

Guideline			
Title: Clinical Competence of Registered Professionals (Non-medical) in Torbay and South Devon NHS Foundation Trust Guideline			
Ref No: 1803			
Version: 3			
Document Author:	Clinical Skills Facilitator	Date	21 June 2017
Ratified by:	Care and Clinical Policies Group	Date:	21 June 2017
Review date:	21 July 2020		
Links to policies: 1716: Supervision, Accountability and Delegation of Activities to Skilled Not Registered (SNR) Staff 1192: Clinical Skills Multidisciplinary Passport Policy to Support Assessment in Practice TSDFT Clinical Skills Standard Operating Procedures (SOPs) TSDFT Clinical Skills Assessment Documents TSDFT Social Care Capability Frameworks			

1. Purpose of this document:

- 1.1. This document has been produced to support the clinical practice of Registered Professionals within Torbay and South Devon NHS Foundation Trust (TSDFT) with regard to the safe implementation of clinical procedures. It is underpinned by appropriate training and competency based assessment.
- 1.2. The information and standards should support and promote:
 - ® Nursing and Midwifery Council (**NMC**) *Code* (2015)
 - ® Health and Care Professions Council (**HCPC**) *Standards of conduct, performance and ethics* (2016)
 - ® Nursing and Midwifery Council *Standards for competence for Registered Nurses* (2014)
 - ® Health and Care Professions Council (**HCPC**) *Standards of Proficiency: Social Workers in England* (2017)
 - ® Other profession-specific competency frameworks
 - ® Evidence-based clinical practice
 - ® Continuity of assessment and patient management across the Trust between individual practitioners
 - ® Effective communication
 - ® Clinical decision making

1.3. This guideline applies to all Registered Professionals employed by TSDFT

1.4. In this document, the term *clinical skill* is used to cover all the skills needed by nurses, therapists, psychologists and other AHPs.

2. Background:

- ® The nature of care delivery is evolving in line with the NHS Five Year Forward View into Action (2015, P.32, Para 8.3) which recognises “ the need to develop an effective local workforce strategy; introduce new and extended roles; enhance the skills of existing staff; and build an engaged, satisfied and healthy workforce” .
- ® TSDFT is moving towards a new model of care. As a result, Registered Professionals are now working across boundaries and having to learn and become competent in new clinical skills.
- ® The Nursing and Midwifery Council (NMC) uses competence to describe skills and ability to practice safely and effectively without the need for supervision (Dolan 2003).
- ® It has also been defined as: “The state of having the knowledge, judgement, skills, energy, experience and motivation required to respond adequately to the demands of one’s professional responsibilities” (Roach, 1992).

3. Responsibilities:

3.1. **Registrants with the NMC** are required to uphold and act in line with the NMC Code (2015) by prioritising people; practicing effectively, preserving safety; and promoting professionalism and trust. They must:

- ® Have the knowledge and skills for safe and effective practice when working without direct supervision (section 6.2)
- ® Recognise and work within the limits of their competence (section 13)
- ® Complete the necessary training before carrying out a new role (section 13.5)
- ® Keep their knowledge and skills up to date, taking part in appropriate and regular learning and professional development activities that aim to develop their competence and improve their performance (section 22.3)
- ® Nurses must maintain the standards for competence throughout their careers to remain on the register (NMC Standards of Competence for Registered Nurses, updated: 2015)

3.2. **Registrants with the HCPC** are required to meet the Standards of Conduct, Performance and Ethics (2016). They must:

- ® Work within the limits of their knowledge and skills (section 3)
- ® Keep within their scope of practice by only practising in the areas that they have appropriate knowledge, skills and experience for (section 3.1)
- ® Maintain and develop their knowledge and skills through:
 - Keeping their knowledge and skills up to date and relevant to their scope of practice through continuing professional development (section 3.3)
 - Keeping up to date with and following the law, our guidance and other requirements relevant to their practice (section 3.4).
 - Asking for feedback and use it to improve their practice (section 3.5)

- 3.3. **Managers:** All team managers should maintain a record of the Registered Professional's training and competency, and this should be discussed at their annual appraisal, or earlier if there are any concerns regarding their practice. It is the managers responsibility to ensure that Registered Professional's with the appropriate skills for their caseload, are on each shift where possible, or identify where they can access other staff who have the necessary skills to perform the clinical tasks required.
- 3.4. **NHS Trusts** are required by the Department of Health (2013, p.3) to ensure staff have access to "effective and high quality education and training" . They also recognise that Registered Professional's need the right skills, values and competencies to deliver both excellent clinical outcomes together with patient-centred care.

