



Health Education East Midlands



The Practice Nurse Project Competency Framework and

Competency Development Plan

Developing people for health and healthcare

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The Practice Nurse Competency Framework

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Derby and Derbyshire Local Medical Committee (LMC) Services Ltd was commissioned to deliver the project by Health Education East Midlands (Derbyshire Workforce team), to help scope Practice Nurse development in Derby City and Derbyshire County.

Introduction

The Practice Nurse Competency Framework (PNCF©) is a guidance tool and resource for Practice Nurses.

It has been designed by the Practice Nurse Project Team, which involved experienced Practice Nurses, and a General Practice advisor with a wealth of experience in managing and leading GP practices. It has been critically reviewed by experts who have a background in Practice Nursing, General Practice, Academia and GP practice services.

It is recognised by the Practice Nurse Project Team that certain content of the PNCF[©] may need further refinement.

It is important to ensure systems are put in place to update the PNCF© on a systematic rolling basis – at least every 6 months for quality purposes.

Benefits of using the PNCF©:

- User friendly and understandable.
- > Offers benchmarking possibilities.
- > Facilitates the appraisal process.
- Supports continuing professional development.
- Aligns with the service needs of the GP practice populations.
- Guides Practice Nurses on a career pathway.
- Develops staff to ensure quality and safety in the care they provide.
- A greater understanding of the Practice Nurse role, skills and competencies.
- Structure to aid recruitment, retention and identify the training needs of the clinical workforce.
- Supports compliance with the Care Quality Commission (CQC).
- Helps to address the 6Cs principle values: Care, Compassion, Communication, Competence, Commitment and Courage.

Core and three levels:

The core competencies are deemed to be essential for all Practice Nurses. The remaining competencies have been divided into three levels to help guide the Practice Nurse. The Practice Nurse will not have to be competent in all subjects, just the core level. It should be recognised for some Practice Nurses to be operating at Level 3 in asthma and Level 1 in diabetes, or working towards a level. It is recognised that no Practice Nurse will be working at all the levels.

How should Practice Nurses use the PNCF©?

The PNCF[©] is a resource to help Practice Nurses identify where they are now and where they may want to be, even if this means remaining at the same level.

The PNCF[©] should be used to help support self-assessment and professional development, it should not be used as a performance management tool.

The PNCF© is designed to be used in conjunction with the Practice Nurse Competency Development Plan (CDP) (linked to the end of the PNCF©) when undertaking the Practice Nurse annual appraisal or at another stage as appropriate.

The Practice Nurse and or Manager should support the process of undertaking an exploratory exercise to identify at which level of competency the Practice Nurse is working at or aiming towards evidencing competency - e.g. If it is decided to work towards Level 1, steps have to be undertaken to tick off (a tick box is provided) all the specified competencies indicated in this level, to include associated evidence, which should be saved as appropriate. It is assumed if a Practice Nurse and/or Manager decides they are working at Level 3, a Practice Nurse should evidence working at both Levels 1 and 2.

Training, education and professional development:

It is recognised that the Practice Nurse may have to undertake training to satisfy and help to evidence the competencies set out in each level and in the core areas. This training may involve the following approaches:

- Accredited training, where stipulated to provide a service.
- Training course, provided by an external training provider.
- Training provided in house (GP practice) by a GP, nurse and or any other colleague with expert knowledge.
- Structured on-the-job training.
- Access to educational websites.
- Access to web training and e-learning resources.
- Self-directed learning, through e.g. reading journals, manuals, books and other publications.
- Reflective learning, through e.g. diary, log or journal.
- Attendance at local Practice Nurse forums, conferences, meetings and events.

Care Quality Commission:

As part of the Care Quality Commission (CQC) registration process GP practices have to comply with the:

Health and Social Care Act 2008 (Regulated Activities) Regulations 2012 and the Care Quality Commission (Registration) Regulations 2009.

A GP practice needs to establish compliance by preparing evidence to support the outcomes. The PNCF© will help GP practices comply with CQC regulations and outcomes (not exclusive):

Outcome 12 Requirements relating to workers; people are kept safe, and their health and welfare needs are met, by staff who are fit for the job and have the right qualifications, skills and experience. **Outcome 14 Supporting workers;** people are kept safe, and their health and welfare needs are met, because *staff are competent to carry out their work and are properly trained, supervised and appraised.*

Revalidation:

The PNCF[©] may also help the Practice Nurse and GP practice with nurse revalidation criteria, as and when it has been established.

The PNCF© may also be used to:

- Support Practice Managers and or Nursing Managers in workforce planning and preparing role requirements, job descriptions and preparing questions for interview.
- Support job evaluation and pay review/negotiations.
- Inform commissioners of the baseline competencies for Practice Nurses.
- Assist Clinical Commissioning Groups (CCGs) and NHS Area Teams with quality markers.
- Assist the NHS Area Team to underpin the development and review of services.
- Inform the commissioning process and the development and delivery of education and training for Practice Nurses.
- Inform the Local Educational Training Board (LETB) and the Local Educational Council (LETC) about the training required to assist Practice Nurses with achieving competencies and supporting any Practice Nurse choice of progressing to other levels.

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	Competency Identification
Subject	Core To demonstrate core competency the Practice Nurse is able to:
Accountability	 Hold a valid NMC registration and be aware of and act upon the registration requirements. Adhere to the NMC code of professional conduct and standards. Work within the scope of own professional competence, refer and seek support as required. Identify the Practice Nurse personal and professional issues pertinent to working as a GP Practice Nurse. Be aware of the legal and professional issues pertinent to working as a GP Practice Nurse. Be aware of the Practice Nurse responsibilities and comply with CQC regulations and outcomes (where appropriate) to meet quality standards and outcomes. Recognise and promote the wider remit of the Practice Nurse. Apply clinical governance principles and follow local policies and procedures. Recognise and understand the roles of individuals working within the Primary Health Care Team and understand how the roles of the practitioners and agencies interface with the Practice Nurse rele. Be aware of the legal and professional issues in relation to accountability and delegation. Monitor the quality of work within the designated responsibility and alert others to quality issues. Be aware of the legal and professional issues in relation to consent and capacity (dults and children). Understand the law related to duty of care and vicarious liability. Recognise signs and symptoms which may indicate the presence of serious medical conditions (red flags) and take appropriate action. Keep up dated and aware of relevant nursing issues. Undertake continuing professional evelopment to achieve the skills and competencies to carry out the role of a Practice Nurse. Reflect on own performance and level of skills, identifying strengths and areas for development. Use critical appraisal and self-assessment to identify professional development needs, and develop and agree r

	Competency Identification			
Subject Anticoagulation	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have a basic understanding of anticoagulation therapy and the role of warfarin. Observe anticoagulation clinics.	Competency Identification Level 2 To demonstrate competency at this level the Practice Nurse is able to: Have undertaken a recognised training programme and been assessed as competent. Clinically manage patients, respecting and adhering to local enhanced services and national policies. Take capillary and venous blood samples and demonstrate good finger-prick technique. Use a coagulometer correctly. Use computerised decision support software (cdss). Provide patients with advice, information and educational materials to aid their understanding of all aspects of their medication. Discuss patients with the anticoagulation team should any concerns arise. Maintain up to date clinical knowledge of anticoagulation therapy. Understand clinical signs in patients taking warfarin that indicate the need for medical - specialist referral/advice. Initiate warfarin following GP referral, informing patients of their detailed anticoagulation management plan. Provide support to clinicians within the team who have commenced anticoagulation training. Provide ongoing near assessment support and mentorship to	 Undertake further training to assess clinicians undertaking appropriate training outside their CCG. Contribute to patient education both on an individual or wider basis e.g. through links with patient groups in the locality. Organise events for patients to attend for further information/support. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard 	
		 Provide ongoing peer assessment, support and mentorship to members of the anticoagulation team as required by the local enhanced service or any other commissioned service. Facilitate and encourage the spread of good practice within primary care. Be aware of the emerging new oral anticoagulation therapies. 	 operating procedures and patient surveys, making recommendations where necessary. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

	Competency Identification		
Subject Appraisal of others	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Be aware of the aims of the appraisal process with regard to the practice nurses development of a Professional Development Plan (PDP), and the practice's aims for the appraisal. Be fully informed regarding the practice priorities for the coming year. Have prepared themselves for the appraisal process by ensuring they are fully informed regarding the appraisee, their role within the practice, any achievements from the previous year's appraisal and PDP and outstanding aims from the previous	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Be adequately prepared to carry out appraisals. Be aware of the appraisee's own strengths and weaknesses and what they bring to the appraisal process. Have acted on feedback received following previous appraisals they have carried out. Be ready to assist the appraisee to prepare themselves for the appraisal. Be competent in documenting the appraisal and give feedback to both the appraisee and the Practice Manager. Ensure the appraisee produces a realistic PDP as a consequence of the appraisal.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Provide clinical supervision for appraisers and appraisees. Audit the outcomes from appraisal. Have an overview of appraisal for the whole practice team and support the appraisee and appraisers within the practice. Give constructive feedback.
	 appraisal. Ensure the appraisee has been given adequate notice of the appraisal to allow for preparation for the appraisal. Ensure the appraisee has been given the agreed practice pro forma for preparation for appraisal. Be familiar with research on appraisal and the potential benefits of appraisal for nurses and the whole practice team and for its effect on patient care. Be familiar with the appraisal documentation used within the Practice and their responsibilities for completion of documentation. 	 Facilitate any training plans that have been agreed. Offer interim review of plans made at an appropriate time. 	

