

Working autonomously: identifying required skills and competence

Anne McDermott
Nurse Consultant in Transplant

Royal Brompton & Harefield NHS Foundation Trust
Harefield Hospital

Harefield Hospital





Content

- Development of advanced nursing roles
- Skills for advanced roles
- Autonomous practice and competence
- Training/competence required
- Examples from nurse-led services at Harefield Hospital



Advanced Nursing Roles

- The past 2 decades have seen a proliferation of new, advanced clinical roles for nurses in the UK
- Advanced nursing roles – an umbrella concept which covers many clinical roles



Key Reports

The need to expand nursing skills was highlighted in a variety of government papers:

- Scope of Professional Practice (UKCC 1992)
- The New NHS (1997) DOH
- Making a Difference (1999) DOH
- Higher Level of Practice (UKCC 1999)
- The NHS Plan (2000) DOH
- Freedom to Practice (2003) DOH & RCN
- Modernising Nursing Careers (2006) DOH

CNO Ten Key Roles for Nurses

- Order diagnostic investigations
- Make & receive referrals
- Admit & discharge patients
- Manage caseloads
- Run clinics
- Prescribe medicines
- Resuscitation procedures
- Perform minor surgery
- Triage patients
- Influence provision of local services



Advanced Nursing Roles

- Clinical nurse specialist
- Nurse practitioner
- Advanced nurse practitioner
- Nurse consultant
- Physicians assistant
- Advanced practice nurse

Advanced Nursing Team

ADVANCED NURSING TEAM FRAMEWORK

NURSE CONSULTANT IN	LEAD NURSES IN	CLINICAL NURSE SPECIALIST IN	ADVANCED PRACTITIONER IN
<p>Clinical</p> <ul style="list-style-type: none"> • Has a high profile within related clinical area and is available to nursing staff for additional support and advice in patient care delivery • Contributes to the management and care of acute and long term conditions • A non-medical prescriber is able prescribe appropriate medication for care group. • Develops and maintains communication with people on complex matters, issues and ideas possibly in complex situations • Undertakes patient assessment, performing clinical examination and arranging relevant investigations interpret results and act on such information appropriately. • Proactive case management • Demonstrate a high level of communication skills • An advocate for patients and staff within speciality 	<p>Clinical</p> <ul style="list-style-type: none"> • Has a high profile within related clinical area and is available to nursing staff for additional support and advice in patient care delivery • Contributes to the management and care of acute and long term conditions • Prescribes appropriate medications if qualified non-medical prescriber or administers according to patient group directions • Responsible for providing and advising on the direct delivery of clinical and social care particularly from tertiary primary care • Employs appropriate diagnostic and therapeutic interventions and regimes • Can define own caseload and identify the appropriateness of service provision in secondary and tertiary care • Proactive case management • Demonstrate a high level of communication skills • An advocate for patients and staff within speciality 	<p>Clinical</p> <ul style="list-style-type: none"> • Has a high profile within related clinical area and is available to nursing staff for additional support and advice in patient care delivery • Agreeing with ward managers how the role can compliment the patient journey. • Contributes to the management and care of acute and long term conditions • Prescribes appropriate medications if qualified non-medical prescriber or administers according to patient group directions • Responsible for providing and advising on the direct delivery of clinical and social care particularly from tertiary to primary care • Able to advise and treat patients from an expert knowledge base • Develops systems and processes to ensure that patients or clients receive appropriate services • Has a clinical caseload and works independently with others in the team to manage care. • Proactive case management • A flexible approach to workload re priorities in order to prevent problems, react to and rescue patient care delivery • Demonstrate a high level of communication skills • An advocate for patients and staff within speciality 	<p>Clinical</p> <ul style="list-style-type: none"> • Has a high profile within related clinical area and is available to nursing staff for additional support and advice in patient care delivery • Contributes to the management and care of acute and long term conditions • Prescribes appropriate medications if qualified non-medical prescriber or administers according to patient group directions • Responsible for providing and advising on the direct delivery of clinical and social care • Undertakes patient assessment, performing clinical examination and arranging relevant investigations, interpreting results and acting on such information appropriately, depending on level of training. • Proactive case management • A flexible approach to workload re priorities in order to prevent problems, react to and rescue patient care delivery • Demonstrate a high level of communication skills • An advocate for patients and staff within speciality

