





# Appendix 2 Advanced Critical Care Outreach Competencies



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2 | Critical Care Outreach Practitioner Framework

# **Advanced Practice Level**

It is anticipated that CCO practitioners wishing to achieve 'Advanced Practice Level' will access this through existing advanced practice pathways such as the 'Multi-professional framework for advanced clinical practice in England' (HEE 2017).

The advanced CCO specific competencies are identified below.

#### **A. Clinical Practice**

One of the great joys of working in CCO is the scope for nurses and AHPs to develop advanced skills in a wide range of areas dependent on personal interest and the needs of individual Trusts. The necessary skills should build on existing experience and be relevant to the specialties within the Trust. Teams will need to identify the requirements and develop the service and skills to meet the gap in provision.

It is likely that there are existing advanced practitioners whose roles will overlap with that of Critical Care Outreach and when working together will enhance patient safety and experience. For example, there may be a Vascular Access Clinical Nurse Specialist (CNS) or team working at advanced level that are able to insert peripheral central cannula (PICC) lines. Working collaboratively, the patient receives a high level of specialist input from the most skilled practitioners, in this way their treatment is optimised. In trusts where there is no vascular access team and there is a regular requirement for insertion of PICC lines, it may be that the CCO team can develop their own skills to provide this service.

It is difficult, therefore, to be too prescriptive in required advanced clinical competencies. However as Advanced Practitioners, Health Education England (HEE) advise that a portfolio of evidence or workbased learning should be created, demonstrating advanced clinical practice specific to the area of practice (HEE, 2020).

Within a portfolio for CCO we recommend the following clinical competencies.

#### **General competencies**

Healthcare professionals working at the level of advanced clinical practice should be able to achieve the following competencies:

A.1	Advanced Clinical Competencies
I can	n demonstrate through practice and / or discussion
own	tical understanding of their broadened level of responsibility and autonomy and the limits of competence and professional scope of practice, including when working with complexity, risk, ertainty and incomplete information
1	ability to act on professional judgement about when to seek help, demonstrating critical reflection wn practice, self-awareness, emotional intelligence, and openness to change
meth healt	ability to work in partnership with individuals, families and carers, using a range of assessment nods as appropriate (e.g. of history-taking; holistic assessment; identifying risk factors; mental th assessments; requesting, undertaking and/or interpreting diagnostic tests; and conducting th needs assessments)
1	ctive communication skills, supporting people in making decisions, planning care or seeking to e positive changes
Emp	loyment of expertise and decision-making skills to inform clinical reasoning approaches when

dealing with individual presentations and complex situations, synthesising information from multiple sources to make appropriate, evidence-based judgements and/or diagnoses A.1

#### **Advanced Clinical Competencies**

The ability to exercise professional judgement to manage risk appropriately, especially where there may be complex and unpredictable events and supporting teams to do likewise to ensure safety of individuals, families and carers

The ability to work collaboratively with an appropriate range of multi-agency and inter-professional resources, developing, maintaining and evaluating links to manage risk and issues across organisations and settings

The ability to act as a clinical role model/advocate for developing and delivering care that is responsive to changing requirements, informed by an understanding of local population health needs, agencies and networks

Self-assessment	Competence Fully Achieved
Sign:	Signed by Assessor:
Date:	Date:

#### **Outreach specific clinical competencies**

The Advanced Critical Care Outreach Practitioner's primary role is the autonomous management of the critically ill and acutely deteriorating patient, often in circumstances where the specific cause or underlying medical diagnosis is unclear. The ability to recognise, diagnose and manage the presenting signs and symptoms in order to prevent further deterioration and stabilise the patient's condition is vital in improving patient outcomes.

These competencies have been written in line with Health Education England's 'Multi-professional framework for advanced clinical practice in England' (HEE 2017).

A.2	Indepen	dent Prescribing
l can d	I can demonstrate through practice and / or discussion	
Comple	etion of an accredited independent prescribir	ng course via an HEI
Self-assessment Competence Fully Achieved		Competence Fully Achieved
Sign:		Signed by Assessor:
		ASSESSOI.
Date:		Date:

#### **Medical Emergencies and Advanced Life Support**

#### I can demonstrate through practice and / or discussion

A.3

Completion of Resuscitation Council UK's Adult Advanced Life Support course

Completion of Resuscitation Council UK's Paediatric Immediate Life Support course or Advanced Paediatric Life Support course (where appropriate)

The ability to rapidly and accurately perform and interpret a focused clinical examination in challenging circumstances e.g. acute medical or surgical emergency

Self-assessment	Competence Fully Achieved
Sign:	Signed by Assessor:
Date:	Date:

