

# CONTINUING PROFESSIONAL DEVELOPMENT PORTFOLIO



A Route to Enhanced Competence in  
Pre-specialist Community Children's Nursing



strategy

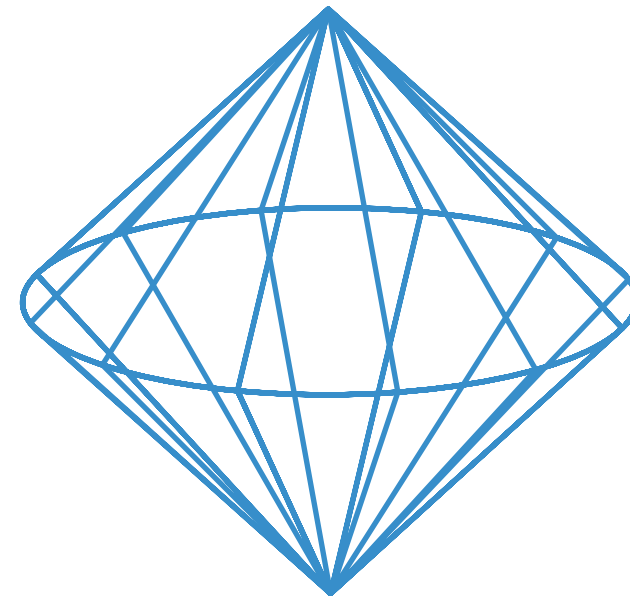
structures

resources

outcomes

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# **A Route to Enhanced Competence in Pre-specialist Community Children's Nursing**



## Introduction

The first Community Children's Nursing Service was established in Scotland in 1969. Expansion of a national community nursing service for children, delivered by children's nurses was slow to develop until 1997 when the BSc in Community Health Nursing leading to the Specialist Practitioner Qualification of Community Children's Nursing was established.

This publication provides a framework of competency descriptors which will support the continuing development of nurses working with *children, families, health care professionals and voluntary services in a community setting* and bridge the professional development gap between Child Branch Diplomates/Graduates and the Specialist Practitioner Qualification of Community Children's Nursing.

## Derivation of the Framework

### Drawing up the draft profile

During 2001, a work analysis of the community children's staff nurse role was undertaken by community children's nurses in Lothian University Hospitals NHS Trust (LUHNT). The aims of this original exercise were to consider the skill mix required by the team and to provide guidance for the development of a local preceptorship programme for community children's nurses. Following this groundbreaking work by the LUHNT team, a project was funded by the National Board for Nursing, Midwifery and Health Visiting for Scotland (NBS), to support the team in drawing up a draft profile of core competencies and skills for a staff nurse (grade E) working in a community children's nursing team. The draft profile was built by including items from team members' direct knowledge of current practice and from published competencies for newly qualified staff nurses in children's nursing and community nursing (NBS 2000).

Items considered to be at too high a level, for example, relevant to specialist practitioner work, were then screened out of the draft profile.

### The national consultation process

In April 2002, a national consultation exercise, by postal survey, was undertaken by NHS Education for Scotland (formerly NBS). Nurses identified, via community nurse managers and via the Nursing and Midwifery Practice Development Unit, as working in community children's nursing received a booklet containing the draft profile of core competencies and skills. Their task was to decide whether each item was an essential or a desirable aspect of work for a staff nurse (grade E) in community children's nursing. Seventy-one booklets were distributed and 52 were returned, representing a 73% response rate. Completion of the booklet was voluntary and anonymous. Booklet data were analysed using SPSS and descriptive information was obtained for each variable. Appendix 1 shows, within the essential and desirable columns, the majority percentage response for each item. Overall, levels of agreement were high across the profile. Most items were considered to be 'essential' and, within the 'essential' category, 69% of items reached the 70% or above level of agreement. Thirty-six respondents reported having an RSCN qualification and, of these, 20 reported having a community children's nursing degree. By grade, respondents represented E(4), F(5), G(32), H(2) and I(1); eight respondents did not report their grade.

### The final profile

To give this work a national focus, a small working group, representing community children's nursing practice and education, was convened by NHS Education for Scotland in December 2002 to review the findings of the national consultation and to agree the final profile of competencies and indicators, in four domains.

## How to get started

This workbook is designed to be completed in association with **A Route to Enhanced Competence (NBS, 2000)**. It continues to utilise the framework of reflecting on past experience and learning in order to record continuous professional development to enhance clinical competence in Pre-specialist Community Children's Nursing. It will help the individual nurse to identify sources of learning and evidence of good practice which relate to providing high quality in Pre-specialist Community Children's Nursing.