Competency Identification			
Subject	Level 1 To demonstrate competency at this level the Practice Nurse is able to:	Level 2 To demonstrate competency at this level the Practice Nurse is able to:	Level 3 To demonstrate competency at this level the Practice Nurse is able to:
Asthma	 Demonstrate a basic working knowledge of pathophysiology of asthma. Understand signs and symptoms including causes and triggers of asthma to recognise opportunistically within patient population. Be aware of local and national guidance on asthma. Understand basic principles of care of a person with asthma. Understand diagnostic criteria and assist in diagnosis using appropriate testing in line with local/national guidelines: PEF monitoring/Spirometry. Be aware of complications of asthma, awareness of multidisciplinary support and referral onwards. Recognise signs and symptoms of exacerbations. Deliver primary prevention: advise/support/smoking cessation/vaccination as appropriate and maintaining healthy lungs. 	 Use appropriate diagnostic methods and make asthma diagnosis in liaison with GP. Conduct annual reviews. Independently plan, implement, monitor and review individualised care management plans. Manage and adjust asthma treatment in line with local/national guidelines. Provide self-management plans and psychological support to patients and families. Work with vulnerable groups to help devise action plans and provide support. Initiate, equip and provide asthma clinics, and deliver opportunistic care. Understand non pharmacological and pharmacological approaches to treatment. Support patients in self-management and adherence/compliance with therapy. Liaise with secondary care specialists as appropriate and support patients following hospitalisation. Ensure appropriate referral to multidisciplinary team. Demonstrate inhaler technique and devices. Implement and support emergency care in line with local/national guidelines. 	 Manage patients with more complex needs. Work independently to make clinical judgements and decisions. Independently diagnose asthma in line with local/national guidelines. Use holistic approach to check compliance and adherence, treatment and identify barriers. Directly refer to other specialists/investigations. Provide advice, education, mentoring and support to other clinicians. Take the lead in managing programmes of care (planning, providing and evaluating care) within the practice. Manage asthma register and ensure systems in place to meet QOF/NICE guidelines. Provide diagnostic health screening, surveillance and therapeutic interventions within a broader health promotion/public health context. Ensure practice working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

	Competency Identification		
Subject Audit, review and research	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have an understanding of the ethical issues and the importance of clinical audit that	Level 2 To demonstrate competency at this level the Practice Nurse is able to:	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Develop a strategy for assurance and audit of nursing services in the practice in conjunction with
Tesedi Uli	 and the importance of chinical addit that impinge on General Practice and the requirements of information governance. Contribute to audit of own and others practice. Participate in on-going review of team effectiveness and quality of service provision. 	 assume and addit in fine with clinical and information governance practice requirements. Disseminate and communicate audit findings. Have an understanding of research principles and practice. 	 Indising services in the practice in conjunction with the partners. Support Practice Nurse colleagues with reviewing audit and recommendations. Implement outcomes. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. Active engagement in research projects to enhance patient care/working practices. Disseminate research findings to colleagues across the sector, as appropriate.

	Competency Identification			
Subject	Core To demonstrate core competency the Practice Nurse is able to:			
Cancer	Any suspicion of cancer, urgent referral to GP.			

	Competency Identification		
Subject Cardiovascular disease	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Image: Identify and advise patients on the risk factors associated with cardiovascular disease (CVD) and peripheral vascular disease (PVD). Image: Understand and advise patients on the basic management of hypertension, angina, myocardial infarction and cerebro-vascular accident. Image: Be capable of discussing lifestyle choices such as diet, exercise and smoking. Image: Refer to relevant health care professionals such as smoking cessation, exercise for health and dietician where appropriate. Image: Discuss with and refer to the primary care team where further advice/support is required.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Be capable of providing a comprehensive risk assessment for primary prevention of CVD. Provide an organised programme of care for individuals in the secondary prevention of cardiovascular disease in line with local and national policies. Educate patients and carers in the lifestyle management of CVD and PVD to avoid further deterioration. Monitor this patient group through regular reviews including diet, exercise, smoking, BP and medication compliance. Recall and monitor as per protocols. Recognise any signs of deterioration of these conditions and refer accordingly. 	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Manage and adjust medication according to prescribing guidelines (if nurse prescriber) and refer appropriately to specialist services where required. Support clinicians in the management of this group, contributing to the maintenance of the CVD, PVD register. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

	Competency Identification		
Subject Cervical screening	C Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have an understanding of the rationale behind cervical cytology and HPV screening, and is able to explain this to patients. Be aware of the cervical screening call and recall system. Be able to prepare the patient, equipment and environment. Prepare to undertake or be undertaking an accredited NHSCSP course for cervical sampling.	 Demonstrate autonomous management of the consultation including history taking, record keeping and explanation of the procedure for obtaining results. Recognise abnormalities of the cervix and refer on to others if needed. 	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Advise the patient re abnormal results and refer on to others as appropriate. Undertake more complex vaginal/pelvic examinations and refer on to others as appropriate. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making
		 Ensure adequate systems and protocols are in place for follow up and failsafe. 	 operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

	Competency Identification		
Subject Chronic kidney disease (CKD)	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have a basic understanding of Chronic Kidney Disease (CKD). Be aware of the NICE guidance on CKD. Be aware of guidance regarding flu and pneumonia vaccine for patients with CKD. Administer flu and pneumococcal vaccine and other vaccines as appropriate to patients with CKD. Carry out CVD risk assessment as appropriate. 	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Be aware of the risk factors for CKD. Be aware of the different Levels of CKD. Be aware of the importance of good blood pressure control in CKD and refer on as appropriate where BP control less than satisfactory. Ensure the need for regular U and E at least 6 monthly and at least annual urine albumin: creatinine or protein: creatinine ratio testing. Discuss with patients the importance of appropriate medications and any contraindications. Be aware of the need for regular testing of U&E, ACR and PCR. 	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Ensure patients are on appropriate medications unless contraindicated. Implement annual and 6 monthly reviews for patients with CKD. Implement best practice in treating CKD including use of ACE-I or ARB. Refer on as appropriate where condition is deteriorating or medication not optimised. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

	Competency Identification
Subject	Core To demonstrate core competency the Practice Nurse is able to:
Clinical guidelines, protocols, directions and directives	Have an understanding of the following and how these are communicated and implemented within the work place: Current national policies National standards NICE guidelines Local GP practice protocols Patient group directions Patient specific directives Other local and national policies that impact on the Practice Nurse role

	Competency Identification				
Subject	Core To demonstrate core competency the Practice Nurse is able to:				
Communication with teams	 Work effectively within the GP practice team and support structures that are in place for the efficient, effective, smooth and safe running of the GP practice. Delegate clearly and appropriately including assessment of clinical risk and application of the principles that underpin delegation to unregulated health care support workers. Communicate effectively with other disciplines and partner organisations to enhance patient care. Communicate if task delegated is beyond the Practice Nurse competencies. 				