A.4	Radiolo	gy and Imaging	
l can d	I can demonstrate through practice and / or discussion		
	The ability to independently order appropriate imaging e.g. chest x-ray, via Trust electronic/digital systems		
	areness and compliance with radiation and ra g Radiation (Medical Exposure) Regulations	•	
The ab	ility to independently interpret a chest x-ray	using a recognised structure (i.e. ABCDEF)	
The indications for CT and MRI scanning and demonstrates basic head, chest and abdominal CT/MRI interpretation			
The inc	The indications for thoracic and abdominal ultrasound		
Ultrasound of major vessels to facilitate line insertion			
Self-as	sessment	Competence Fully Achieved	
Sign:		Signed by Assessor:	
Date:		Date:	

A.5	End of	Life Care
I can demonstrate through practice and / or discussion		
The ability to initiate and contribute to decision making discussions as a member of the multi- professional team		
The recognition of the fundamental importance of breaking bad news		
An ability to use strategies for skilled delivery of bad news according to the needs of individual patients and their relatives / carers		
Self-as	assessment C	ompetence Fully Achieved
Sign:		igned by ssessor:

Date:

Date:

## **B.** Leadership

B.1	Leadership
l can	demonstrate through practice and / or discussion
An in-	depth knowledge of contemporary issues within and surrounding Critical Care Outreach
Αссοι	untability for the operational delivery of the CCO service across the organisation
deteri	ence to keep challenging despite opposition, demonstrate team leadership, resilience and mination, managing situations that are unfamiliar, complex or unpredictable and seeking to build lence in others
An ab	ility to critique in challenging situations and provide solution focused outcomes
	derstanding of the political, social, technical, economical and professional aspects that can of on provision of service
	ility to role model the values of the organisation / place of work, demonstrating a person-centred ach to service delivery and development
	bility to pro-actively initiate and develop effective relationships, fostering clarity of roles within s and across professional boundaries to encourage productive working
The a	bility to recognise the value of diverse ideas to harness creativity and focused solution outcomes
consu	bility to critically apply advanced clinical expertise in appropriate faciliatory ways to provide Iltancy across professional and service boundaries, influencing clinical practice to enhance y, reduce unwarranted variation and promote the sharing and adoption of best practice
	bility to work at a national / regional level to benchmark and draw together the best practice and examples across organisations
	bility to lead new practice and service redesign solutions in response to feedback, evaluation eed, working across boundaries and broadening sphere of influence

B.1 L	eadership	
The capability to evaluate own practice, and participate in multi-disciplinary service and team evaluation, demonstrating the impact of advanced clinical practice on service function and effectiveness, and quality (i.e. outcomes of care, experience and safety)		
The ability to actively engage in peer review to inform own and other's practice, formulating and implementing strategies to act on learning and make improvements		
The capability to continually develop practice in response to changing population health need, engaging in horizon scanning for future developments (e.g. impacts of genomics, new treatments and changing social challenges)		
Identification of the leadership style and strengths	and opportunities of others and self	
Effective communication of strategies to deal with	complex and difficult scenarios / issues	
Development of the relevant Critical Care Outread	h/Acute Care Strategy	
Contribution to regional activity through collaboration with other services		
An atmosphere/environment that promotes the health and wellbeing of the immediate / wider healthcare team		
An understanding of what motivates the immediate team / wider healthcare team and use this to enable the delivery of safe and compassionate care		
Self-assessment	Competence Fully Achieved	
Sign:	Signed by Assessor:	
Date:	Date:	

### C. Education/Facilitation of Learning

#### C.1

#### **Continuous Professional Development**

#### I can demonstrate through practice and / or discussion:

Comprehensive knowledge and understanding of professional codes and their application to lifelong learning, e.g. NMC, CSP

Evidence of post-registration learning and further continuous professional development to Masters level programmes, e.g. Masters in medical education, Masters in advanced clinical practice

Detailed knowledge of other relevant professional and national guidance related to role and responsibilities:

- NMC Revalidation
- Standard Framework for Education
- SSSA standards
- Future nurse curriculum

C.1 Continuous Pro	ofessional Development		
Comprehensive understanding of relevant local education, training and development policies			
Facilitation of effective learning and teaching of ac	lult learners		
Support and advice to others for the development	of teaching programmes and new curricula		
Promotion of a culture of learning within CCO tear	n and the wider organisation		
Self-awareness of own limitations, educational new	eds and the ability to seek appropriate support		
Active participation in local, professional and nation based on relevant up to date evidence-based find			
Leadership of others in the CCO team in order to to achieve working at the top of their license	facilitate learning in roles, new skills and knowledge		
Compliance with statutory and mandatory training			
Continuous professional development to meet the professional regulatory body	Continuous professional development to meet the registration requirements of the relevant professional regulatory body		
Maintenance of a continuing professional portfolio	with evidence of personal reflection on practice		
How to seek out learning opportunities to improve knowledge and skills, implementing these in practice			
How to use the diverse, often unpredictable ward opportunity for complex decision-making	environment to reflect on practice as a key learning		
Self-assessment	Competence Fully Achieved		
Sign:	Signed by Assessor:		
Date:	Date:		

