Roles, Responsibilities and Competency

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Introduction to the Generic Competency Framework

- Competency document available for Registered Nursing/ Midwifery staff and Operating Department Practitioners
- Competency document available for unregistered staff such as Health Care Support workers
- Available for new employees to Portsmouth Hospitals NHS Trust
Introduction Generic Competency Framework

Why Assess Competency?
Introduction Generic Competency Framework

- Competence and competences are job related, being a description of an action, behaviour or outcome that a person should demonstrate in their performance.

- Competency and competencies are person orientated, referring to a person’s underlying characteristics and qualities that lead to effective/superior performance in their job.

- Therefore the expectations of the framework relate not only to effective performance but also to professional and skill development.
Introduction Generic Competency Framework

- A well trained and competent workforce is vital for the delivery of safe and effective patient centred care.

- The Generic Competency Framework for Registered and Unregistered Practitioners is a Trust policy that details expectations of core competencies that staff require to be able to fulfill their role to a minimum expected standard of performance.
Accountability

- GENERIC COMPETENCY FRAMEWORK FOR REGISTERED AND UNREGISTERED PRACTITIONERS Policy:

- 4.41 Registered Practitioners are accountable to their professional bodies in accordance with the standards for conduct, performance and ethics, to the patient and public under civil and criminal law and their employer under employment law. Accountability to the employer is discharged by acting in accordance with organisational policy and procedure.
Professional Standards

- Keep your knowledge and skills up to date, taking part in appropriate and regular learning and professional development activities that aim to maintain and develop your competence and improve your performance.

- Maintain the knowledge and skills you need for safe and effective practice.
Professional Standards

Be able to practice safely and effectively within their scope of practice

1.1 know the limits of their practice and when to seek advice or refer to another professional

Be able to maintain fitness to practice

3.3 understand both the need to keep skills and knowledge up to date and the importance of career-long learning
Accountability

- GENERIC COMPETENCY FRAMEWORK FOR REGISTERED AND UNREGISTERED PRACTITIONERS Policy:

- 4.42 Unregistered Practitioners are accountable for their actions to the patient and public under civil and criminal law and to their employer under employment law. The expectation to follow their contract of duty which is their job description and act in accordance with organisational policy and procedure.
Delegation

- Only delegate tasks and duties that are within the other person’s scope of competence, making sure that they fully understand your instructions.
- Make sure that everyone you delegate tasks to is adequately supervised and supported so they can provide safe and compassionate care, and
- Confirm that the outcome of any task you have delegated to someone else meets the required standard.

Section 11. NMC Code (2015)
Expectations
Health Care Support Workers / Unregistered practitioners

- All Health Care Support Workers are required to complete the first four competencies as soon as possible after commencing employment with the Trust.
- Completion of the remaining core competencies that are relevant to your practice area must then be completed during the first 12 months in post.
- Should be completed and signed at level 1 as a minimum requirement.
- Not every element of each core competency may be achievable for all staff – discuss with ward manager
Expectations
Registered Nurses/ Midwives and ODP’s

- Work in accordance with your professional body’s code of conduct - Nursing and Midwifery Council or Health and Care Professions Council Standards of conduct, performance and ethics
- Expectation of self regulation
- Required to complete the first four competencies as soon as possible at the start of employment
  - (Basic Life Support,
  - Anaphylaxis,
  - Patient Centred Dignity in Care
  - Documentation and Record Keeping)
Expectations
Registered Nurses/ Midwives and ODP’s

- Core competencies should be completed and signed at level 2 as a minimum requirement.
- Not every element of each core competency may be achievable for all staff - discuss with your manager.
- Some specialties require you to complete specialty specific competencies such as Theatres, the Emergency Department and Neonates.
- Any additional specialty specific competencies should be completed within a time frame agreed with your manager.
### Competency Statement: Documentation and Record Keeping