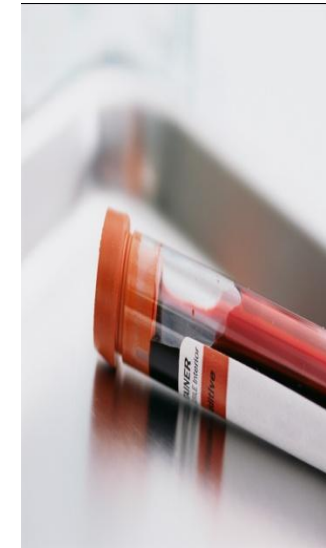
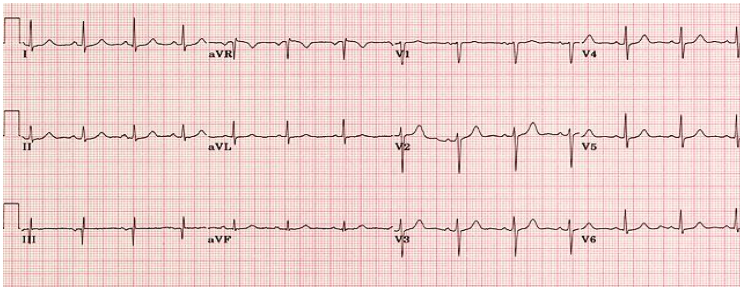
Developing Clinical Skills

- Physical examination
- History taking
- Requesting and interpretation of investigations
- Making/receiving referrals



Developing Clinical Skills

- Manage patient caseloads
- Prescribe medicines and treatments
- Run clinics



C.N.O. 10 key roles for nurses

The NHS Plan (July 2000) www.nhs.uk/nationalplan

Training

- Advanced practice
- BSc/?MSc
- Relevant courses
- Knowledge base
- Observation
- Supervision
- Evaluation
- Performance review



Autonomous Practice

“Having the authority to make decisions and the freedom to act in accordance with one’s professional knowledge base”

(Skar, Journal of Clinical Nursing, 2010)



Why is Competency Important?

- Maintains standards
- Measurable
- Facilitates good practice
- Patient safety
- Organisational accountability/liability
- Professional accountability

Code of Conduct

NMC Nursing &
Midwifery
Council

The Code

Standards of conduct,
performance and ethics
for nurses and midwives

Skills and knowledge:-

- You must have the knowledge and skills for safe and effective practice when working without direct supervision.
- You must recognise and work within the limits of your competence.
- You must keep your knowledge and skills up to date throughout your working life.
- You must take part in appropriate learning and practice activities that maintain and develop your competence and performance.

Standards for Competence



All nurses must:-

- Be responsible and accountable for keeping knowledge and skills up to date through continuing professional development. Aim to improve performance and enhance the safety and quality of care.
- Practise independently, recognising the limits of competence and knowledge. Reflect on these limits and seek advice from, or refer to, other professionals where necessary.
- Appreciate the value of evidence in practice, be able to understand and appraise research, apply relevant theory and research findings.

NMC – Hearings and Outcomes

An example whilst employed as a

1. Failed to inform Patient A that the results of her vaginal swab were abnormal.
2. Diagnosed Patient B with Chronic Obstructive Pulmonary Disease, when you knew or ought to have known that the patient had asthma.
3. Prescribed Patient C with a course of Trimethoprim alongside Methotrexate, when you knew or ought to have known that these two medications are contraindicated and prescribed Trimethoprim when you were not a Nurse Prescriber.
4. Prescribed Patient D Furosemide for leg oedema without the patient seeing a GP;
 - b) Failed to record the patient's symptoms and/or diagnosis and/or prescription of Furosemide in the patient's medical records;
 - c) Failed to arrange follow up blood tests and/or a GP review;
 - d) Failed to arrange a holistic assessment from a GP owing to the patient's leg swelling.