	Competency ide	entification	
Consultation Understand the imwith patients durin Prepare for the consultation and prepared with the pluconsultation and prepared with near take blood pressure Recognise the imprelationship as the or confirming the Take an accurate the examination using skills. Agree a treatment appropriate follow Safety net ensurin untoward signs an medical help. Make an accurate all key elements u appropriately to e readily accessible Seek to time mana Reflect on consult develop consultat	Nurse is able to: Praynov of good communication ng consultation. Insultation by familiarising his/ lanned reason for the patient prepare appropriately e.g. be cessary equipment to do a dressing, re etc. portance of establishing the e consultation starts and discovering reason for the consultation. history and perform an appropriate g verbal and physical assessment t plan with the patient and v up. ng the patient is aware of any nd when to seek further nursing or record of the consultation including using the practice IT system ensure contemporaneous records are and legible. age the consultation. rations regularly to learn from and	Level 2 rate competency at this level the actice Nurse is able to: skills to establish a good with all patients. e how personal and patient eliefs affect the consultation. d in consulting with the wider population including patients nority groups. opriate consultation and n techniques to educate patients g their chronic disease and agree agement plans. consultation skills sufficiently to good time management of	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Active and assess junior nurse's consultations. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

	Competency Identification			
Subject Contraception and sexual health	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Provide information and undertake initial assessment regarding client's contraceptive needs. Perform pill checks for patients who are established pill users in line with practice and local policies. Administer injectable contraception in line with local policy, using Patient Group Directive (PGD)/prescribing. Teach correct condom use. Offer advice regarding screening for STIs, including local policies for Chlamydia screening. Offer advice regarding local agencies that can advise on unwanted pregnancies. Signpost to other services e.g. specialist sexual health services.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Provide emergency contraception under a PGD or as a prescriber. Assess and teach oral contraceptive use to patients using this method for the first time, providing the contraceptive pill by prescribing or under a Patient Group Directive (PGD). Provide coil checks. Undertake pregnancy testing and provide advice and referral to GP for unwanted pregnancies. Advise on male and female sterilisation. 	 Level 3 To demonstrate competency at this level the Practice Nurse is able to: Provide a full range of contraceptive services. Independently fit, and/or remove LARC or coils. Manage patients with more complex needs such as epilepsy and learning disability. Use referral pathways for those patients requesting sterilisation. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

Competency Identification			
regulations, Care Quality Commission (CQC) regulations and outcomes, Quality Outcomes Framework (QOF) and service redesign.	 Level 1 To demonstrate competency at this level the Practice Nurse is able to: Learn, develop and contribute to the efficient working of the Nursing Team to meet quality, safety and performance requirements. Understand and contribute to the contractual requirements of General Practice i.e. to meet General Medical Services contract (GMS) or the Personal Medical Services contract (PMS), Enhanced and locally commissioned services contracts and QOF. Take responsibility for some of the requirements of GMS or PMS, QOF and enhanced and locally commissioned services. Understand and comply with CQC regulations and outcomes. Work within the support structures and procedures that are in place for the smooth running of the practice. Recognise strengths in others and work with them to make a difference to the service provided. 	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Take more senior responsibility for some of the requirements of contractual requirements. Take a lead on CQC outcomes, helping the GP practice establish evidence and maintain compliance with regulations and outcomes. Implement programmes to meet the contractual requirements of the practice and other national programmes/care requirements. Advise on and contribute to the development, and review of procedures that assure cost effective nursing and other services. Take positive action to make agreed changes to improve services to patients. Seek support from colleagues or Manager as required. Support the clinical governance requirements of the General Medical Services contract (GMS) or the Personal Medical Services contract (PMS) contract and professional bodies that impinge on nursing. Contribute to the development of new practices and changes in service delivery and discuss and agree how these might be taken forward.	 Level 3 To demonstrate competency at this level the Practice Nurse is able to: Identify elements and lead members of the Practice Team to meet relevant General Medical Services contract (GMS) or the Personal Medical Services contract (PMS) requirements and enhanced locally commissioned services. Take responsibility for ensuring the Nursing Team delivers the GP practice goals set against the practice profile and disease prevalence. Lead on nursing related practice development initiatives and give guidance on nursing perspectives. Identify the need and establish evidence to support service development. Consider the quality, effectiveness and efficiency of the services. Lead on development of local protocols and practices to meet contract and regulatory requirements.

		Competency Identification	
Subject	Level 1	Level 2	Level 3
	To demonstrate competency at this	To demonstrate competency at this level the Practice Nurse	To demonstrate competency at this level the Practice Nurse is
	level the Practice Nurse is able to:	is able to:	able to:
COPD	Deliver primary prevention:	Understand diagnostic criteria and assist in diagnosis of	Manage patients with more complex needs.
	advice/support smoking	COPD using spirometry.	Work independently to make clinical judgements and
	cessation/vaccination as	Support monitor and review progress and management.	decisions.
	appropriate and maintaining	Support patients in self-management and	Independently diagnose COPD in line with local/national
	healthy lungs.	adherence/compliance with therapy.	guidelines.
	Demonstrate a basic working	Use appropriate diagnostic methods have awareness of	Be proficient in interpreting spirometry findings.
	knowledge of pathophysiology	differential diagnosis and make COPD diagnosis in liaison	Manage and adjust treatment in line with local/national
	of COPD.	with GP.	guidelines.
	Understand signs and	Conduct annual reviews on stable patients with COPD.	Use holistic approach to check compliance and adherence, to
	symptoms including causes	Review spirometry findings and perform assessments.	treatment, identify barriers and support adherence.
	and exacerbations of COPD to	For example CAT or BODE	Directly refer to other specialists/investigations.
	recognise opportunistically	Plan, implement, monitor and review individualised care	Take the lead in managing programmes of care (planning,
	within patient population.	management plans.	providing and evaluating care) within the practice.
	Be aware of local and national	Advise and alter medication as required.	Manage COPD register and ensure systems in place to meet
	guidance on COPD.	Provide instruction and education on recognising signs of	QOF/NICE guidelines.
	Understand basic principles of	exacerbation and use of rescue packs. Implement and	Ensure effective call and recall in place.
	care of a person with COPD.	support rescue care in line with local/national guidelines.	Provide diagnostic health screening, surveillance and
	Use O2 sats monitor and	Provide self-management plans and psychological	therapeutic interventions within a broader health
	understand results.	support to patients and families especially in recognising	promotion/public health context.
	Demonstrate inhaler	depression.	Ensure working policies and guidelines reflect local and
	technique and devices.	Refer to pulmonary rehabilitation, benefits advice as	national recommendations and remain up to date with local
	Understand non	appropriate.	initiatives.
	pharmacological and	□ Liaise with secondary care specialists as appropriate and	Ensure that a quality assured service is provided.
	pharmacological approaches	support patients following hospitalisation.	Contribute to development of governance framework e.g.
	to treatment.	Ensure appropriate referral to multidisciplinary team.	clinical guidelines, audits, standard operating procedures and
	Be aware of the social and	Initiate, equip and provide COPD clinics and deliver	patient surveys, making recommendations where necessary.
	psychological impact of COPD	opportunistic care.	Provide a link/liaison role between primary care and
	Recognise signs and symptoms	Maintain a disease register.	specialist services.
	of exacerbations and refer		Act as a mentor and educator for members of the primary
	where appropriate.		care team, providing ongoing training and education.

	Competency Identification				
Subject	Core To demonstrate core competency the Practice Nurse is able to:				
Data protection, confidentiality, information governance, record keeping and the law	Be aware of the legal and professional issues and legislation, regulations and local policies and procedures in relation to the following: Data protection Access to health records Confidentiality Information governance Record, review and process data and information, in line with practice policies and NMC guidelines. Use accurate read codes about patients and appropriate and accurate free text, in order to ensure easy and accurate access to medical records and to carry out appropriate audit. Use a computer and manage files and medical records according to GP practice policies and procedures. Access to head emails including attachments safely. Have basic knowledge of Microsoft word package. Manage information searches using the internet and local library databases. Support the clinical governance requirements of the GP practice.				