## QACPD Portfolio CD

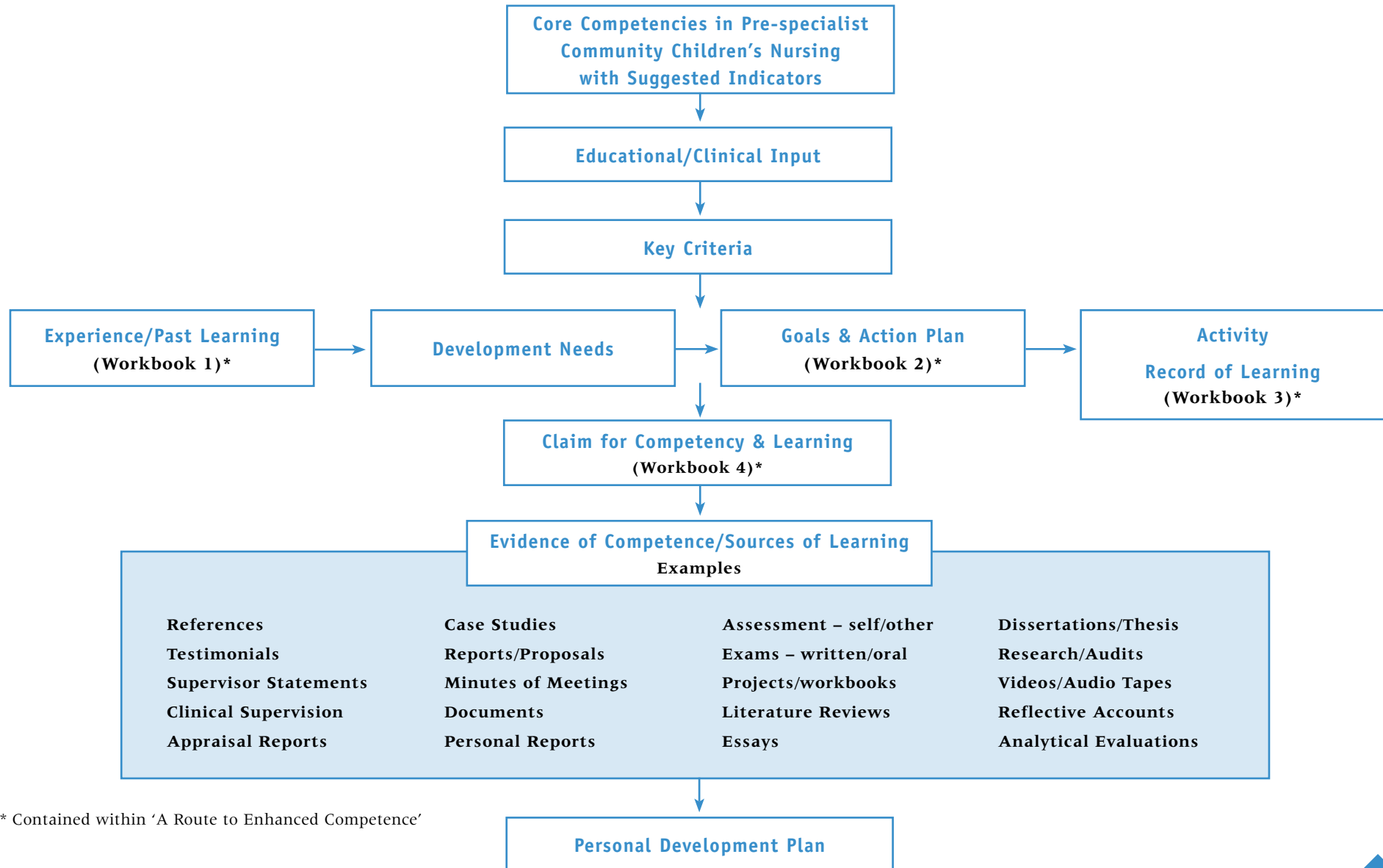
**A copy of the Continuing Professional Development Portfolio,  
'A Route to Enhanced Competence' and  
'A Route to Enhanced Competence in Pre-specialist  
Community Children's Nursing'  
documents are supplied on the enclosed CD in Acrobat PDF format.  
They may be printed out for reference.**

## Steps to Building a Portfolio

You may already have a personal professional profile which you may wish to incorporate into this NES portfolio, but you should continue to use the following steps:

- Step 1 Review your experience and practice to date identifying any knowledge and skills you have in Pre-specialist Community Children's Nursing;*
- Step 2 Appraise your level of competence and identify strengths and any areas that need to be developed;*
- Step 3 Agree with your senior manager, in-house CPD staff and/or Higher Education Institution a training programme that meets your learning needs;*
- Step 4 Set goals and devise an action plan to achieve the stated Pre-specialist Community Children's Nursing competencies in partnership with your named facilitator;*
- Step 5 Provide evidence of competence through your portfolio.*

## Portfolio Route To Enhanced Competence in Pre-specialist Community Children's Nursing



\* Contained within 'A Route to Enhanced Competence'

## Core Competencies In Pre-Specialist Community Children's Nursing: Overview

DOMAIN	ASSOCIATED COMPETENCIES
<b>1. Professional/Ethical Practice</b>	<p>Recognise ethical and legal issues which have implications for community children's nursing practice</p> <hr/> <p>Understand and implement risk assessment of health and safety in the community/home care environment relating to self and others</p> <hr/> <p>Understand child protection issues</p> <hr/> <p>Relate to the child and family as unit of care</p> <hr/> <p>Demonstrate a non-judgemental and non-hierarchical attitude in interactions with children and families</p> <hr/> <p>Demonstrate cultural awareness when dealing with the public and other professional groups</p> <hr/>
<b>2. Care Delivery</b>	<p>Assist with planning, providing and evaluating specialist nursing care in the community setting to meet the care needs of acutely and chronically ill children at home</p> <hr/> <p>Administer prescribed medicine in accordance with the NMC Code of Practice and local policies</p> <hr/> <p>Work collaboratively with the child, family, informal carers and other support agencies and professionals</p> <hr/> <p>Assist in applying a systematic family nursing approach to working with the child and family</p> <hr/> <p>Demonstrate effective communication skills for interprofessional information transfer that meet the needs of children, families and other carers</p> <hr/> <p>Facilitate learning in relation to identified health needs of children, their families and other carers</p> <hr/> <p>Demonstrate an understanding of the multiagency support available in the community and know how to liaise/refer</p> <hr/>

## Core Competencies In Pre-Specialist Community Children's Nursing: Overview

DOMAIN	ASSOCIATED COMPETENCIES
<b>3. Care Management</b>	<hr/> <p>Demonstrate effective management skills</p> <hr/> <p>Undertake health promotion and health education activities</p> <hr/> <p>Demonstrate knowledge and skills to ensure Clinical Governance in community children's nursing practice</p> <hr/> <p>Demonstrate knowledge and skills in maintaining health and safety at work</p> <hr/>
<b>4. Personal/Professional Development</b>	<hr/> <p>Demonstrate the promotion of lifelong learning</p> <hr/>

# Domain 1: Professional/Ethical Practice

‘Children’s nursing is practised within a philosophy of child-focused and family-centred care in which, whenever possible, the child, the parents and carers are equal partners.’

