minor injury patients.
1.2.2 Assessment frameworks	Use structured approaches for assessing patients who present with a minor injury, including those with complex needs and their carers.	Systematically apply structured approaches to assessing patients presenting with a minor injury, including those with complex needs and their carers.
1.2.3 Assessment frameworks	Evaluate care for patients with minor injuries, using a structured approach which enables appropriate care planning.	Evaluate care for patients presenting with injuries, using a structured approach for care planning.
1.3.1 Prioritising care	Distinguish when an injury requires immediate or urgent intervention and identify those that can wait without risk.	Prioritise care for patients with minor injuries, rationalising decisions made for immediate or urgent intervention and identifying those who can wait without risk.
1.4.1 Critical illness or injury	Monitor patients within department and identify those with injuries who require urgent intervention.	Rationalise when patients with injuries require earlier intervention than planned.
1.5.1 Emotional and psychological reactions	Articulate the emotional and psychological impact that having a minor injury has for individuals e.g scarring burn or wound, assault, domestic violence, the effect of sickness on employment, the impact on ability to self-care.	Integrate understanding of the psychological and emotional impact of having an injury into the consultation process and management plan.
1.6.1 Pharmacology and medicines management	Explain the pharmodynamics and pharmokinetics of the medicines/medicinal products used for minor injury patients.	Demonstrate compliance with regulatory body requirements for administering or prescribing the medicines for the management of minor injuries.

1.7.1 Care needs	Adapt nursing care to patients' presenting injuries.	Undertake risk benefit analysis and adapt care provision to meet the needs of the individual minor injured patient.
1.15.1 Accountabilit	Demonstrate accountability and responsibility whilst working under protocols.	Manage patients under agreed departmental protocols.

Minor Injuries Competencies: Section 2: Patient Intervention

Competency Number & Theme	Competency	Learning outcome
2.1.1 Assessment	Take a comprehensive history from patients presenting with minor injuries, being able to discern the relevant findings to document, and identifying the major warning signs (red flags). Identify which patients require radiological investigation and request these in line with local protocols.	Undertake a systematic clinical assessment of patients presenting with a minor injury and prioritise care required.
2.2.1 Observation and evaluation	Identify when patients require continuous monitoring or frequent recordings of vital signs, neurological observations, and neurovascular observations e.g limb pulses. Interpret vital signs and oxygen saturation levels across the age ranges, including patients with chronic or complex complaints.	Interpret inconsistent vital signs, neurological observations and neurovascular observations and act upon findings.
2.3.1 Critical situations	Differentiate between minor injuries and injuries that are potentially or actually lifethreatening or require resuscitation	Identify patients who attend with minor injuries that are potentially life-threatening and act upon findings.
2.4.1 Therapeutic interventions	Prescribe interventions for patients presenting with injuries e.g analgesia, slings, splints, temporary dressings Demonstrate ability to perform the following interventions: Selection, prescription and application of casts or braces to manage upper arm injuries Selection, prescription and application of casts, splints or braces to manage knee and upper leg injuries Closing wounds using staples or sutures Selection, prescription and application of primary and secondary dressings for	Select and rationalise the choice of therapeutic interventions as listed in competency.



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	wounds.	
2.5.1 Disseminating information	Articulate the importance of clinical note making that rationalises assessments, interventions and treatments.	Demonstrate effective note making that rationalises assessments, interventions and treatments.
2.6.1 Pain assessment	Critically appraise and select from the variety of evidence-based pain assessment tools to assess the pain of patients with a minor injury.	Select and implement appropriate pain assessment tools and evaluate their effectiveness.
2.6.2 Pain relief	Match pharmacological and other interventions to the pain of patients who have been injured.	Manage pain through choosing appropriate pain-relieving measures and evaluate the effectiveness of the chosen methods.
2.7.1 Psychological impact	Critically consider the psychological impact that the minor injury has had on the patient and adapt planned care to accommodate patient's reactions.	Assess the psychological condition of patients who have been injured; plan appropriate care and management.
2.8.1 Health promotion	Find and use opportunities to impact on health promotion, to prevent or reduce complications when injured.	Consistently integrate health promotion into consultations with patients presenting with minor injuries.