C.2	Engagement within the Critical Care Outreach Team
I can	demonstrate through practice and / or discussion:
	ability to lead the team to develop differing roles, new skills and knowledge, in clinical practice service delivery
	ability to participate in MDT education to ensure it is implemented in a manner that facilitates stic knowledge and supports the retention of information provided
	ability to lead the integration, co-ordination, collaboration and continuity of multidisciplinary ning in an organisation
in cli	ctive leadership, teaching and role-modelling for the CCO team when caring for acutely ill patients inical practice Effective leadership, peer support and role-modelling for the CCO team when hing in clinical practice or in different settings

8 | Critical Care Outreach Practitioner Framework

#### C.2

#### **Engagement within the Critical Care Outreach Team**

The ability to provide leadership and mentorship to the CCO team in managing CCO caseloads and prioritisation of tasks

The ability to lead MDT decision making when assessing, planning and treating acutely ill/ deteriorating patients

The ability to deliver clear and constructive feedback to MDT and peers

The ability to lead critical care outreach case reviews

Effective management of the CCO team caseload to allow time for teaching, supervision and support

The ability to undertake effective clinical governance by:

- Reporting, investigating and learning from adverse incidents and near-misses
- Utilising learning from themes identified and incorporating them into training

The ability to lead evaluation of learning within the team to improve service delivery and local practice

The ability to lead the benchmarking process of existing local training and education to influence future service development, training and inform clinical practice

The ability to lead MDT meetings inclusive of Patient Safety/ Deteriorating Patient / Mortality and Morbidity

Facilitation of continuous professional development of CCO staff with training and learning opportunities

Self-assessment	Competence Fully Achieved
Sign:	Signed by Assessor:
Date:	Date:

C.3	Teaching and Supporting Educational Activities / Programmes		
l can	demonstrate through practice and / or discussion:		
The o	delivery of innovative teaching and learning to enhance the learner experience		
The u	The use of different teaching styles / methods to accommodate variations in adult learning styles		
Asse	Assessment of prior learning		
The a	ability to champion critical thinking/reflective learning		
The a	ability to promote a positive approach to engage and teach the MDT in clinical practice including:		
•	Patient assessment		

- Anatomy and pathophysiology relating to acute illness
- Understanding of national and local education guidance or policy that will affect their practice

C.3	Teaching and Supporting Ed	ucational Activities / Programmes	
A positive approach to engage in learning, facilitation and development of others including staff, patients and family members			
Proactive engagement of learners and others in the development and delivery of education and training			
Teaching and educational activities to multi-disciplinary staff, and support all learner groups with:			
•	Critical thinking/ reflective practice		
•	Clinical debrief		
Classroom based and on-going simulation, through case-based learning and problem solving, to help teach the following:			
•	Risk management		
•	Teamwork		
•	Situational awareness		
•	Clinical decision making		
•	Effective pre-briefing and de-briefing		
How the provision of leadership, support and opportunities for learners, drives quality improvement in service			
Evidence of acting as a mentor/preceptor/practice supervisor / practice assessor:			
Assessing competence of others			
Coaching of CCO team and wider MDT			
Self-	assessment	Competence Fully Achieved	
Sign	:	Signed by Assessor:	

Date:	Date:

C.4	Appraisal and Review	
l can	demonstrate through practice and / or discussion:	
	mentation of local educational policy, learning and organisational development strategies, and isal guidelines	
The ability to lead the collation of training needs analysis, and supporting frameworks of training and development for the CCO team		
Continuous professional development and engagement with annual appraisals		
Effective role modelling to other CCO team members and the wider MDT		
Contribution and participation of individual's performance review and the development of proactive personal development plans		

The employment of experiential learning enabling constructive feedback and facilitating reflection

Self-assessment	Competence Fully Achieved
Sign:	Signed by Assessor:
Date:	Date:

