

# National Curriculum and Competency Framework Emergency Nursing (Level 2)



# Acknowledgements

This Royal College of Nursing (RCN) curriculum and competency framework for emergency nursing was produced by a working party of emergency nursing representatives from across the United Kingdom. Special thanks go to the individuals who gave their time and expertise to make this possible.

## Working party members

Janet Youd	Chair, RCN Emergency Care Association (ECA), Emergency Nurse Consultant, Calderdale and Huddersfield NHS Foundation Trust
Bruce Armstrong OBE	Consultant Nurse in Emergency Care, Hampshire Hospitals NHS Foundation Trust, Hampshire and Isle of Wight Air Ambulance
Jasmin Clark	Advanced Nurse Practitioner, Royal Infirmary Edinburgh
Anna Crossley	Royal College of Nursing (RCN) Professional Lead for Acute, Emergency and Critical Care
Roisin Devlin	ECA Committee Member, Lead Nurse for Emergency Departments, South Eastern Health and Social Care Trust, Northern Ireland
Owen Hammett	ECA Committee Member, Trainee Specialist Practitioner – Critical Care, South Western Ambulance Service NHS Foundation Trust
Jacky Price	ECA Committee Member, Principal Lecturer University of Hertfordshire
Kevin Randall	Lead Nurse/ANP Emergency Department, Bridgend, Abertawe Bro Morgannwg University Health Board
Michelle Rudd	Emergency Nurse Consultant, Lincolnshire Hospitals
Mandy Rumley-Bus	ECA Committee Member, Consultant Nurse, Emergency Care Improvement Programme
Simon Standen	ANP/Matron, University Hospitals Leicester/Paramedic Consultant, Yorkshire Ambulance Service
Dr Anne Welling	Emergency Nurse Consultant, Portsmouth, Chair Wessex Emergency Care Collaboration
Jill Windle	RCN Fellow, Lecturer Practitioner, Salford University/Salford Royal NHS Foundation Trust

In addition to individual work, the development of this framework would not have been possible without the preceding work shared or published by various organisations; in particular the Wessex Emergency Care Collaboration, the Faculty of Emergency Nursing and the Intercollegiate Board for Training in Pre-Hospital Emergency Medicine (IBTPHEM).

## RCN Legal Disclaimer

This publication contains information, advice and guidance to help members of the RCN. It is intended for use within the UK but readers are advised that practices may vary in each country and outside the UK.

The information in this booklet has been compiled from professional sources, but its accuracy is not guaranteed. Whilst every effort has been made to ensure the RCN provides accurate and expert information and guidance, it is impossible to predict all the circumstances in which it may be used. Accordingly, the RCN shall not be liable to any person or entity with respect to any loss or damage caused or alleged to be caused directly or indirectly by what is contained in or left out of this website information and guidance.

Published by the Royal College of Nursing, 20 Cavendish Square, London W1G 0RN

© 2017 Royal College of Nursing. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means electronic, mechanical, photocopying, recording or otherwise, without prior permission of the Publishers. This publication may not be lent, resold, hired out or otherwise disposed of by ways of trade in any form of binding or cover other than that in which it is published, without the prior consent of the Publishers.

# Foreword

Over 20 million patients access emergency and urgent care in the NHS each year in a range of settings and services. Central to each of these services are the nursing teams working alongside other professional colleagues to ensure that these patients and their families receive world-class care. The increasing demands and challenges on the NHS emergency care system have seen it evolve significantly in the last twenty years in the United Kingdom. Technological and clinical advances, coupled with the introduction of integrated emergency care networks, involving major trauma centres, and other centres of excellence, with emergency departments and urgent care centres, ensure patients can expect to receive quality and compassionate care responsive to their needs.

Alongside these clinical and service developments, emergency nursing has also progressed, both in terms of its ability to improve outcomes for patients and their families, and to enrich the profession of nursing itself, through evidence-base and role development. There is now an increasing diversity of nursing roles required in emergency care settings, demanding specialist and advanced skills and knowledge. Each brings a significant contribution to the multi-professional team in the modern emergency care environment.

This framework, developed by leading emergency nursing experts, is founded on nursing philosophy and details the depth and breadth of knowledge and skills required of emergency nurses. It offers long overdue clarity on the nomenclature of nursing roles in emergency care settings and provides a clear career structure for those wishing to advance in the specialism. It will facilitate consistency and continuity of educational preparation of emergency nursing teams, as well as future workforce planning, and will be an extremely valuable resource for both individual nurses and organisations.

**Ruth May**

Executive Director of Nursing  
NHS Improvement

# Contents

<b>1</b>	<b>Introduction</b>	<b>5</b>	<b>Cross-cutting themes Level 2</b>	<b>24</b>
	Preceptorship and induction	5	CCT1 – Patient assessment	25
	Glossary of nursing roles	6	CCT2 – Pain assessment and management	27
	Emergency nurse development pathway	7	CCT3 – Medicines management	28
	Foundation practice – Working to Level 1 competencies	8	CCT4 – Moving and handling	30
	Emergency nurses – Working to Level 2 competencies	8	CCT5 – Infection prevention and control	31
	Emergency nurse development – Beyond Level 2	8	CCT6 – Safeguarding children and adults	32
	The competence framework	9	CCT7 – Documentation and record keeping	34
	Good nursing practice	10	CCT8 – Preventing and controlling violence and aggression	35
	Cross-cutting themes	11	<b>Clinical domains Level 2</b>	<b>36</b>
	Emergency care clinical domains	12	CD1 – Caring for acutely ill adults	36
	Competence assessment	13	CD2 – Caring for adults requiring resuscitation	54
	The role of the clinical supervisor/assessor/mentor	14	CD3 – Caring for adults with minor illness or injury	67
<b>2</b>	<b>Level 2 competencies:</b>		CD4 – Caring for children and young people	75
	<b>Good nursing practice Level 2</b>	<b>15</b>	CD5 – Caring for people with mental health needs	90
	GNP1 – Professional behaviour	16	CD6 – Caring for older people	95
	GNP2 – Team working	17	CD7 – Emergency planning and disaster management	101
	GNP3 – Communication	18		
	GNP4 – Leadership and management	19		
	GNP5 – Education	20		
	GNP6 – Evidence-based practice	21		
	GNP7 – Legal and ethical dilemmas and decision making	22		
	GNP8 – Service evaluation and improvement	23		

# 1. Introduction

This framework was produced in response to a demand from RCN Emergency Care Association members for clarity in the competencies expected of nurses working in emergency care settings across the UK. Whilst its development focused on the needs of nurses working in emergency departments (EDs), the framework will also be applicable to nurses working in a wide range of urgent and emergency care settings and also other health care professionals who are required to care for patients in emergency care settings. The aim is to encourage professional development, leadership skills, and career progression in emergency nursing; promoting high quality patient care and a culture that supports recruitment and retention of emergency nurses. The framework is designed to support nurses from newly qualified or new to the specialty (foundation staff nurse) through to more experienced emergency nurses working with patients of all ages.

Nurses working in emergency care settings that receive trauma should also follow the trauma competency framework developed by the National Major Trauma Nursing Group. These competencies can be found at: [www.nmtng.co.uk/emergency-dept-1.html](http://www.nmtng.co.uk/emergency-dept-1.html)

Competencies for advanced clinical practitioners in emergency care have been developed by the Royal College of Emergency Medicine (RCEM) and Health Education England (HEE). These have been endorsed by the RCN and are available at: [www.rcem.ac.uk/RCEM/Exams\\_Training/Emergency\\_Care\\_ACP/RCEM/Exams\\_Training/Emergency\\_Care\\_ACP/Emergency\\_Care\\_ACP.aspx?hkey=8244ccaf-e85a-4b1e-8f8d-152484810137](http://www.rcem.ac.uk/RCEM/Exams_Training/Emergency_Care_ACP/RCEM/Exams_Training/Emergency_Care_ACP/Emergency_Care_ACP.aspx?hkey=8244ccaf-e85a-4b1e-8f8d-152484810137)

## Preceptorship

All nurses joining the NMC register have demonstrated their ability to undertake a wide range of core nursing skills with competence. This framework recognises the acquisition of these skills and seeks to build specific competence in emergency nursing. The guidance provided in the Preceptorship framework for newly registered nurses, midwives and allied health professions (DH, 2009), should act as a useful resource.

## Induction

A period of structured support is vital for all nurses who are new to the emergency care environment. For nurses who have clinical experience elsewhere, their transition into emergency care may be less challenging, and their progress in achieving the competencies may be accelerated in comparison to that of the newly qualified nurse.

The emergency care environment is stressful and challenging and for emergency nurses to develop and work effectively, they need to maintain personal wellbeing. To develop resilience, emergency nurses should feel supported in exploring their experiences, to enable reflection and learning. The need for emotional support at any stage in an emergency nurse's career should never be underestimated.

## References

Department of Health (2009) *Preceptorship framework for newly registered nurses, midwives and allied health profession*. London: DH.

## Glossary of nursing roles in the emergency care setting

**Foundation staff nurse:** A registered nurse who is either newly qualified or new to emergency nursing; has not yet acquired the competencies of an emergency nurse. These nurses require supervision in practice, ranging from direct supervision in their initial weeks, to indirect supervision as they near the accomplishment of an emergency nurse. They should be working to complete the Level 1 competencies. Typically, they would be Band 5.

**Emergency nurse:** A registered nurse who has completed preceptorship and has achieved the Level 1 competencies. They can work with individual patients or groups of patients without direct supervision in the emergency care setting. This includes initial assessment and the provision of treatment (but not diagnosis) for patients. In EDs, this is likely to include working with patients in the resuscitation room, those with major illness or injury and those with minor presentations. They should be working to complete the Level 2 competencies. Typically, they would be Band 5 or 6.

**Emergency charge nurse:** An emergency nurse who has completed level 2 competencies, is a clinical expert and proactively develops themselves and others. They lead and supervise the clinical work of others and can manage the emergency care setting as a whole; managing patient flow and delegating care accordingly. In EDs they should work in close partnership with the emergency medicine consultant to ensure safety of patients and best use of resources. They should focus on more in-depth leadership, educational and/or research competencies, which are beyond the scope of this framework. Typically, they would be senior Band 6 or 7.

**Emergency nurse practitioner (ENP):** A registered nurse who has undertaken specific additional training in order to assess, diagnose and prescribe treatment for patients who present with minor injuries and or illness. The role of emergency nurse practitioner is subject to local variation in education and practice provision, therefore this framework does not provide the competencies required for this role. Typically, they would be Band 6 or 7.

**Advanced clinical practitioner (ACP):** An emergency nurse or other registered allied health professional who has undergone masters level education in examination, diagnosis and treatment and can provide a clinical consultation for any patient presenting to emergency care. They should be working to the Royal College of Emergency Medicine/Health Education England emergency care ACP competency standards. Typically, they would be Band 8a or 8b.

**Practice educator:** This is an emergency nurse having completed Level 2 competencies who facilitates educational opportunities in the emergency care setting. They provide supervision in practice, deliver training sessions and assessment of competencies. They often teach on nationally recognised courses (for example, advanced life support). They should be working towards education-specific competencies and/or qualifications. Typically, they are Band 6 or 7 depending on the leadership responsibilities of the role.

**Practice development lead:** This is an emergency nurse having completed Level 2 competencies who leads the education strategy for the emergency care setting. They will provide supervision in practice and deliver some training sessions, whilst establishing the training requirements in the setting to ensure the necessary workforce skill mix. They will link the education strategy for the emergency care setting with the overall strategy for education in the organisation. They will work closely with the lead nurse manager, the medical clinical director and other education providers, including higher education institutes (HEIs). They will typically be Band 7 or 8a.

**Lead nurse manager:** This is an emergency nurse having completed Level 2 competencies who is responsible for the day-to-day operational management of the emergency care setting, including workforce management and implementation of local policy and clinical guidelines. Typically, Band 7 or 8a.

**Matron:** This is an emergency nurse having completed Level 2 competencies who is responsible for quality assurance and quality improvement in the emergency care setting; including responding to patient feedback and ensuring clinical incidents are investigated and any recommendations actioned. Typically, Band 8a.

**Emergency nurse consultant:** A clinical expert in emergency nursing with responsibility for emergency care leadership; including strategic development of policy and practice, research, education and advanced clinical practice. Typically, Band 8b or 8c.

## Emergency nurse development pathway

A clearly defined development pathway enables nurses to identify their position on a career journey, consider future options and plan the steps required to achieve their career aims.

Figure 1 maps the professional development pathways into management, education or clinical specialist roles for emergency nurses. Defining stages within the pathway not only facilitates career progression, but may also inform workforce development.

**Figure 1: Career development pathway overview**



## Foundation practice – Working to Level 1 competencies

The newly qualified nurse requires at least 12 months to consolidate their nurse training in addition to developing the competencies to be an emergency nurse. In total, it may take them up to two years to become an emergency nurse.

Nurses new to the emergency care environment, but with previous nursing experience, should aim to complete their Foundation Level 1 competencies within 12 months. They may achieve them sooner if their previous experience is in an acute or critical care environment.

### Developmental milestones of foundation staff nurse

#### Three months

- Be familiar with the environment and work as a member of the team caring for patients under supervision of an emergency nurse.
- Understand operational and patient processes in the various areas of the environment.
- Start to develop good nursing practice and competencies of cross-cutting themes at Level 1.
- Recognise own limitations, seeking help and advice when needed.

#### Six months

- Function as a member of the team in various areas of the setting, taking responsibility for planning, implementing and evaluating individual patient care.
- Achieve further good nursing practice, cross-cutting themes and specific competencies of the clinical practice domains at Level 1.

#### 12 months (up to two years for newly qualified)

- Manage allocated patients in various settings. In the emergency department, this is likely to include majors, minors and resus.
- Safely undertake the initial assessment of patients and triage appropriately.
- Complete good nursing practice, cross-cutting themes and specific competencies of clinical practice domains at Level 1.
- Mentor student nurses and act as a guide to less experienced staff.

## Emergency nurses – Working to Level 2 competencies

These nurses should form the largest nursing group in the emergency care setting. Provided they have had a structured foundation period, with appropriate education and supervision, they should be able to care for patients in all areas of the environment without direct supervision. These nurses will have successfully completed the Foundation practice Level 1 competencies and be working to complete the Level 2 competencies.

### Developmental milestones of emergency nurses are likely to include:

- ability to lead the provision of evidence-based holistic care for groups of patients, from initial assessment to discharge or admission
- teaching and supervising less experienced staff and students
- developing in-depth knowledge about specific areas of interest and effectively communicating this to colleagues, for example, link nurse role
- advancing clinical skills and knowledge, developing teaching and assessing skills, and developing leadership qualities.

## Emergency nurse development – Beyond Level 2

It is important to recognise that developing competence as an emergency nurse is the fundamental platform on which all domains evolve. Depending on the aspirations and chosen career direction, practice beyond that of an emergency nurse may follow a specific pathway or crossover between domains (see Figure 1):

- operational management (emergency sister/charge nurse/matron)
- education specialist (practice educator/lead for practice development)
- clinical specialist (emergency nurse practitioner/advanced nurse practitioner).

Competencies for these pathways are outside the scope of this document.

## The competency framework

The national curriculum and competency framework for emergency nursing is demonstrated in Figure 2.

- Good nursing practice (GNP) – centre (core).
- Cross-cutting themes (CCT) – inner wheel.
- Clinical domains (CD) – outer wheel.

These sections appear in both Level 1 and Level 2 competency sets.

Figure 2: The competency framework



## Good nursing practice

Good nursing practice (GNP) forms the basis of all nursing care and is central to the NMC Code. The behaviours outlined in GNP should be applied when approaching the other competencies within the framework. The domains of GNP cover competencies in:

- GNP1 – Professional behaviour
- GNP2 – Team working
- GNP3 – Communication
- GNP4 – Leadership and management
- GNP5 – Education
- GNP6 – Evidence-based practice
- GNP7 – Legal and ethical dilemmas and decision making
- GNP8 – Service evaluation and improvement.

Figure 3: Good nursing practice



### Cross-cutting themes

These generic themes apply to patients in any emergency care setting irrespective of their presenting complaint. The cross-cutting themes (CCT) in Figure 4 are grouped into competencies relating to:

- CCT1 – Patient assessment
- CCT2 – Pain assessment and management
- CCT3 – Medicines management
- CCT4 – Moving and handling
- CCT5 – Infection prevention and control
- CCT6 – Safeguarding children and adults
- CCT7 – Documentation and record keeping
- CCT8 – Preventing and controlling violence and aggression.

Figure 4: Cross-cutting themes



## Emergency care clinical domains

The clinical domains (CD) in Figure 5 specify the competencies required to care for emergency patients across the lifespan. There are seven clinical domains:

- CD1 – Caring for acutely ill adults
- CD2 – Caring for adults requiring resuscitation
- CD3 – Caring for adults with minor injury and illness
- CD4 – Caring for children and young people
- CD5 – Caring for people with mental health needs
- CD6 – Caring for older people
- CD7 – Emergency planning and disaster management.

**Figure 5: Emergency care clinical domains**



## Competence assessment

The competencies in this framework are presented in two levels. This publication covers competencies Level 2 and publication 005 883 covers competencies Level 1.

- Level 1 competencies are intended for the foundation staff nurse to complete.
- Level 2 competencies are intended for the emergency nurse to complete.

It is recognised that prior to the introduction of this framework, many nurses will have worked in emergency care for many years. It would be reasonable for them to go straight to Level 2 competencies rather than start with Level 1. For this reason, many of the Level 1 competencies are duplicated in Level 2 where they are still required of a Level 2 emergency nurse. For those who have completed level 1, some evidence will be transferable to the Level 2 framework, where the competencies remain the same. However, the majority will require demonstration of a higher level of achievement within the taxonomy as described opposite.

Competencies should be assessed using Benner's stages of clinical competence (Figure 6). This taxonomy is widely known and the definitions are easy to apply.

**Figure 6: Benner's stages of clinical competence**

Code	Novice to expert continuum	Description
N	Novice or beginner	No experience in the situation in which they are expected to perform and depend on rules to guide their actions. Lacks confidence to demonstrate safe practice and requires continual verbal and physical cues.
AB	Advanced beginner	Demonstrates marginally acceptable performance because the nurse has had prior experience in actual situations. Often needs help setting priorities and cannot reliably sort out what is most important in complex situations and will require help to prioritise.
C	Competent	Demonstrates efficiency, is co-ordinated and has confidence in their actions. Able to plan and determine which aspects of a situation are important and which can be ignored or delayed. This practitioner lacks the speed and flexibility of a proficient practitioner but they show an ability to cope with and manage contingencies of practice.
P	Proficient	Someone who perceives the situation as a whole rather than in parts. They have a holistic understanding of clinical situations which makes for quick and more accurate decision making. They consider fewer options and quickly hone in on accurate issues of the problem.
E	Expert	No longer relies on rules, guidelines, etc. to rapidly understand the problem. With an extensive background of experience demonstrates an intuitive grasp of complex situations. They focus on the accurate region of the problem without first considering fruitless possibilities.