	Competency Identification			
Subject Dementia	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have an understanding of dementia, and how it affects individuals and those close to	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Undertake a holistic assessment of a patient with dementia, including memory testing	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Be involved in the diagnostic process of dementia care	
	 Induited inclusion and those close to them. Understand the Mental Capacity Act and how it may affect clinical practice. Recognise when a patient may have some cognitive impairment that may affect their ability to consent to care and treatment. Be aware of any safeguarding issues, and know how to use the local procedures. Be aware of resources that are available to support those with dementia such as 'This is me' from the Alzheimer's Society. 	using a validated tool such as GPCOG / MOCA. Liaise with and referral to social services as applicable.	 Definition of the diagnostic process of definition dure including: ordering/undertaking blood tests to exclude other possible diagnoses. Undertake initial and subsequent memory testing according to local policies. Work jointly with GP/CPN at the point of diagnosis to ensure prescribed medications are understood and adhered to, and support mechanisms are in place for the patient and their families/carers. Undertake a medication review to ensure all medicines are suitable. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

	Competency Identification			
Subject Depression	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Be confident to recognise and make a basic assessment and enquire re signs and symptoms of depression. Use the PHQ 9 depression questionnaire or similar tool where relevant. Know where to refer patients and make a timely and appropriate referral. Be aware of the availability of self-referral for counselling i.e. IAPT.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Be aware of risk factors for depression. Be aware of red flags - suicidal ideation and when patient needs to be seen urgently. Refer patients on to GP or Nurse Practitioner.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Be able to build a rapport with patients which enables honest discussion about mood and emotions and to acknowledge the physical manifestation of depression. Know when to refer on to appropriate person for diagnosis and treatment of depression. Have a basic knowledge of antidepressant medication and the need for regular GP review. Ensure working policies and guidelines reflect loca and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standar operating procedures and patient surveys, making recommendations where necessary.	
			 Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

	Competency Identification			
Subject	Level 1 To demonstrate competency at this level the Practice Nurse is able to:	Level 2 To demonstrate competency at this level the Practice Nurse is able to:	Level 3 To demonstrate competency at this level the Practice Nurse is able to:	
Diabetes	 Be aware of the difference between Type 1 and Type 2 diabetes. Assess and advise those at risk of type 2 diabetes with regard to lifestyle changes, including, exercise programmes and dietary changes. Demonstrate knowledge of the available tests for the diagnosis of type 2 diabetes and make appropriate referrals. Know the local/national guidelines for care of patients with diabetes. Provide education and support to patients newly diagnosed with diabetes including referral to education programmes as appropriate. Refer to dietetics and weight management programmes as appropriate. Perform and interpret the results of blood and/or urine monitoring. Be competent in use of blood glucose management (BGM). Support patients in BGM and recognise when BGM is appropriate. Ensure people with diabetes understand how to take medications, its side-effects and when to report them. Demonstrate knowledge of the types of oral and hyperglycaemic agents and how they work. Recognise that the progressive nature of type 2 diabetes may require changes in medication over time. 	 Assess and manage all aspects of diabetes: including hyper/hypoglycaemia, hypercholesterolemia, hypertension and microalbuminuria. Use results to optimise treatment interventions according to local and national evidence-based practice, and initiate further tests as appropriate. Recognise when treatment needs to be adjusted. Adjust treatment in line with local national guidelines. Demonstrate a broad knowledge of third and fourth line therapies including GLP-1 receptor agonists. Describe circumstances in which insulin use might be initiated or altered and make appropriate referral. Demonstrate awareness of issues related to polypharmacy and drug interactions (e.g. steroids). Ensure appropriate educational materials for patients and staff. Provide information and support to encourage the person with diabetes to make informed choices about controlling and monitoring their diabetes, including: choice of treatment and follow-up; risk reduction; monitoring control; and complications. Facilitate the development of an agreed care plan. 	 Manage patients with more complex needs. Provide expertise in the development of management plans for people with complex diabetes and/or comorbidities. Demonstrate expert knowledge of insulin and GLP-1 receptor agonist therapies and act as a resource for people with diabetes, their carer and HCPs. Demonstrate a high level of competency in the safe administration of insulin or GLP-1 receptor agonists. Ensure protocols and procedures are current for the management of using, converting and commencing insulin. Initiate insulin safely and competently and maintain patients with type 1 and type 2 diabetes, according to local guidelines. Teach the person with diabetes or their carer the principles of carbohydrate awareness and medication dose adjustment. Deliver (where individually appropriately acceptable) structured group education to people with diabetes, their carers and HCPs. Participate in the development and monitoring of integrated care pathways and liaise with multidisciplinary team members. Liaise with MDT to identify people frequently presenting with diabetes emergencies. Participate in research and promote evidence-based practice. Develop best practice e.g. through leadership and consultancy. 	

 Describe signs and symptoms of hyperglycaemia/hypoglycaemia. Administer or advise on treatment to resolve hyperglycaemia/hypoglycaemia in accordance with local policies or individual clinical management plans. Advise on driving regulations with regard to hypoglycaemia. Be aware of the potential long-term health consequences of type 2 diabetes including micro and macro vascular complications and depression. Be aware of local policy regarding screening programmes. Give foot care advice to people with diabetes, and their carers. Be aware of erectile and sexual dysfunction as a neuropathic process, and refer where appropriate. Organise or perform microalbuminuria screening, blood pressure measurement and blood tests according to local and national protocols and guidelines. Identify people with diabetes at risk of hypertension and CHD and refer as appropriate. Recognise when treatment needs to be adjusted and refer as appropriate. 	 Demonstrate knowledge and skills to facilitate behaviour change. Empower and support a person with diabetes to achieve an individualised level of self-management and an agreed glycaemic target. Participate in educating people with diabetes, their carers and other HCPs in the identification, treatment and prevention of hyperglycaemia/hypoglycaemia. Support patients converting or commencing insulin to develop the management techniques within guidelines Refer patients to appropriate educational programmes as available. Recognise the importance of good glycaemic, blood pressure and cholesterol control in preventing and/or progressing diabetic complications: Screen for complications including sexual dysfunction in both men and women, according to local guidelines. Identify risk factors in the development of complications and refer as appropriate. 	 oral therapies. Investigate all incidents and report to the relevant agencies, develop an action plan to prevent recurrence. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.
Recognise when treatment needs to be adjusted		

	Competency Identification			
Subject Disease- Modifying Anti- Rheumatic Drugs (DMARDs) and rheumatoid arthritis (RA) and therapeutic monitoring	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have a basic understanding of the conditions which are treated by DMARDs. Be aware of the complications and associated co-morbidities risk factors associated with rheumatoid arthritis. Give flu and pneumococcal vaccine to patients with rheumatoid arthritis.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Image: Description of the common DMARDs drugs that are used to treat this Condition. Image: Reserve the Re	 Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Be familiar with the shared care guidelines for monitoring DMARDS. Use the shared care guidelines for monitoring the DMARDs therapies reviewing blood results and carrying out medication reviews. Carry out biannual osteoporosis risk assessments on all patients on the rheumatoid arthritis register. Use tool e.g. FRAX and refer or treat as appropriate. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making 	
			 recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

	Competency Identification			
Subject Ear care	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Display an understanding of the need for preventative care including patient education and advice. Have a working knowledge of anatomy and physiology of the ear. Advise and prepare patients for ear irrigation. Highlight presenting problem, previous problems, any history of surgery, perforations, tinnitus, pain in ear, cleft palate repaired or not, infections of middle ear within last 6 weeks or a mucoid discharge, which could contraindicate treatment. Use otoscope to examine both ears with patient's consent, recognise any abnormalities.	Impetency Identification Level 2 To demonstrate competency at this level the Practice Nurse is able to: Proactively provides good ear care patient education. Support junior nurse undertaking ear care. Independently manage minor ear problems and refer accordingly. Undertake ear toilet based on knowledge of the latest evidence based practice in relation to ear care. Recognise the specific needs of patients with hearing loss including provision of advice for patients on safe ear care in accordance with national guidelines.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Recognise abnormal ear conditions and refer appropriately. Assess and diagnose ear complaints exacerbated by excess wax production. Be aware of common ear conditions and signs of infection, treatment options including prescription medication. Initiate and lead management of ear care based on the latest evidence-based practice. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures	
	 Perform ear irrigation in line with practice protocol. Demonstrate safe and proficient use of aural care instruments for the removal of cerumen, ear toilet and irrigation. Examine ear following treatment and document outcome. Ensure the application of the principles of infection control according to national and local guidelines within the practice. 		 and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

	Competency Identification			
Subject End of life, palliative care and terminal illness	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Recognise and acknowledge cues from palliative care patients wanting to talk about concerns, wishes and priorities. Work within Advance Care Plans ensuring wishes are recorded and communicated. Recognise the signs and symptoms of pain and distress, and seek advice. Integrate working with District Nursing colleagues. Attend palliative care meetings within the practice.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Use enhanced communication skills that encompass being able to ask 'difficult' questions. Work with patients and carers to establish Advance Care Plans including preferred place of care and death. Assess holistically the dying patient with regard to pain and other symptoms. Anticipate and recognise the changing clinical status of the dying patient. Contribute to palliative care meetings within the practice. Liaise with and refer to social services.	 Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Act as a role model for effective communication, initiate and manage conversations with patients regarding their preferences at end of life. Manage challenging conversations with other professionals. Critically assess clinical situations, interpret complex information, and prioritise needs and co-ordinate appropriate nursing care, referring if necessary to specialist services. Input onto palliative care register and take the lead in multidisciplinary palliative care meetings. Verify an expected death in line with practice policies / procedures – available from http://www.dchs.nhs.uk/end-of-life-care. Ensure working policies and guidelines reflect local and national recommendations and remain un to date with 	
			 national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