In light of the above your fitness to practise is impaired by reason of your misconduct.

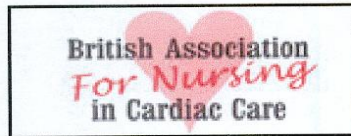


Competence 1

Collins English Dictionary

‘the condition of being capable, ability’.

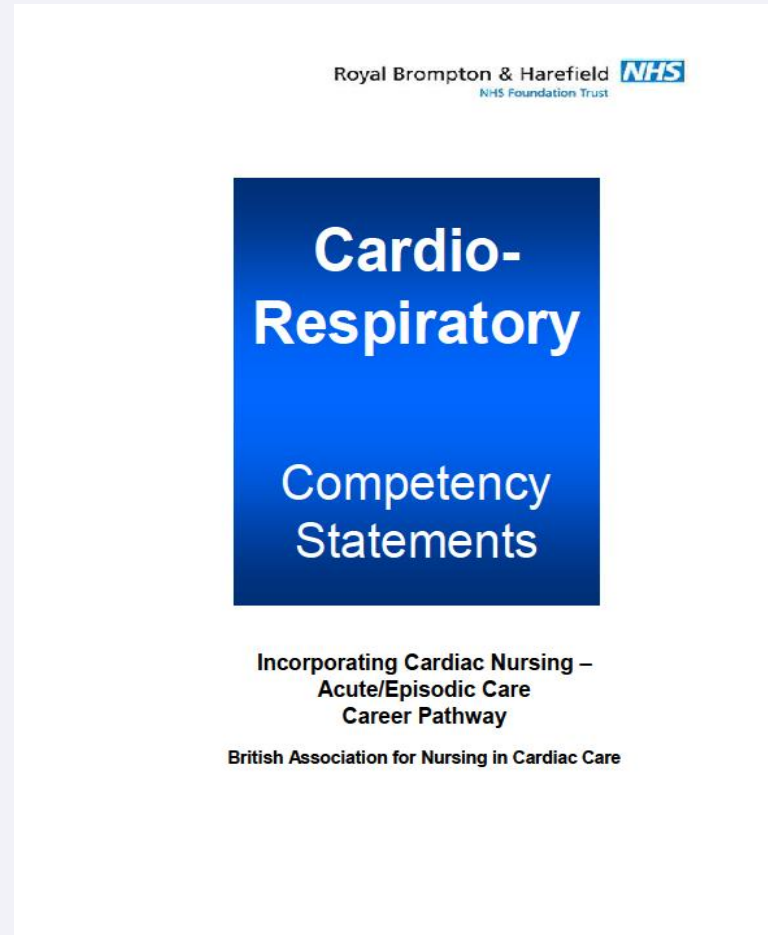
Competence 2



Cardiac Nursing - Acute/Episodic Care Career Pathway

Competency Statements

Competence 3



Competence 4

Our Culture of Compassionate Care 



**The
6 Cs**

1. Care
2. Compassion
3. Competence
4. Communication
5. Courage
6. Commitment



Who Should Run Nurse-Led Services?