Minor Injuries Competencies: Section 3: Patient Management

Competency Number & Theme	Competency	Learning outcome
3.1.1 Care delivery	Provide emergency care for patients with a minor injury, taking into account their age, gender, ethnicity, culture, values, spiritual beliefs, occupation, hand dominance, driving licence status, sports and exercise preferences and hobbies.	Assess, plan, implement and evaluate care for patients with complex care problems, taking into account patients' age, gender, ethnicity, culture, values, spiritual beliefs, occupation, hand dominance, driving licence status, sports and exercise preferences and hobbies. Interpret and challenge assumptions that affect the delivery of evidence-based emergency care.
3.3.2 Communication with colleagues	Negotiate with the multiprofessional/ agency team to ensure patients with injuries have safe discharge and outcomes.	Refer patients to the multiprofessional/agency team to ensure patients with injuries have safe discharge and outcomes.



3.12.1 Multi- professional team working	Respond to unexpected incidents that occur during consultations.	Manage unexpected incidents that occur during consultations with patients with injuries e.g faints, arterial bleeds, reduced consciousness level.
3.13.1 Inter-agency working	Discharge patients with injuries independently, ensuring patient safety netting in place.	Ensure the safe discharge of patients, including risk benefit assessments, making referrals to others to support home care or organizing hospital admissions or referrals to other agencies.
3.14.1 Clinical governance and care delivery	Analyse the quality of care provision, identifying strengths and weaknesses, making recommendations for clinician or service improvement.	Analyse care provided to patients with minor injuries, taking an objective perspective on the quality of the care provided, identifying strengths and weaknesses, recommending actions required.
3.15.1 Risk management	Maintain currency of evidence-based local guidance, including proformas and patient advice leaflets.	Appraise and develop local guidance which supports practice for patients with injuries.
3.16.1 Policy and practice development	Contribute to the overall management and policy development for patients with minor injuries.	Negotiate the development of care for the injured, including policy and practice development.



Major Trauma Competencies: Section 1: Knowledge

Competency Number & Theme	Competency	Learning outcome
1.1.1 Anatomy and physiology	Critically appraise knowledge of complex anatomy and physiology for all body systems to identify different injury presentations across the full age range.	Analyse knowledge base and complex care needs and apply this to the multiply injured trauma patient.
1.1.2 Anatomy and physiology	Combine knowledge of mechanism of injury and injury patterns to identify actual and potential patient problems: Severe head injury Cervical spine injury Traumatic aortic disruption Pneumothorax Flail chest Abdominal/visceral injuries	Identify the physiological responses of the trauma patient which will direct decision making for the multiply injured patient.
1.2.1 Clinical assessment	 Extremity trauma Integrate history taking throughout the primary and secondary surveys, using structured clinical assessment detailed below, in order to identify management and resuscitation priorities for the multiply injured patient Airway patency Cervical Spine control including correct measurement and application of hard collar Breathing /chest assessment Circulatory status including haemorrhage control Disability - Neurological status, blood glucose Exposure/ Environment Radiographic/ Diagnostic interventions Secondary survey. 	Select clinical assessment appropriate for a trauma patient, using primary and secondary surveys, outlining definitive care necessary to stabilise patient and prevent the development of life-threatening emergencies.
1.2.2 Assessment frameworks	Integrate structured clinical assessment with understanding of cardiovascular functioning and homeostasis in order to identify fluid management and resuscitation priorities in the following conditions: Multiple injuries	Anticipate physiological response of the trauma patient, related to fluid resuscitation and critically analyse fluid choice according to supporting literature/policy for: Multiple Injuries Major Burns