4. TSDFT Clinical Skills Training:

- 4.1. All courses provided are developed according to evidence based local, national and specialist guidance.
- 4.2. A variety of clinical skills courses can be booked via [The Hive](#). Details, programmes and booking forms can be found via links on the Trust intranet and weekly bulletin.
- 4.3. BUZZ videos and e-learning courses can be accessed via [The Hive](#). These can also be used for updating practice.
- 4.4. **Professionals learning a new clinical skill for the first time, should attend a practical training course** with the Clinical Skills Facilitators, Specialist Nurses/Practitioners or Clinical Supervisor/Clinical Mentor, following which, they will be provided with an assessment document.

5. Assessment of Competence:

- 5.1. The experienced Registered Professional undertaking clinical skills assessments, must be competent and up to date with their own training and clinical practice to be eligible to assess and sign off the competency of another. They should also offer support and on-going assessment if required in line with the TSDFT delegation policy.
- 5.2. Registered Professionals undertaking new skills should be assessed at least twice in practice to ensure their competence. If the assessor or the assessee feel more practice is required, further assessments or re-training are recommended prior to the assessee undertaking unsupervised practice.
- 5.3. TSDFT competency documents are developed by the trainers using resources from the relevant policies, guidelines and training programmes, and can be accessed via the [Trust intranet](#) or directly from the trainers.
- 5.4. [TSDFT Social Care Capability Frameworks](#) are also accessible via the trust intranet
- 5.5. Completed competence assessments should be retained by the practitioner as evidence for appraisal and revalidation. Managers may also want to retain a copy for that Professional's personal records.

5.6. All Registered Professionals are accountable for maintaining their own competency: if at any point they or their manager feel they are no longer competent or confident to perform a clinical skill, they should access one or more of the training options provided by TSDFT or, where necessary, another approved provider.

6. References:

- ® Department of Health (2013): Delivering high quality, effective, compassionate care: Developing the right people with the right skills and the right values; London : Williams Lea
- ® Health and Care Professions Council (2017) Standards of proficiency: Social Workers in England [on-line] Accessed from: <http://www.hcpc-uk.org.uk/assets/documents/10003B08Standardsofproficiency-SocialworkersinEngland.pdf> [Accessed 22/05/2017]
- ® Health and Care Professions Council (2016) Standards of Conduct, Performance and Ethics [on-line] Accessed from: <http://www.hcpc-uk.org/publications/standards/index.asp?id=38> [Accessed 10/04/2017]
- ® NHS (2015); Five Year Forward View into Action; NHS England Publications; Gateway Number: 02768
- ® Nursing & Midwifery Council (2015); THE CODE: Professional Standards of practice and Behaviour for Nurses and Midwives [on-line]. Accessed from: <https://www.nmc.org.uk/standards/code/read-the-code-online/> [Accessed 10/02/2017]
- ® Nursing & Midwifery Council (2014) Standards of Competence for Registered Nurses [on-line]. Accessed from: <https://www.nmc.org.uk/standards/additional-standards/standards-for-competence-for-registered-nurses/> [Accessed 10/02/2017]
- ® Royal College of Nursing (2016) Principles of Nursing Practice [on-line]. Accessed from: <https://www.rcn.org.uk/professional-development/principles-of-nursing-practice>. [Accessed 09/02/2017]
- ® Royal College of Nursing (2016) Principles of Nursing Practice - films [on-line]. Accessed from <https://www.rcn.org.uk/professional-development/principles-of-nursing-practice/principles-of-nursing-practice-films>. [Accessed 09/02/2017]
- ® Skills for Health (2017) Core Skills Training Framework [on-line]. Accessed from: <https://tools.skillsforhealth.org.uk/> [Accessed 09/02/2017]

Amendment History

Issue	Status	Date	Reason for Change	Authorised
1	New Document	July 2012	New Document	Professional practice
2	Version 2	July 2014	2 year review	Professional practice
3	Ratified	21 July 2017	Revised	Care and Clinical Polcies Group
3		20 February 2018	Review date extended from 2 years to 3 years	

The Mental Capacity Act 2005

The Mental Capacity Act provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. It covers a wide range of decision making from health and welfare decisions to finance and property decisions

Enshrined in the Mental Capacity Act is the principle that people must be assumed to have capacity unless it is established that they do not. This is an important aspect of law that all health and social care practitioners must implement when proposing to undertake any act in connection with care and treatment that requires consent. In circumstances where there is an element of doubt about a person's ability to make a decision due to 'an impairment of or disturbance in the functioning of the mind or brain' the practitioner must implement the Mental Capacity Act.