- Complex clinical work is undertaken by specialist nurses in many different contexts using a wide range of interventions (Leary, 2008)
- Right people with the right skills, in the right place at the right time
- Competence and training



Policies, Guidelines and Protocols

- New areas of working for nurses
- Nurses are familiar with working to guidelines/protocols/procedures
- Enables practice to be measured
- Provides role clarity
- Ensures standard of care



Examples From My Practice

- Admission for transplant assessment
- Immunoadsorption service
- Oesophageal impedance/pH testing



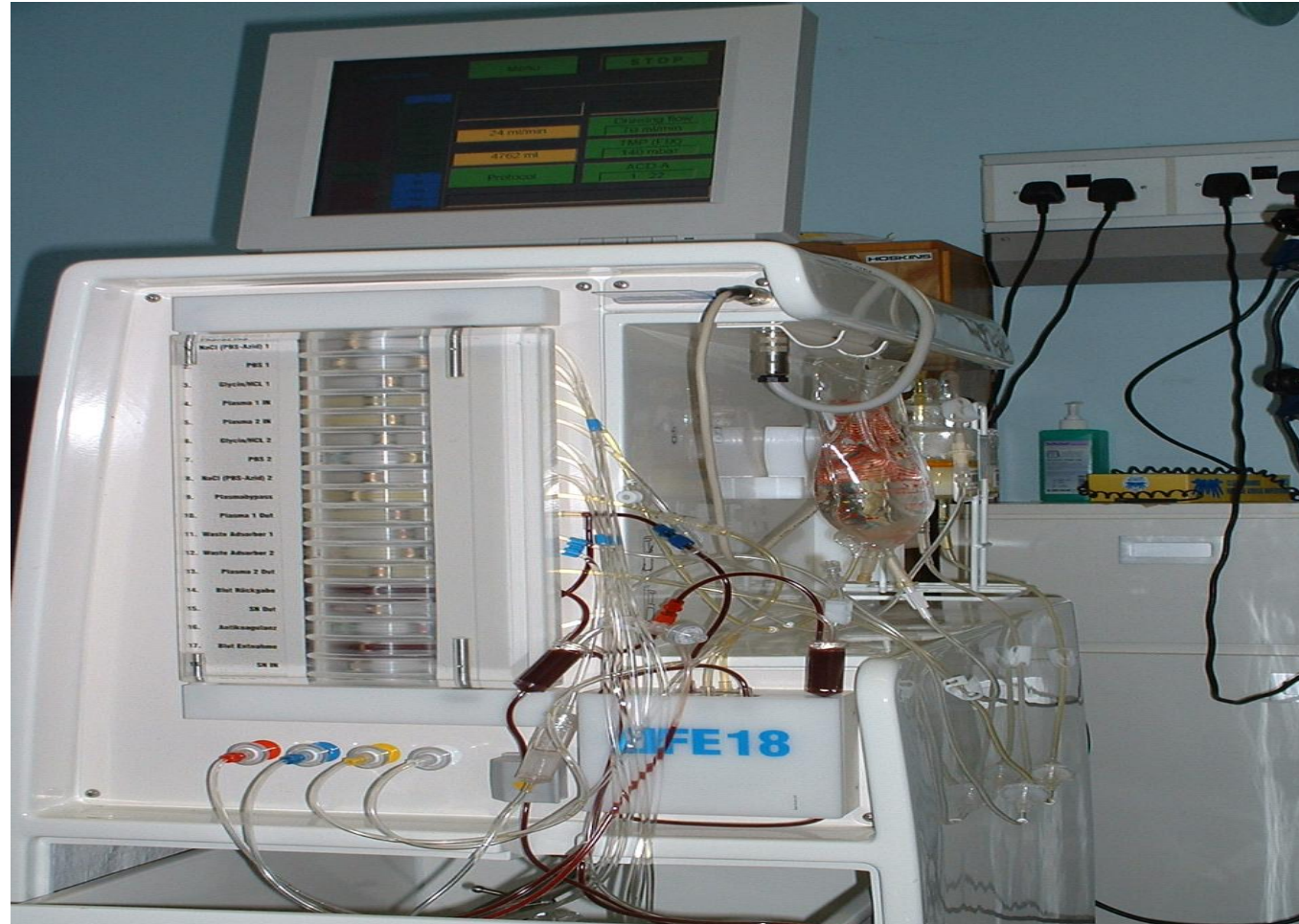
Lung Transplant Assessment

- Medically led
- Observation of practice
- Agreed pathway of care
- Protocol written