Benner P (1984) *From novice to expert: Excellence and power in clinical nursing practice*. Menlo Park: Addison-Wesley.

Each competency starts with a self-assessment that helps to identify individual learning needs.

- Novice (N): I have some awareness but little knowledge or skill in this competency.
- Advanced beginner (AB): I have basic knowledge or skill in this competency and need supervision.
- Competent (C): I have the knowledge and skills relevant for the competency and could complete without supervision.
- Proficient (P): I am experienced in the knowledge and skills relevant for the competency and could supervise or teach others.
- Expert (E): I am leading developments in this competency.

For each competency, minimum achievement criteria are set for successful completion. However, this should be regarded as a minimum and not stifle those who wish to progress beyond this, for which they should be given recognition. Whilst some competencies will be unique to each level, others have identical wording in Levels 1 and 2, but the minimum achievement criteria differ. For example, at Level 1 'Advanced beginner' may be required, whilst at Level 2 'Proficiency' may be required.

## The role of the clinical supervisor/assessor/mentor

A foundation staff nurse should have an emergency nurse as a supervisor (having completed Level 1 as a minimum). The supervisor should have undergone specific training in supervision and assessment of others and, typically, would be a senior emergency nurse, emergency charge nurse or practice educator. For emergency nurses, a supervisor should be beyond Level 2. Typically, they would be an emergency charge nurse or practice educator.

It is recognised that when an emergency care setting starts to use this curriculum, there may be insufficient nurses that have achieved Level 1 and 2 competencies to supervise the development of foundation staff nurses and emergency nurses. Until such a time, a pragmatic approach should be applied and senior nurses should be allowed to supervise others commensurate with their current role.

Whilst self-assessment helps to direct learning, support development and provides a baseline for subsequent assessment, objective formal assessment of competence should be undertaken for quality assurance purposes and should include individual professional feedback. Assessment should be based on objective evidence. Due to the diverse nature of the competencies, no one type of evidence can meet all the statements. It is important that a variety of evidence types are used to demonstrate the knowledge, skills and behaviours required. Evidence may include, but would not be limited to:

- direct observation of practice (DOPS)
- case-based discussion (CBD)
- simulation (S)
- reflective report (RR)

- question and answer (Q&A)
- anonymised clinical case notes (CCN)
- feedback from colleagues and/or patients (F)
- nationally recognised courses (RC).

It would be acceptable to put these abbreviated codes in the evidence column of the competency framework to demonstrate the type of evidence that has been generated. Regular reviews are essential to highlight and resolve any difficulties in achieving or maintaining competence. They also provide support for individuals, helping them to reach their potential without being restricted by traditional time-bound progression limits.

It would be overwhelming for anyone to try to address all the competencies simultaneously; it is recommended that realistic developmental goals are set at each one-to-one meeting and reviewed in a timely manner. It may be helpful to put the date of the next meeting in the 'expected achievement date' column of those competencies which should be prioritised, leaving blank those competencies which will be done at a future date.

During the first year of employment in the emergency care setting, it would be realistic to meet with a mentor/assessor after the first month, then at three monthly intervals with an appraisal at the end of the first year. In year two, it would be realistic to meet at six-monthly intervals, with annual appraisals and development planning thereafter.

At each meeting, there should be an agreement on which specific competencies have been achieved or maintained and which need to be progressed before the next meeting. It may be decided that some competencies are not applicable to the emergency care environment in which the individual is working. In this case 'N/A' should be marked against them. This will allow the individual to use their competency framework as a passport should they move to another emergency care workplace and continue their development.

# Level 2 competencies

## Good nursing practice (GNP) Level 2



## Contents

### Core skills: Good nursing practice (GNP) – Level 2

GNP1 – Professional behaviour – Level 2								
Demonstrate the knowledge, skills and behaviour to project a high standard of professional nursing								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 1.1.1 (L2)	Understand the NMC Code and its application within clinical practice	N, AB, C, P, E	Proficient					
GNP1 1.1.2 (L2)	Identify and interpret wider policy documents that guide professional practice	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 1.2.1 (L2)	Contribute to the process of personal appraisal and the appraisal of others	N, AB, C, P, E	Proficient					
GNP 1.2.2 (L2)	Identify own developmental needs and pursue activities to address them	N, AB, C, P, E	Proficient					
GNP 1.2.3 (L2)	Feedback to others about their professional behaviour	N, AB, C, P, E	Competent					
GNP 1.2.4 (L2)	Alter pace of work according to urgency of the clinical situation or demands of the emergency care setting	N, AB, C, P, E	Proficient					
	Behaviour	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 1.3.1 (L2)	Acknowledge limitations in knowledge, skills and behaviour	N, AB, C, P, E	Competent (as Level 1)					
GNP 1.3.2 (L2)	Demonstrate a positive attitude to learning and the development of self and others	N, AB, C, P, E	Competent (as Level 1)					
GNP 1.3.3 (L2)	Promote multi-professional team working	N, AB, C, P, E	Proficient					
GNP 1.3.4 (L2)	Build a professional relationship with students and/or other professionals on attachment	N, AB, C, P, E	Competent (as Level 1)					
GNP 1.3.5 (L2)	Act as a role model to others, projecting a professional image at all times	N, AB, C, P, E	Competent (as Level 1)					

## Contents

### Core skills: Good nursing practice (GNP) – Level 2

GNP2 – Team working – Level 2								
Contribute to effective team working								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 2.1.1 (L2)	Understand the concepts relating to human factors and team resource management, situational awareness and error theory	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 2.2.1 (L2)	Identify stress and or stressful situations for self	N, AB, C, P, E	Competent					
GNP 2.2.2 (L2)	Identify stress and or stressful situations for others	N, AB, C, P, E	Competent					
GNP 2.2.3 (L2)	Identify individual coping mechanisms for dealing with stress	N, AB, C, P, E	Competent					
GNP 2.2.4 (L2)	Demonstrate the ability to work effectively in a team	N, AB, C, P, E	Proficient					
GNP 2.2.5 (L2)	Demonstrate the ability to lead a small team	N, AB, C, P, E	Proficient					
GNP 2.2.6(L2)	Demonstrate the ability to lead a departmental team on a shift basis	N, AB, C, P, E	Competent					

## Contents

### Core skills: Good nursing practice (GNP) – Level 2

GNP3 – Communication – Level 2								
Ensure effective communication								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 3.1.1 (L2)	Understand factors that influence communication and common barriers to effective communication	N, AB, C, P, E	Proficient					
GNP 3.1.2 (L2)	Discuss strategies available to aid communication for individuals who have sensory impairment	N, AB, C, P, E	Proficient					
GNP 3.1.3 (L2)	Discuss strategies available to aid communication with individuals who speak languages other than English	N, AB, C, P, E	Proficient					
GNP 3.1.4 (L2)	Describe and evaluate tools and strategies available to improve the quality of communication between health professionals	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 3.2.1 (L2)	Demonstrate effective communication with colleagues both internal and external to the emergency care setting	N, AB, C, P, E	Proficient					
GNP 3.2.2 (L2)	Demonstrate effective communication with partner agencies	N, AB, C, P, E	Competent					
GNP 3.2.3 (L2)	Demonstrate effective communication with patients of all ages and their families/ carers/significant others, including regular updates on care plans	N, AB, C, P, E	Proficient					
GNP 3.2.4 (L2)	Facilitate use of interpreting services in line with local policy	N, AB, C, P, E	Competent					
GNP 3.4.5 (L2)	Communicate effectively with individuals with audio and/or visual impairment	N, AB, C, P, E	Competent					
GNP 3.2.6(L2)	Communicate effectively with individuals with learning disability such as autism or attention deficit disorders	N, AB, C, P, E	Competent					

## Contents

### Core skills: Good nursing practice (GNP) – Level 2

GNP4 – Leadership and management – Level 2								
Lead and manage the provision of emergency nursing care								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 4.1.1 (L2)	Discuss the use of local and national quality indicators of emergency care	N, AB, C, P, E	Competent					
GNP 4.1.2 (L2)	Discuss theories of leadership	N, AB, C, P, E	Competent					
GNP 4.1.3 (L2)	Articulate the difference between leadership and management	N, AB, C, P, E	Competent					
GNP 4.1.4 (L2)	Understand the principles of effective change management	N, AB, C, P, E	Competent					
GNP 4.1.5 (L2)	Describe principles of department management and patient flow processes	N, AB, C, P, E	Competent					
GNP 4.1.6 (L2)	Understand the local governance structure used to improve care quality	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 4.2.1 (L2)	Demonstrate skill in managing, supervising and supporting colleagues on a shift basis	N, AB, C, P, E	Competent					
GNP 4.2.2 (L2)	Manage patient flow and implement strategies to reduce delays	N, AB, C, P, E	Competent					
GNP 4.2.3 (L2)	Respond appropriately to patient satisfaction concerns and complaints	N, AB, C, P, E	Proficient					
GNP 4.2.4 (L2)	Identify and implement quality improvement initiatives within the care setting	N, AB, C, P, E	Competent					
GNP 4.2.5 (L2)	Identify and escalate concerns relating to patient safety according to local policy	N, AB, C, P, E	Competent					

## Contents

### Core skills: Good nursing practice (GNP) – Level 2

GNP5 – Education – Level 2								
Support the delivery of education, training and mentorship within the emergency care setting								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 5.1.1 (L2)	Understand the theories that underpin clinical education and mentorship, including learning style theories	N, AB, C, P, E	Competent					
GNP 5.1.2 (L2)	Discuss patient education strategies	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement		Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 5.2.1 (L2)	Help others undertake a learning-needs analysis and produce a development plan	N, AB, C, P, E	Competent					
GNP 5.2.2 (L2)	Select and implement appropriate strategies to facilitate patient education	N, AB, C, P, E	Proficient					
GNP 5.2.3 (L2)	Demonstrate skill at teaching others, modifying approach in response to group size and learning styles	N, AB, C, P, E	Competent					
GNP 5.2.4 (L2)	Demonstrate skill at assessing others and delivering feedback	N, AB, C, P, E	Competent					

## Contents

### Core skills: Good nursing practice (GNP) – Level 2

GNP6 – Evidence-based practice – Level 2								
Ensure safe and effective care through application of evidence-based practice								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 6.1.1 (L2)	Understand the theory of evidence-based practice	N, AB, C, P, E	Competent					
GNP 6.1.2 (L2)	Describe how evidence can be identified and accessed	N, AB, C, P, E	Competent					
GNP 6.1.3 (L2)	Describe how evidence should be reviewed and evaluated	N, AB, C, P, E	Competent					
GNP 6.1.4 (L2)	Understand the local process for changing practice based on best evidence	N, AB, C, P, E	Competent					
GNP 6.1.5 (L2)	Understand the principles to be considered when individual care requires deviation from standard practice guidelines	N, AB, C, P, E	Competent					
GNP 6.1.6 (L2)	Understand the principles of the audit process	N, AB, C, P, E	Competent					
GNP 6.1.7 (L2)	Discuss the local research governance structure and process	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 6.2.1 (L2)	Demonstrate ability to critically appraise literature from professional and or academic sources	N, AB, C, P, E	Competent					
GNP 6.2.2 (L2)	Demonstrate ability to make a judgement about the applicability of a study to the clinical environment	N, AB, C, P, E	Competent					
GNP 6.2.3 (L2)	Contribute to developing evidence-based patient protocols and guidelines for the local setting	N, AB, C, P, E	Competent					
GNP 6.2.4 (L2)	Contribute to the audit process within the clinical setting	N, AB, C, P, E	Competent					
GNP 6.2.5 (L2)	Identify topics for audit and/or research	N, AB, C, P, E	Competent					

## Contents

### Core skills: Good nursing practice (GNP) – Level 2

GNP7 – Legal and ethical dilemmas and decision making – Level 2								
Ensure practice is founded on legal frameworks and ethical principles								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 7.1.1 (L2)	Demonstrate understanding of the legal and ethical frameworks related to consent for all age groups	N, AB, C, P, E	Competent (as Level 1)					
GNP 7.1.2 (L2)	Demonstrate understanding of the legal and ethical frameworks related to confidentiality for all age groups	N, AB, C, P, E	Competent (as Level 1)					
GNP 7.1.3 (L2)	Describe the principles of the Equality Act (or equivalent in country of practice) and the implications for practice	N, AB, C, P, E	Competent					
GNP 7.1.4 (L2)	Describe the principles of the Mental Capacity Act, including the Deprivation of Liberty Safeguards and the implications for practice (or equivalent in country of practice)	N, AB, C, P, E	Competent					
GNP 7.1.5 (L2)	Describe the principles of the Children Act relevant to country of practice and the implications for practice	N, AB, C, P, E	Competent					
GNP 7.1.6 (L2)	Demonstrate understanding of the Mental Health Act relevant to the country of practice and the implications for practice	N, AB, C, P, E	Competent					
GNP 7.1.7 (L2)	Reflect analytically on ethical, moral and legal dilemmas within clinical practice	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement		Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 7.2.1 (L2)	Demonstrate the ability to undertake and document an assessment of mental capacity	N, AB, C, P, E	Competent					
GNP 7.2.2 (L2)	Demonstrate skill in applying the principles of the Mental Capacity Act (or equivalent)	N, AB, C, P, E	Competent					
GNP 7.2.3 (L2)	Demonstrate ability to identify when there is a requirement to breach confidentiality	N, AB, C, P, E	Competent					
GNP 7.2.4 (L2)	Demonstrate ability to gain lawful consent for treatment in the emergency care setting	N, AB, C, P, E	Competent (as Level 1)					
GNP 7.2.5 (L2)	Recognise situations where it is necessary to provide treatment without consent and implement the process to ensure this is lawful	N, AB, C, P, E	Competent (as Level 1)					
GNP 7.2.6 (L2)	Demonstrate ability to initiate proceedings to establish Deprivation of Liberty Safeguards in country of practice	N, AB, C, P, E	Competent					
GNP 7.2.7 (L2)	Demonstrate ability to seek legal advice as appropriate for complex situations	N, AB, C, P, E	Competent					

## Contents

## Core skills: Good nursing practice (GNP) – Level 2

GNP8 – Service evaluation and improvement – Level 2								
Contribute to service evaluation and improvement initiatives								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 8.1.1 (L2)	Demonstrate an understanding of the policies which influence cost-effective, high quality care	N, AB, C, P, E	Competent					
GNP 8.1.2 (L2)	Understand how quality is measured in the care setting	N, AB, C, P, E	Competent					
GNP 8.1.3 (L2)	Understand local processes for service evaluation	N, AB, C, P, E	Competent					
GNP 8.1.4 (L2)	Understand local service improvement processes	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
GNP 8.2.1 (L2)	Engage with patients/carers to inform service development	N, AB, C, P, E	Proficient					
GNP 8.2.2 (L2)	Communicate ideas for service improvement using local governance frameworks	N, AB, C, P, E	Competent					
GNP 8.2.3 (L2)	Lead service improvement projects	N, AB, C, P, E	Competent					

# Level 2 competencies

## Cross-cutting themes (CCT) Level 2



## Contents

## Cross-cutting themes (CCT) Level 2

CCT1 – Patient assessment – Level 2								
Holistically and systematically, assess patients								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 1.1.1 (L2)	Understand the importance of pre-hospital care information	N, AB, C, P, E	Competent					
CCT 1.1.2 (L2)	Understand the factors that affect communication or act as a communication barrier and strategies that may be used to overcome them (see GNP3)	N, AB, C, P, E	Proficient					
CCT 1.1.3 (L2)	Understand the importance of obtaining a comprehensive clinical and social history to plan appropriate person-centred care	N, AB, C, P, E	Competent					
CCT 1.1.4 (L2)	Understand the elements underpinning the structured approach to patient assessment	N, AB, C, P, E	Proficient					
CCT 1.1.5 (L2)	Discuss the use of clinical assessment tools	N, AB, C, P, E	Competent					
CCT 1.1.6 (L2)	Understand the system in place to prioritise patients according to clinical need	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 1.2.1 (L2)	Effectively receive handover from pre-hospital personnel and document appropriately	N, AB, C, P, E	Proficient					
CCT 1.2.2 (L2)	Use a structured approach to gather and document the clinical history	N, AB, C, P, E	Proficient					
CCT 1.2.3 (L2)	Effectively determine patient priority based on assessment (triage)	N, AB, C, P, E	Proficient					
CCT 1.2.4 (L2)	Direct/move patients to appropriate areas, teams and services	N, AB, C, P, E	Proficient					
CCT 1.2.5 (L2)	Use a structured A-E approach to undertake patient assessment	N, AB, C, P, E	Proficient					
CCT 1.2.6 (L2)	Safely and accurately record clinical observations including: <ul style="list-style-type: none"> <li>• respiration</li> <li>• oxygen saturations</li> <li>• heart rate (manual)</li> <li>• blood pressure</li> <li>• temperature</li> <li>• Peak expiratory flow rate</li> </ul>	N, AB, C, P, E	Proficient					
CCT 1.2.7 (L2)	Use the National Early Warning Score (or local variant) and act as per guidelines depending on score	N, AB, C, P, E	Proficient					

## Contents

CCT 1.2.8 (L2)	Safely and accurately conduct the following investigations: <ul style="list-style-type: none"> <li>• ECG monitoring</li> <li>• capillary blood glucose</li> <li>• urinalysis</li> <li>• pregnancy testing</li> </ul>	N, AB, C, P, E	Proficient					
CCT 1.2.9 (L2)	Safely and effectively conduct cannulation and venipuncture in accordance with local guidelines	N, AB, C, P, E	Competent					

## Contents

## Cross-cutting themes (CCT) Level 2

CCT2 – Pain assessment and management – Level 2								
	Provide holistic care for patients with pain							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 2.1.1 (L2)	Understand the physiology of pain	N, AB, C, P, E	Competent					
CCT 2.1.2 (L2)	Understand the principles of pain management	N, AB, C, P, E	Proficient					
CCT 2.1.3 (L1)	Discuss the tools available to assess and objectively measure pain	N, AB, C, P, E	Proficient					
CCT 2.1.4 (L2)	Discuss how pain assessment relates to triage priority	N, AB, C, P, E	Proficient					
CCT 2.1.5 (L2)	Discuss the pharmacological and non-pharmacological strategies for managing pain	N, AB, C, P, E	Proficient					
CCT 2.1.6 (L2)	Understand locally agreed PGDs for nurse-led analgesia (where relevant)	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 2.2.1 (L2)	Select and use pain assessment tools to objectively assess pain	N, AB, C, P, E	Proficient					
CCT 2.2.2 (L2)	Apply appropriate non-pharmacologic strategies for the management of pain (i.e. splinting, positioning, dressings)	N, AB, C, P, E	Proficient					
CCT 2.2.3 (L2)	Administer prescribed analgesia via a variety of routes	N, AB, C, P, E	Proficient					
CCT 2.2.4 (L2)	If using PGDs, select appropriate drug and route for effective pain management using systematic and step-wise approach	N, AB, C, P, E	Proficient					
CCT 2.2.5 (L2)	Evaluate the effectiveness of analgesia at appropriate times following administration and respond appropriately	N, AB, C, P, E	Proficient					
CCT 2.2.6 (L2)	Use Entonox safely and appropriately	N, AB, C, P, E	Proficient					