<table>
<thead>
<tr>
<th>Competency Indicators 1st Level</th>
<th>Achieved Assessor Signature</th>
<th>Competency Indicators 2nd Level</th>
<th>Achieved Assessor Signature</th>
<th>Competency Indicators 3rd Level</th>
<th>Achieved Assessor Signature</th>
<th>Competency Indicators 4th Level</th>
<th>Achieved Assessor Signature</th>
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</thead>
<tbody>
<tr>
<td>a) Demonstrate understanding of the key principles of the Trust’s Health Records Management policy and Nursing and Midwifery Council (NMC) Standards for Record Keeping (if applicable).</td>
<td></td>
<td>b) Demonstrate awareness of the requirements set out under the Data Protection Act and Freedom of Information Act on how it relates to practice.</td>
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<td>c) Describe your responsibility and accountability in maintaining health records and the confidentiality of patient information.</td>
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<td>d) Ensure patient demographic records are accurate on each patient episode.</td>
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<td>e) Produce legible, factual and accurate patient records that are written up as soon as a possible after an intervention and are signed, dated and timed with a full name and job title against the first entry.</td>
<td></td>
<td>f) Demonstrate that your documentation is unambiguous, not containing jargon, abbreviations and any alterations are dated, timed and signed and remain legible. Delete using a single line through incorrect text.</td>
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<tr>
<td>Level 1 plus a) Demonstrate evidence in record keeping that as a registered practitioner you have honoured your duty of care providing e.g. - Full account of the assessment, plan and provision of care. Relevant information about the patient’s condition. Records of referrals/arrangements for continuing care. b) Complete the Trust’s Care Record Documents in accordance with the expectations set out in the document of 3 times in 24 hours (morning, evening and at night). c) Demonstrate appropriate increases in the frequency of record keeping in accordance with patients with complex needs. d) Supervise and countersign unregistered practitioners’ student entries. e) Describe your role in supporting patient and parent held records in accordance with policy. f) Be aware of the retention periods for patient records.</td>
<td></td>
<td>Levels 1 &amp; 2 plus a) Describe your role in the use of patient records for research, teaching and supervision. b) Participate in audit to ensure the quality of patient care. c) Act as a mentor and teacher to junior colleagues role modelling best practice in record keeping.</td>
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<td></td>
<td>Levels 1, 2 &amp; 3 plus a) Maintain a system to ensure the requisite standards for record keeping within the ward/department. b) Lead record keeping audit in your clinical area to assure standards and respond with appropriate actions plans to address issues and maintain standards.</td>
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Support in Practice

- NMC Code - Professional standards of practice and behaviour for nurses and midwives (2015) states that:
  - Share your skills, knowledge and experience for the benefit of people receiving care and your colleagues
  - Provide honest, accurate and constructive feedback to colleagues
  - Support students’ and colleagues’ learning to help them develop their professional competence and confidence.
Support in Practice

- Mentor
- Buddy
- Peer Review
- Practice Educator
- Line Manager
- Specialist Nurse or Practitioner
- Feedback, review, appraisal
Generic Competency Framework is available on the Trust Intranet site
**GENERIC COMPETENCY FRAMEWORK**

**So what is the Generic Competency Framework?**

For registered practitioners, the generic competencies should be achieved to a minimum level 2.

The NMC Code of Professional Conduct: Standards for Conduct, Performance and Ethics (2004) states that: "To practice competently, you must possess the knowledge, skills, and abilities required for lawful, safe, and effective practice without direct supervision. You must acknowledge the limits of your professional competence and only undertake practice and accept responsibilities for those activities in which you are competent."

The Generic Competency Framework for Registered and Unregistered Practitioners is a nursing and midwifery policy and is available on the Trust Intranet in the policy & guidelines section. The framework sets out the Trust's expectations for safe and effective practice, in other words, the skills, knowledge, and ability that you need to provide care to your patients/clients.

There are generic competencies identified for all staff to achieve.

**Registered Practitioners**

<table>
<thead>
<tr>
<th>Staff Groups</th>
<th>Competencies</th>
<th>Comments</th>
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<tbody>
<tr>
<td>All Registered Nurses, Midwives and Operating Department Practitioners</td>
<td>- Basic Life Support or equivalently trained (maternal, neonatal, child health, adult)</td>
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<td>- Anaphylaxis (Adult)</td>
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<td>- Patient Centred Dignity in Care</td>
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<td></td>
<td>- Documentation and Record Keeping</td>
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<tr>
<td>Ward/Dept based front line staff involved in direct patient care as appropriate to clinical requirements</td>
<td>- Assess the physical wellbeing of the adult</td>
<td>*Only for staff involved in handling blood products</td>
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<td>- Transfusion</td>
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<td>- Administration of medication</td>
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<td>- Falls prevention</td>
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<td>- Moving and Handling</td>
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<td>- Nutrition</td>
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<td></td>
<td>- Management of Pressure Areas</td>
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<td></td>
<td>- Washing, recording and assessment of vital signs in adults</td>
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Please discuss these with your ward/department managers as they will form part of your appraisal and personal development review (APDR).