Competence

- BSc level physical examination course
- Period of supervision
- IRMER training completed
- Some medical input maintained
- Expansion of nursing roles

Immunoadsorption Service





Immunoadsorption Service

- Dialysis type treatment for patients with antibody mediated organ rejection
- Only a few units UK undertake this treatment
- Treatment is carried out when determined by patients clinical status
- Service started in 2003
- Nurse-led service



Competence

- Service initially run by Cardiology Nurse Consultant
- Training from machine manufacturer
- Trained Nurse Specialists
- Competency based
- Annual update from manufacturer
- UK annual update meeting

Immunoadsorption - Competency

Immunoadsorption Therapy					
Competency Statements		Competency Achieved		Competency maintained	
		Evidence utilised:	Peer reviewed:	Evidence utilised:	Peer reviewed:
2.1	<i>Skill:</i> Demonstrate the ability to set up the Life 18 machine for immunoadsorption therapy.				
	<i>Knowledge:</i> Describes indications for treatment and relevant equipment required.				
2.2	<i>Skill:</i> Demonstrates the ability to safely perform an immunoadsorption treatment.				
	<i>Knowledge:</i> Describes the operation of the machine and the normal parameters during a treatment.				

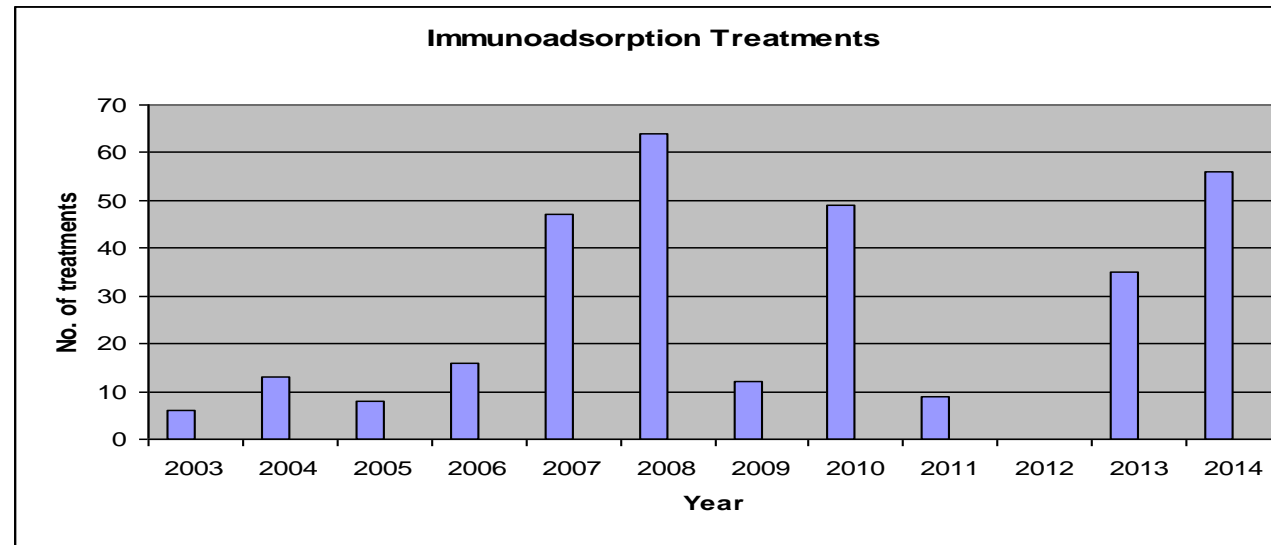
Competence - PGD

Staff Characteristics	
Professional Qualifications	Registered Nurse on Part 1 of the Register maintained by the Nursing & Midwifery Council (NMC) and employed as either a Nurse Consultant in Transplantation/Nurse Specialist in Transplantation or qualified transplant nurse at the Royal Brompton & Harefield NHS F.T.