	Competency Identification			
Subject Epilepsy	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have an understanding of what epilepsy is, possible causes, what happens in a seizure, and when to get medical help. Demonstrate the ability to assess seizure control, and document seizure descriptions. Assess adherence to therapy.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Explore and discuss reasons for non-adherence to therapy. Recognise risks associated with abrupt withdrawal. Refer onwards patients who are not adhering to therapy.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Have an understanding of anti-epileptic drugs (AED's) how they work, side effects, need for monitoring etc. Have an understanding of seizure types. Discuss contraception - have an understanding of how AED's affect contraceptive options provide advice on best	
	 Assess adherence to therapy. Recognise importance of therapy adherence refer as appropriate. Assess side-effects and refer as appropriate. Document driving and employment status. Discuss contraception, conception and pregnancy, if the patient is a woman of childbearing potential. 	 Liaise with epilepsy specialist nurses, to support adherence. Ensure patients are fully involved in decisions about their treatment. Be able to explore the balance between side effects and seizure control. Be aware of and able to discuss lifestyle implications: for example employment, education, personal safety, sport. 	 AED s affect contraceptive options provide advice on best methods for patients. Reinforce the importance of planned conception and refer to a specialist as required. Have an understanding of precipitating factors: e.g. alcohol, menstruation, photosensitivity, stress. Offer a seizure diary if appropriate. Be aware of NICE guidance on epilepsy. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

Competency Identification			
Subject	Core To demonstrate core competency the Practice Nurse is able to:		
Equality and Diversity	Be aware of the Practice Nurse responsibilities and comply with: Care Quality Commission Regulation 9 and Outcome 4 - People experience effective, safe and appropriate care, treatment and support that meet their needs and protect their rights. Comply with practice policies, helping to ensure they remain in line with local and national guidelines and the latest evidence-based practice. Know the demographics of the practice population and locality in order to actively promote equality and diversity in own work. Understand and implement with the patients, pratient's relatives and colleagues the latest guidelines issued by professional booles such as the NMC/2008, ("Code for Standards of Conduct, Performance and Ethics for Nurses and Midwives" www.mnc-uk.org/Documents/Standards/The-code-A4-20100406.pdf) - relevant areas might include: Ocnofied intality Cosent Ocnore the demographics of collar care and the provide standards of conduct, verformance and beliefs (the patient's and your own) The patient's right to make their own decisions Offferent cultures and ethnicity Identify with patients relevant social, cultural and religious factors which may influence or impact on care provision and take action when equality and diversity is undermined. Support these whose rights have been compromised consistent with legislation, policies and procedures and good and best practice. Support tolesques regarding the reporting of incidents. Ensure the application of anti-discriminatory practices within own sphere of responsibility. Signpost patients		

	Competency Identification			
Subject	Core To demonstrate core competency the Practice Nurse is able to:			
Equipment and stock management	Be aware of the Practice Nurse responsibilities and comply with: Care Quality Commission Regulation 16 and Outcome 11 - Where equipment is used, it is safe, available, comfortable and suitable for people's needs. Follow practice policies and protocols. Be aware of the Medicines and Healthcare Products Regulatory Agency (MHRA) http://www.mhra.gov.uk/#page=DynamicListMedicines Read and respond to GP practice related medical devices alerts and at appropriately in line with local policies and procedures. Alhere to the requirements of the Medicines Act, including safe storage, rotation and disposal of vaccines and drugs as appropriate to role. Oversee the management of all clinical stock including maintenance of emergency equipment in accordance with local and national guidelines. Maintain the systems necessary to ensure all health and safety requirements are met within the practice. Ensure cold chain, safe storage, vaccine stability, rotation and disposal of drugs. Oversee the monitoring, stock control and documentation of controlled drug usage according to legal requirements, as appropriate to role. Oversee the monitoring, stock control and documentation of controlled drug usage according to legal requirements, as appropriate to role.			

Competency Identification			
Subject	Core To demonstrate core competency the Practice Nurse is able to:		
Health and safety	 Be aware of the Practice Nurse responsibilities and comply with: Care Quality Commission Regulation 10 and Outcome 16 - People benefit from safe, quality care because effective decisions are made and because of the management of risks to people's health, welfare and safety and; Regulation 15 and Outcome 10 - People receive care in, work in or visit safe surroundings that promote their wellbeing and Regulation 9 and; Outcome 4 - People experience effective, safe and appropriate care, treatment and support that meet their needs and protects their rights. Show awareness of health and safety issues and actively promote good working processes clinical and non-clinical. Demonstrate safe behaviours and ways of working and support others to maintain own and others health, safety and security consistent with legislation, policies and procedures Use risk assessment to identify actual and potential risks and take appropriate action. Deal with emergency situations when appropriate, and use local guidelines to manage the emergency response and treatment for conditions including cardio pulmonary resuscitation (CPR). Have a working knowledge of health and safety requirements within the workplace, including fire procedures. Follow procedures to report any concerns identified. Identify, and if appropriate take action on the risks to health of microbiological and chemical hazards within the working environment according to COSHH regulations for the safe use of VDU screens and undertake a risk assessment. 		

	Competency Identification			
Subject	Core To demonstrate core competency the Practice Nurse is able to:			
Health promotion	 Make sure health promotion forms the basis of every consultation, make every contact count. Ensure there are clear guidelines within the working environment for the efficient and effective application of knowledge, skills, attitudes and values needed to plan, implement and evaluate health promotion. Assist in providing a tool for use in planning and deciding on professional development and training needs. Develop expert knowledge of health and its determinants. Analyse complex issues regarding how health is created and how health behaviours are brought about. Have excellent communication and negotiation skills. Provide a caring and empathetic approach. Be understanding, supportive and non-judgmental. Have the ability to focus on the needs and issues of individual people, their communities and cultures. Have the ability to focus on the needs and issues of individual people, their communities and suffices. Be able to reflect on their actions and motivations and think outside of conventional, safe ways of working. Champion ways of working based on evidence of effectiveness and also clear ethical principles. Commit to working consistently and in ways which involve people and encourage participation. Build capabilities and skills in others, in order for them to carry out health promotion themselves. 			

Competency Identification			
Subject Heart failure	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have a basic understanding of the pathophysiology of Heart Failure (HF). Be aware patients may have HF due to Left Ventricular Systolic Dysfunction or HF with preserved ejection fraction. Be aware of the NICE guidelines for caring for patients with stable chronic HF. Give lifestyle advice regarding diet, exercise, smoking, and alcohol to patients with HF. Know the signs of worsening HF. Know when to refer patient to another nurse or GP.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Run HF clinics for annual and/or 6 month reviews ensuring all regular monitoring including appropriate blood tests are carried out for patients with stable chronic HF. Educate patients in self-management of HF. Review medication. Be aware of facilities in Primary and Secondary care to support patients with HF. Refer to expert nurse, GP, or specialist Nurse led HF clinics where medication not optimised or patient's condition deteriorating. Refer for rehabilitation for HF where available.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage more complex patients with HF initiating increased vigilance in reviewing patients with deteriorating HF. Optimise pharmacological treatment for HF. Support self-management in patients with deteriorating HF or in need of palliative care for HF. Refer as necessary. Ensure working policies and guidelines reflect loca and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standarco operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

Competency Identification			
Subject Hypertension	 Level 1 To demonstrate competency at this level the Practice Nurse is able to: Perform a blood pressure (BPM) and document, act upon results and recognise where emergency referral is necessary, following local and national guidelines. Record a BP using manual/automatic devices and document according to practice protocols and national guidelines. Check current hypertension medication treatment and recognise when it is appropriate to refer/discuss the patient's BP with the appropriate clinician. Discuss lifestyle choices, interventions. Discuss possible causes of hypertension. Refer to suitable clinicians and lifestyle groups/services. Recall and monitor as required. 	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Perform a comprehensive hypertension review. Be aware of the process involved in the diagnosis of hypertension. Review current treatment hypertension medication and discuss options if required. Reinforce lifestyle and refer to appropriate groups/services to include smoking cessation, weight management, exercise and behaviour change programs. Recall and monitor as required. Interpret and act upon 24 BP monitoring results or refer as appropriate.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage complex patients and is proficient in hypertension management. Provide an organised, objective approach, holistic assessment and diagnosis in line with national and local protocols. Review current treatment medication and titrate, add in where appropriate in line with national and local protocol. Implement an action plan, recall and monitor as required. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary.
			 Refer to primary care team and secondary care when specialist advice is required. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