*Scottish Subject Benchmark Statement – Nursing 2002*

## Domain 1: Professional/Ethical Practice

COMPETENCY	INDICATORS
<b>1.1 Recognise ethical and legal issues which have implications for community children's nursing practice</b>	Understand own current scope of competence Demonstrate sound professional judgement and clinical decision-making Consult other registered nurses/healthcare professionals appropriately Ensure professional skills and ethical practice are maintained and updated
<b>1.2 Understand and implement risk assessment of health and safety in the community/home care environment relating to self and others</b>	Identify unsafe practice and respond appropriately to ensure a safe outcome Recognise signs of and manage personal stress Recognise stress in others and provide support Demonstrate ability to manage aggressive behaviour/situations
<b>1.3 Understand child protection issues</b>	Explain issues of informed consent in relation to: <ul style="list-style-type: none"><li>– children under 16 years</li><li>– person/s with parental responsibilities</li></ul> Promote good practice on restraining, holding still and containing children Recognise child abuse/neglect and follow local reporting policy

## Domain 1: Professional/Ethical Practice

COMPETENCY	INDICATORS
<b>1.4 Relate to the child and family as unit of care</b>	Engage/disengage appropriately from therapeutic relationships Ensure the best interest of the child is paramount in partnership with families and carers
<b>1.5 Demonstrate a non-judgemental and non-hierarchical attitude in interactions with children and families</b>	Demonstrate a welcoming/approachable/friendly manner Listen to and communicate with others effectively
<b>1.6 Demonstrate cultural awareness when dealing with the public and other professional groups</b>	Demonstrate respect and sensitivity towards children's and families' individual values, customs and beliefs to ensure that rights are not compromised

# Domain 2: Care Delivery

‘Nursing competence requires the development of technical, cognitive and interpersonal skills and involves a variety of different ways of knowing and understanding.’

*Scottish Subject Benchmark Statement – Nursing 2002*

## Domain 2: Care Delivery

COMPETENCY	INDICATORS
<b>2.1 Assist with planning, providing and evaluating specialist nursing care in the community setting to meet the care needs of acutely and chronically ill children at home</b>	<p>Develop a plan of care, in partnership with the child, family and other carers, that enables the family unit to maintain and adapt activities of living as near normal as possible</p> <hr/> <p>With supervision, adapt care appropriately within the home, health centre and other community settings</p> <hr/> <p>Engage in therapeutic interventions supported by evidence from theory and research</p> <hr/> <p>Follow NMC guidelines for records and record keeping</p> <hr/> <p>Develop, use and review care plans/pathways</p> <hr/> <p>Assist with assessment and management of:</p> <ul style="list-style-type: none"><li>Critical and clinical events to ensure safe and effective care</li><li>Sleeping patterns for different developmental stages</li><li>Nutritional/fluid requirements for all age groups</li></ul> <hr/> <p>Promote current recommendations for a healthy diet</p> <hr/> <p>Advise regarding cutlery/utensils, according to developmental stage and special needs</p> <hr/> <p>Assess cultural influences on diet</p> <hr/> <p>Be aware of common food allergens</p> <hr/> <p>Interpret/plot centile charts for recording height/weight</p> <hr/> <p>Set up and use a feeding pump</p> <hr/> <p>Assist with co-ordinating the process of prescribing feeds according to local policy</p> <hr/> <p>Assist with setting up a syringe driver</p> <hr/> <p>Insert a urinary catheter according to local policy</p> <hr/> <p>Recognise symptoms of urinary tract infection</p> <hr/>

## Domain 2: Care Delivery

COMPETENCY	INDICATORS
<b>2.1 Assist with planning, providing and evaluating specialist nursing care in the community setting to meet the care needs of acutely and chronically ill children at home - continued</b>	Assist with assessing the home/community environment for mobility requirements and access
	Assist with promoting correct positioning of children with special needs
	Manage the care of an immobilised child: traction/hip spica/braces/in plaster
	Ensure the safe use of equipment eg hoists, frames, traction, beds, chairs, using specialist advice
	Assess and maintain skin integrity
	Assess and manage a wound
	Recognise the importance and benefits of social and educational inclusion for the child
	Identify children and families at risk of social and educational exclusion
	Understand the importance of play to promote development and normalisation during illness/trauma
	Use play as a communication aid
	Be aware of local pain management guidelines
	Assess and manage pain using an appropriate pain tool in partnership with child/families/carers
	Collect specimens for diagnostic and therapeutic interventions
	Perform risk assessment in relation to the collection and transportation of specimens
	Administer oxygen as prescribed according to local policy
	Select size/type of equipment appropriate to age/size
Prepare a child for practical procedures in community/hospital	

## Domain 2: Care Delivery (continued)

COMPETENCY	INDICATORS
<b>2.1 Assist with planning, providing and evaluating specialist nursing care in the community setting to meet the care needs of acutely and chronically ill children at home - continued</b>	Demonstrate awareness of local policy/guidelines regarding: tracheostomy management bronchopulmonary dysplasia management asthma management apnoea management
	Understand differing cultural practices surrounding death and bereavement
	Demonstrate ability to support bereaved parents and their families
<b>2.2 Administer prescribed medicine in accordance with the NMC Guidelines and local policies</b>	Outline commonly used drugs and their side effects Outline compatibility of commonly used drugs Recognize non-adherence to medication Order drugs according to local policy/community formulary Store drugs safely Demonstrate awareness of nurse prescribing policies and regulations
<b>2.3 Work collaboratively with the child, family, informal carers and other support agencies and professionals</b>	Assist with identifying and selecting from a range of health, social, education and voluntary agencies, those which will assist with and improve the care of the child and family Provide guidance for carers in carrying out tasks to ensure continuity of care for the child Assist with supporting informal carers in a partnership for care giving