C.5		on and support in practice for early recognition ely ill / deteriorating patients	
l can	demonstrate through practice and / or disc	cussion:	
How t	o determine a learner's level of competence,	confidence and experience in practice	
Identification of strategies to support learners not achieving and the development of talent and clinical excellence in others			
Facilitation of constructive feedback on clinical and professional performance to MDT across an organisation ensuring it is appropriate to the individual learner needs			
Production of teaching materials, learning outcomes and educational support to enhance training of staff regarding early recognition of the acutely ill/deteriorating patient			
Appraisal of human factors during training and exploration of strategies to promote safer working practices			
Optimisation of the quality of the acutely unwell/ deteriorating patient's treatment, care and experience by developing self and others			
Sharing of outcomes of education and training by publishing and presenting at conferences utilising:			
Evidence based practice			
Research			
•	Innovation		
Leading local policy and educational development of strategies to improve standards of care to improve patient safety			
Self-a	assessment	Competence Fully Achieved	
Sign:		Signed by Assessor:	
Date:		Date:	

# C.6 Foster an inclusive approach to all staff and patients. Actively encourage learners to participate in new ways of working and learning

#### I can demonstrate through practice and / or discussion:

Behaviors that will promote professional confidence, performance and self-esteem of the MDT

Behaviors in others that may undermine learning professional confidence, performance or self-esteem and develop strategies to overcome these

Teaching materials to enhance the facilitation of learning for all CCO Practitioners and ward staff responsible for the early recognition and response to acutely ill/deteriorating patients

Teaching locally and regionally to inform and educate all staff about their role in CCO

Respect for all team members, learners, patients and their families

Responsibility for effective reporting mechanisms, feedback and local clinical governance activities

Educational support and the raising of clinical concerns regarding patient safety, standards of care, education and training and ethics

Self-assessment	Competence Fully Achieved
Sign:	Signed by Assessor:
Date:	Date:

#### **D.** Research, Evidence and Improvement

D.1	Research: Knowledge and Delivery
l can	demonstrate through practice and / or discussion:
	-depth knowledge and understanding of national legislation and research governance policy egal requirements pertaining to healthcare research. For example
•	Provisions of Care Act (2014)
•	GDPR (2016)
•	Health Research Authority. UK Policy Framework for Health and Social Care Research (2020)
•	Freedom of Information (2000)
•	Equality Act (2010)
	-depth knowledge and understanding of a variety funding sources and grant application edures
	ability to utilise service evaluation and audit activity to generate research questions and/or lates into local quality improvement initiatives
The a	ability to champion research and identify priority areas for research within:
•	The organisation and/or profession
•	Critical care outreach services/delivery

#### Research: Knowledge and Delivery

Co-ordinates research activity of others

Participates in multi-centre or large-scale research

Demonstrates the development of a portfolio of research, utilising a range of research methods, which includes an array of publications and presentations

Contributes to/influences research policy and/ or strategy within local organisation or Higher Education Institute (HEI)

Uses the recommendations from relevant research to underpin own practice and to inform that of others

Completion of post- graduate accreditation at Masters level

Assists with peer reviews/appraisal of research proposals

Shadows or is supervised as an independent reviewer

Self-assessment	Competence Fully Achieved
Sign:	Signed by Assessor:
Date:	Date:

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D.1

#### **Evidence Based Practice**

#### I can demonstrate through practice and / or discussion:

An extensive understanding of the evidence-base which informs clinical and professional practice and critical care outreach operational service delivery

Ability to identify gaps in the evidence base and its application to practice. Through discussion demonstrates an understanding of how these might be addressed

Applying evidence to practice through:

- Use of local guidelines and policy to inform practice
- Using evidence to inform education delivery and resources

The ability to develop practice in line with research recommendations and national guidelines

Apply evidence to support high level complex decision making in practice, including management of complete episodes of care

Self-assessment	Competence Fully Achieved
Sign:	Signed by Assessor:
Date:	Date:

### **D.3** Service Improvement and Evaluation I can demonstrate through practice and / or discussion: Understanding of how to use audit results, outcome measures and patient experience in improving care delivered. Understanding of how to disseminate local, regional or national service evaluation and audit findings through appropriate media/forums The ability to critically appraise and synthesise relevant research, evaluation and audit The ability to use a range of quality/ outcome measures in clinical practice to critically analyse and evaluate the effectiveness of patient care and/or service delivery, including: Patient experience clinical Health-economic • • Patient-reported outcomes Positively influences the local agenda of service evaluation and audit activity programmes or strategies How to undertake service evaluation and audit activity to generate research questions and/or translates into local quality improvement initiatives The ability to design and undertake critical care outreach service evaluation and audit projects across professional and/or organisational boundaries, addressing local and regional practice The ability to appraise and guide critical care outreach service evaluation and audit activity of others Self-assessment **Competence Fully Achieved**

Date:	Date:

Signed by Assessor:

Sign:



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