	Competency Identification			
- adult and child [(non travel) [Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have an understanding of the aims of immunisation national policy and schedules. Be aware of up to date UK immunisation schedule and know who to consult if there is any uncertainty about which vaccines are needed or timing of vaccines. Understand the different types of vaccines used and their composition plus current issues and controversies regarding immunisation. Give appropriate advice and information to the patient/parents, and explain the benefits of immunisation versus the risk of disease when required. Advise patients/parents on potential side effects and management of these. Ensure access to an on-line edition of Immunisation Against Infectious Diseases 2006 or an up to date copy of the relevant vaccine chapter prior to immunising. Understand the legal aspects of vaccination and can apply medico legal principles of informed consent. Demonstrate correct injection technique, uses recommended needle size and recommended vaccination site(s). Dispose of sharps, vaccine vials, unused vaccines and other vaccine equipment safely according to sharps policy. 	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Ensure PGDs/PSDs are in place and are appropriately authorised. Have an understanding of the conditions that may place children, young people and adults at greater risk of infectious diseases and which risk groups should be immunised as a matter of priority and what vaccines they will require. Ensure local protocols exist and are updated for cold chain audit and action to be taken in case of a cold chain incident. Contribute to the development of practice guidelines. Enable strategies for improving immunisation rates and dealing effectively with persistent non-attenders.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Demonstrate awareness of current issues in vaccination, and epidemiology of vaccine preventable diseases. Responsible for implementing national immunisation schedule and any ad hoc campaigns. Plan and develop training and methods of assessment in the local setting. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures, and patient surveys, making recommendations where necessary. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. Additional Resources: Your local Health Protection Agency NHS Immunisation Information www.immunisation.nhs.uk National Minimum Standards for Immunisation Training	

	Competency Identification		
Subject	Core To demonstrate core competency the Practice Nurse is able to:		
Infection control and cleanliness	Be aware of the Practice Nurse responsibilities and comply with: Comply with CQC Regulation 12 and Outcome 8 - People experience care in a clean environment, and are protected from acquiring infections. Be aware of the Department of Health and NICE guidance on cleanliness and infection control standards to include: • https://www.gov.uk/government/publications/the-health-and-social-care-act-2008 code-of-practice-on-the-prevention-and-control-of-infections-and-related-guidance • https://guidance.nice.org.uk/CG139 Follow practice policies and procedures and recognise own areas of responsibility in the following areas: • Hand washing • Clinical waste storage and disposal • Infection control and cleanliness		

Competency Identification		
Subject	Core To demonstrate core competency the Practice Nurse is able to:	
Leadership	 Demonstrate a leadership style that is effective within changing health care environment. Help create a culture that promotes quality healthcare and patient, colleague and own safety. Practise behaviours that demonstrate leadership. Be proactive by working with the GP practice team to develop and extend the best vision for the GP practice. Help to established systems for continuous GP practice improvement. Develop and maintain collaborative team working with internal GP practice team and external health and social care service colleagues. Undertake a global perspective or mind-set regarding healthcare and professional nursing issues. Cope effectively with change by proactively adopting local, regional and national policy and guidance. Be dedicated to lifelong learning. Be a reflective practitioner. Disseminate learning and information to other team members in order to share good practice and inform others about current and future developments (e.g. courses and conferences). Seek feedback about own performance through direct conversations and objective tools such as 360-degree reviews and annual appraisal. Promote evidence based practice. Contribute to the provision of learning opportunities for colleagues. Act as a mentor/coach for more junior staff (e.g. preregistration nurses or HCAs) if appropriately qualified, assessing competency against set standards as requested. Provide effective clinical leadership and act as a good role model at all times. Lead and or participate in research and to establish links with others in order to be aware of national development, which may affect local care provision. Demonstrate a commitment to the 6Cs: Care, Compassion, Communication, Competence, Commitment and Courage. 	

	Competency Identification			
Subject Learning disabilities	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Promote the autonomy, rights and choices of patients with learning disabilities and support and involve their families and carers, ensuring that each patient's rights are upheld according to policy and the law. Provide safe and effective care in partnership with patients and their carers within the context of age, conditions and developmental stage. Conduct a holistic person centred (In partnership with an individual, their carer and family) and systematic assessment of their physical,	Competency Identification Level 2 To demonstrate competency at this level the Practice Nurse is able to: Practice self-awareness that challenges own prejudices and enables professional relationships. Provide holistic care that demonstrates sensitivity to patients/clients/family/carers cultural traditions and beliefs. Be sensitive and empower patients to meet their own needs and make choices and considers with the person and their carer(s) their capability to care. Be confident to challenge inequality, discrimination and exclusion from access to care. Actively help patients to identify and use their strengths to achieve their goals and aspirations. Use own knowledge and skills to exercise	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Recognise and act to overcome barriers in developing effective relationships with patients and carers Understand the role and responsibilities of other health and social care professionals, and seek to work with them collaboratively for the benefit of all who need care. Work inter-professionally and autonomously as a means of achieving optimum outcomes for patients. Discuss sensitive issues in relation to public health and provides appropriate advice and guidance to individuals, communities and populations. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives.	
	 emotional, psychological, social, cultural and spiritual needs, including risk assessment and identification of the patients strengths and abilities. Use knowledge of dietary, physical, social and psychological factors to inform practice being aware of those that can contribute to poor diet, cause or be caused by ill health. Support patients to make appropriate choices and changes to eating patterns. Safeguard the safety of self and others by adhering to local and national policies. 	 professional advocacy, and recognise when it is appropriate to refer to independent advocacy services to safeguard dignity and human rights. Promote health and wellbeing, self-care and independence. Encourage patients and carers to make choices in coping with the effect of treatment. Uses appropriate strategies to empower and support patient choice. Actively consult and explore solutions and ideas with others to enhance care. Discuss sensitive issues in relation to public health and provide appropriate advice and guidance to patients for e.g. contraception, substance misuse, smoking, obesity. 	 Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

Subject	Level 1	Level 2	Level 3
	To demonstrate competency at this level the Practice Nurse is able to:	To demonstrate competency at this level the Practice Nurse is able to:	To demonstrate competency at this level the Practice Nurse is able to:
Management	 Plan, organise and implement the care for an individual and a group of patients in an efficient and effective way. Delegate work to others that is appropriate for their level of competence and monitor output. Share resources and information with colleagues. Be confident in own ability recognising strengths and areas for development. Think ahead and proactively forward plans. Be aware of local and national guidance related to the role and responsibility. Ensure effective communication with patients and colleagues. Complete a professional development plan. Act in accordance with the NHS Constitution. 	 Continually review role and responsibilities and practice, ensuring continuous quality improvement. Manage the team on the day to day operational delivery of the service. Delegate specific tasks and roles with full briefing, identifying accountability and responsibility. Gather, collate and analyse information and disseminate appropriately and effectively. Work effectively with the team and Practice Manager to set outcomes for the service and in their area of responsibility. Coordinate and support professional development plans for the team. Support the Practice Manager and/or the GPs with specific outcomes. Reflect on actions and decisions goals and priorities within the context of the service objectives. 	 Continually review role and practice, ensuring continuous quality improvement. Manage key areas of governance as determined by the practice. Initiate professional development to ensure fitness for practice. Act as a coach/mentor/teacher to others in clinical and managerial situations (as defined by the NMC). Communicate effectively when managing the team. Participate in a supervision programme; provide supervision to others as required by the practice. Manage service delivery from a medium to long term perspective. Manage on larger areas of work and performance manages outcomes. Ensure effective systems are in place to disseminate/cascade relevant information to clinical staff in liaison with practice management. Look ahead to plan future service delivery; consider population need, staffing resources and skill mix. Encourage and support others to take decisions autonomously and ensure that nursing professional and practice needs. Set demanding but achievable objectives for self and others. Delegate specific tasks and roles with full briefing, identifying accountability and responsibility. Agree plans and outcomes by which to measure success. Critically evaluate and review innovations and developments that are relevant to own area of work and the team. Keep up to date with new developments locally and nationally identifying those that will enhance your team work. Influence other team members to undertake trials of changes in care delivery. Participate in the recruitment of new members of the nursing team.