## Contents

## Cross-cutting themes (CCT) Level 2

CCT3 – Medicines management – Level 2								
Store, administer and dispose of medications safely and effectively in line with NMC standards and local policy								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 3.1.1 (L2)	Understand the NMC standards for medicines management and their application locally	N, AB, C, P, E	Proficient					
CCT 3.1.2 (L2)	Understand locally agreed policies, procedures and guidelines relating to the storage, administration, disposal and recording of medicines	N, AB, C, P, E	Proficient					
CCT 3.1.3 (L2)	Understand how to use additional information about medicines (e.g. British National Formulary)	N, AB, C, P, E	Proficient					
CCT 3.1.4 (L2)	Understand the immunisation schedule and its importance	N, AB, C, P, E	Competent					
CCT 3.1.5 (L2)	Understand drug error or near miss reporting	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 3.2.1 (L2)	Follow local policies on drug administration and the NMC guidelines for the administration of medicines	N, AB, C, P, E	Proficient					
CCT 3.2.2 (L2)	Store medication safely	N, AB, C, P, E	Proficient					
CCT 3.2.3 (L2)	Select appropriate equipment and safely administer medications as prescribed via: <ul style="list-style-type: none"> <li>• oral</li> <li>• intravenous</li> <li>• intramuscular</li> <li>• subcutaneous</li> <li>• inhaled</li> <li>• rectal</li> <li>• buccal</li> <li>• topical</li> <li>• ophthalmic</li> <li>• aural</li> </ul>	N, AB, C, P, E	Proficient					
CCT 3.2.4 (L2)	Administer medications using PGDs as per local policy	N, AB, C, P, E	Proficient					
CCT 3.2.5 (L2)	Administer controlled drugs as per local policy	N, AB, C, P, E	Proficient					
CCT 3.2.6 (L2)	Recognise and take appropriate action when a patient experiences early signs of adverse drug reactions, allergic reactions or anaphylaxis	N, AB, C, P, E	Competent					

## Contents

CCT 3.2.7 (L2)	Document and communicate appropriately when patients refuse medications	N, AB, C, P, E	Competent					
CCT 3.2.8 (L2)	Report medicine-related adverse incidents or 'near-miss' events	N, AB, C, P, E	Competent					
CCT 3.2.9 (L2)	Ensure adequate information for patients about medication prior to discharge	N, AB, C, P, E	Proficient					

## Contents

## Cross-cutting themes (CCT) Level 2

CCT4 – Moving and handling – Level 2								
Ensure safe moving and handling of patients and equipment in the emergency care setting								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 4.1.1 (L2)	Understand of the principles of safe moving and handling	N, AB, C, P, E	Proficient					
CCT 4.1.2 (L2)	Discuss the tools available to aid the assessment of moving and handling tasks	N, AB, C, P, E	Proficient					
CCT 4.1.3 (L2)	Understand the equipment available within the local organisation, including its benefits and limitations	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 4.2.1 (L2)	Adhere to local health and safety guidance when moving equipment and resources	N, AB, C, P, E	Competent					
CCT 4.2.2 (L2)	Assess and plan patient moving and handling needs	N, AB, C, P, E	Proficient					
CCT 4.2.3 (L2)	Safely use locally available moving and handling aids	N, AB, C, P, E	Proficient					
CCT 4.2.4 (L2)	Lead a team undertaking patient handling activities	N, AB, C, P, E	Competent					

## Contents

### Cross-cutting themes (CCT) Level 2

<b>CCT5 – Infection prevention and control – Level 2</b>								
Care for patients with due regard to infection prevention and control principles								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CCT 5.1.1 (L2)	Understand the role of the infection prevention and control (IPC) team	N, AB, C, P, E	Competent					
CCT 5.1.2 (L2)	Discuss the local IPC policies and identify IPC resources	N, AB, C, P, E	Proficient					
CCT 5.1.3 (L2)	Understand the importance of the hand hygiene policy and the correct use of Personal Protective Equipment (PPE)	N, AB, C, P, E	Competent					
CCT 5.1.4 (L2)	Explain national, regional and local initiatives/targets/data in relation to infection prevention and control (IPC)	N, AB, C, P, E	Competent					
CCT 5.1.5 (L2)	Describe the chain of infection and give examples of how it can be broken	N, AB, C, P, E	Competent					
CCT 5.1.6 (L2)	Understand antimicrobial resistance and the nurse role in antibiotic safeguarding	N, AB, C, P, E	Competent					
CCT 5.1.7 (L2)	Have awareness of communicable diseases	N, AB, C, P, E	Competent					
CCT 5.1.8 (L2)	Discuss the local pandemic infection plan and major incident plan related to infection control (see CD7.1)	N, AB, C, P, E	Competent					
CCT 5.1.9 (L2)	Understand implementation of the department isolation plan and associated implications	N, AB, C, P, E	Competent					
CCT 5.1.10 (L2)	Understand when and how to decontaminate equipment and department areas	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CCT 5.2.1 (L2)	Apply the isolation, waste, linen, standard precautions and sharps policies, promote best practice and challenge bad behaviour	N, AB, C, P, E	Proficient					
CCT 5.2.2 (L2)	Apply and remove Personal Protective Equipment (PPE) appropriately	N, AB, C, P, E	Proficient					
CCT 5.2.3 (L2)	Decontaminate hands effectively	N, AB, C, P, E	Proficient					
CCT 5.2.4 (L2)	Demonstrate the aseptic technique i.e. Aseptic Non-Touch Technique (ANTT)	N, AB, C, P, E	Proficient					
CCT 5.2.5 (L2)	Effectively communicate with other health care providers the infection status of patients	N, AB, C, P, E	Competent					

## Contents

### Cross-cutting themes (CCT) Level 2

CCT6 – Safeguarding children and adults – Level 2								
Protect the safety of children and adults								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 6.1.1 (L2)	Understand local guidelines and policies on safeguarding adults and children and how to access support	N, AB, C, P, E	Proficient					
CCT 6.1.2 (L2)	Identify the named nurse for safeguarding adults and children and understand their role	N, AB, C, P, E	Competent					
CCT 6.1.3 (L2)	Understand the needs of persons who are susceptible to abuse, either through mental disability, physical disability or at risk from self or carer	N, AB, C, P, E	Proficient					
CCT 6.1.4 (L2)	Understand the principles of the Mental Capacity Act (or equivalent in country of practice) and its implementation (see GNP7)	N, AB, C, P, E	Proficient					
CCT 6.1.5 (L2)	Understand the principles and legal implications for Deprivation of Liberty Safeguards (DOLS) or capacity legislation in country of practice (see GNP7)	N, AB, C, P, E	Proficient					
CCT 6.1.6 (L2)	Discuss the signs and symptoms of abuse: <ul style="list-style-type: none"> <li>• physical</li> <li>• emotional</li> <li>• sexual (including exploitation)</li> <li>• female genital mutilation</li> <li>• neglect</li> <li>• domestic abuse</li> <li>• honour-based violence</li> </ul>	N, AB, C, P, E	Proficient					
CCT 6.1.7 (L2)	Discuss information sharing in order to adequately safeguard children or adults	N, AB, C, P, E	Competent					
CCT 6.1.8 (L2)	Understand the role of safeguarding a patient's dependents	N, AB, C, P, E	Proficient					
CCT 6.1.9 (L2)	Discuss the challenges of caring for persons/family suffering from domestic abuse	N, AB, C, P, E	Competent					
CCT 6.1.10 (L2)	Recognise local processes for referral to external agencies	N, AB, C, P, E	Competent					

## Contents

	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 6.2.1 (L2)	Identify children or parents in need of social support and initiate appropriate action	N, AB, C, P, E	Proficient					
CCT 6.2.2 (L2)	Respond appropriately to situations which necessitate immediate action to safeguard children or adults	N, AB, C, P, E	Proficient					
CCT 6.2.3 (L2)	Access and implement the local policy for safeguarding children and adults	N, AB, C, P, E	Proficient					
CCT 6.2.4 (L2)	Provide support and advice to others in conducting safeguarding interventions	N, AB, C, P, E	Competent					
CCT 6.2.5 (L2)	Undertake a risk assessment and initiate a local multi-agency domestic abuse referral	N, AB, C, P, E	Competent					
CCT 6.2.6 (L2)	Identify appropriate resources available for persons who are at risk of abuse	N, AB, C, P, E	Competent					
CCT 6.2.7 (L2)	Complete safeguarding training level commensurate with local policy	N, AB, C, P, E	Competent					
CCT 6.2.8 (L2)	Engage in safeguarding supervision	N, AB, C, P, E	Competent					

## Contents

## Cross-cutting themes (CCT) Level 2

CCT7 – Documentation and record keeping – Level 2								
Effectively document care in line with NMC standards for record keeping								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 7.1.1 (L2)	Understand the NMC standards and local policy for documentation and record keeping	N, AB, C, P, E	Competent					
CCT 7.1.2 (L2)	Discuss patient confidentiality and the safekeeping of patient-identifiable data (see GNP7 Legal and ethical practice)	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CCT 7.2.1 (L2)	Complete all documentation accurately and legibly in accordance with local guidelines	N, AB, C, P, E	Competent					
CCT 7.2.2 (L2)	Ensure that patient-identifiable records remain secure	N, AB, C, P, E	Competent					

**Contents**
**Cross-cutting themes (CCT) Level 2**

<b>CCT8 – Preventing and controlling violence and aggression – Level 2</b>								
Ensure safety of staff and patients when individuals display violent and/or aggressive behaviour								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CCT 8.1.1 (L2)	Demonstrate an understanding of clinical conditions that increase the risk of violence and aggression	N, AB, C, P, E	Competent					
CCT 8.1.2 (L2)	Understand organic (physical) causes of violent or aggressive behaviour and the importance of early senior medical assessment	N, AB, C, P, E	Competent					
CCT 8.1.3 (L2)	Understand the potential triggers for violent and aggressive behaviour	N, AB, C, P, E	Competent					
CCT 8.1.4 (L2)	Understand the local policy on restraint, both physical and chemical	N, AB, C, P, E	Competent					
CCT 8.1.5 (L2)	Understand the local policy for involvement of security and police services	N, AB, C, P, E	Competent					
CCT 8.1.6 (L2)	Describe the use of safe breakaway techniques	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>		<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CCT 8.2.1 (L2)	Recognise signs of increasing emotion or agitation and use appropriate de-escalation techniques in the management of violence and aggression	N, AB, C, P, E	Proficient					
CCT 8.2.2 (L2)	Use safe breakaway techniques to maintain own safety	N, AB, C, P, E	Proficient					
CCT 8.2.3 (L2)	Ensure any restrictive practice procedures are implemented safely, effectively and based on an appropriate assessment of risk, with minimum force necessary and appropriate monitoring during the restraint	N, AB, C, P, E	Proficient					
CCT 8.2.4 (L2)	Contact support services to assist with episodes of violence and aggression as per local policy	N, AB, C, P, E	Proficient					
CCT 8.2.5 (L2)	Safely and effectively assist with rapid tranquilisation and undertake appropriate nursing care of the sedated patient	N, AB, C, P, E	Proficient					
CCT 8.2.6 (L2)	Use local risk management system to report episodes of violence and aggression	N, AB, C, P, E	Proficient					
CCT 8.2.7 (L2)	Recognise the implications for the mental wellbeing of all people involved following an episode of violence or aggression and seek appropriate support	N, AB, C, P, E	Proficient					

# Level 2 competencies

## Clinical domains (CD) Level 2 Caring for acutely ill adults



## Contents

### CD1 – Caring for acutely ill adults – Level 2

CD1.1 – Adults with problems affecting the respiratory system – Level 2								
Care for patients with airway and respiratory system problems (also see the National Major Trauma Nursing Group competencies for trauma-specific respiratory competences)								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1.1.1 (L2)	Understand the normal anatomy and physiology of the respiratory system	N, AB, C, P, E	Competent					
CD1.1.2 (L2)	Understand the principles (and tools used) of respiratory function assessment	N, AB, C, P, E	Proficient					
CD1.1.3 (L2)	Understand the conditions associated with actual or potential obstruction of the upper airway and the associated signs and airway noises	N, AB, C, P, E	Proficient					
CD1.1.4 (L2)	Discuss the features and clinical presentation of patients with: <ul style="list-style-type: none"> <li>• acute breathlessness</li> <li>• type 1 respiratory failure</li> <li>• type 2 respiratory failure</li> </ul>	N, AB, C, P, E	Proficient					
CD1.1.5 (L2)	Understand the pathophysiology associated with the illnesses of: <ul style="list-style-type: none"> <li>• pulmonary embolism (PE)</li> <li>• respiratory tract infection and pneumonia</li> <li>• asthma</li> <li>• COPD</li> </ul>	N, AB, C, P, E	Proficient					
CD1.1.6 (L2)	Understand the local and national guidelines for oxygen therapy	N, AB, C, P, E	Proficient					
CD1.1.7 (L2)	Discuss methods of delivering oxygen therapy for supporting ventilation	N, AB, C, P, E	Proficient					
CD1.1.8 (L2)	Describe the pathophysiology of a pneumothorax and tension pneumothorax, and describe the principles and possible complications of treatment	N, AB, C, P, E	Competent					
CD1.1.9 (L2)	Understand the signs and symptoms of respiratory distress and the local escalation processes to ensure appropriate clinical support	N, AB, C, P, E	Proficient					

## Contents

	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 1.2.1 (L2)	As part of a structured A-E assessment, demonstrate assessment and recording of: <ul style="list-style-type: none"> <li>• actual or potential airway obstruction</li> <li>• respiratory rate, depth and pattern</li> <li>• oxygen saturations, having awareness of situations which affect reliability of readings</li> <li>• peak expiratory flow rate</li> </ul>	N, AB, C, P, E	Proficient					
CD1 1.2.2 (L2)	Recognise and respond appropriately to: <ul style="list-style-type: none"> <li>• stridor</li> <li>• expiratory wheeze</li> </ul>	N, AB, C, P, E	Proficient					
CD1 1.2.3 (L2)	Deliver oxygen therapy using a range of devices, including: <ul style="list-style-type: none"> <li>• nasal cannulae</li> <li>• variable flow masks</li> <li>• high-concentration masks</li> <li>• tracheostomy masks</li> </ul>	N, AB, C, P, E	Proficient					
CD1 1.2.4 (L2)	Deliver inhaled medication via: <ul style="list-style-type: none"> <li>• metered dose inhaler (with and without spacer device)</li> <li>• nebuliser device</li> </ul>	N, AB, C, P, E	Proficient					
CD1 1.2.5 (L2)	Prepare equipment and support a patient undergoing chest aspiration or chest drain insertion for a pneumothorax	N, AB, C, P, E	Competent					

## Contents

### CD1 – Caring for acutely ill adults – Level 2

CD1.2 – Adults with problems affecting the cardiovascular system – Level 2								
	Effectively care for patients with cardiovascular problems							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 2.1.1 (L2)	Understand the normal anatomy and physiology of the cardiovascular system	N, AB, C, P, E	Competent					
CD1 2.1.2 (L2)	Understand cardiac conduction, the cardiac cycle and the features of the normal ECG	N, AB, C, P, E	Competent					
CD1 2.1.3 (L2)	Discuss the advanced life support (ALS) algorithms for managing abnormal cardiac rhythms associated with significant patient cardiovascular compromise	N, AB, C, P, E	Competent					
CD1 2.1.4 (L2)	Describe the ECG changes associated with acute coronary syndrome (ACS) and myocardial infarction (MI) and appropriate escalation pathways	N, AB, C, P, E	Proficient					
CD1 2.1.5 (L2)	Understand the emergency treatment for ACS and MI	N, AB, C, P, E	Competent					
CD1 2.1.6 (L2)	Discuss the pathophysiology of: <ul style="list-style-type: none"> <li>• pericarditis</li> <li>• pulmonary embolism</li> <li>• pneumothorax</li> <li>• pleuritic pain</li> <li>• musculoskeletal chest pain</li> <li>• ischaemic limb pain</li> </ul>	N, AB, C, P, E	Competent					
CD1 2.1.7 (L2)	Understand the pathophysiology of sickle cell anaemia and treatment for sickle cell crisis in relation to cardiovascular problems	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 2.2.1 (L2)	Undertake a structured approach to the assessment of patients presenting with chest pain and determine priority of care	N, AB, C, P, E	Proficient					
CD1 2.2.2 (L2)	Correctly perform 12 lead ECG and troubleshoot where recordings are of poor quality (such as artefact, wandering baseline etc.)	N, AB, C, P, E	Proficient					
CD1 2.2.3 (L2)	Demonstrate a systematic approach to ECG interpretation and recognition of life-threatening arrhythmias	N, AB, C, P, E	Competent					

## Contents

CD1 2.2.4 (L2)	Effectively prepare patients and equipment and assist in the procedure for: <ul style="list-style-type: none"> <li>• synchronised cardioversion</li> <li>• transcutaneous pacing</li> </ul>	N, AB, C, P, E	Competent					
CD1 2.2.5 (L2)	Initiate effective immediate management of ACS following local policy and guidelines	N, AB, C, P, E	Competent					
CD1 2.2.6 (L2)	Provide effective care to patients in acute heart failure, including administration of prescribed medication, monitoring of clinical condition and provision of psychological support	N, AB, C, P, E	Proficient					
CD1 2.2.7 (L2)	Ensure timely emergency care for patients with sickle cell crisis and support provision of prescribed treatment	N, AB, C, P, E	Competent					

## Contents

### CD1 – Caring for acutely ill adults – Level 2

CD1.3 Neurological system – Level 2								
Effectively care for patients with neurological problems								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 3.1.1 (L2)	Understand basic anatomy and physiology of the central nervous system including: <ul style="list-style-type: none"> <li>principal brain areas and their function</li> <li>sensory and motor pathways</li> </ul>	N, AB, C, P, E	Competent					
CD1 3.1.2 (L2)	Understand the pathophysiology associated with the following medical conditions: <ul style="list-style-type: none"> <li>stroke</li> <li>intracranial haemorrhage (subarachnoid haemorrhage, extradural haemorrhage, subdural haemorrhage)</li> <li>epilepsy</li> <li>Parkinson's disease</li> <li>Guillain–Barré syndrome</li> <li>Myasthenia gravis</li> </ul>	N, AB, C, P, E	Competent					
CD1 3.1.3 (L2)	Understand national guidelines for: <ul style="list-style-type: none"> <li>stroke</li> <li>head injury</li> <li>Parkinson's disease</li> <li>back pain</li> </ul>	N, AB, C, P, E	Competent					
CD1 3.1.4 (L2)	Discuss the signs of conditions requiring emergency intervention: <ul style="list-style-type: none"> <li>raised intracranial pressure</li> <li>cauda-equina</li> </ul>	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 3.2.1 (L2)	Recognise and act appropriately when mechanism of injury or history of presenting complaint may suggest acute neurological insult	N, AB, C, P, E	Competent					