The legal framework provided by the Mental Capacity Act 2005 is supported by a Code of Practice, which provides guidance and information about how the Act works in practice. The Code of Practice has statutory force which means that health and social care practitioners have a legal duty to have regard to it when working with or caring for adults who may lack capacity to make decisions for themselves.

“The Act is intended to assist and support people who may lack capacity and to discourage anyone who is involved in caring for someone who lacks capacity from being overly restrictive or controlling. It aims to balance an individual's right to make decisions for themselves with their right to be protected from harm if they lack the capacity to make decisions to protect themselves”. (3)

All Trust workers can access the Code of Practice, Mental Capacity Act 2005 Policy, Mental Capacity Act 2005 Practice Guidance, information booklets and all assessment, checklists and Independent Mental Capacity Advocate referral forms on iCare

http://icare/Operations/mental_capacity_act/Pages/default.aspx

Infection Control

All staff will have access to Infection Control Policies and comply with the standards within them in the work place. All staff will attend Infection Control Training annually as part of their mandatory training programme.

Rapid (E)quality Impact Assessment (EqIA) (for use when writing policies)

Policy Title:	Clinical Competence of Registered Professionals in TSDFT	Version and Date	V3. June 2017
Policy Author			
An (e) quality impact assessment is a process designed to ensure that policies do not discriminate or disadvantage people whilst advancing equality. Consider the nature and extent of the impact, not the number of people affected.			
Who may be affected by this document?			
Patients/ Service Users	<input checked="" type="checkbox"/>	Staff	<input checked="" type="checkbox"/>
Other, please state...			<input type="checkbox"/>
Could the policy treat people from protected groups less favorably than the general population? <i>PLEASE NOTE: Any 'Yes' answers may trigger a full EIA and must be referred to the equality leads below</i>			
Age	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Gender Reassignment	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Race	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Disability	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Gender	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Pregnancy/Maternity	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
		Sexual Orientation	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
		Religion/Belief (non)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
		Marriage/ Civil Partnership	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is it likely that the policy could affect particular 'Inclusion Health' groups less favorably than the general population? (substance misuse; teenage mums; carers ¹ ; travellers ² ; homeless ³ ; convictions; social isolation ⁴ ; refugees)			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Please provide details for each protected group where you have indicated 'Yes'.			
VISION AND VALUES: Policies must aim to remove unintentional barriers and promote inclusion			
Is inclusive language ⁵ used throughout?			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Are the services outlined in the policy fully accessible ⁶ ?			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Does the policy encourage individualised and person-centered care?			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Could there be an adverse impact on an individual's independence or autonomy ⁷ ?			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA <input type="checkbox"/>
EXTERNAL FACTORS			
Is the policy a result of national legislation which cannot be modified in any way?			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
What is the reason for writing this policy? (Is it a result in a change of legislation/ national research?)			
Re-written to reflect changes in legislation, Nursing Practice Nationally and RN practices within the ICO			
Who was consulted when drafting this policy?			
Patients/ Service Users	<input type="checkbox"/>	Trade Unions	<input type="checkbox"/>
Staff	<input checked="" type="checkbox"/>	Protected Groups (including Trust Equality Groups)	<input type="checkbox"/>
General Public	<input type="checkbox"/>	Other, please state...	<input type="checkbox"/>
What were the recommendations/suggestions?			
Waiting feedback from consultation			
Does this document require a service redesign or substantial amendments to an existing process? <i>PLEASE NOTE: 'Yes' may trigger a full EIA, please refer to the equality leads below</i>			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
ACTION PLAN: Please list all actions identified to address any impacts			
Action	Person responsible	Completion date	
AUTHORISATION:			
By signing below, I confirm that the named person responsible above is aware of the actions assigned to them			
Name of person completing the form	Clinical Skills Facilitator	Signature	
Validated by (line manager)	Deputy Director of Nursing	Signature	

Please contact the Equalities team for guidance:

For South Devon & Torbay CCG, please call 01803 652476 or email marisa.cockfield@nhs.net

For Torbay and South Devon NHS Trusts, please call 01803 656676 or email pdf.sdht@nhs.net

This form should be published with the policy and a signed copy sent to your relevant organisation.