## Domain 2: Care Delivery (continued)

COMPETENCY	INDICATORS
<b>2.4 Assist in applying a systematic family nursing approach to working with the child and family</b>	<p>Demonstrate understanding of family intervention models</p> <hr/> <p>Interpret the child's, family's and carers' responses to the effects of altered physiology, disease and injury</p> <hr/> <p>Assist with assessment of the health and health related needs of children, their families and other carers</p> <hr/> <p>Assist with setting, implementing and evaluating standards and criteria of nursing intervention</p> <hr/> <p>Discuss with children, their families and other carers the rationale for treatments and nursing care</p> <hr/> <p>Be able to identify expected outcomes including a time frame for achievement</p> <hr/> <p>Assist with supporting and empowering children, their families and other carers to influence and participate in decisions concerning their care</p> <hr/> <p>Assist with supporting and empowering children, their families and other carers to influence and use available services, information and skills to the full</p> <hr/> <p>Provide counselling and psychological support for children and their carers</p> <hr/> <p>Assess sibling response and encourage sibling support as appropriate</p> <hr/> <p>Assess extended family response and encourage extended family support as appropriate</p> <hr/> <p>Invite and assist families to find their own solutions to problems</p> <hr/> <p>Assist in identifying structural, developmental and functional dimensions of the family</p> <hr/> <p>Assist the family in developing coping strategies</p> <hr/> <p>Recognise signs of family stress and be able to advise on adequate sleep, rest, diet, respite, change of scene and other family responsibilities</p> <hr/> <p>Assist the family to adapt to the chronic illness of their child</p> <hr/>

## Domain 2: Care Delivery (continued)

COMPETENCY	INDICATORS
<b>2.5 Demonstrate effective communication skills for interprofessional information transfer that meet the needs of children, families and other carers</b>	<p>Communicate effectively with children and families, acknowledging their cultural, ethnic, social and educational backgrounds</p> <hr/> <p>Update and involve community/hospital colleagues in all aspects of care management</p> <hr/> <p>Demonstrate an effective telephone manner</p> <hr/>
<b>2.6 Facilitate learning in relation to identified health needs of children, their families and other carers</b>	<p>Provide printed/written information when possible for children/families/carers</p> <hr/> <p>Advise/teach families/carers how to recognise and respond to emergency situations: choking, anaphylaxis, respiratory distress, cardiac arrest, seizures</p> <hr/> <p>Promote understanding of issues surrounding Sudden Infant Death Syndrome and recommendations for reducing risk</p> <hr/> <p>Demonstrate knowledge of and teach families/carers key skills in enteral feeding either by pump or bolus</p> <ul style="list-style-type: none"><li>Nasogastric: passing/positioning tube, checking position/patency and ongoing care</li><li>Gastrostomy: changing tube/button and ongoing care</li></ul> <hr/> <p>Demonstrate knowledge of and teach families/carers key skills in parenteral feeding according to local policy</p> <hr/>

## Domain 2: Care Delivery (continued)

COMPETENCY	INDICATORS
<b>2.6 Facilitate learning in relation to identified health needs of children, their families and other carers - continued</b>	<p>Assist with advising/teaching families/carers about:</p> <ul style="list-style-type: none"><li>Monitoring blood sugar levels</li><li>Management of a urinary catheter</li><li>Management of pyrexia</li><li>Management of febrile convulsions</li><li>Management of hypothermia</li><li>Beds/equipment to improve sleep quality</li><li>Testing urine and interpreting the results</li><li>Management of constipation/encopresis</li><li>Stoma management</li><li>Self awareness/management of body hygiene and body image</li><li>Treatment of common rashes and skin conditions</li><li>Prevention of head lice</li><li>Safe use of pressure relieving equipment</li><li>Oral hygiene and dental care</li><li>Breast feeding</li><li>Safe moving and handling</li><li>Optimum positioning of their child with special needs</li></ul> <hr/> <p>Refer families/carers for specialist advice</p> <hr/>

## Domain 2: Care Delivery (continued)

COMPETENCY	INDICATORS
<b>2.7 Demonstrate an understanding of the multiagency support available in the community and know how to liaise/refer</b>	Assist with providing information on a range of specialist nursing care, statutory and voluntary services
	Assist with referring families to relevant health, social, education and voluntary agencies
	Refer to nurse specialists, eg nurse specialist – pain management, or to children’s community nurses as appropriate
	Refer families to and liaise effectively with: <ul style="list-style-type: none"><li>Interpreters</li><li>Hearing/visual/speech impairment agencies</li><li>Dietician/nutrition nurse specialist</li><li>Respite services</li><li>Local/national sleep support groups/agencies</li><li>Nurseries and schools</li><li>Hospital/home teachers</li><li>Local bereavement support services</li></ul>
	Ensure family are provided with the opportunity to speak to specialist staff about their child
	Explain the services provided by SNIP (Special Needs Information Point)

# Domain 3: Care Management

‘Sound professional practice is essentially a process of problem solving. It is characterised by four major phases:

- The identification and analytical assessment of health and social care needs
- The formulation of plans and strategies for meeting health and social care needs
- The performance of appropriate, prioritised health promoting/health educating/caring/diagnostic/therapeutic activities
- The critical evaluation of the impact of, or response to, these activities.’

*Scottish Subject Benchmark Statement – Nursing 2002*

## Domain 3: Care Management

COMPETENCY	INDICATORS
<b>3.1 Demonstrate effective management skills</b>	Assist families/carers to co-ordinate the delivery of nursing/healthcare
	Demonstrate ability to problem solve
	Participate with members of the health, social care, education and voluntary care teams in decision-making/reviewing care
	Liaise with local hospital care co-ordination team
	Use admission/discharge planning documentation
	Participate in managing change within the practice area
	Demonstrate ability to motivate team members
	Offer support and supervision to other care workers
	Demonstrate ability to manage time effectively
	Demonstrate ability to work effectively under pressure
	Demonstrate ability to manage personal work with supervision
	Report incidents as per local policy
	Outline local complaints policy
	Handle complaints effectively
	Manage and resource care effectively supported by current local/national strategies
	Manage clinical supplies effectively
Make effective use of information technology systems in support of care delivery and management	