## Contents

CD1 3.2.2 (L2)	Undertake a neurological assessment to include: <ul style="list-style-type: none"> <li>assessment of conscious level using 'alert, voice, pain, unresponsive' scale (AVPU)</li> <li>basic assessment of sensation, motor power and tone</li> <li>Glasgow Coma Score</li> <li>assessment of pupillary size and reaction</li> </ul>	N, AB, C, P, E	Proficient					
CD1 3.2.3 (L2)	Identify patients with red flag symptoms and/or signs and escalate concerns to appropriate clinician	N, AB, C, P, E	Competent					
CD1 3.2.4 (L2)	Apply local and national clinical guidelines in the care of <ul style="list-style-type: none"> <li>stroke</li> <li>intracranial haemorrhage</li> <li>seizures</li> <li>altered levels of consciousness</li> </ul>	N, AB, C, P, E	Competent					
CD1 3.2.5 (L2)	Provide safe and effective care of the agitated and/or combative patient	N, AB, C, P, E	Competent					

## Contents

## CD1 – Caring for acutely ill adults – Level 2

CD1.4 – Gastrointestinal system – Level 2								
Effectively care for patients with abdominal pain and/or gastrointestinal problems								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 4.1.1 (L2)	Understand the anatomy and physiology of the gastrointestinal (GI) system	N, AB, C, P, E	Competent					
CD1 4.1.2 (L2)	Understand the pathophysiology associated with the following emergency presentations: <ul style="list-style-type: none"> <li>• GI bleeding</li> <li>• intra-abdominal sepsis, including pancreatitis</li> <li>• acute gastroenteritis</li> <li>• abdominal aortic aneurism</li> <li>• ischaemic bowel</li> </ul>	N, AB, C, P, E	Competent					
CD1 4.1.3 (L2)	Discuss specific information required when assessing patients with acute gastrointestinal symptoms and/or abdominal pain in order to determine clinical priority	N, AB, C, P, E	Proficient					
CD1 4.1.4 (L2)	Understand local clinical guidelines pertaining to common gastrointestinal emergency presentations (e.g. GI bleeding)	N, AB, C, P, E	Competent					
CD1 4.1.5 (L2)	Understand the investigations commonly undertaken in patients with abdominal pain or gastrointestinal presentations	N, AB, C, P, E	Competent					
CD1 4.1.6 (L2)	Understand the rationale for insertion of nasogastric tube in this group of patients and local guidelines/policy for tube placement	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 4.2.1 (L2)	Demonstrate initial assessment and prioritisation of patients presenting with abdominal pain, initiating appropriate pain relief and investigations to aid further clinical assessment	N, AB, C, P, E	Proficient					
CD1 4.2.2 (L2)	Recognise and report 'red flag' signs and symptoms of: <ul style="list-style-type: none"> <li>• vomiting and/or per rectum loss of frank or occult blood</li> <li>• faecal vomiting</li> <li>• rigid/distended abdomen</li> <li>• abdominal bruising</li> </ul>	N, AB, C, P, E	Competent					
CD1 4.2.3 (L2)	Provide care with respect to dignity and privacy for patients with diarrhoea and or vomiting; having awareness of skin integrity problems in patients with diarrhoea	N, AB, C, P, E	Proficient					

## Contents

CD1 4.2.4 (L2)	Demonstrate the ability to safely and effectively insert a wide bore nasogastric tube	N, AB, C, P, E	Competent					
CD1 4.2.5 (L2)	Recognise and locate the equipment used to control variceal bleeding and instigate massive haemorrhage protocol where needed	N, AB, C, P, E	Competent					
CD1 4.2.6 (L2)	Recognise patients who may pose an infection control risk and implement isolation procedures (e.g. those with diarrhoea and or vomiting)	N, AB, C, P, E	Competent					
CD1 4.2.7 (L2)	Undertake collection of stool samples and send for appropriate investigations	N, AB, C, P, E	Competent					

## Contents

### CD1 – Caring for acutely ill adults – Level 2

CD1.5 – Renal system – Level 2								
Effectively care for patients with renal problems								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 5.1.1 (L2)	Understand the anatomy and physiology of the kidneys and renal tract	N, AB, C, P, E	Competent					
CD1 5.1.2 (L2)	Understand the pathophysiology associated with the common renal presentations: <ul style="list-style-type: none"> <li>• Pyelonephritis</li> <li>• renal colic</li> <li>• urine retention and haematuria</li> <li>• trauma to the kidney and/or renal tract</li> </ul>	N, AB, C, P, E	Competent					
CD1 5.1.3 (L2)	Discuss the pathophysiology associated with the following presentations and their relationship to the renal system: <ul style="list-style-type: none"> <li>• hyper/hypokalemia</li> <li>• hyper/hyponatremia</li> <li>• hypomagnesemia</li> </ul>	N, AB, C, P, E	Competent					
CD1 5.1.4 (L2)	Understand the presenting signs and symptoms and pathophysiology associated with: <ul style="list-style-type: none"> <li>• AKI – acute kidney injury</li> <li>• CKD – chronic kidney disease</li> </ul>	N, AB, C, P, E	Competent					
CD1 5.1.5 (L2)	Recognise the normal values for urea and electrolytes and understand the significance of derangement	N, AB, C, P, E	Competent					
CD1 5.1.6 (L2)	Understand the local and national guidelines (including NICE guidelines) in relation to AKI and CKD	N, AB, C, P, E	Competent					
CD1 5.1.7 (L2)	Understand the principles of haemofiltration and the emergency indications for dialysis	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 5.2.1 (L2)	Identify patients with abnormal renal function tests and escalate appropriately	N, AB, C, P, E	Competent					
CD1 5.2.2 (L2)	Implement safe and effective care in patients with: <ul style="list-style-type: none"> <li>• acute kidney injury</li> <li>• chronic kidney disease</li> </ul>	N, AB, C, P, E	Competent					

## Contents

CD1 5.2.3 (L2)	Insert urethral catheters in female patients in line with locally agreed policies and procedures	N, AB, C, P, E	Competent					
CD1 5.2.4 (L2)	Insert urethral catheters in male patients in line with locally agreed policies and procedures	N, AB, C, P, E	Competent					
CD1 5.2.5 (L2)	Monitor urine output and fluid intake and escalate concerns appropriately	N, AB, C, P, E	Proficient					

## Contents

### CD1 – Caring for acutely ill adults – Level 2

CD1.6 – Endocrine system – Level 2								
	Effectively care for patients with endocrine problems							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 6.1.1 (L2)	Understand the anatomy and physiology associated with the endocrine system	N, AB, C, P, E	Competent					
CD1 6.1.2 (L2)	Understand the pathophysiology associated with conditions affecting the endocrine system, in particular: <ul style="list-style-type: none"> <li>• pancreas – diabetes and glycaemic emergencies</li> <li>• thyroid – thyrotoxicosis and hypothyroidism</li> <li>• pituitary – diabetes insipidus</li> <li>• adrenal – Addison's disease</li> </ul>	N, AB, C, P, E	Competent					
CD1 6.1.3 (L2)	Describe the signs and symptoms of the following presentations: <ul style="list-style-type: none"> <li>• hyperglycaemia</li> <li>• diabetic ketoacidosis (DKA)</li> <li>• hypoglycaemia</li> <li>• Addisonian Crisis</li> </ul>	N, AB, C, P, E	Competent					
CD1 6.1.4 (L2)	Understand the local guidelines to manage endocrine emergency presentations	N, AB, C, P, E	Competent					
CD1 6.1.5 (L2)	Understand the normal reference ranges for blood glucose, blood pH, lactate and blood gases	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 6.2.1 (L2)	Recognise 'red flag' endocrine presentations and escalate concerns to an appropriate clinician	N, AB, C, P, E	Competent					
CD1 6.2.2 (L2)	Provide safe and effective assessment of patients presenting with actual or potential problems affecting the endocrine system, including the ability to undertake the following investigations: <ul style="list-style-type: none"> <li>• capillary blood glucose monitoring</li> <li>• capillary blood ketone monitoring</li> <li>• urinalysis</li> </ul>	N, AB, C, P, E	Competent					

## Contents

CD1 6.2.3 (L2)	Instigate the blood tests necessary to investigate and manage endocrine emergencies	N, AB, C, P, E	Competent					
CD1 6.2.4 (L2)	Provide safe and effective care to patients with endocrine emergencies, in particular the management of: <ul style="list-style-type: none"> <li>• hyperglycaemia</li> <li>• DKA</li> <li>• hypoglycaemia</li> <li>• Addison's Crisis</li> </ul>	N, AB, C, P, E	Competent					

## Contents

## CD1 – Caring for acutely ill adults – Level 2

CD1.7 – Reproductive system – Level 2								
	Effectively care for patients with reproductive system problems							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 7.1.1 (L2)	Understand the normal anatomy and physiology of the male and female reproductive system	N, AB, C, P, E	Competent					
CD1 7.1.2 (L2)	Understand the assessment and management of vaginal and rectal foreign bodies	N, AB, C, P, E	Competent					
CD1 7.1.3 (L2)	Understand the emotional and physical care of women and men who present with injuries as a result of sexual assault or rape	N, AB, C, P, E	Competent					
CD1 7.1.4 (L2)	Discuss the signs, symptoms and presentation of sexually transmitted infections (STIs), their management and the information and referral resources available	N, AB, C, P, E	Competent					
CD1 7.1.5 (L2)	Describe the health promotion and screening available for reproductive health surveillance for men and women including: <ul style="list-style-type: none"> <li>• breast and testicular self-examination</li> <li>• vulval health</li> <li>• cervical smears</li> <li>• human papilloma virus (HPV) vaccination</li> <li>• mammography</li> <li>• prostate assessment and examination</li> </ul>	N, AB, C, P, E	Competent					
	<b>Female-specific competency knowledge</b>							
CD1 7.1.6 (L2)	Understand reproductive development and maturity, the menstrual cycle and the features of normal menopausal changes	N, AB, C, P, E	Competent					
CD1 7.1.7 (L2)	Describe the primary symptoms of potential cancer diagnosis	N, AB, C, P, E	Competent					
CD1 7.1.8 (L2)	Discuss the specific assessment related to female reproductive system presentations to determine clinical priority	N, AB, C, P, E	Proficient					
CD1 7.1.9 (L2)	Understand the assessment, treatment options, health advice and sexual health promotion for women requesting emergency contraception	N, AB, C, P, E	Competent					
CD1 7.1.10 (L2)	Discuss the legal and professional responsibilities of the emergency nurse in relation to female genital mutilation (FGM)	N, AB, C, P, E	Competent					

## Contents

<b>Pregnancy-specific competency knowledge</b>								
CD1 7.1.11 (L2)	Understand the significance of establishing pregnancy in the emergency care setting and the potential for false negatives based on hormonal irregularities	N, AB, C, P, E	Competent					
CD1 7.1.12 (L2)	Describe the development of the foetus within the first 16 weeks and the related health guidance in early pregnancy	N, AB, C, P, E	Competent					
CD1 7.1.13 (L2)	Understand the signs and symptoms and management of hyperemesis	N, AB, C, P, E	Competent					
CD1 7.1.14 (L2)	Understand the local guidance relating to: <ul style="list-style-type: none"> <li>• miscarriage</li> <li>• ectopic pregnancy</li> <li>• emergency delivery</li> </ul>	N, AB, C, P, E	Competent					
CD1 7.1.15 (L2)	Describe local policy for investigating and/or disposing of products of conception in the emergency care setting	N, AB, C, P, E	Competent					
CD1 7.1.16 (L2)	Understand the physical and emotional impact of early miscarriage and ectopic pregnancy and the importance of empathy, support and specific services and counselling available	N, AB, C, P, E	Competent					
CD1 7.1.17 (L2)	Understand the assessment and management of women presenting with complications post termination of pregnancy	N, AB, C, P, E	Competent					
CD1 7.1.18 (L2)	Understand common complications which arise in the third trimester of pregnancy (e.g. pre-eclampsia, gestational diabetes)	N, AB, C, P, E	Competent					
<b>Gynaecological conditions</b>								
CD1 7.1.19 (L2)	Understand the features and management of: <ul style="list-style-type: none"> <li>• torsion or rupture of ovarian cysts</li> <li>• salpingitis</li> <li>• pelvic inflammatory disorders</li> <li>• dysmenorrhoea</li> <li>• IVF associated conditions (ovarian hyperstimulation)</li> </ul>	N, AB, C, P, E	Competent					
CD1 7.1.20 (L2)	Understand the features and management of abnormal vaginal bleeding from: <ul style="list-style-type: none"> <li>• trauma</li> <li>• post-coital</li> <li>• post-menopausal</li> </ul>	N, AB, C, P, E	Competent					

## Contents

Male-specific competency knowledge								
CD1 7.1.21 (L2)	Understand reproductive development and sexual maturity	N, AB, C, P, E	Competent					
CD1 7.1.22 (L2)	Describe the specific assessment related to the male reproductive system to determine clinical priority	N, AB, C, P, E	Competent					
CD1 7.1.23 (L2)	Understand the signs and symptoms and management of: <ul style="list-style-type: none"> <li>• torsion of the testes</li> <li>• hydrocele</li> <li>• epididymo-orchitis</li> <li>• penile trauma</li> <li>• penile fracture</li> <li>• balanitis</li> <li>• paraphymosis</li> <li>• priapism</li> </ul>	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 7.2.1 (L2)	Undertake a structured approach to the initial assessment of women presenting with problems associated with pregnancy and prioritise appropriately (triage)	N, AB, C, P, E	Proficient					
CD1 7.2.2 (L2)	Undertake a structured approach to the initial assessment of women presenting with gynaecological symptoms and prioritise appropriately	N, AB, C, P, E	Proficient					
CD1 7.2.3 (L2)	Prepare equipment and support women undergoing vaginal examination and ensure the presence of a female chaperone	N, AB, C, P, E	Competent					
CD1 7.2.4 (L2)	Identify location and prepare equipment required in the event of haemorrhagic shock resulting from vaginal bleeding	N, AB, C, P, E	Competent					
CD1 7.2.5 (L2)	Undertake a structured approach to the initial assessment of men presenting with reproductive/genital associated symptoms and prioritise appropriately	N, AB, C, P, E	Proficient					
CD1 7.2.6 (L2)	Prepare equipment and support men undergoing examination of the reproductive system, and ensure the presence of a male chaperone	N, AB, C, P, E	Competent					
CD1 7.2.7 (L2)	Demonstrate compassion and empathy when communicating with patients, and those important to them, who may be experiencing the loss of a pregnancy or news of an unexpected pregnancy	N, AB, C, P, E	Proficient					
CD1 7.2.8 (L2)	Demonstrate a non-judgemental approach to issues of sexual harm, including FGM, assault, rape and sexually transmitted infection	N, AB, C, P, E	Proficient					

## Contents

### CD1 – Caring for acutely ill adults – Level 2

CD1.8 – Illness affecting the musculoskeletal system – Level 2 (also see the National Major Trauma Nursing Group competencies Level 2, which can be found at: <a href="http://www.nmtng.co.uk/emergency-dept-1.html">www.nmtng.co.uk/emergency-dept-1.html</a> )								
Effectively care for patients with major musculoskeletal problems								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 8.1.1 (L2)	Understand the anatomy and physiology of the musculoskeletal system	N, AB, C, P, E	Competent					
CD1 8.1.2 (L2)	Understand the immediate management of catastrophic haemorrhage associated with musculoskeletal injuries	N, AB, C, P, E	Proficient					
CD1 8.1.3 (L2)	Describe the signs and symptoms of life or limb-threatening musculoskeletal injuries	N, AB, C, P, E	Competent					
CD1 8.1.4 (L2)	Describe the initial assessment of major musculoskeletal problems, including the relevance of mechanism of injury	N, AB, C, P, E	Competent					
CD1 8.1.5 (L2)	Understand the pathophysiology of major musculoskeletal problems including: <ul style="list-style-type: none"> <li>• major fractures – pelvis, hip and long bones</li> <li>• spinal injury</li> <li>• cauda-equina</li> <li>• major joint dislocation</li> </ul>	N, AB, C, P, E	Competent					
CD1 8.1.6 (L2)	Understand the local and national guidelines for the assessment and management of major musculoskeletal problems (e.g. local trauma network guidelines)	N, AB, C, P, E	Competent					
CD1 8.1.7 (L2)	Understand the assessment and treatment of venous thromboembolism (VTE)	N, AB, C, P, E	Competent					
CD1 8.1.8 (L2)	Describe local policy on VTE prevention in patients with immobilised limbs	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD1 8.2.1 (L2)	Undertake a structured initial assessment of patients with musculoskeletal problems and prioritise care appropriately (triage)	N, AB, C, P, E	Proficient					

## Contents

CD1 8.2.2 (L2)	Provide safe and effective care for patients with: <ul style="list-style-type: none"> <li>• major pelvic injury</li> <li>• fractured neck of femur</li> <li>• fractured femoral shaft</li> <li>• major joint dislocation</li> <li>• spinal injury</li> </ul>	N, AB, C, P, E	Proficient					
CD1 8.2.3 (L2)	Identify the need for emergency manipulations of fractures and dislocations that pose a threat to neurovascular supply or skin integrity, and escalate appropriately	N, AB, C, P, E	Competent					
CD1 8.2.4 (L2)	Apply a range of splints to support major fractures	N, AB, C, P, E	Competent					
CD1 8.2.5 (L2)	Apply femoral traction splints	N, AB, C, P, E	Competent					
CD1 8.2.6 (L2)	Apply a pelvic splint	N, AB, C, P, E	Competent					
CD1 8.2.7 (L2)	Identify the need for, and demonstrate safe spinal immobilisation of patients and lead procedures to move patients who require spinal immobilisation	N, AB, C, P, E	Competent					

# Level 2 competencies

## Clinical domains (CD) Level 2 Caring for adults requiring resuscitation



For nurses caring for trauma patients please also see the National Major Trauma Nursing Group competencies, available at: [www.nmtng.co.uk/emergency-dept-1.html](http://www.nmtng.co.uk/emergency-dept-1.html)

**Contents**
**CD2 – Caring for adults requiring resuscitation – Level 2**

<b>CD2.1 – Anaphylaxis – Level 2</b>								
Care appropriately for patients suffering anaphylaxis								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 1.1.1 (L2)	Understand the pathophysiology of anaphylaxis	N, AB, C, P, E	Competent					
CD2 1.1.2 (L2)	Understand the clinical signs and symptoms, differentiating between allergic reaction and anaphylaxis	N, AB, C, P, E	Proficient					
CD2 1.1.3 (L2)	Discuss the common causes of anaphylaxis	N, AB, C, P, E	Competent					
CD2 1.1.4 (L2)	Describe how to summon emergency assistance to support immediate emergency care	N, AB, C, P, E	Proficient					
CD2 1.1.5 (L2)	Understand the national and local guidelines for the emergency management of anaphylaxis	N, AB, C, P, E	Competent					
CD2 1.1.6 (L2)	Understand the importance of investigations in patients with anaphylaxis (e.g. venous blood gas, lactate, mast cell tryptase)	N, AB, C, P, E	Competent					
CD2 1.1.7 (L2)	Understand the follow-up pathways following treatment for anaphylaxis	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 1.2.1 (L2)	Recognise signs of anaphylaxis (bronchospasm, hypotension, angio-oedema) and summon appropriate clinical support	N, AB, C, P, E	Proficient					
CD2 1.2.2 (L2)	Initiate emergency resuscitation – oxygen and IM adrenaline	N, AB, C, P, E	Competent					
CD2 1.2.3 (L2)	Ensure timely IV access, IV fluids, antihistamine and steroids (in accordance with national guidance and locally agreed procedures)	N, AB, C, P, E	Competent					
CD2 1.2.4 (L2)	Establish appropriate physiological monitoring	N, AB, C, P, E	Competent					
CD2 1.2.5 (L2)	Ensure the patient is placed in an appropriate clinical area, capable of supporting their physiological needs and level of observation	N, AB, C, P, E	Proficient					
CD2 1.2.6 (L2)	Order appropriate investigations (e.g. venous blood gas, lactate, mast cell tryptase)	N, AB, C, P, E	Competent					