Specialist competencies or qualifications	<p>Has completed assessment and viva. Must have demonstrated an appropriate level of understanding and knowledge regarding:</p> <ul style="list-style-type: none"> • Therasorb treatment • Knowledge of the basic pharmacology, actions, interactions, side effects, adverse reactions, indications, cautions and contra-indications of all the drugs within the direction. • Knowledge of the legal and professional implications of drug prescribing, dispensing and administration, including knowledge of the Supply and Administration of Medicines under Group Protocols as directed by current NHS Executive Health Service Circulars. <p>In addition:</p> <ul style="list-style-type: none"> • Completion of <u>apheresis competencies</u> • Observing and assisting with at least 20 Ig Therasorb treatments • <u>Lead at least 10 Ig Therasorb treatments</u> under supervision • Practises in accordance with the 'Standards for Medicines Management' (NMC 2008) • Practices in accordance with 'Record Keeping: Guideline for nurses and midwives (NMC 2009) • In accordance with 'The Code: Standards of conduct, performance and ethics for nurse and midwives' (NMC 2008), <u>the nurse must acknowledge any limitations in competence</u> and decline any duties or responsibilities unless able to perform them in a safe and skilled manner. <p>Must have successfully completed:</p> <ul style="list-style-type: none"> • Medicines management training • ILS/ALS certification

Immunoadsorption Service

To date:-

- 20 patients post heart transplant
- 10 patients post lung transplant

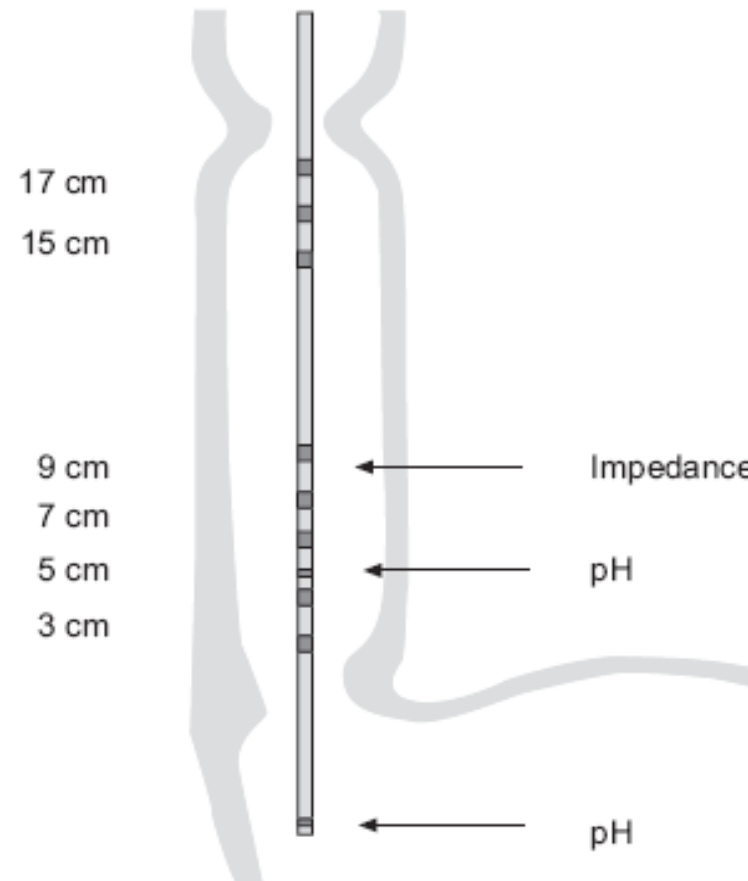
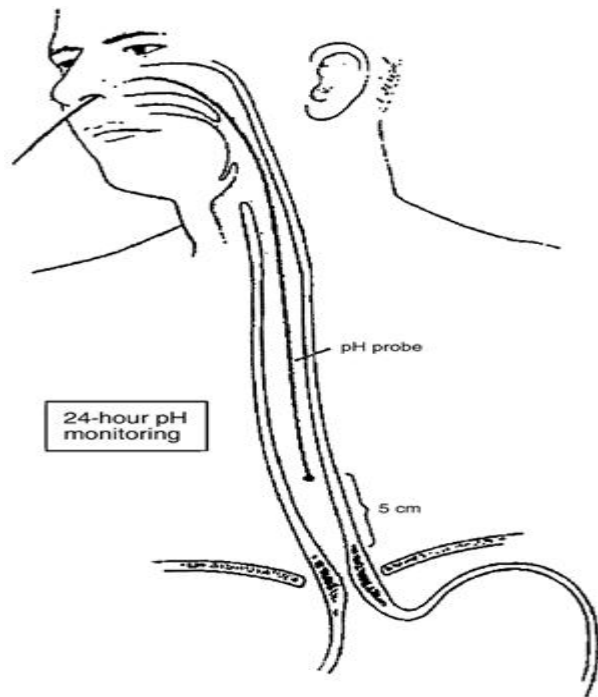