## Domain 3: Care Management

COMPETENCY	INDICATORS
<b>3.2 Undertake health promotion and health education activities</b>	<p>Create and use opportunities to promote the health and well being of children and their families</p> <hr/> <p>Consult with children and their families to identify needs and desires for health promotion advice</p> <hr/> <p>Provide relevant and current health information to children and their families</p> <hr/> <p>Ensure information is in a form which facilitates understanding</p> <hr/> <p>Provide support/education in the development/maintenance of independent living skills</p> <hr/> <p>Demonstrate knowledge of immunisation programmes</p> <hr/> <p>Be aware of signs and symptoms of common viral/bacterial infections</p> <hr/>
<b>3.3 Demonstrate knowledge and skills to ensure Clinical Governance in community children's nursing practice</b>	<p>Participate in creating an environment in which best practice in community children's nursing is promoted, evaluated and shared</p> <hr/> <p>Identify, apply and disseminate research findings relating to community children's nursing practice</p> <hr/> <p>Participate in audit review and appropriate quality assurance activities</p> <hr/> <p>Access and use local and national standards for care management/pathways</p> <hr/> <p>Participate in development of standards within the community setting informed by local and national guidelines/policies</p> <hr/>

## Domain 3: Care Management (continued)

COMPETENCY	INDICATORS
<b>3.4 Demonstrate knowledge and skills in maintaining health and safety at work</b>	Access health and safety guidelines
	Participate in risk assessment/management in the community
	Outline personal security management
	Use personal identity card
	Know about equipment/tools used in local area
	Report faults promptly
	Advise/teach parents/carers the rationale behind mandatory safety checks
	Advise parents/carers about safe and effective use of oxygen and other equipment
	Refer to local fire department for individual risk assessment of family home when oxygen in use
	Access and use the local control of infection guidelines
	Liaise with the Infection Control Team
	Minimise cross infection
	Use local handwashing guidelines
	Advise child/families/carers about effective handwashing
	Organise and advise parents about clinical waste uplift in the community
	Demonstrate safe handling and moving for self and clients
	Assess families'/carers' understanding, skill and confidence levels in use of specialised equipment
	Liaise effectively with moving and handling facilitator
	Be aware of counselling services from occupational health

# Domain 4: Personal/Professional Development

'...shared learning is seen as one of a number of means of promoting improved collaborative practice and addressing a range of issues which span professional accountability and professional relationships.'

*Scottish Subject Benchmark Statement – Nursing 2002*

## Domain 4: Personal/Professional Development

COMPETENCY	INDICATORS
<b>4.1 Demonstrate the promotion of lifelong learning</b>	Engage in continuous professional development (CPD) activities
	Identify own professional development needs
	Participate in clinical supervision
	Reflect on practice
	Produce a personal development action plan
	Take action to meet any knowledge/skills deficit
	Consult relevant journals and data sources
	Maintain a climate conducive to learning
	Participate in mentoring of student nurses
	Participate in preceptoring of staff newly qualified/new to work area
	Apply teaching skills effectively with nursing colleagues, support staff and other professional colleagues

## Further Reading

Anderson P 2000 Taking care to the child – community children’s nursing.

*Nursing Times* 96 (33) 51-53

Eaton N 2001 Models of community children’s nursing. *Paediatric Nursing* 13 (1) 32-36

Eaton N, Thomas P 1998 Community children’s nursing: an evaluative framework.

*Journal of Child Health Care* 2 (4) 170-173

Murphy W 2001 Leadership and community children’s nurses. *Paediatric Nursing* 13 (10) 36-40

National Board for Nursing, Midwifery and Health Visiting for Scotland 2000 *The Work of Newly Qualified Nurses. Core Skills and Competencies*. (In boxed set) NBS, Edinburgh

Quality Assurance Agency for Higher Education 2002 *Scottish subject benchmark statement – Nursing*. Quality Assurance Agency for Higher Education, Gloucester

While A, Dyson L 2000 Characteristics of paediatric home care provision: the two dominant models in England. *Child: Care, Health & Development* 26 (4) 263-276

Whyte D, Barton M, Lamb A, Magennis C, Mallinson C, Marshall L, Oliver R, Reid P, Richardson H, Walford C 1998 Clinical effectiveness in community children’s nursing. *Clinical Effectiveness in Nursing* 2 (3) 139-144

## Useful Websites

NHS Education for Scotland (NES):

[www.nes.scot.nhs.uk](http://www.nes.scot.nhs.uk)

NES QACPD initiative:

[www.qacpd.org.uk](http://www.qacpd.org.uk)

NHS Quality Improvement Scotland (NHSQIS):

[www.nhshealthquality.org](http://www.nhshealthquality.org)

Formed 1 January 2003 from a merger of the Clinical Resource Audit Group (CRAG), the Clinical Standards Board for Scotland (CSBS), the Health Technology Board for Scotland (HTBS), the Nursing and Midwifery Practice Development Unit (NMPDU), and the Scottish Health Advisory Service (SHAS).

NHS Health Scotland:

Formed 1 April 2003 from a merger of the Health Education Board for Scotland (HEBS) and the Public Health Institute for Scotland (PHIS).

Website under development – access information from

[www.hebs.scot.nhs.uk](http://www.hebs.scot.nhs.uk)

[www.phis.org.uk](http://www.phis.org.uk)

## Useful Information

A Community Children’s Nursing Directory has been compiled by the Scottish Executive Nursing Directorate. This will be updated and available from Autumn 2003.

# **Appendix 1**

## **Core Competencies and Skills: Results of the National Consultation Process**



## Section 1: Professional/Ethical Practice

	Essential %	Desirable %
Recognise ethical and legal issues which have implications for community children's nursing practice and take legal action	76	–
Ensure professional skills and ethical practice are maintained and updated	98	–
<b>(a) Professional Skills and Attributes</b>		
Demonstrate a welcoming/approachable/friendly manner	100	–
Engage/disengage appropriately from therapeutic relationships	98	–
Demonstrate ability to problem solve	93	–
Demonstrate sound clinical decision making that can be justified even when based on limited information	75	–
Listen to and communicate with others effectively	100	–
Accurately interpret numerical data and its significance for safe delivery of care	75	–
Encourage questioning from learners/colleagues	67	–
Understand and implement risk assessment of safety in the community	82	–
Recognise signs of and manage personal stress	71	–
Identify stress in others and provide support	–	51
Demonstrate ability to manage aggressive behaviour/situations	67	–