## Contents

### CD2 – Caring for adults requiring resuscitation – Level 2

CD2.2 – Cardiorespiratory arrest – Level 2								
	Identify patients in respiratory or cardiorespiratory arrest and instigate life support procedures in accordance with the UK Resuscitation Council guidelines (2015), available at: <a href="http://www.resus.org.uk/resuscitation-guidelines">www.resus.org.uk/resuscitation-guidelines</a>							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD2 2.1.1 (L2)	Understand the causes of cardiac arrest, including special situations (e.g. overdose, hypothermia)	N, AB, C, P, E	Proficient					
CD2 2.1.2 (L2)	Understand the UK Resuscitation Council guidelines for in-hospital resuscitation	N, AB, C, P, E	Proficient					
CD2 2.1.3 (L2)	Understand the indications and delivery methods of drugs used within the advanced life support (ALS) algorithm	N, AB, C, P, E	Proficient					
CD2 2.1.4 (L2)	Describe the safe use of emergency resuscitation equipment (e.g. suction, oxygen, defibrillator, automated compression device)	N, AB, C, P, E	Proficient					
CD2 2.1.5 (L2)	Discuss the major reversible causes of cardiorespiratory arrest and their treatment	N, AB, C, P, E	Proficient					
CD2 2.1.6 (L2)	Understand the decision-making process relating to continuation or termination of resuscitation, and the actions to be taken in the event of unsuccessful resuscitation	N, AB, C, P, E	Proficient					
CD2 2.1.7 (L2)	Understand procedures relating to organ and tissue donation	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD2 2.2.1 (L2)	Rapidly assess the collapsed patient, adopting a structured approach	N, AB, C, P, E	Proficient					
CD2 2.2.2 (L2)	Recognise critical illness and summon appropriate clinical support to instigate early management (prevention of cardiorespiratory arrest)	N, AB, C, P, E	Proficient					
CD2 2.2.3 (L2)	Perform basic life support in accordance with the Resuscitation Council UK guidelines. For example, effective chest compressions, basic airway management and bag-valve-mask ventilation	N, AB, C, P, E	Proficient					
CD2 2.2.4 (L2)	Advanced Life Support (ALS) (or equivalent) provider status	N, AB, C, P, E	Competent					
CD2 2.2.5 (L2)	Identify shockable cardiac arrest rhythms (VF, VT) and safely perform DC defibrillation when indicated	N, AB, C, P, E	Competent					
CD2 2.2.6 (L2)	Anticipate and prepare drugs as per ALS guidelines	N, AB, C, P, E	Competent					
CD2 2.2.7 (L2)	Provide clinical care as part of the ALS approach; IV/IO access, IV/IO drug administration and where indicated, assist with emergency endotracheal intubation. Assist in the management of reversible causes of arrest	N, AB, C, P, E	Competent					

## Contents

CD2 2.2.8 (L2)	Undertake lead nurse role as part of the clinical team	N, AB, C, P, E	Competent					
CD2 2.2.9 (L2)	Instigate appropriate monitoring and investigations following return of spontaneous cardiac output	N, AB, C, P, E	Competent					
CD2 2.2.10 (L2)	Provide appropriate emotional support during the process of breaking bad news. For example, demonstrate sensitivity and empathy	N, AB, C, P, E	Proficient					
CD2 2.2.11 (L2)	Care for the deceased patient in accordance with local guidelines	N, AB, C, P, E	Competent					

**Contents**
**CD2 – Caring for adults requiring resuscitation – Level 2**

<b>CD2.3 – Managing sepsis – Level 2</b>								
Provide appropriate care for patients with sepsis								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 3.1.1 (L2)	Understand the potential causes of sepsis	N, AB, C, P, E	Competent					
CD2 3.1.2 (L2)	Understand the pathophysiology of sepsis, including its identifying clinical features	N, AB, C, P, E	Competent					
CD2 3.1.3 (L2)	Describe the significance of patient investigations such as: lactate levels and white cell count	N, AB, C, P, E	Competent					
CD2 3.1.4 (L2)	Articulate the features associated with high risk criteria for sepsis and the circumstances in which patients may require senior clinical input and/or review by intensive care experts	N, AB, C, P, E	Competent					
CD2 3.1.5 (L2)	Understand locally agreed guidelines and documentation relating to sepsis	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 3.2.1 (L2)	Identify patients with signs or symptoms of sepsis and ensure initiation of early treatment as per local guidelines	N, AB, C, P, E	Competent					
CD2 3.2.2 (L2)	Instigate physiological monitoring, record baseline observations and accurately calculate early warning score and assign patient priority (triage)	N, AB, C, P, E	Proficient					
CD2 3.2.3 (L2)	Initiate oxygen therapy titrated to oxygen saturations and in accordance with agreed guidelines	N, AB, C, P, E	Proficient					
CD2 3.2.4 (L2)	Establish IV access and obtain appropriate blood samples, including venous blood cultures – in line with locally agreed procedures	N, AB, C, P, E	Proficient					
CD2 3.2.5 (L2)	Evaluate results of near patient tests and report abnormal results to an appropriate clinician	N, AB, C, P, E	Competent					
CD2 3.2.6 (L2)	Administer intravenous fluid and antibiotics as prescribed and in accordance with guidelines and local policy	N, AB, C, P, E	Competent					
CD2 3.2.7 (L2)	Maintain accurate fluid balance monitoring	N, AB, C, P, E	Proficient					
CD2 3.2.8 (L2)	Maintain close observation of patient's condition, liaising with critical care support as required in line with local guidelines and procedures	N, AB, C, P, E	Competent					

**Contents**
**CD2 – Caring for adults requiring resuscitation – Level 2**

<b>CD2.4 – The shocked patient – Level 2</b>								
Provide appropriate care for patients with 'shock' states. Also see CD2.1 Anaphylaxis, CD2.3 Sepsis and the National Major Trauma Group competencies								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 4.1.1 (L2)	Define 'shock' and discuss the pathophysiology and presenting signs and symptoms resulting from: <ul style="list-style-type: none"> <li>• hypovolemic shock</li> <li>• cardiogenic shock</li> <li>• septic shock</li> <li>• anaphylactic shock</li> <li>• neurogenic shock</li> </ul>	N, AB, C, P, E	Competent					
CD2 4.1.2 (L2)	Understand the progression of shock and the resulting manifestation of signs, symptoms and blood values	N, AB, C, P, E	Competent					
CD2 4.1.3 (L2)	Understand the management of the different forms of shock listed above	N, AB, C, P, E	Competent					
CD2 4.1.4 (L2)	Describe methods to minimise external bleeding	N, AB, C, P, E	Competent					
CD2 4.1.5 (L2)	Understand the local guidelines relating to activation of the massive haemorrhage protocol	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 4.2.1 (L2)	Identify and report evidence of catastrophic haemorrhage	N, AB, C, P, E	Competent					
CD2 4.2.2 (L2)	Establish physiological monitoring, record baseline observations and accurately calculate early warning score and assign triage category	N, AB, C, P, E	Proficient					
CD2 4.2.3 (L2)	Initiate oxygen therapy in accordance with local and national guidance	N, AB, C, P, E	Competent					
CD2 4.2.4 (L2)	Establish IV access and obtain appropriate blood samples, in line with locally agreed procedures	N, AB, C, P, E	Competent					
CD2 4.2.5 (L2)	Evaluate blood results and communicate abnormal results appropriately	N, AB, C, P, E	Competent					
CD2 4.2.6 (L2)	Initiate intravenous fluids and/or transfusion of blood products as prescribed and in accordance with guidelines and local policy	N, AB, C, P, E	Competent					
CD2 4.2.7 (L2)	Maintain accurate fluid balance monitoring	N, AB, C, P, E	Proficient					
CD2 4.2.8 (L2)	Evaluate effect of interventions, communicate to responsible clinician and facilitate critical care support in line with local guidelines and procedures	N, AB, C, P, E	Competent					

**Contents**
**CD2 – Caring for adults requiring resuscitation – Level 2**

<b>CD2.5 – The unconscious patient – Level 2</b>								
Provide holistic care for patients presenting with reduced level of consciousness								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 5.1.1 (L2)	Discuss the potential causes of unconsciousness	N, AB, C, P, E	Competent					
CD2 5.1.2 (L2)	Describe the systematic assessment of patients with altered levels of consciousness	N, AB, C, P, E	Proficient					
CD2 5.1.3 (L2)	Understand the terms 'AVPU' and describe the Glasgow Coma Score (GCS)	N, AB, C, P, E	Proficient					
CD2 5.1.4 (L2)	Describe the investigations required to establish cause and possible treatment for patients with altered levels of consciousness	N, AB, C, P, E	Competent					
CD2 5.1.5 (L2)	Describe methods of obtaining information on relevant medical history in unconscious patients (e.g. medic alerts, telephone)	N, AB, C, P, E	Competent					
CD2 5.1.6 (L2)	Understand the local pathways to specialist services for patients with brain injury (e.g. cerebral haemorrhage or stroke)	N, AB, C, P, E	Competent					
CD2 5.1.7 (L2)	Understand the need for comprehensive nursing care to meet hydration, hygiene (oral, eye and general), mobility and communication needs in patients unable to do so themselves	N, AB, C, P, E	Proficient					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 5.2.1 (L2)	Recognise patients who are unable to maintain their own airway and implement the following basic airway skills: <ul style="list-style-type: none"> <li>• positioning – chin lift/head tilt and/or jaw thrust</li> <li>• use of oropharyngeal airways (OPA)</li> <li>• use of nasopharyngeal airway (NPA)</li> <li>• suctioning of the oropharynx</li> </ul>	N, AB, C, P, E	Competent					
CD2 5.2.2 (L2)	Escalate, promptly and effectively, concerns about any patient with the inability to protect or maintain their airway or where there is derangement or deterioration of physiological parameters	N, AB, C, P, E	Proficient					
CD2 5.2.3 (L2)	Demonstrate the ability to undertake a structured initial assessment of a patient with altered conscious level, and prioritise care appropriately (triage)	N, AB, C, P, E	Proficient					
CD2 5.2.4 (L2)	Establish appropriate physiological monitoring	N, AB, C, P, E	Proficient					

## Contents

CD2 5.2.5 (L2)	Demonstrate effective patient positioning, having due regard for pressure area care	N, AB, C, P, E	Proficient					
CD2 5.2.6 (L2)	Ensure hygiene needs are met with due regard for privacy and dignity	N, AB, C, P, E	Competent					
CD2 5.2.7 (L2)	Conduct eye and mouth care once initial assessment and evaluation has been completed	N, AB, C, P, E	Competent					
CD2 5.2.8 (L2)	Take steps to establish identity of patients and contact significant others	N, AB, C, P, E	Competent					

**Contents**
**CD2 – Caring for adults requiring resuscitation – Level 2**

<b>CD2.6 – Emergency airway and ventilation management – Level 2</b>								
Provide holistic care for patients requiring emergency airway intervention and/or ventilation								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD2 6.1.1 (L2)	Understand the principles of bag-valve-mask ventilation	N, AB, C, P, E	Proficient					
CD2 6.1.2 (L2)	Describe emergency airway management and the concepts of rapid sequence induction (RSI)	N, AB, C, P, E	Competent					
CD2 6.1.3 (L2)	Understand the guidelines for minimum standards of monitoring of physiological parameters for ventilated patients and the local equipment required	N, AB, C, P, E	Competent					
CD2 6.1.4 (L2)	Understand the drugs commonly used for: <ul style="list-style-type: none"> <li>• emergency anaesthesia and RSI</li> <li>• on-going anaesthesia</li> </ul>	N, AB, C, P, E	Competent					
CD2 6.1.5 (L2)	Describe the standard operating procedures and guidelines relating to emergency airway management and the roles of each team member	N, AB, C, P, E	Competent					
CD2 6.1.6 (L2)	Understand end-tidal CO <sub>2</sub> monitoring (ETCO <sub>2</sub> ) and the normal values	N, AB, C, P, E	Competent					
CD2 6.1.7 (L2)	Understand normal blood gas values	N, AB, C, P, E	Competent					
CD2 6.1.8 (L2)	Understand how blood gas values change due to inadequate ventilation and/or inadequate perfusion	N, AB, C, P, E	Competent					
CD2 6.1.9 (L2)	Discuss use of mechanical ventilator – identifying location, associated equipment (e.g. tubing, filters) and principles of functioning	N, AB, C, P, E	Competent					
CD2 6.1.10 (L2)	Understand the signs of a patient who is under-sedated and/or requires further paralysis	N, AB, C, P, E	Competent					
CD2 6.1.11 (L2)	Discuss the process of endotracheal suctioning and associated complications	N, AB, C, P, E	Competent					
CD2 6.1.12 (L2)	Understand the features of patients who may be predicted to be difficult to intubate and or bag-valve-mask ventilate	N, AB, C, P, E	Competent					
CD2 6.1.13 (L2)	Describe the location and components of difficult airway equipment	N, AB, C, P, E	Competent					
CD2 6.1.14 (L2)	Describe the location and components of surgical airway equipment	N, AB, C, P, E	Competent					

## Contents

	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD2 6.2.1 (L2)	Establish physiological monitoring and prepare ETCO <sub>2</sub> equipment	N, AB, C, P, E	Competent					
CD2 6.2.2 (L2)	Prepare the drugs prescribed for RSI in accordance with local guidelines and procedures	N, AB, C, P, E	Competent					
CD2 6.2.3 (L2)	Prepare equipment for intubation in discussion with the clinician who will intubate the patient	N, AB, C, P, E	Competent					
CD2 6.2.4 (L2)	Prepare the ventilator for use and effectively undertake a functional check following agreed procedures	N, AB, C, P, E	Competent					
CD2 6.2.5 (L2)	Correctly discuss pre-determined ventilator settings and set up the transport ventilator effectively	N, AB, C, P, E	Competent					
CD2 6.2.6 (L2)	Safely and effectively undertake the role of airway assistant during RSI and intubation	N, AB, C, P, E	Competent					
CD2 6.2.7 (L2)	Correctly assemble the equipment necessary to suction through the endotracheal tube and demonstrate safe technique for endotracheal suctioning	N, AB, C, P, E	Competent					
CD2 6.2.8 (L2)	Effectively monitor the patient's physiological parameters post-intubation and ventilation and escalate concerns appropriately	N, AB, C, P, E	Competent					
CD2 6.2.9 (L2)	Demonstrate the correct procedure for the preparation of prescribed maintenance drugs for on-going anaesthesia and paralysis	N, AB, C, P, E	Competent					

## Contents

### CD2 – Caring for adults requiring resuscitation – Level 2

CD2.6a – The patient requiring non-Invasive ventilation (NIV) – Level 2								
	Provide holistic care for patients requiring non-invasive ventilation (NIV)							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD2 6a.1.1 (L2)	Understand the anxieties experienced by patients needing NIV (and their families)	N, AB, C, P, E	Competent					
CD2 6a.1.2 (L2)	Understand the indications, contraindications and potential complications with NIV	N, AB, C, P, E	Competent					
CD2 6a.1.2 (L2)	Understand the difference in the two primary modes of NIV – CPAP and BiPAP	N, AB, C, P, E	Competent					
CD2 6a.1.3 (L2)	Understand the British Thoracic Society guidelines and the local standard operating procedures for the use of NIV	N, AB, C, P, E	Competent					
CD2 6a.1.4 (L2)	Describe the term positive end-expiratory pressure (PEEP) and discuss its advantages and disadvantages	N, AB, C, P, E	Competent					
CD2 6a.1.5 (L2)	Understand the importance of oxygen saturation and arterial blood gas monitoring and interpretation in the contexts of managing NIV	N, AB, C, P, E	Competent					
CD2 6a.1.6 (L2)	Describe the systems available within the care setting to deliver NIV	N, AB, C, P, E	Competent					
CD2 6a.1.7 (L2)	Understand when NIV may no longer be appropriate and the threshold at which invasive ventilation may be required	N, AB, C, P, E	Competent					
CD2 6a.1.8 (L2)	Discuss the equipment required when transferring patients on NIV, both within the hospital and externally	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD2 6a.2.1 (L2)	Provide adequate advice, instruction, reassurance and support to the patient prior to commencing NIV	N, AB, C, P, E	Competent					
CD2 6a.2.2 (L2)	Identify the correct mask for the system being used and size the mask appropriately	N, AB, C, P, E	Competent					
CD2 6a.2.3 (L2)	Instigate the correct standard of physiological monitoring prior to the implementation of NIV and monitor these parameters once NIV has started	N, AB, C, P, E	Competent					
CD2 6a.2.4 (L2)	Demonstrate the ability to effectively adjust NIV settings following prescribed limits and/or medically defined physiological parameters	N, AB, C, P, E	Competent					
CD2 6a.2.5 (L2)	Accurately document the care of patients undergoing NIV	N, AB, C, P, E	Competent					

## Contents

CD2 6a.2.6 (L2)	Demonstrate the ability to safely transfer patients undergoing NIV, ensure that all essential equipment accompanies the patient during transfer	N, AB, C, P, E	Competent					
-----------------	-------------------------------------------------------------------------------------------------------------------------------------------------	----------------	-----------	--	--	--	--	--