Oesophageal Impedance/pH

- An oesophageal impedance/pH study is undertaken to diagnose reflux
- Main cohort of patients - post lung transplantation
- Generally undertaken in respiratory function departments

Oesophageal Impedance/pH



Competence

- Service started in 2011
- No specific training available
- Observation of medical input
- Protocol written
- Agreed pathway of care
- Assessed by medical consultant

Impedance/pH Competency

OESOPHAGEAL IMPEDANCE/pH MONITORING					
Competency Statements		Competence achieved		Competence maintained	
		Evidence utilised:	Peer reviewed:	Evidence utilised:	Peer reviewed:
2.1	<i>Skill:</i> Demonstrates an understanding of the indications for an oesophageal impedance/pH study.				
	<i>Knowledge:</i> Describes the basic anatomy and physiology of the upper gastrointestinal tract. States the indications for the study.				
2.2	<i>Skill:</i> Demonstrates the ability to prepare equipment for insertion of impedance probe. States the contraindications and potential complications of the insertion.				
	<i>Knowledge:</i> Describes equipment required, the operation of the machine and normal parameters during the procedure. Prepares equipment appropriately. Is able to state contraindications and potential complications of the insertion.				



Oesophageal Impedance/pH

- Since 2011, 330 probes inserted
- Expansion of nursing roles
- A second nurse has been trained and a third is in training
- Nurse-led service
- Annual update/audits

What Next?

- New services to be developed:-
 - Extracorporeal photopheresis (ECP)
 - Study day, company competencies, literature review, organise visit to other centre, organise training, supervision, assessment, competence
 - Photodynamic Therapy
 - Visit to centre where treatment undertaken, company competencies, study day, literature review, organise training, supervision, assessment, competence

Competence

- Identify learning needs
- Literature search
- Best practice evidence – FONS, NICE
- Visit “centres of excellence”
- Online learning modules, University courses
- Documentation
- Assessment
- Maintaining competence
- Evidence – professional portfolio/appraisal



Summary

- Experienced nurses are in a good position to assess services offered to patients and to consider alternative ways of working.
- Nurse led clinics can improve the provision of quality care and increase productivity.
- Nurse led initiatives offer opportunities for professional role development and increased job satisfaction.



Conclusion

Advanced nursing practice is about the “advancement of practice” in order to bring about improvements in the quality of care delivered to patients.

Nurses must demonstrate competence within the roles undertaken and consider how this competence is maintained.



Conclusion

- Exciting time for nursing
- Numerous opportunities for role development
- Continuous need for ongoing education
- Good quality patient care is paramount
- Must demonstrate competency



Thank you for your attention