	Essential %	Desirable %
<b>(b) Accountability</b>		
Practice in accordance with UKCC Code of Professional Conduct	100	–
Understand own current scope of competence	100	–
Consult other registered nurses/health care professionals appropriately	100	–
Identify unsafe practice and respond appropriately to ensure a safe outcome	98	–
<b>(c) Strategies</b>		
Understand and promote local health and social care policies	61	–
Understand and promote national health and social care policies	50	–
Devise strategy/action plan for personal work	73	–
<b>(d) Child Protection</b>		
Explain issues of informed consent in relation to:		
– children under 16 years	86	–
– person/s with parental responsibilities	86	–
Promote good practice on restraining, holding still and containing children	89	–
Recognise child abuse/neglect and follow local reporting policy	91	–

## Section 1: Professional/Ethical Practice

	Essential %	Desirable %
<b>(e) Multicultural Awareness</b>		
Demonstrate respect and sensitivity towards children's and families' individual values, customs and beliefs to ensure that rights are not compromised	93	–
Use local interpreting service	73	–
<b>(f) Advocacy</b>		
Ensure the best interest of the child is paramount in partnership with families and carers in all health care settings	100	–

## Section 2: Care Delivery

	Essential %	Desirable %
Deliver high quality family centred care which involves partnership working with children/families, multidisciplines and agencies	96	–
Interpret the child's, family's and carers' responses to the effects of altered physiology, disease and injury	73	–
Discuss with children, their families and other carers the rationale for treatments and nursing care	91	–
Assist with assessment of the health and health related needs of children, their families and other carers	89	–
Assist with setting, implementing and evaluating standards and criteria of nursing intervention	89	–
Assist with planning, providing and evaluating specialist nursing care in the community setting to meet the care needs of acutely and chronically ill children at home	91	–
With supervision, adapt care appropriately within the home, health centre and other community settings	91	–
Assist with assessment and management of critical and clinical events to ensure safe and effective care	89	–
Assist with supporting and empowering children, their families and other carers to influence and participate in decisions concerning their care	84	–
Assist with identifying and selecting from a range of health, social and voluntary agencies, those which will assist with and improve the care of the child, family and other carers	67	–
Assist with supporting and empowering children, their families and other carers to influence and use available services, information and skills to the full	75	–



## Section 2: Care Delivery (continued)

	Essential %	Desirable %
Provide printed/written information when possible for children/families/carers	91	–
Have a good telephone manner	89	–
Liaise with interpreters	76	–
Liaise with resources/agencies available to child/family with:		
– hearing impairment	69	–
– visual impairment	69	–
– speech impairment	69	–
Ensure family are provided with the opportunity to speak to specialist staff about their child	89	–
Explain the services provided by SNIP (Special Needs Information Point)	58	–
<i>With nursing colleagues and students:</i>		
Maintain UKCC standards for records and record keeping	98	–
Use care plans/pathways effectively	89	–
Be involved in team meetings	91	–
<i>With multi-disciplinary teams:</i>		
Update and involve community/hospital colleagues in all aspects of care management across Trusts	65	–
Refer to nurse specialists or children's community nurses as appropriate	93	–

	Essential %	Desirable %
<i>With community professionals/agencies: health, education, social services:</i>		
Assist with referring families to relevant health, education, social services and voluntary agencies	80	–
Assist with update and involve these agencies in care	80	–
<b>(d) Sleeping</b>		
Assist with assessing and managing sleeping patterns for different developmental stages	52	–
Interpret cultural/social issues affecting sleep behaviour	–	58
Assist with advising and provide families/carers with beds/equipment which may improve sleep quality	56	–
Assist with promoting correct positioning of children with special needs	72	–
Assist with informing and referring families/carers to respite services	76	–
Assist with referring families/carers to local/national sleep support groups/agencies	69	–
Promote understanding of issues surrounding Sudden Infant Death Syndrome and recommendations for reducing risk	82	–
<b>(e) Eating and drinking</b>		
Assist with assessment and management of nutritional/fluid requirements for all age groups	87	–
Interpret/plot centile charts for recording height/weight	67	–
Relate and promote current recommendations for a healthy diet	83	–
Advise/assist parents with breast feeding	51	–

## Section 2: Care Delivery (continued)

	Essential %	Desirable %
Advise regarding cutlery/utensils likely to be used according to developmental stage and special needs	56	–
Understand cultural influences on diet	56	–
Advise regarding disease specific diets	–	57
Be aware of common food allergens	76	–
Teach families/carers key skills in enteral feeding either by pump or bolus	81	–
Nasogastric: passing/positioning tube, checking position/patency and ongoing care	83	–
Gastrostomy: changing tube/button and ongoing care	60	–
Set up and use a feeding pump	74	–
Demonstrate knowledge of and teach families/carers key skills in parenteral feeding according to local policy	64	–
Refer families/carers to dietician/nutrition nurse specialist	83	–
Assist with setting up a syringe driver	52	–
Assist with teaching how to monitor blood sugar levels	69	–
Assist with co-ordinating the process of ordering supplies according to local policy	67	–
Assist with co-ordinating the process of prescribing feeds according to local policy	61	–

	Essential %	Desirable %
<b>(f) Breathing</b>		
Understand normal parameters for pulse, respiration and blood pressure	98	–
Monitor vital signs according to Trust policies	94	–
Use a pulse oximeter	73	–
Demonstrate how to take a manual blood pressure using a sphygmomanometer	89	–
Use a dynamap	77	–
Recognise and advise/teach families/carers about the signs of respiratory distress and how to respond to them	87	–
Advise/teach families/carers how to recognise and respond to emergency situations:		
– choking	85	–
– anaphylaxis	70	–
– respiratory distress	85	–
– respiratory arrest	76	–
– cardiac arrest	73	–
– seizures	85	–
Administer oxygen as prescribed according to local policy	93	–