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	Major Burns	■ Pregnancy
	Pregnancy	■ Hypothermia.
	Hypothermia.	
1.3.1	Initiate trauma calls using local calling	Identify the physiological signs, mechanism
Prioritisation	criteria.	of injury and special circumstances that would indicate a trauma team response is required.
1.4.1	Review patients following primary survey,	Accurately identify actual and potential life-
Critical illness or injury	considering age and patterns of injury, in order to identify their potential to become critically ill, advising the team and respond appropriately in the following presentations:	threatening conditions arising from traumatic injury presentations.
	 Head injuries 	
	 Pulmonary contusion 	
	Blunt cardiac injury	
	 Diaphragmatic injury 	
	Rib, sternal and scapular injuries	
	 Hyper or hypothermal injuries. 	
1.10.1	Describe the structure and function of the	Describe the levels of trauma care that are
External influences on care	local trauma care system.	provided in different centres and the criteria used to decide the most appropriate location for definitive treatment of a trauma patient.
1.11.1	Initiate early trauma care guidelines in the	Identify situations where local trauma care
Standards	following circumstances:	guidelines apply and anticipate requirements
and guidance	Secondary transfer	for transfer into or out of your organisation.
	Bypass criteria	
	Isolated head injury	
	Spinal injury	
	■ Burns.	
1.11.2 Standards and guidance	Interpret current guidance from professional and government bodies in relation to trauma care e.g. Major Trauma, Fractures (complex and non-complex), Spinal injury.	Analyse current practice against standards and guidance provided by professional governing body, national standards agency or government.
1.12.1 Legal and ethical	Analyse legal and ethical aspects of trauma practice and disseminate key issues to multidisciplinary team for:	Consider implications of legislation and ethical issues in situations where patients have life-threatening or life altering injuries.
principles	■ Consent	
	Mental Capacity	
	 Traffic legislation 	
	■ Firearms	
	Forensic procedures	

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-	Tissue and organ donation	
-	Religious/cultural sensitivities	
•	Sexual offences related to trauma.	

Major Trauma Competencies: Section 2: Patient Intervention

Competency Number & Theme	Competency	Learning outcome
2.2.1	Evaluate trauma patients with inconsistent clinical signs and symptoms, adapting and integrating various approaches to assessment.	Use experience of differing patient presentations to identify the relevant observations required when performing a physical systematic assessment of the trauma patient.
Observation and evaluation		
2.3.1 Critical	Select interventions for patients in critical and/or life-threatening situations.	Demonstrate use of a range of interventions for patients in critical and/or life-threatening situations.
situations	Correctly select and deploy:	
	 Methods of external haemorrhage control 	
	 Haemostatic agents 	
	Tourniquets	
	Pelvic binder	
	■ Femoral splint.	
2.4.1 Therapeutic	In conjunction with trauma team leader initiate use of:	Use experience of differing patient presentations to identify when specific therapeutic interventions are required during treatment of the trauma patient.
interventions	 Major haemorrhage policy (liaising with blood bank) 	
	■ Point of Care testing	
	 Rapid transfusion 	
	Blood warmer	
	 Anticoagulant reversal 	
	Anticipate and assist with:	
	 Rapid Sequence Induction 	
	Cricothyroidotomy	
	■ Thoracostomy	
	chest drain insertion	
	■ thoracotomy	



	Provide ongoing care of intubated and ventilated patient. Lead log rolling and spinal immobilisation procedures.	
2.5.1 Disseminating information	Apply the principles of essential trauma care and report this information effectively to other members of the health care team.	Accessing, use and disseminate information from a wide variety of sources, within the department, on admission, transfer or discharge.
		Supervise and facilitate others in disseminating information
2.6.1 Pain assessment	Assess and manage patients' pain across a range of patient presentations.	Demonstrate how to assess and manage patients' pain, across a range of patient presentations and complexity.
2.6.2 Pain relief	Contribute to the introduction/review and application of pharmacological pain management initiatives.	Apply pharmacological principles to the development and review of pain management initiatives.
	Evaluate the effectiveness of pain management initiatives.	Manage trauma patients pain using pharmacological and non-pharmacological methods (i.e. splinting)
2.7.1 Psychological impact	Assess the psychological condition of a patient and family/carers, instigate appropriate interventions and plan further care.	Demonstrate assessment of the psychological condition of a patient and their family/carers and instigate appropriate interventions. Supervise others providing, evaluating and planning psychological care.

Major Trauma Competencies: Section 3: Patient Management

Competency Number & Theme	Competency	Learning outcome
3.3.1 Communication with colleagues	Lead communication between pre-hospital staff, hospital clerical staff and hospital-based trauma team.	Apply human factors theory to structure communication between pre-hospital and hospital-based staff.
3.8.1 Manage relatives' loss	Discuss with relatives or patient the mechanism of injury, injuries found and likely care trajectory. Accompany relatives to resuscitation room, providing narrative of what they are seeing and explanation of procedures and rationale for care being given to patient.	Apply crisis and loss theories to communication with relatives to ensure their expectations of what can be achieved are realistic.