	Competency Identification			
Subject Mental health	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Be familiar with the Mental Capacity Act 2005 http://www.legislation.gov.uk/ukpga/2005/9/contents and have an understanding of the legal aspects of consent to treatment and capacity. Be familiar with local and national guidelines	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Identify patients within routine consultations who may have undiagnosed depressions or symptoms of stress and refer on as appropriate. Be aware of the risk factors and recognise early signs of MH problems.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Provide an opportunity for patients to share emotional and psychological issues within consultations. Support the management of patients with a diagnosed MH condition. Manage and support other Practice Nurses consulting	
	 for safe guarding adults and children. Know who the practice leads are for child and adult safeguarding. Recognise the importance of caring for the physical health of patients with Mental Health (MH) disorders including behavioural conditions. Carry out annual health assessments for patients with ongoing MH disorders. Give healthy lifestyle advice to patients with MH disorders referring as appropriate for healthy lifestyle support and interventions. Demonstrate an awareness of substance misuse and addictive behaviours. Make an initial assessment and refer as necessary. Identify where patients are at significant risk e.g. suicide risk. 	 Have a basic understanding of the management of such conditions as depression, general anxiety disorders, suicide awareness, self-harm, bipolar disorder, post-partrum affective disorders, schizophrenia, dementia, substance abuse, and eating disorders. Make an assessment of the need for therapy and monitoring and refer as appropriate. 	 with vulnerable patients. Develop and maintain links with outside agencies to ensure best practice is in place for vulnerable groups. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g.: clinical guidelines, audits, standard operating procedures (sop) and patient surveys; making recommendations where necessary. Ensure that a quality assured service is provided. Contributes to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

	Co	mpetency Identification	
Subject Minor illness	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Make a simple assessment of a patient presenting to the practice and refer to appropriate workstream i.e. minor illness nurse/NP/GP urgent/routine. Be aware of 'red flags' which may indicate serious/emergency conditions, and know how to deal with patients who present at the surgery with these.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Undertake face to face and telephone triage within the practice, dealing with those with simple self-limiting conditions and directing other patients to the most appropriate pathway within the practice. Undertake an assessment of a patient presenting with a minor illness e.g. sore throat, using local protocols.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Undertake physical examination and health assessment of more complex presentations. To formulate a diagnosis and provide treatment/medicines/advice autonomously. Refer to other primary or secondary care services where needed. Undertake the role of independent prescriber. Ensure working policies and guidelines reflect loca
	Be able to recognise serious life threatening presentations and initiate emergency procedures/treatment e.g. deal with anaphylaxis/cardiac arrest.	 Provide medications directly or indirectly working within local or national guidelines, using PGDs or prescribing. Give information and advice regarding prescribed and over the counter medicines, side effects and interactions. 	 and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures, and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

	Competency Identification			
Subject Minor injury	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Make an initial assessment of a patient with a minor injury, referring to others if beyond own competence to manage. Recognise any life threatening presentation and initiate emergency procedures if needed. Undertake simple wound cleansing and dressing. Assess a head injury, refer on if needed or give home care advice with safety netting. Advise on over the counter analgesia. Apply principles of appropriate safeguarding to all presentations of minor injury. 	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Undertake simple wound closure using steristrips/glue. Undertake assessment of limb injuries using recognised guidelines e.g. Ottawa rules. Ensure supply of appropriate analgesia by either PGD or prescribing. Undertake simple procedures e.g. removal of foreign bodies from skin.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Undertake wound closure by suturing. Refer directly for X-ray imaging if fracture is suspected. Prescribe full range of analgesia that may be required. Assess and manage or refer as appropriate finger injuries. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance	
			 framework e.g. clinical guidelines, audits, standard operating procedures, and patien surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 	

	Competency Identification			
Subject Osteoporosis	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Have an understanding of the physiological process involved in the development of osteoporosis. Be aware of factors which increase the risks for developing osteoporosis. Be aware of health promotion and appropriate lifestyle advice to help in the prevention of osteoporosis. 	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Be aware of NICE guidance on primary prevention TA 160 and secondary prevention of osteoporosis TA161. Assess and support concordance with therapies. Make an assessment using an appropriate tool to identify risk and refer as necessary.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Refer at risk patients for screening for osteoporosis as appropriate in line with NICE guidance for primary prevention. Refer diagnosed and at risk patients for treatment for secondary prevention. Understand the treatment guidelines and use of Bisphosphonates and be aware of the specific instructions for taking these medications and their side effects profile. Commence prophylaxis for primary prevention in	
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	Competency Identification			
Subject Prescribing and medicines management	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Be aware of the Practice Nurse responsibilities in relation to medicines management and comply with: Care Quality Commission Regulation 13 and Outcome 9 – People have their medicines when they need them, and in a safe way. Use PGDs and PSDs according to practice protocols Identify drug side effects, contraindications and interactions Discuss medication regimes with patients and verify concordance. Appropriately signpost to and liaise with pharmacists within or outside the team.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Be aware of prescribing cost effectiveness, and work within local guidance. Have up to date knowledge of current therapeutic guidelines, recommendations and changes within local policies via updates from MMT. Navigate and utilise the BNF, eBNF and local formularies.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Have successfully completed the non-medical prescribing course. Adhere to the principles identified in the NPCs Competency framework. Be responsible for maintaining professional development. Adhere to own responsibilities. Ensure working policies and guidelines reflect loca and national recommendations and remain up to date with local initiatives. Will ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary.	

	Competency Identification
Subject	CORE To demonstrate core competency the Practice Nurse is able to:
Reflective practice	Fulfil responsibility under the NMC Prep standards to think and reflect on learning activities and how these have influenced practice http://www.nmc:uk.org/locuments/Standards/NMC Prephandbook 2011.pdf Be aware of different models of reflection. Document as per the NMC Prep Standards learning actives and reflections on own learning. Use different models of reflection on a regular basis to reflect on practice to learn from and improve one's own practice and patient care. Use reflection not only to resolve incongruites between practice and own beliefs when encountering problems or difficulties but also when things have gone well to facilitate the recognition and affirmation of own competence. Use reflection not and teach others about the models and benefits of reflective practice. Personally use reflective practice to empower and transform own practice to empower and transform own practice to a set of reflective practice. Personally use reflective practice to empower and transform own practice and to improve patient care.

	Competency Identification			
Subject	Core			
	To demonstrate core competency the Practice Nurse is able to:			
Safeguarding -				
adults and	Be aware of the Practice Nurse responsibilities and comply with: Care Quality Commissioning Regulation 11 and Outcome 7 - People are safeguarded from abuse, or the risk of abuse, and their human rights are respected and			
children	upheld.			
	Be aware of the legal and professional issues regarding safeguarding adults and children including statutory health procedures and local guidance.			
	Follow local guidance and policies.			
	Recognise, observe, document and refer in cases of abuse as appropriate and is able to discuss the importance of this action.			
	 Recognise and take appropriate action in response to domestic violence. Ensure safe effective systems are implemented regarding safeguarding vulnerable groups and the reporting of abuse. 			
	 Report immediately to the adult and children safeguarding lead in the practice any concerns, issues or worries. 			
	 Record all information as appropriate. 			
	Share information with other professional bodies acting in the best interest of the adult and the child.			
	Demonstrate an understanding of the NMC safeguarding guidance http://www.nmc-uk.org/Nurses-and-midwives/Regulation-in-practice/Safeguarding-New/			

	Competency Identification				
Subject Spirometry	Level 1 To demonstrate competency at this level the Practice Nurse is able to: Identify when spirometry testing is appropriate based on clinical history taking and physical examination and make necessary referral for the procedure. Identify own training needs and the needs of others, and what action to take if standards are not met.	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Identify own professional accountability and responsibility for maintaining competence in spirometry. Demonstrate knowledge of spirometry, its use and contribution to patient care, including knowledge of equipment and when to calibrate.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Analyse and interpret the results of a spirometry test, and report accordingly. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives.		
		 Understand background and rationale for the test. Assess and identify indications and/or contraindications to procedure. Able to identify appropriate time and situation to perform spirometry. Identify when not appropriate to continue with spirometry test. Be aware of who to communicate results of test to and referral onwards. Identify issues around infection control, and general health and safety, and what appropriate action to take. Knowledge of decontamination processes. 	 Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures, and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education. 		