## Section 2: Care Delivery (continued)

	Essential %	Desirable %
Use:		
– nasal cannula	91	–
– face mask	91	–
– nasopharyngeal tube	62	–
– oxygen concentrator	69	–
– non invasive ventilation (NIPPV) eg BIPAP, CPAP	–	73
– invasive ventilation (IPPV)	–	74
Demonstrate awareness of tracheostomy management using local guidelines/policy	53	–
Demonstrate awareness of bronchopulmonary dysplasia management using local guidelines/policy	52	–
Demonstrate awareness of asthma management using local guidelines/policy	67	–
Demonstrate awareness of apnoea management using local guidelines/policy	71	–
<b>(g) Maintaining Temperature</b>		
Demonstrate awareness of normal parameters for temperature	98	–
Advise/teach families and carers about the management of pyrexia	96	–
Assist with teaching families and carers about the management of febrile convulsions	89	–
Advise/teach families and carers about the management of hypothermia	84	–

	Essential %	Desirable %
<b>(h) Elimination</b>		
Relate normal toilet functions to developmental stage	98	–
Teach families/carers how to test urine and interpret the results	85	–
Insert a urinary catheter according to local policy	67	–
Assist with advising/teaching families/carers how to manage a urinary catheter	74	–
Recognise symptoms of urinary tract infection	91	–
Assist with advising/teaching families/carers about the management of constipation/encopresis	74	–
Assist with advising/teaching families/carers about stoma management	64	–
Order continence and stoma products and advise carers about their use	57	–
<b>(i) Fears and Anxieties</b>		
<i>Family Centred Care</i>		
Demonstrate partnership working with parents when planning, implementing and evaluating care	94	–
Demonstrate encouragement and support for the family when they participate in care	94	–
Recognise signs of family stress and be able to advise on adequate sleep, rest, diet, respite, change of scene, and other family responsibilities	80	–
Analyse sibling response and encourage sibling support as appropriate	67	–

## Section 2: Care Delivery (continued)

	Essential %	Desirable %
Analyse extended family response and encourage extended family support as appropriate	62	–
<i>Individual/holistic care</i>		
Prioritise care for the child and family	89	–
Assist with assessing the physical, psychological, social and spiritual needs of the child/family	91	–
Be able to identify expected outcomes including a time frame for achievement	82	–
<b>(j) Hair/skin condition and personal hygiene</b>		
Provide health education related to self awareness/management of body hygiene and body image	91	–
Recognise and advise families/carers about the treatment of common rashes and skin conditions	67	–
Demonstrate and discuss the management/prevention of head lice	74	–
Assess and maintain skin integrity	94	–
With assistance, order, provide and teach families/carers about the use of pressure relieving equipment	76	–
Assess and manage a wound	78	–
Promote oral hygiene and minimise dental caries	94	–
<b>(k) Mobility</b>		
Assess expected level for developmental stage	87	–
Advise families/carers about safe moving and handling and refer for specialist advice	83	–

	Essential %	Desirable %
Demonstrate good positioning of children with special needs	78	–
Manage the care of an immobilised child: traction/hip spica/braces/in plaster	65	–
Demonstrate the safe use of equipment eg hoists, frames, traction, beds, chairs, using specialist advice	56	–
Assist with assessing the home/community environment for mobility requirements and access	50	–
Be aware of limitations to mobilising in the home/community environment	78	–
<b>(l) Play and Education</b>		
Understand the importance of play to promote development and normalisation during illness/trauma	86	–
Understand the benefits of play for therapeutic purposes	87	–
Use play as a communication aid	83	–
Recognise the importance and benefits of social and educational inclusion for the child/family/carers	83	–
Identify children and families at risk of social and educational exclusion	76	–
Understand educational needs according to age/developmental stage	76	–
Have awareness of the education system in relation to:		
– Record of needs	37	–
– Special educational needs system and services	37	–
– Future needs assessments	37	–

## Section 2: Care Delivery (continued)

	Essential %	Desirable %
Liaise effectively with nurseries and schools	83	–
Be aware of community development projects in relation to play and education:		
– Early intervention schemes	–	73
– Surestart initiative	–	71
– Nursery education	–	55
– Children and family centres	–	57
– Community schools	–	67
– Health promotion programmes	–	54
– Healthy living centres	–	71
– Out of school and after care	–	70
– Anti-bullying strategies	–	71
– Befriending/peer education schemes	–	77
– Youth crime initiatives	–	82
Liaise effectively with hospital/home teachers	80	–
<b>(m) Bereavement</b>		
Be aware of bereavement information as per local policy	82	–
Liaise with local bereavement support services	64	–
Understand differing cultural practices surrounding death and bereavement	64	–
Demonstrate ability to support bereaved parents and their families	67	–

	Essential %	Desirable %
<b>(n) Pain</b>		
Understand the physiology of pain	93	–
Locate local pain management guidelines	89	–
Assess and manage pain using an appropriate pain tool in partnership with child/families/carers	82	–
Liaise effectively with the Nurse Specialist – Pain Management	89	–

## Section 3: Care Management

	Essential %	Desirable %
Manage and resource care effectively using current local/national strategies	59	–
Participate in practice developments to enhance the nursing contribution and quality of care	72	–
Create an environment in which clinical practice development is fostered, evaluated and disseminated	70	–
Identify, apply and disseminate research findings relating to community children's nursing practice	57	–
Assist with providing effective learning experiences within a sound educational environment: provide opportunities for pre-registration students to achieve learning outcomes through mentorship	61	–
Participate in audit review and appropriate quality assurance activities	77	–

### (a) Health Promotion/Education

Create and utilise opportunities to promote the health and well being of children and their families	87	–
Consult with children and their families to identify needs and desires for health promotion advice	84	–
Provide relevant and current health information to children and their families	91	–
Ensure information is in a form which facilitates understanding	93	–
Provide support/education in the development/maintenance of independent living skills	84	–
Seek specialist/expert advice as appropriate	96	–
Be able to promote good health within the community team	80	–

	Essential %	Desirable %
<b>(b) Clinical Governance</b>		
Demonstrate use of local and national standards for care management/pathways	85	–
Participate in development of standards within the community setting	67	–
Be aware of SIGN guidelines and how to access them on intranet	76	–
Participate in bench marking with other practice areas	–	51
Access local guidelines/policies across Trusts	84	–
Participate in development of local guidelines/policies	60	–
Read relevant journals regularly	91	–
Undertake literature search and critically review literature with support	64	–
Demonstrate familiarity with and use the learning resource centres available	53	–
Disseminate effectively new information/research findings to colleagues/multi disciplinary team	58	–
Report incidents as per local policy	100	–
Outline local complaints policy	96	–
Handle complaints effectively	91	–
<b>(c) Health and Safety at Work</b>		
Access health and safety guidelines	100	–
Participate in risk assessment/management in the community	86	–
Be aware of counselling service from occupational health	84	–