These are guides to your development and will provide evidence of achievement for your personal review as part of the Knowledge and Skills Framework (KSF). Some clinical specialities have specific competencies relevant to their area of practice and these will be aligned to this generic framework.

**Key to Evidence Gathering Methods | Mapping Document | Neonatal Mapping Document**
Departmental/Speciality Competencies

Other competencies available, which can be incorporated into Departmental/Speciality Competency requirements

Alcohol Misuse
Administration of Botulinum Toxin in the treatment of Blepharospasm
Administration of Chemotherapy to Adult Patients
Assisting in the giving of medications – Unregistered Practitioners
Administering of BCG
Adult Arterial Blood Gas Sampling
Analgesia Generic
Assessing the Physical Well-Being of an Adult Patient
Breastfeeding (for Midwives and relevant Paediatric/Neonatal staff only)
Cannula Care (Peripheral Venous Device (PVD))
Cannulation (Adult)
Care of a Chest Drain
Care of Central venous Pressure (CVP) Line
Care of obstetric women post anaesthesia/post operative procedure
Checking of Resus Equipment
Delivering Personal Care
Dementia
Diabetes and Acute Illness
Diabetes and Blood Glucose Monitoring
Diabetes and Consultation skills
Diabetes and Telephone Calls and Consultations
Diabetes and Patient Education
Diabetes and Elective Surgery
Diabetes and the Management of Glucose, Insulin and Potassium Infusions
Diabetes and Hypoglycaemia
Diabetes Management with other Injectable Therapies
Diabetes and Insulin Pump Therapy
Diabetes and Insulin Therapy
Diabetes and Nutritional Requirements
Diabetes and Oral Medications
Diabetes in Pregnancy and Pre-Conception
Diabetes and Management of Risk Factors
DIEP flap post-operatively for Registered Nurses
Discharge Planning
Dysphagia
Continence & Elimination
ECG - Recording 12 Lead
Emergency Eye Clinic
EMF Competency
Epidural
Eye Department Competency for Peripheral Clinics
Eye Department Competency for Lucentis Injection Clinic
Female Catheterisation

Falls
Fine Bore NG Tube
Intra Aortic Balloon Pump
Intra-operative Cell Salvage
Intravenous Drug Administration - Neonates
Intravenous Drug Administration - Adult
Intravenous Drug Administration - Child
Maintaining Optimum Fluid Balance
Manage an Epidural Infusion
Metaraminol infusions
Mai Catheterisation
Manual Handling
Non invasive ventilation (NIV) in adults
Nurse Led Discharge
Parenteral Nutrition
Patient Transfer From Theatres
PCA Competency
Perineal Repair
Phlebotomy (Adult)
Phlebotomy, Heel Pricks and Arterial Blood Sampling in Neonates
F.I.C.C
Post-op free flap monitoring
Plan and Intervene to Address the Immediate Physical Needs of the Critically Ill Adult – LEVEL 1
Post-operative reinfusion of patient’s own shed blood – Theatres and Recovery
Post-operative reinfusion of patient’s own shed blood – Ward/Clinical Area
Prevention of Pressure Ulcers
Safeguarding Adults
Simple Wound Dressing
Spinal injury - manoeuvring and assessing a patient
Stoma Care
Supplemental Oxygen Therapy in Adult
Tracheostomy Care Competency
Thrombilia
Transfusion
Undertaking Patient Histories and Clinical Examination
VAC Therapy

Child Health Competencies

Administration of medication (Neonates)
Arterial Blood Gas Sampling (Neonates)
Cannulation (Neonates)
Child Anaphylaxis
CVC Paediatrics
Fine Bore Naso-gastric Feeding Tube
TIVAD Paediatrics
Midwives - Post operative Care
Oxygen Therapy (Neonates)
Tracheostomy (Neonates)
Weighing a Child
Evidence

- Observation of products e.g. medicines round
- Testimony of others
- Candidate’s explanation of process/review of work
- Naturalistic observation of workplace activity.
- Assessment of prior achievement
- Oral/written questioning
- Projects/assignments/case studies
Questions