## Contents

## CD2 – Caring for adults requiring resuscitation – Level 2

CD2.7 – The patient requiring invasive monitoring (central venous access and arterial lines) – Level 2								
Provide holistic care for patients requiring invasive monitoring using central venous access and/or arterial lines								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD2 7.1.1 (L2)	Demonstrate understanding of the indications and rationale for the placement of central venous catheters or arterial catheters, and the potential risks and complications of insertion	N, AB, C, P, E	Competent					
CD2 7.1.2 (L2)	Understand local policies and guidelines for the placement and use of central venous access and arterial lines	N, AB, C, P, E	Competent					
CD2 7.1.3 (L2)	Demonstrate an understanding of the equipment necessary for the insertion of central venous and arterial catheters, and the types of lines commonly inserted	N, AB, C, P, E	Competent					
CD2 7.1.4 (L2)	Demonstrate an understanding of the common sites for insertion and the procedure for insertion of central venous and arterial catheters	N, AB, C, P, E	Competent					
CD2 7.1.5 (L2)	Demonstrate an understanding of pressure transducer equipment and the configuration of the multi-modality monitor to facilitate recording, and monitoring of CVP and arterial pressures	N, AB, C, P, E	Competent					
CD2 7.1.6 (L2)	Demonstrate an understanding of the risks and complications associated with central venous access and arterial lines, and their insertion	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD2 7.2.1 (L2)	Correctly assemble the equipment necessary for central venous or arterial catheter insertion and prepare the procedure trolley whilst maintaining aseptic technique	N, AB, C, P, E	Competent					
CD2 7.2.2 (L2)	Where possible, ensure the patient is fully informed of the proposed procedure and provide psychological support	N, AB, C, P, E	Competent					
CD2 7.2.3 (L2)	Correctly assist with the insertion procedure and assemble transducer equipment, ensuring lines are labelled correctly	N, AB, C, P, E	Competent					
CD2 7.2.4 (L2)	Demonstrate correct connection to patient and configuration of CVP monitoring, including configuration of the multi-modality monitor and ability to 'zero' the line	N, AB, C, P, E	Competent					
CD2 7.2.5 (L2)	Correctly document care relating to central venous access and/or arterial lines	N, AB, C, P, E	Competent					
CD2 7.2.6 (L2)	Escalate appropriately in response to line complications or emergencies – take appropriate immediate action	N, AB, C, P, E	Competent					

# Level 2 competencies

## Clinical domains (CD) Level 2 Caring for adults with minor injury or illness



## Contents

### CD3 – Caring for adults with minor injury or illness – Level 2

CD3.1 – Limb injuries – Level 2								
Provide holistic care for patients presenting with upper and lower limb injuries								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD3 1.1.1 (L2)	Describe of the basic anatomy of the upper and lower limb	N, AB, C, P, E	Competent					
CD3 1.1.2 (L2)	Describe the term mechanism of injury and the significance of this in patient assessment	N, AB, C, P, E	Proficient					
CD3 1.1.3 (L2)	Describe the red flag signs and symptoms associated with injuries that represent a risk to life or limb	N, AB, C, P, E	Proficient					
CD3 1.1.4 (L2)	Describe the signs and symptoms of common limb fractures and dislocations	N, AB, C, P, E	Competent					
CD3 1.1.5 (L2)	Describe the local guidelines relating to the assessment and radiological imaging of upper and lower limb injuries	N, AB, C, P, E	Competent					
CD3 1.1.6 (L2)	Understand ionising radiation for medical exposure regulations (IRMER)	N, AB, C, P, E	Competent					
CD3 1.1.7 (L2)	Describe venous thromboembolism (VTE) risk assessment and when this is indicated	N, AB, C, P, E	Competent					
CD3 1.1.8 (L2)	Describe the risks and complications associated with limb immobilisation	N, AB, C, P, E	Competent					
CD3 1.1.9 (L2)	Describe treatments available for managing upper limb and hand injuries, including their indications and complications	N, AB, C, P, E	Competent					
CD3 1.1.10 (L2)	Understand how significant systemic illness may present as an apparent minor injury	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD3 1.2.1 (L2)	Assess patients with upper and lower limb injuries and prioritise care appropriately (triage)	N, AB, C, P, E	Proficient					
CD3 1.2.2 (L2)	Demonstrate ability to carry out and document neurovascular observations on limbs distal to injury site	N, AB, C, P, E	Proficient					
CD3 1.2.3 (L2)	Use correct technique for removal of rings	N, AB, C, P, E	Competent					
CD3 1.2.4 (L2)	Recognise patients who require more detailed systemic medical assessment beyond assessment of the injury	N, AB, C, P, E	Proficient					
CD3 1.2.5 (L2)	Recognise patients with signs and symptoms of fracture to the neck or femur (NOF)	N, AB, C, P, E	Proficient					

## Contents

CD3 1.2.6 (L2)	Demonstrate the correct application and provision of appropriate advice following: <ul style="list-style-type: none"> <li>• broad arm sling</li> <li>• high arm sling</li> <li>• collar and cuff</li> <li>• neighbour strapping</li> <li>• mallet/zimmer splints</li> <li>• thumb spica</li> <li>• application of wrist splints (with and without thumb extension)</li> </ul>	N, AB, C, P, E	Proficient					
CD3 1.2.7 (L2)	Apply to lower limbs: <ul style="list-style-type: none"> <li>• wool and crepe bandage</li> <li>• knee splint</li> <li>• ankle splint</li> </ul>	N, AB, C, P, E	Proficient					
CD3 1.2.8 (L2)	Apply upper and lower limb casts (Plaster of Paris or locally used equivalent), following locally agreed procedures and adopting national best practice	N, AB, C, P, E	Proficient					
CD3 1.2.9 (L2)	Give appropriate advice following application of a cast	N, AB, C, P, E	Competent					
CD3 1.2.10 (L2)	Undertake a VTE risk assessment and ensure that appropriate management/prophylaxis is implemented	N, AB, C, P, E	Competent					
CD3 1.2.11 (L2)	Provide patients with correctly sized, appropriate walking aids (e.g. crutches, Zimmer frame, walking stick) and instructions, ensuring they can use the device safely	N, AB, C, P, E	Proficient					
CD3 1.2.12 (L2)	Support the care of patients undergoing manipulation under: <ul style="list-style-type: none"> <li>• regional anaesthesia (regional block)</li> <li>• sedation</li> </ul>	N, AB, C, P, E	Competent					
CD3 1.2.13 (L2)	Provide appropriate discharge advice to patients following lower limb injuries. For example: <ul style="list-style-type: none"> <li>• sprains to knee and ankle</li> <li>• fractures to tibia/fibula and bones of the ankle and foot</li> </ul>	N, AB, C, P, E	Competent					
CD3 1.2.14 (L2)	Ensure outpatient follow up (in accordance with locally agreed guidelines and procedures)	N, AB, C, P, E	Competent					
CD3 1.2.15 (L2)	Recognise and refer patients for additional therapy (physio/OT) following locally agreed guidelines and procedures	N, AB, C, P, E	Competent					

## Contents

### CD3 – Caring for adults with minor injury or illness – Level 2

CD3.2 – Head and neck – Level 2								
	Provide holistic care for patients presenting with ophthalmic, maxillofacial, or ear, nose and throat (ENT) problems							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD3 2.1.1 (L2)	Describe the normal anatomy and physiology of the eye	N, AB, C, P, E	Competent					
CD3 2.1.2 (L2)	Describe the normal anatomy and physiology of the ear, nose and throat	N, AB, C, P, E	Competent					
CD3 2.1.3 (L2)	Describe the mechanism of injury associated with: <ul style="list-style-type: none"> <li>foreign body to the eye</li> <li>abrasion to cornea</li> <li>blunt trauma to the eye</li> <li>penetrating trauma to the eye</li> <li>chemical eye injury</li> </ul>	N, AB, C, P, E	Competent					
CD3 2.1.4 (L2)	Describe the mechanism of injury associated with: <ul style="list-style-type: none"> <li>perforated tympanic membrane (traumatic)</li> <li>foreign body to the ear</li> <li>nasal fractures and septal haematoma</li> <li>trauma to the face and ears, including lacerations and fractures</li> </ul>	N, AB, C, P, E	Competent					
CD3 2.1.5 (L2)	Describe the red flag signs or symptoms and immediate treatment of an eye-threatening emergency	N, AB, C, P, E	Competent					
CD3 2.1.6 (L2)	Describe the red flag signs or symptoms of an ENT emergency and the immediate actions required	N, AB, C, P, E	Competent					
CD3 2.1.7 (L2)	Describe the assessment process for patients with ophthalmic presentations, including: <ul style="list-style-type: none"> <li>assessing visual acuity</li> <li>rationale for measuring eye pH</li> </ul>	N, AB, C, P, E	Proficient					
CD3 2.1.8 (L2)	Describe the assessment process for patients with ENT presentations	N, AB, C, P, E	Proficient					
CD3 2.1.9 (L2)	Understand how systemic illnesses may manifest in eye or ENT symptoms	N, AB, C, P, E	Competent					
CD3 2.1.10 (L2)	Describe local processes for obtaining ophthalmic, ENT and maxillofacial specialist referral	N, AB, C, P, E	Competent					

## Contents

CD3 2.1.11 (L2)	Describe common eye medication used within the emergency department. For example: <ul style="list-style-type: none"> <li>• local anaesthetic</li> <li>• antibiotics</li> <li>• corneal stains</li> </ul>	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD3 2.2.1 (L2)	Assess and prioritise patients presenting with an eye problem	N, AB, C, P, E	Proficient					
CD3 2.2.2 (L2)	Assess and prioritise patients presenting with an ENT problem	N, AB, C, P, E	Proficient					
CD3 2.2.3 (L2)	Accurately measure and record visual acuity: <ul style="list-style-type: none"> <li>• unaided</li> <li>• with glasses</li> <li>• with pinhole</li> </ul>	N, AB, C, P, E	Competent					
CD3 2.2.4 (L2)	Measure and record eye pH	N, AB, C, P, E	Competent					
CD3 2.2.5 (L2)	Recognise when patients with eye or ENT symptoms may require more detailed examination of other body systems and refer to appropriate clinician	N, AB, C, P, E	Competent					
CD3 2.2.6 (L2)	Effectively undertake eye irrigation	N, AB, C, P, E	Proficient					
CD3 2.2.7 (L2)	Effectively administer eye medications	N, AB, C, P, E	Competent					
CD3 2.2.8 (L2)	Provide first aid steps to manage an epistaxis	N, AB, C, P, E	Competent					
CD3 2.2.9 (L2)	Effectively prepare the patient and equipment for nasal packing by a trained clinician	N, AB, C, P, E	Competent					
CD3 2.2.10 (L2)	Make an appropriate referral to other specialties or health professionals in line with locally agreed pathways	N, AB, C, P, E	Competent					

## Contents

## CD3 – Caring for adults with minor injury or illness – Level 2

CD3.3 – Back problems – Level 2								
	Provide holistic care to patients presenting with back problems							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD3 3.1.1 (L2)	Describe the normal anatomy and physiology of the back and spine	N, AB, C, P, E	Competent					
CD3 3.1.2 (L2)	Describe the red flags indicating spinal pathology	N, AB, C, P, E	Competent					
CD3 3.1.3 (L2)	Describe the local guidelines for spine immobilisation	N, AB, C, P, E	Competent					
CD3 3.1.4 (L2)	Describe mechanisms of injury and how this influences injury to the back/spine	N, AB, C, P, E	Competent					
CD3 3.1.5 (L2)	Understand the psychological and social implication for patients with acute and chronic back pain	N, AB, C, P, E	Competent					
CD3 3.1.6 (L2)	Understand how pathology of other systems may result in the experience of back pain (e.g. pneumonia, abdominal aortic aneurysm)	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD3 3.2.1 (L2)	Assess patients presenting with acute back problems and prioritise appropriately	N, AB, C, P, E	Proficient					
CD3 3.2.2 (L2)	Identify any new neurological deficit and report concerns appropriately	N, AB, C, P, E	Competent					
CD3 3.2.3 (L2)	Identify patients with back pain symptoms who may require urgent clinical assessment of other body systems and report concerns appropriately	N, AB, C, P, E	Competent					
CD3 3.2.4 (L2)	Facilitate appropriate pain management (see CCT2)	N, AB, C, P, E	Proficient					
CD3 3.2.5 (L2)	Provide appropriate discharge advice to patients with musculoskeletal back pain	N, AB, C, P, E	Competent					

## Contents

## CD3 – Caring for adults with minor injury or illness – Level 2

CD3.4 – Wounds and burns – Level 2								
	Provide holistic care to patients presenting with minor wounds and burns (for major burns refer to the National Major Trauma Nursing Group competencies)							
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD3 4.1.1 (L2)	Describe the normal anatomy of the skin	N, AB, C, P, E	Competent					
CD3 4.1.2 (L2)	Describe mechanisms of injury that may result in wounds and/or burns	N, AB, C, P, E	Competent					
CD3 4.1.3 (L2)	Understand the terminology associated with wounds and burns including: <ul style="list-style-type: none"> <li>• laceration</li> <li>• incision</li> <li>• graze</li> <li>• scald</li> <li>• full thickness</li> <li>• partial thickness</li> <li>• superficial</li> </ul>	N, AB, C, P, E	Competent					
CD3 4.1.4 (L2)	Describe wound and burn assessment including red flags	N, AB, C, P, E	Proficient					
CD3 4.1.5 (L2)	Understand how seemingly small wounds or burns may have serious consequences due to anatomical site	N, AB, C, P, E	Competent					
CD3 4.1.6 (L2)	Understand the normal wound and burn healing processes and the factors that may affect this	N, AB, C, P, E	Competent					
CD3 4.1.7 (L2)	Describe the properties of dressings used to facilitate wound and burn healing	N, AB, C, P, E	Competent					
CD3 4.1.8 (L2)	Describe recognised immediate and delayed complications arising from wounds and burns	N, AB, C, P, E	Competent					
CD3 4.1.9 (L2)	Describe the local guidelines relating to wound and burn management	N, AB, C, P, E	Competent					
CD3 4.1.10 (L2)	Understand how the presence of wounds, burns or other minor injuries may give rise to safeguarding concerns (see CTT6)	N, AB, C, P, E	Proficient					
CD3 4.1.11 (L2)	Describe the criteria for wound and burn referral to specialised services and the locally agreed guidelines and processes for referral	N, AB, C, P, E	Competent					

## Contents

	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD3 4.2.1 (L2)	Demonstrate the initial assessment of patients with wounds and burns and prioritise appropriately (triage)	N, AB, C, P, E	Competent					
CD3 4.2.2 (L2)	Initiate first aid treatment of wounds and burns	N, AB, C, P, E	Proficient					
CD3 4.2.3 (L2)	Undertake wound cleaning following local guidelines	N, AB, C, P, E	Competent					
CD3 4.2.4 (L2)	Following local policy, clean and close an uncomplicated wound with: <ul style="list-style-type: none"> <li>• tissue adhesive</li> <li>• steri strips</li> <li>• staples</li> <li>• sutures</li> </ul>	N, AB, C, P, E	Proficient					
CD3 4.2.5 (L2)	Demonstrate ability to de-roof blisters according to local guidelines	N, AB, C, P, E	Competent					
CD3 4.2.6 (L2)	Select and apply dressings to wounds and burns (as per local guidelines)	N, AB, C, P, E	Proficient					
CD3 4.2.7 (L2)	Recognise when a wound or burn requires more detailed clinical exploration/assessment and report concerns appropriately	N, AB, C, P, E	Competent					
CD3 4.2.8 (L2)	Provide appropriate wound care advice, including when to seek urgent clinical attention	N, AB, C, P, E	Competent					

# Level 2 competencies

## Clinical domains (CD) Level 2 Caring for children and young people



The Good Nursing Practice and Cross-Cutting Theme competencies apply equally to nurses caring for adults and children. However, nurses caring for children and young people must prioritise completion of CCT6 competencies on safeguarding children and adults.

For nurses caring for children following major trauma, please also see the National Major Trauma Nursing Group Competencies available at: [www.nmtng.co.uk/emergency-dept-1.htm](http://www.nmtng.co.uk/emergency-dept-1.htm)

## Contents

### CD4 – Caring for children and young people – Level 2

CD4.1 – Assessing children and young people – Level 2								
Holistically and systematically assess children and young people through the age spectrum								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 1.1.1 (L2)	Describe how anatomy and physiology changes from infancy through to adulthood	N, AB, C, P, E	Competent					
CD4 1.1.2 (L2)	Understand how anatomical and physiological differences impact on illness and injury manifestations	N, AB, C, P, E	Proficient					
CD4 1.1.3 (L2)	Describe how anatomical, physiological and psychological differences impact on nursing assessment	N, AB, C, P, E	Proficient					
CD4 1.1.4 (L2)	Discuss normal parameters of weight in children of various ages and the use of formulae to estimate this	N, AB, C, P, E	Proficient					
CD4 1.1.5 (L2)	Explain how normal values of heart rate, respiratory rate, blood pressure and urine output vary with age	N, AB, C, P, E	Proficient					
CD4 1.1.6 (L2)	Describe normal child development from infancy to adulthood	N, AB, C, P, E	Proficient					
CD4 1.1.7 (L2)	Describe why children may present with abnormal development	N, AB, C, P, E	Competent					
CD4 1.1.8 (L2)	Discuss how developmental stage impacts on injury and illness presentations	N, AB, C, P, E	Competent					
CD4 1.1.9 (L2)	Describe the role of centile charts in monitoring child growth	N, AB, C, P, E	Competent					
CD4 1.1.10 (L2)	Describe the normal nutritional and fluid requirements of children at different ages	N, AB, C, P, E	Competent					
CD4 1.1.11 (L2)	Discuss dietary requirements of children, including feeding regimes	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 1.2.1 (L2)	Demonstrate a systematic method of assessment of children and young people following a structured A-E approach	N, AB, C, P, E	Proficient					

## Contents

CD4 1.2.2 (L2)	For children of all ages, appropriately measure and record the following physiological observations: <ul style="list-style-type: none"> <li>• evaluation of respiration to include:           <ul style="list-style-type: none"> <li>• rate and work of breathing</li> <li>• oxygen saturations</li> </ul> </li> <li>• heart rate</li> <li>• blood pressure</li> <li>• capillary refill time (CRT)</li> <li>• conscious level – AVPU and Glasgow Coma Score (GCS)</li> <li>• blood glucose measurement (BM)</li> <li>• temperature</li> </ul>	N, AB, C, P, E	Proficient					
CD4 1.2.3 (L2)	Correctly calculate and document the locally used paediatric early warning score	N, AB, C, P, E	Proficient					
CD4 1.2.4 (L2)	Demonstrate appropriate urine collection techniques in all ages of children and interpret urinalysis	N, AB, C, P, E	Proficient					
CD4 1.2.5 (L2)	Identify children who are acutely unwell or seriously injured, move to an appropriate environment, commence immediate treatment and summon help	N, AB, C, P, E	Competent					
CD4 1.2.6 (L2)	Triage children accurately and modify priority management based on issues other than acuity (e.g. learning disability)	N, AB, C, P, E	Competent					
CD4 1.2.7 (L2)	Assess children in a calm and age-appropriate manner	N, AB, C, P, E	Proficient					
CD4 1.2.8 (L2)	Modify communication and interaction strategies to facilitate appropriate assessment	N, AB, C, P, E	Proficient					
CD4 1.2.9 (L2)	Engage with parents and carers in order to gather pertinent information to enhance assessment	N, AB, C, P, E	Proficient					
CD4 1.2.10 (L2)	Calculate maintenance fluid requirements for children according to weight	N, AB, C, P, E	Competent					
CD4 1.2.11 (L2)	Identify the deteriorating child and respond appropriately	N, AB, C, P, E	Proficient					