Competency Identification				
Tissue viability and wound care Have a basic Be aware of appropriater formularies a Undertake u wound care. Assess the w appropriate. Incorporate managemen Have a basic Recognise w refer as nece	Level 1 e competency at this level the Practice Nurse is able to: cunderstanding of the wound healing process. the necessary wound care products and their ness for each wound, using local wound care as guidance. uncomplicated dressings to include post op yound, determining follow up care where health promotion interventions in the to f wounds. cunderstanding of leg ulcers and their it and is able to discuss with appropriate when a wound is non-healing, and investigate or	Ency Identification Level 2 To demonstrate competency at this level the Practice Nurse is able to: Have a comprehensive understanding of wound care and tissue preservation. Critically examine wound care products to include cost effective practice. Manage the care of complex wounds, to include minor surgery, referring when appropriate. Be capable of educating patients in lifestyle management to promote healing. 	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs. Have an in depth knowledge of leg ulcer management and the application of compression therapy to include bandages and stockings. Perform Doppler assessment and calculate readings to assess circulation and refer when appropriate. Make independent clinical judgements and decisions. Provide direct patient access to specialist services for undifferentiated patients within a locality population. Provide diagnostic, health screening, health surveillance and therapeutic interventions within a broader health promotion/public health context. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures, and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.	

able to: this level the Practice Nurse is able to: Travel health and vaccination Demonstrate good geographical knowledge and know how to access further information regarding global destinations including use of an up-to-date atlas and accessing online Support and educate other team members in the process of risk assessment.	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs.
and vaccination to access further information regarding global destinations including use of an up-to-date atlas and accessing online process of risk assessment.	Manage patients with more complex needs.
recognised databases such as Nathnac and TRAVAX. Advise travellers on more complex health issues. For example, emergency standby malaria medication, post-example, emergency standby malaria medication, post-exposure prophylaxis following blood-borne virus exposure prophylaxis Interpret the risk assessment and accesses the latest recommendations for travel health advice, immunisations required and malaria chemoprophylaxis appropriate to the risk assessment for the journey. Advise travellers on more complex health issues. For example, emergency standby malaria medication, post-exposure prophylaxis Recognise complex issues beyond personal scope and knows who to contact for further information, support and advice. Provide specialist advice to travellers with more complex itinearies that may also require the prescription, prevention and the importance of adequate travel insurance, safe food, water and personal hygiene protective measures prevention of blood-borne and sexually transmitted diseases, general insect bite prevention, prevention of animal bites particularly rabies including wound management, prevention of sun and heat complications, personal safety and security, malaria-awareness, bite prevention, appropriate chemoprophylaxis and the importance of compliance and symptoms of malaria to quickly diagnose and treat a traveller with the disease and other travel-related risks, vaccine recommendations and malaria prevention advice appropriate to the risk assessment.	 Work independently to make clinical judgements and decisions. Oversee effective implementation of protocols and make recommendations. Advise travellers with complex travel and special needs e.g. the pregnant traveller, the traveller with diabetes, immunosuppression, cardiac or respiratory disease, those who have experienced previous severe adverse reactions to a vaccine. Meet the standards required for administration of yellow fever vaccine and complies with national regulations as a Yellow Fever Vaccination Centre. Use expert knowledge to inform protocol development anguide others in this process. Participate in the revision and updating of established PGDs/PSDs or standing orders. Use international databases to ensure awareness of global issues in travel health. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services.

Prioritico appropriatoly in cituations where a patient's time	care team, providing ongoing training and oducation
Prioritise appropriately in situations where a patient's time or financial situation does not allow the aptimum	care team, providing ongoing training and education.
or financial situation does not allow the optimum	
recommendations.	
Assesse anxieties, especially to vaccination, and acts	
appropriately.	
Attend annual update on anaphylaxis and CPR training.	
Understand the issues of informed consent and acts	
 accordingly.	
Administer injections as appropriate according to local	
guidelines and policies.	
Demonstrate involvement in the financial governance of	
travel including vaccine administration, and antimalarials	
e.g. which vaccines are provided privately and their cost,	
and which vaccines are reimbursable under the NHS.	
Demonstrate knowledge of the common travel related	
illnesses for example, travellers' diarrhoea, hepatitis A,	
hepatitis B, typhoid, malaria and dengue fever (consider	
MMR, flu and pneumococcal disease in relation to travel)	
and other travel-related hazards.	

Competency Identification			
Subject	Core		
	To demonstrate core competency the Practice Nurse is able to:		
Treating people			
with dignity and	Be aware of the Practice Nurse responsibilities and comply with:		
respect	Care Quality Commissioning Regulation 17 and Outcome 1 - People understand the care and treatment choices available to them.		
•	Ensure patients can express their views and are involved in making decisions about their care.		
	Ensure patients have their privacy, dignity and independence respected, and have their views and experiences taken into account in the way in which the service is delivered.		
	Act in accordance the 6Cs principle values: Care, Compassion, Communication, Competence, Commitment and Courage.		
	Act in accordance with the NHS Constitution.		
	Ensure adherence to local chaperoning policies.		
	Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives.		

Competency Identification			
Subject Venepuncture	Level 1 To demonstrate competency at this level the Practice Nurse is able to:	Level 2 To demonstrate competency at this level the Practice Nurse is able to: Provide a portfolio of evidence	Level 3 To demonstrate competency at this level the Practice Nurse is able to: Manage patients with more complex needs.
	 physiology of capillaries, veins, arteries and nerves. Have knowledge of devices and equipment for capillary blood sampling and venepuncture and their use. Handle sharps, injuries and sharp disposal in line with local protocols and best practice. Ensure appropriate consent is gained recognising where capacity to consent is limited Adhere to local policies such as health and safety and procedures for capillary blood sampling and venepuncture. Discuss the legal and professional issues associated with performing capillary blood sampling and venepuncture. Outline current evidence to support best practice in capillary blood sampling and venepuncture. 	 showing skills, experience and development in venepuncture supported by supervisors. Undertake a formal examination (objective structured clinical examination) in order to practise competently. Perform venepuncture independently. Require a period of preceptorship in order to consolidate the venepuncture competency. Offer support to those undertaking venepuncture training. 	 Be aware of the need to utilise practice assessors and possibly working towards this criteria for assessing staff new to venepuncture. (An assessor should be experienced in capillary blood sampling and venepuncture). Be responsible for all HCAs performing venepuncture. Assess the competency of nurses new to venepuncture. Ensure working policies and guidelines reflect local and national recommendations and remain up to date with local initiatives. Ensure that a quality assured service is provided. Contribute to development of governance framework e.g. clinical guidelines, audits, standard operating procedures and patient surveys, making recommendations where necessary. Provide a link/liaison role between primary care and specialist services. Act as a mentor and educator for members of the primary care team, providing ongoing training and education.

The Practice Nurse Competency Development Plan

Introduction

Practice Nurse training, education, and development plays a key part in improving the quality of care and services provided by GP practices. The Practice Nurse Competency Development Plan (CDP) has been designed to support Practice Nurses, GPs, and Practice Managers identify training and development needs for the Practice Nurse that are aligned to the maintenance and the development of **safe**, **effective**, **caring**, **responsive and well-led** GP services and care.

It is recommended that the CDP to be used alongside The Practice Nurse Competency Framework (PNCF©).

Additional benefits of using the Practice Nurse Competency Development Plan (CDP) are:

- Enable Practice Nurses to identify the competency level they are aiming to work towards in line with The Practice Nurse Competency Framework (PNCF©).
- > Identify training and development needs in line with the PNCF[©].
- Assist GPs and Practice Managers in identifying areas that need improvement in the GP practice.
- > Assist Practice Nurses with their NMC PREP requirements.
- > Demonstrate Practice Nurse development and career progression.
- > Aid the Practice Nurse annual performance review/appraisal.

The CDP is not a wish list but rather a process of individual development that fits in with the GP practice development plan and the needs of the patient population, identifying what you need to achieve the different levels of Practice Nurse competencies. The CDP provides a structure to support Practice Nurses to provide **safe, effective, caring, responsive and well-led** GP services and care.

Prior to the appraisal, Practice Nurses should aim to draft a CDP. At the appraisal, the appraiser will discuss the content with the Practice Nurses in formulating their development needs before agreeing the final version. The development of your CDP should be a central part of the appraisal process.

The 'study leave' entitlement needs to be agreed with the employer and Manager.

The Practice Nurse Competency Development Plan (CDP)

Name:

Indicate the level (either 1,	Indicate the training needs	Indicate the process and	Provisional date to meet	Date when competency	Indicate the service
2 or 3) that you are both		method to achieve the	the competency level	level was achieved	improvement as a result of
currently working on and		competency level (e.g. in			achieving the competence
towards		house/external training)			level
		and the funding stream			