## Section 3: Care Management (continued)

	Essential %	Desirable %
Outline personal security management	87	–
Use personal identity card	96	–
Know how and when to contact police	95	–
Locate equipment/tools used in local area	91	–
Locate Medical Physics/Anaesthetic Repair forms and describe procedures	75	–
Report faults promptly	98	–
Advise/teach parents/carers the rationale behind mandatory safety checks	100	–
Assist with advising parents/carers about safe and effective use of oxygen and other equipment	100	–
<b>(d) Fire Policy</b>		
Refer to local fire department for individual risk assessment of family home when oxygen in use	86	–
<b>(e) Infection Control Measures</b>		
Access and use the local control of infection guidelines	100	–
Liaise with the Infection Control Team	89	–
Minimise cross infection	100	–
Use local handwashing guidelines	100	–
Advise child/families/carers about effective handwashing	100	–
Discuss the signs and symptoms of infection	98	–
Use aseptic non touch technique and advise families/carers	98	–

	Essential %	Desirable %
Organise and advise parents about clinical waste uplift in the community	80	–
Know needle stick injury guidelines	98	–
Demonstrate knowledge of immunisation programme	89	–
Be aware of signs and symptoms of common childhood viral/bacterial infections	88	–
Discuss current issues relating to immunisation	81	–
<b>(f) Moving and Handling</b>		
Demonstrate safe handling and moving for self and clients	96	–
Assess families'/carers' understanding, skill and confidence levels in use of specialised equipment	71	–
Liaise effectively with moving and handling facilitator	87	–
<b>(g) Partnership and interprofessional/interagency working</b>		
Liaise with multidisciplinary team, other agencies and professionals	91	–
Participate with members of the health, social care, education and voluntary care teams in decision making/reviewing care	89	–
Use admission/discharge planning documentation	93	–
Liaise with local hospital care co-ordination team	81	–
<b>(h) Team working</b>		
Assist families/carers to co-ordinate the delivery of nursing/health care	96	–
Demonstrate ability to manage time effectively	87	–

## Section 3: Care Management (continued)

	Essential %	Desirable %
Demonstrate ability to work effectively under pressure	80	–
Demonstrate an ability to manage personal work with supervision	94	–
Participate in managing change within the practice area	70	–
Demonstrate ability to motivate other team members	52	–
Be aware of budget issues/restraints	50	–
Manage clinical supplies effectively	67	–

### (i) Information management

Utilise and interpret information technology:

– Use patient/hospital information systems	80	–
– Access local intranet	54	–
– Access internet	–	58
– Use internal email	57	–
– Use Microsoft Word	–	51
– Use Powerpoint	–	87
– Use Excel	–	93
– Other – please specify		

## Section 4: Personal/Professional Development

	Essential %	Desirable %
Demonstrate continuous professional development (CPD)	97	–
<b>(a) Personal Development</b>		
Reflect on practice	87	–
Identify own professional development needs	89	–
Take action to meet any knowledge/skills deficit	91	–
Produce a personal development action plan	74	–
Share experiences with colleagues/children and families and learn from them	82	–
<b>(b) Learning Environment</b>		
Maintain a climate conducive to learning	76	–
Demonstrate ability to be a mentor for students	77	–
Participate in preceptoring for staff newly qualified/new to work area	63	–
Demonstrate teaching skills with:		
– child/family/other carers	85	–
– support staff	76	–
– trained nursing staff	67	–
– other professional colleagues	65	–
Demonstrate presenting skills at local level	–	66
Be able to write for publication	–	93

The following biographical details were also requested at the end of the questionnaire:

**Grade**

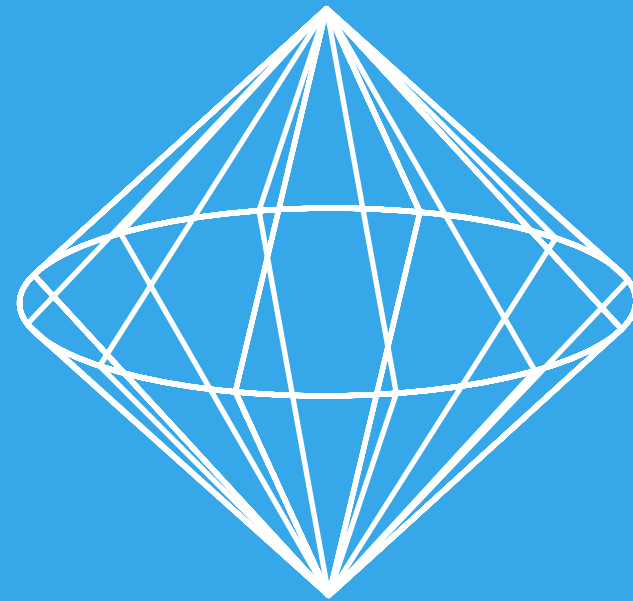
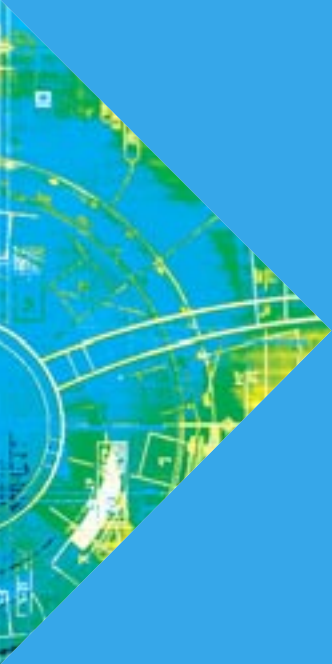
**Post**

**Area of nursing work**

**Professional and academic qualifications**



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