## Contents

### CD4 – Caring for children and young people – Level 2

CD4.2 – Assessment and management of pain in children (including medicines management) – Level 2								
Safely assess and manage pain in children								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 2.1.1 (L2)	Describe the principles of pain theory and assessment in children	N, AB, C, P, E	Competent					
CD4 2.1.2 (L2)	Has working knowledge of local pain management guidelines for children	N, AB, C, P, E	Proficient					
CD4 2.1.3 (L2)	Compare and contrast pain assessment tools for children of different developmental stages	N, AB, C, P, E	Competent					
CD4 2.1.4 (L2)	Discuss how pain assessment influences triage priority	N, AB, C, P, E	Proficient					
CD4 2.1.5 (L2)	Describe pharmacological differences between children and adults and the implications this has for practice	N, AB, C, P, E	Competent					
CD4 2.1.6 (L2)	Discuss the factors affecting administration of medicines to children and young people and describe strategies for facilitating administration	N, AB, C, P, E	Proficient					
CD4 2.1.7 (L2)	Understand how to use the BNF(c)	N, AB, C, P, E	Competent					
CD4 2.1.8 (L2)	Describe non-pharmacological pain management strategies suitable for children at different ages	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 2.2.1 (L2)	Demonstrate a systematic method of pain assessment of children and young people using appropriate tools	N, AB, C, P, E	Proficient					
CD4 2.2.2 (L2)	Demonstrate non-pharmacological methods of pain management for children	N, AB, C, P, E	Proficient					
CD4 2.2.3 (L2)	Demonstrate weight-based drug calculations for children	N, AB, C, P, E	Proficient					
CD4 2.2.4 (L2)	Where locally available, use PGDs appropriately to administer timely analgesia to children. (If a non-medical prescriber, prescribe appropriate analgesia for children safely.)	N, AB, C, P, E	Competent					

## Contents

CD4 2.2.5 (L2)	Demonstrate effective strategies for safe administration of analgesia to children via a variety of routes: <ul style="list-style-type: none"> <li>• oral</li> <li>• rectal</li> <li>• intranasal</li> <li>• inhaled</li> <li>• intravenous</li> <li>• topical</li> </ul>	N, AB, C, P, E	Proficient					
CD4 2.2.6 (L2)	Demonstrate evaluation of pain after interventions and respond appropriately	N, AB, C, P, E	Proficient					

## Contents

### CD4 – Caring for children and young people – Level 2

CD4.3 – Children requiring resuscitation – Level 2								
Care holistically for children requiring resuscitation								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 3.1.1 (L2)	Describe the pathophysiology and the emergency treatment for: <ul style="list-style-type: none"> <li>• airway obstruction</li> <li>• anaphylaxis</li> <li>• respiratory failure</li> <li>• circulatory compromise including hypovolaemic shock</li> <li>• sepsis</li> <li>• the fitting child</li> <li>• diabetic ketoacidosis</li> <li>• poisoning</li> </ul>	N, AB, C, P, E	Competent					
CD4 3.1.2 (L2)	Describe the sequence of progression of signs and symptoms from respiratory distress or circulatory compromise to cardiopulmonary arrest	N, AB, C, P, E	Competent					
CD4 3.1.3 (L2)	Describe the basic life support guidelines for neonates, infants and children	N, AB, C, P, E	Proficient					
CD4 3.1.4 (L2)	Understand advanced life support guidelines and algorithms for infants and children. Possess APLS provider status or equivalent	N, AB, C, P, E	Proficient					
CD4 3.1.5 (L2)	Understand the roles of the paediatric resuscitation team and describe the human factors necessary for effective team working	N, AB, C, P, E	Competent					
CD4 3.1.6 (L2)	Describe signs of possible emotional distress in self and/or colleagues when caring for a critically ill or injured child and know what support is available and appropriate	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 3.2.1 (L2)	Identify respiratory failure in children and respond appropriately	N, AB, C, P, E	Proficient					
CD4 3.2.2 (L2)	Identify circulatory compromise in children and respond appropriately	N, AB, C, P, E	Proficient					
CD4 3.2.3 (L2)	Identify cardiac arrest in children and respond appropriately	N, AB, C, P, E	Proficient					
CD4 3.2.4 (L2)	Demonstrate advanced life support skills in infants and children including safe defibrillation	N, AB, C, P, E	Competent					
CD4 3.2.5 (L2)	Recognise the seizing child and initiate immediate interventions	N, AB, C, P, E	Proficient					
CD4 3.2.6 (L2)	Function as lead nurse in the paediatric resuscitation team	N, AB, C, P, E	Competent					

## Contents

CD4 3.2.7 (L2)	Locate equipment and, safely and effectively, implement emergency airway and breathing management to include the following: <ul style="list-style-type: none"> <li>• manual airway maneuvers</li> <li>• insertion of oropharyngeal airway</li> <li>• insertion of nasopharyngeal airway</li> <li>• use of suctioning</li> <li>• initiation of oxygen therapy</li> <li>• set up and administration of prescribed nebuliser therapy</li> <li>• pulse oximetry</li> <li>• two person technique, bag-valve-mask ventilation</li> <li>• set up of intubation equipment</li> <li>• set up of ETCO2 monitoring</li> <li>• set up and assist with chest drain insertion</li> <li>• set up of transport ventilator equipment</li> </ul>	N, AB, C, P, E	Proficient					
CD4 3.2.8 (L2)	Locate equipment and, safely and effectively, implement emergency circulatory support, to include the following: <ul style="list-style-type: none"> <li>• use of equipment for venepuncture and intravenous or intraosseous cannulation</li> <li>• application of NIBP and ECG monitoring</li> <li>• calculate, prepare and administer prescribed weight-based fluid boluses</li> <li>• set up of prescribed intravenous medications, including fluid therapy</li> <li>• set up of invasive pressure monitoring (arterial lines)</li> </ul>	N, AB, C, P, E	Proficient					
CD4 3.2.9 (L2)	Interpret blood gas results	N, AB, C, P, E	Competent					
CD4 3.2.10 (L2)	Safely insert a urinary catheter and monitor urine output	N, AB, C, P, E	Competent					
CD4 3.2.11 (L2)	Safely insert a nasogastric tube	N, AB, C, P, E	Competent					
CD4 3.2.12 (L2)	Recognise the child with reduced level of consciousness and respond appropriately	N, AB, C, P, E	Competent					
CD4 3.2.13 (L2)	Demonstrate the ability to arrange and co-ordinate the emergency transfer of children using established referral pathways and regional retrieval and transfer services	N, AB, C, P, E	Competent					
CD4 3.2.14 (L2)	Implement local guidelines for the management of sudden death in infants and children	N, AB, C, P, E	Competent					
CD4 3.2.15 (L2)	Demonstrate awareness of emotions of self and others when caring for children and families and seek/offer appropriate support	N, AB, C, P, E	Proficient					

## Contents

## CD4 – Caring for children and young people – Level 2

CD4.4 – Caring for acutely ill children – Level 2								
Care holistically for children and young people presenting with acute illness								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 4.1.1 (L2)	Demonstrate an understanding of the pathophysiology and associated signs and symptoms of common respiratory illnesses in children. For example: <ul style="list-style-type: none"> <li>• bronchiolitis</li> <li>• croup</li> <li>• asthma</li> <li>• pneumonia</li> </ul>	N, AB, C, P, E	Proficient					
CD4 4.1.2 (L2)	Demonstrate an understanding of the pathophysiology and associated signs and symptoms of common gastrointestinal presentations in children: <ul style="list-style-type: none"> <li>• gastroenteritis</li> <li>• constipation</li> <li>• swallowed foreign body</li> <li>• appendicitis</li> <li>• pyloric stenosis</li> <li>• intussusception</li> </ul>	N, AB, C, P, E	Proficient					
CD4 4.1.3 (L2)	Demonstrate an understanding of the pathophysiology and associated signs and symptoms of common ENT presentations in children: <ul style="list-style-type: none"> <li>• otitis media</li> <li>• ENT foreign body</li> <li>• tonsillitis</li> <li>• peri-tonsillar abscess</li> </ul>	N, AB, C, P, E	Proficient					
CD4 4.1.4 (L2)	Demonstrate an understanding of the pathophysiology and associated signs and symptoms of common neurological presentations in children: <ul style="list-style-type: none"> <li>• head injury</li> <li>• febrile convulsions</li> <li>• epilepsy</li> <li>• headache</li> <li>• collapse</li> </ul>	N, AB, C, P, E	Proficient					

## Contents

CD4 4.1.5 (L2)	Demonstrate an understanding of the pathophysiology and associated signs and symptoms of common endocrine presentations in children: <ul style="list-style-type: none"> <li>• diabetes</li> <li>• diabetic ketoacidosis</li> <li>• hypoglycaemia</li> <li>• Addison's disease and Addisonian Crisis</li> </ul>	N, AB, C, P, E	Proficient					
CD4 4.1.6 (L2)	Demonstrate an understanding of the pathophysiology and associated signs and symptoms of common childhood infectious disease presentations in children. For example: <ul style="list-style-type: none"> <li>• chicken pox</li> <li>• rubella</li> <li>• mumps</li> <li>• measles</li> <li>• scarlet fever</li> <li>• fifth disease</li> <li>• hand, foot and mouth disease</li> </ul>	N, AB, C, P, E	Competent					
CD4 4.1.7 (L2)	Describe the assessment and care of a child with fever of unknown origin with reference to national and local guidelines	N, AB, C, P, E	Proficient					
CD4 4.1.8 (L2)	Describe when a child may need nursing in an environment away from other patients due to reduced immunity	N, AB, C, P, E	Proficient					
CD4 4.1.9 (L2)	Describe when a child may need nursing in an environment away from other patients to prevent spread of infection	N, AB, C, P, E	Proficient					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD4 4.2.1 (L2)	Implement clinical care following local and/or national guidance for infants, children and adolescents presenting with: <ul style="list-style-type: none"> <li>• respiratory problems</li> <li>• gastrointestinal problems</li> <li>• ENT problems</li> <li>• neurological problems</li> <li>• endocrine problems</li> <li>• infectious diseases</li> </ul>	N, AB, C, P, E	Proficient					

## Contents

CD4 4.2.2 (L2)	Demonstrate ability to assess and care for children with fever of unknown origin. Including: <ul style="list-style-type: none"> <li>regular recording of vital signs and early warning score calculations with appropriate escalation of concerns</li> <li>assessment for signs of meningism, dehydration or sepsis</li> <li>conducting urinalysis with interpretation of results</li> <li>ensuring adequate fluid intake</li> <li>adherence to local anti-pyretic interventions</li> </ul>	N, AB, C, P, E	Proficient					
CD4 4.2.3 (L2)	Demonstrate effective strategies for safe administration of medicines to children via a variety of routes	N, AB, C, P, E	Proficient					
CD4 4.2.4 (L2)	Contribute to evidence review and introduction/update of clinical guidance	N, AB, C, P, E	Competent					
CD4 4.2.5 (L2)	Give appropriate discharge advice to carers of children who have presented with illness, including safety-netting of when to return	N, AB, C, P, E	Proficient					

## Contents

### CD4 – Caring for children and young people – Level 2

CD4.5 – Children with minor injuries and limb problems – Level 2								
Care holistically for children and young people presenting with minor injuries and limb problems								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 5.1.1 (L2)	Describe how mechanism of injury relates to actual injury pattern	N, AB, C, P, E	Competent					
CD4 5.1.2 (L2)	Demonstrate an understanding of the signs, symptoms and pathophysiology of common upper limb presentations in children. For example: <ul style="list-style-type: none"> <li>• pulled elbow</li> <li>• upper limb fractures (including the clavicle)</li> <li>• upper limb sprain</li> <li>• injuries to the hand and digits</li> </ul>	N, AB, C, P, E	Proficient					
CD4 5.1.3 (L2)	Demonstrate an understanding of the signs, symptoms and pathophysiology of common lower limb presentations in children. For example: <ul style="list-style-type: none"> <li>• lower limb fractures</li> <li>• lower limb sprains</li> <li>• injuries to the foot and toes</li> <li>• hip problems: <ul style="list-style-type: none"> <li>idiopathic synovitis (irritable hip)</li> <li>septic arthritis</li> <li>slipped upper femoral epiphysis</li> <li>Legg-Perthes Disease</li> </ul> </li> <li>• knee problems: <ul style="list-style-type: none"> <li>patella dislocation</li> <li>Osgood-Schlatter Disease</li> </ul> </li> </ul>	N, AB, C, P, E	Proficient					
CD4 5.1.4 (L2)	Demonstrate an understanding of the pathophysiology of wounds and burns in children, specifically in relation to area and depth of injury and the involvement of associated structures	N, AB, C, P, E	Proficient					
CD4 5.1.5 (L2)	Understand the principles of wound and burn assessment and describe red flag or priority features requiring immediate escalation and intervention	N, AB, C, P, E	Proficient					
CD4 5.1.6 (L2)	Describe the wound and burn healing processes and the factors that may affect these in children	N, AB, C, P, E	Proficient					

## Contents

CD4 5.1.7 (L2)	Describe local, regional and national guidelines relating to wound and burn assessment and management in children	N, AB, C, P, E	Proficient					
CD4 5.1.8 (L2)	Demonstrate an understanding of the criteria for wound and burn referral to specialised services, and the locally agreed guidelines and processes for referral of children	N, AB, C, P, E	Proficient					
CD4 5.1.9 (L2)	Understand Ionising Radiation for Medical Exposure Regulations (IRMER)	N, AB, C, P, E	Competent					
CD4 5.1.10 (L2)	Understand how the presence of minor injuries may give rise to safeguarding concerns (see CCT6)	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD4 5.2.1 (L2)	Demonstrate ability to carry out and document a musculoskeletal assessment on the limb of a child, making notes of: <ul style="list-style-type: none"> <li>• time of injury</li> <li>• mechanism of injury</li> <li>• wounds/bruising/swelling/deformity</li> <li>• bony tenderness</li> <li>• ability to move the limb</li> <li>• ability to weight-bear if lower limb</li> <li>• neurovascular status</li> </ul>	N, AB, C, P, E	Competent					
CD4 5.2.2 (L2)	Initiate immediate first aid to wounds/burns	N, AB, C, P, E	Proficient					
CD4 5.2.3 (L2)	Demonstrate ability to splint upper and lower limbs in children, selecting appropriate equipment for anatomical area and size of child, including use of Plaster of Paris casts	N, AB, C, P, E						
CD4 5.2.4 (L2)	Request X-rays as per local protocols (e.g. use of Ottawa ankle rules)	N, AB, C, P, E	Proficient					
CD4 5.2.5 (L2)	Demonstrate ability to accurately assess the size of a burn or wound in a child	N, AB, C, P, E	Competent					
CD4 5.2.6 (L2)	Demonstrate ability to select and apply appropriate dressings for wounds and burns in children following local guidelines and policies	N, AB, C, P, E	Proficient					
CD4 5.2.7 (L2)	Select and demonstrate ability of appropriate wound closure techniques	N, AB, C, P, E	Proficient					
CD4 5.2.8 (L2)	Provide appropriate discharge advice to children and their families following treatment for a wound or burn, including when to seek urgent medical attention	N, AB, C, P, E	Proficient					

## Contents

CD4 5.2.9 (L2)	Provide appropriate discharge advice to children and their families following treatment for a limb injury, including when to seek urgent medical attention	N, AB, C, P, E	Proficient					
CD4 5.2.10 (L2)	Provide appropriate discharge advice to children and their families following treatment for a head injury, including when to seek urgent medical attention	N, AB, C, P, E	Proficient					
CD4 5.2.11 (L2)	Communicate appropriate safety/health promotional advice to children and their families	N, AB, C, P, E	Proficient					

## Contents

### CD4 – Caring for children and young people – Level 2

CD4.6 – Psychological and mental health aspects of care of children – Level 2 (also see CD5.1)								
Provide safe psychological and mental health care for children and young people								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 6.1.1 (L2)	Discuss the role of play in relation to development	N, AB, C, P, E	Proficient					
CD4 6.1.2 (L2)	Discuss the role of play in the assessment and management of children presenting to hospital	N, AB, C, P, E	Proficient					
CD4 6.1.3 (L2)	Describe factors that may contribute to fear in children and strategies that may be used to mitigate them	N, AB, C, P, E	Proficient					
CD4 6.1.4 (L2)	Discuss the implications of risk-taking behaviour in young people	N, AB, C, P, E	Competent					
CD4 6.1.5 (L2)	Understand the roles of other professionals (e.g. play therapists) in the care of acutely ill or injured children	N, AB, C, P, E	Competent					
CD4 6.1.6 (L2)	Identify the possible psychological effects of hospitalisation on children and families, and the coping strategies that may be used	N, AB, C, P, E	Competent					
CD4 6.1.7 (L2)	Understand the behavioural and psychological symptoms that may be experienced by children with mental health issues and the impact this has on families	N, AB, C, P, E	Competent					
CD4 6.1.8 (L2)	Understand the common mental health problems of children and young people including: <ul style="list-style-type: none"> <li>• depression</li> <li>• anxiety</li> <li>• suicide ideation</li> <li>• self-harm</li> <li>• eating disorders</li> <li>• psychosis</li> </ul>	N, AB, C, P, E	Competent					
CD4 6.1.9 (L2)	Understand the principles of a suicide/self-harm risk assessment with a young person	N, AB, C, P, E	Competent					
CD4 6.1.10 (L2)	Describe local child and adolescent mental health services (CAMHS) and referral pathways for young people	N, AB, C, P, E	Competent					
CD4 6.1.11 (L2)	Discuss the use of the Mental Health Act or equivalent in country of practice	N, AB, C, P, E	Competent					
CD4 6.1.12 (L2)	Describe local alcohol and substance misuse services for children and young people	N, AB, C, P, E	Competent					

## Contents

	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD4 6.2.1 (L2)	Demonstrate the appropriate use of distraction methods in children of various developmental stages	N, AB, C, P, E	Proficient					
CD4 6.2.2 (L2)	Demonstrate the use of play as part of the assessment and management of children presenting with illness or injury	N, AB, C, P, E	Proficient					
CD4 6.2.3 (L2)	Demonstrate effective communication and interaction strategies with both children and their families	N, AB, C, P, E	Proficient					
CD4 6.2.4 (L2)	Demonstrate ability to conduct a suicide/self-harm risk assessment with a young person	N, AB, C, P, E	Competent					
CD4 6.2.5 (L2)	Demonstrate compassion and empathy for young people and their families who present with mental health concerns	N, AB, C, P, E	Proficient					
CD4 6.2.6 (L2)	Make appropriate referrals to local alcohol and substance misuse service	N, AB, C, P, E	Competent					
CD4 6.2.7 (L2)	Liaise with local CAMHS as per local guidelines when appropriate	N, AB, C, P, E	Competent					
CD4 6.2.8 (L2)	Instigate safeguarding interventions as per local policy for children with mental health and/or substance misuse problems	N, AB, C, P, E	Proficient					

# Level 2 competencies

## Clinical domains (CD) Level 2 Caring for people with mental health needs



**Contents**
**CD5 – Caring for people with mental health needs – Level 2**

<b>CD5.1 – Assessing adults with mental health problems – Level 2 (for children and young people see CD4.6)</b>								
Holistically and systematically assess adults with mental health problems								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD5 1.1.1 (L2)	Discuss factors that influence mental health and psychological wellbeing	N, AB, C, P, E	Proficient					
CD5 1.1.2 (L2)	Understand the behavioural and psychological symptoms that may be experienced by patients with mental health issues	N, AB, C, P, E	Proficient					
CD5 1.1.3 (L2)	Discuss how mental health problems may impact on the individual's ability to communicate effectively and how this may impair mental capacity	N, AB, C, P, E	Competent					
CD5 1.1.4 (L2)	Describe assessment frameworks and tools used to support emergency mental health assessment	N, AB, C, P, E	Proficient					
CD5 1.1.5 (L2)	Describe the signs and symptoms of the following common mental illnesses: <ul style="list-style-type: none"> <li>• depression</li> <li>• anxiety</li> <li>• eating disorders</li> <li>• bi-polar disorder</li> <li>• schizophrenia</li> </ul>	N, AB, C, P, E	Competent					
CD5 1.1.6 (L2)	Discuss the signs or symptoms of mental illness that require immediate or urgent intervention	N, AB, C, P, E	Proficient					
CD5 1.1.7 (L2)	Discuss the correlation between mental health conditions and physiological conditions, appreciating how one may manifest as the other	N, AB, C, P, E	Competent					
CD5 1.1.8 (L2)	Understand the use of the Mental Health Act (or equivalent in country of practice) in the emergency care setting	N, AB, C, P, E	Competent					
CD5 1.1.9 (L2)	Understand how emotional distress may result in verbal and/or physical violence. Describe principles of de-escalation and safety	N, AB, C, P, E	Proficient					
CD5 1.1.10 (L2)	Understand how mental illness may impair a patient's ability to safeguard themselves	N, AB, C, P, E	Competent					
CD5 1.1.11 (L2)	Understand how acute mental illness may impair ability of the patient to care adequately for dependents	N, AB, C, P, E	Competent					
CD5 1.1.12 (L2)	Describe local policy for reporting and escalating concerns of a missing/absconded patient	N, AB, C, P, E	Competent					

## Contents

	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD5 1.2.1 (L2)	Use a structured approach to assess patients presenting with acute mental health problems and prioritise appropriately	N, AB, C, P, E	Proficient					
CD5 1.2.2 (L2)	Evaluate patient behaviour in relationship to actual and/or potential risk of harm to self or others	N, AB, C, P, E	Competent					
CD5 1.2.3 (L2)	Recognise when a patient presenting with a physical illness may be experiencing symptoms of a mental illness and report appropriately	N, AB, C, P, E	Proficient					
CD5 1.2.4 (L2)	Recognise when a patient presenting with a mental health problem may be experiencing symptoms of a physical illness and report appropriately	N, AB, C, P, E	Proficient					
CD5 1.2.5 (L2)	Use effective strategies, including the inclusion or withdrawal of significant others, to calm highly emotional situations	N, AB, C, P, E	Competent					
CD5 1.2.6 (L2)	Act in line with local policy to safeguard patients with mental illness	N, AB, C, P, E	Competent					
CD5 1.2.7 (L2)	Act in line with local policy to safeguard dependents of patients with impaired ability to do so themselves	N, AB, C, P, E	Competent					

## Contents

### CD5 – Caring for people with mental health needs – Level 2

CD5.2 – Self-harm – Level 2								
Care holistically for patients presenting with self-harm								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD5 2.1.1 (L2)	Discuss national guidance on management of self-harm patients and implications for local practice	N, AB, C, P, E	Competent					
CD5 2.1.2 (L2)	Understand the physical management of self-poisoning and self-injury	N, AB, C, P, E	Proficient					
CD5 2.1.3 (L2)	Discuss the issues surrounding repeated attendance for self-harm	N, AB, C, P, E	Proficient					
CD5 2.1.4 (L2)	Understand the nursing care required for a patient with drug toxicity	N, AB, C, P, E	Proficient					
CD5 2.1.5 (L2)	Discuss the need for a timely mental health assessment	N, AB, C, P, E	Competent					
CD5 2.1.6 (L2)	Understand local processes and pathways for ensuring patients with self-harm receive formal psycho-social assessment	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD5 2.2.1 (L2)	Engage with patients who have self-harmed (and their families) with empathy and dignity	N, AB, C, P, E	Competent					
CD5 2.2.2 (L2)	Use a structured approach to assess patients who present following intentional self-harm and assign appropriate priority using a locally approved system	N, AB, C, P, E	Competent					
CD5 2.2.3 (L2)	Instigate first aid for significant injuries	N, AB, C, P, E	Competent					
CD5 2.2.4 (L2)	Ensure patients receive any timely treatment for self-injury or self-poisoning	N, AB, C, P, E	Proficient					
CD5 2.2.5 (L2)	Use locally approved pathways and guidelines when caring for patients with self-harm, including local missing person guidance	N, AB, C, P, E	Proficient					

**Contents**
**CD5 – Caring for people with mental health needs – Level 2**

<b>CD5.3 – Patients with alcohol problems – Level 2</b>								
Care holistically for patients presenting with problems relating to alcohol or substance misuse								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD5 3.1.1 (L2)	Understand the impact of alcohol or substance misuse on both physical and mental health	N, AB, C, P, E	Proficient					
CD5 3.1.2 (L2)	Understand the medical conditions that may manifest as intoxication	N, AB, C, P, E	Competent					
CD5 3.1.3 (L2)	Understand how alcohol or substance misuse may affect mental capacity and the implications on nursing care	N, AB, C, P, E	Competent					
CD5 3.1.4 (L2)	Describe the signs and symptoms of acute alcohol withdrawal and understand the emergency management	N, AB, C, P, E	Competent					
CD5 3.1.5 (L2)	Describe local alcohol and substance misuse services and their referral processes	N, AB, C, P, E	Proficient					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD5 3.2.1 (L2)	Use a structured approach to assess and manage patients presenting with alcohol or substance withdrawal symptoms	N, AB, C, P, E	Proficient					
CD5 3.2.2 (L2)	Use a structured approach to assess and manage patients presenting with acute alcohol or substance intoxication	N, AB, C, P, E	Proficient					
CD5 3.2.3 (L2)	Use locally approved assessment tools and pathways for alcohol dependence, alcohol intoxication and alcohol withdrawal	N, AB, C, P, E	Competent					
CD5 3.2.4 (L2)	Provide effective clinical care to patients with alcohol or substance dependence, intoxication or withdrawal	N, AB, C, P, E	Proficient					
CD5 3.2.5 (L2)	Make appropriate referrals to local alcohol and substance misuse services	N, AB, C, P, E	Competent					

# Level 2 competencies

## Clinical domains (CD) Level 2 Caring for older people



## Contents

## CD6 – Caring for older people – Level 2

CD6.1 – Assessing older people – Level 2								
Holistically and systematically assess the needs of the older person								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD6 1.1.1 (L2)	Understand the anatomical and physiological changes in the older adult	N, AB, C, P, E	Proficient					
CD6 1.1.2 (L2)	Understand frailty and its impact on older adults	N, AB, C, P, E	Proficient					
CD6 1.1.3 (L2)	Understand the impact of psychological and/or social influences on older adults	N, AB, C, P, E	Proficient					
CD6 1.1.4 (L2)	Understand how the ageing process impacts on the body's ability to compensate for illness and injury	N, AB, C, P, E	Proficient					
CD6 1.1.5 (L2)	Understand how the ageing process influences pharmacology in older adults	N, AB, C, P, E	Proficient					
CD6 1.1.6 (L2)	Understand the impact of polypharmacy in older adults	N, AB, C, P, E	Proficient					
CD6 1.1.7 (L2)	Discuss quality standards to be followed when caring for older people in the emergency care setting (e.g. Silver Book)	N, AB, C, P, E	Proficient					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD6 1.2.1 (L2)	Conduct a systematic initial assessment of the older person and prioritise care appropriately (triage)	N, AB, C, P, E	Proficient					
CD6 1.2.2 (L2)	Recognise and respond appropriately to the following common conditions in an older adult: <ul style="list-style-type: none"> <li>• sepsis</li> <li>• delirium</li> <li>• postural hypotension</li> <li>• dehydration</li> </ul>	N, AB, C, P, E	Proficient					
CD6 1.2.3 (L2)	Conduct a falls risk assessment and document subsequent nursing care plan	N, AB, C, P, E	Proficient					
CD6 1.2.4 (L2)	Conduct a pressure area risk assessment and document a subsequent nursing care plan	N, AB, C, P, E	Proficient					
CD6 1.2.5 (L2)	Assess continence in the older person and plan appropriate care	N, AB, C, P, E	Proficient					
CD6 1.2.6 (L2)	Assess nutritional and fluid requirements in older people and provide appropriate assistance where needed	N, AB, C, P, E	Proficient					
CD6 1.2.7 (L2)	Demonstrate ability to assess the older adult for frailty and commence referral to appropriate health and social services	N, AB, C, P, E	Proficient					

**Contents**
**CD6 – Caring for older people – Level 2**

<b>CD6.2 – Psychological and social care of older adults – Level 2</b>								
Ensure the provision of holistic psychological and social care for older people								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD6 2.1.1 (L2)	Understand the application of the Mental Capacity Act, including the role of the Independent Mental Capacity Advocate (or equivalent in country of practice) (also see GNP7)	N, AB, C, P, E	Proficient					
CD6 2.1.2 (L2)	Understand the Principles of Deprivation of Liberty Safeguards (DoLS) or the equivalent in country of practice (also see GNP7)	N, AB, C, P, E	Proficient					
CD6 2.1.3 (L2)	Understand safeguarding principles of adults specific to the older person (also see CCT6)	N, AB, C, P, E	Proficient					
CD6 2.1.4 (L2)	Understand how dementia affects physiological, psychological and social wellbeing in patients and their families	N, AB, C, P, E	Proficient					
CD6 2.1.5 (L2)	Describe local support services for people with dementia and those important to them	N, AB, C, P, E	Proficient					
CD6 2.1.6 (L2)	Understand the legal principles when someone has a Lasting Power of Attorney (or country equivalent)	N, AB, C, P, E	Proficient					
CD6 2.1.7 (L2)	Discuss why it is important to have discussions which may be distressing and/or life-changing. For example: <ul style="list-style-type: none"> <li>• end of life care</li> <li>• DNA CPR</li> <li>• ability to live independently</li> <li>• neglect and abuse</li> <li>• ability to drive</li> </ul>	N, AB, C, P, E	Proficient					
CD6 2.1.8 (L2)	Describe the possible causes of acute confusion in the older person	N, AB, C, P, E	Proficient					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD6 2.2.1 (L2)	Ensure services meet the requirements of the Equality Act (Or equivalent in country of practice) to protect the needs of older adults	N, AB, C, P, E	Competent					
CD6 2.2.2 (L2)	Conduct and document a mental capacity assessment	N, AB, C, P, E	Proficient					
CD6 2.2.3 (L2)	Promote dignity when caring for older adults	N, AB, C, P, E	Proficient					

## Contents

CD6 2.2.4 (L2)	Identify signs and symptoms of potential undiagnosed dementia and escalate within own health care setting and/or partner agencies	N, AB, C, P, E	Proficient					
CD6 2.2.5 (L2)	Identify when existing support services (including unpaid carers) are unable to meet the needs of an older person and initiate multi-professional assessment	N, AB, C, P, E	Competent					
CD6 2.2.6 (L2)	Identify the need for, and instigate, a social services referral for an older person as appropriate	N, AB, C, P, E	Competent					
CD6 2.2.7 (L2)	Assess the older person for neglect and/or self-harm and report as per local policy	N, AB, C, P, E	Competent					
CD6 2.2.8 (L2)	Select and use appropriate distraction techniques for older people who may be agitated or distressed	N, AB, C, P, E	Proficient					
CD6 2.2.9 (L2)	Communicate effectively with patients who have sensory impairment.	N, AB, C, P, E	Proficient					

## Contents

### CD6 – Caring for older people – Level 2

CD6.3 – Critically ill older people – Level 2								
Care holistically for critically ill older people (also see CD1 and CD2 in addition to the National Major Trauma Nursing Group competencies)								
	Knowledge	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD6 3.1.1 (L2)	Understand how altered physiology may mask critical illness in the older person	N, AB, C, P, E	Competent					
CD6 3.1.2 (L2)	Describe how mechanism of injury and frailty relate to actual or potential injury patterns in the older adult	N, AB, C, P, E	Competent					
	Skills	Self-assessment (circle as appropriate)	Minimum standard for achievement	Expected date of achievement	Evidence submitted	Date of completion	Level achieved	Mentor sign-off (print and sign)
CD6 3.2.1 (L2)	Recognise the signs of deterioration in the older person and respond appropriately	N, AB, C, P, E	Proficient					
CD6 3.2.2 (L2)	Evaluate physiological data with reference to medication and co-morbidities	N, AB, C, P, E	Competent					

**Contents**
**CD6 – Caring for older people – Level 2**

<b>CD6.4 – End of life care – Level 2</b>								
Provide dignified holistic end of life care for patients and those important to them								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD6 4.1.1 (L2)	Describe the principles of decision making in end of life care planning	N, AB, C, P, E	Competent					
CD6 4.1.2 (L2)	Discuss the challenges of providing both anticipated end of life care and unexpected/traumatic end of life care	N, AB, C, P, E	Competent					
CD6 4.1.3 (L2)	Understand local, regional and national guidelines and procedures relating to end of life care	N, AB, C, P, E	Competent					
CD6 4.1.4 (L2)	Describe the legal framework around advanced directives in the country of practice	N, AB, C, P, E	Competent					
CD6 4.1.5 (L2)	Understand the need to consider the person's wishes around organ donation	N, AB, C, P, E	Competent					
CD6 4.1.6 (L2)	Discuss the policies and procedures relating to transfer of the deceased person to the mortuary and meeting cultural and religious beliefs	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD6 4.2.1 (L2)	Respect the wishes of people and those important to them regarding end of life where possible	N, AB, C, P, E	Proficient					
CD6 4.2.2 (L2)	Support carers and families of patients who are at the end of their life and signpost to relevant bereavement services	N, AB, C, P, E	Proficient					
CD6 4.2.3 (L2)	Ensure contemporaneous documentation of discussions and information is provided to the person (and those important to them)	N, AB, C, P, E	Proficient					
CD6 4.2.4 (L2)	Provide an appropriate environment for the person at the end of life, maintaining privacy, dignity and meeting spiritual and cultural needs	N, AB, C, P, E	Competent					
CD6 4.2.5 (L2)	Discuss with people important to the person, their wishes regarding organ donation and contact relevant persons to facilitate this	N, AB, C, P, E	Competent					
CD6 4.2.6 (L2)	Follow local procedures for safe transfer of the deceased person to the mortuary	N, AB, C, P, E	Competent					

# Level 2 competencies

## Clinical domains (CD) Level 2 Emergency planning and disaster management



**Contents**
**CD7 - Emergency planning and disaster management - Level 2**

<b>CD7.1 - Emergency planning and disaster management - Level 2</b>								
Contribute effectively to the implementation of the organisational plan in the event of a major incident								
	<b>Knowledge</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD7 1.1.1 (L2)	Define the term major incident	N, AB, C, P, E	Competent					
CD7 1.1.2 (L2)	Understand the local major incident plan and how to access it	N, AB, C, P, E	Competent					
CD7 1.1.3 (L2)	Understand triage in the context of a major incident	N, AB, C, P, E	Competent					
CD7 1.1.4 (L2)	Understand the purpose and location of local survivor reception centres	N, AB, C, P, E	Competent					
CD7 1.1.5 (L2)	Understand the role of other emergency services as part of the major incident plan	N, AB, C, P, E	Competent					
CD7 1.1.6 (L2)	Understand communication strategies used during a major incident	N, AB, C, P, E	Competent					
CD7 1.1.7 (L2)	Understand the use of equipment specific to major incident management and how to access it	N, AB, C, P, E	Competent					
CD7 1.1.8 (L2)	Understand how to access and use major incident documentation	N, AB, C, P, E	Competent					
CD7 1.1.9 (L2)	Understand the principles of a CBRN (chemical, biological, radiological, nuclear) incident and specific management of these events	N, AB, C, P, E	Competent					
CD7 1.1.10 (L2)	Understand the principles and indications for decontamination, including use of equipment and personnel	N, AB, C, P, E	Competent					
CD7 1.1.11 (L2)	Understand strategies to brief the press and contact relatives/significant others of those involved in the incident	N, AB, C, P, E	Competent					
CD7 1.1.12 (L2)	Discuss the importance of a post-incident debrief	N, AB, C, P, E	Competent					
	<b>Skills</b>	<b>Self-assessment (circle as appropriate)</b>	<b>Minimum standard for achievement</b>	<b>Expected date of achievement</b>	<b>Evidence submitted</b>	<b>Date of completion</b>	<b>Level achieved</b>	<b>Mentor sign-off (print and sign)</b>
CD7 1.2.1 (L2)	Recognise situations which constitute a major incident and instigate activation of the local plan including the call cascade to notify additional personnel to attend	N, AB, C, P, E	Competent					
CD7 1.2.2 (L2)	Demonstrate ability to safely apply and remove personal protective equipment required in response to the specific incident	N, AB, C, P, E	Competent					

## Contents

CD7 1.2.3 (L2)	Effectively assume (or respond to instructions to undertake) specific roles as part of the major incident team for the duration of the incident, including but not limited to: <ul style="list-style-type: none"> <li>• lead nurse role</li> <li>• resuscitation lead nurse</li> <li>• triage nurse</li> <li>• minor injury lead nurse</li> <li>• relative liaison nurse</li> </ul>	N, AB, C, P, E	Competent					
CD7 1.2.4 (L2)	Liaise effectively with other health professionals contributing to the major incident response team and key individuals from other emergency services	N, AB, C, P, E	Competent					
CD7 1.2.5 (L2)	Identify and report situations which may indicate serious risk to safety of staff or patients	N, AB, C, P, E	Competent					
CD7 1.2.6 (L2)	Undertake major incident training as per local policy	N, AB, C, P, E	Competent					
CD7 1.2.7 (L2)	Provide effective support to the team at post-incident debrief	N, AB, C, P, E	Competent					



Royal College  
of Nursing

The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies

**June 2017**

**Review date: June 2019**

RCN Online  
[www.rcn.org.uk](http://www.rcn.org.uk)

RCN Direct  
[www.rcn.org.uk/direct](http://www.rcn.org.uk/direct)

0345 772 6100

Published by the Royal College of Nursing

20 Cavendish Square  
London  
W1G 0RN

020 7409 3333

 [www.facebook.com/royalcollegeofnursing](http://www.facebook.com/royalcollegeofnursing)

 [www.twitter.com/thercn](http://www.twitter.com/thercn)

 [www.youtube.com/rcnonline](http://www.youtube.com/rcnonline)

Publication code: 005 923

The Royal College of Nursing would like to thank NHS Improvement for its support in the production of this publication.

gency  
ng and  
aster  
gement

Caring  
adults rec  
resuscit

