



Paediatric Nursing Preceptorship Programme

NURSE PORTFOLIO: PART 2

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Paediatric Nursing Preceptorship Programme

Portfolio: Part 2

Name

NMC number

Workplace

Preceptor

Preceptor NMC number

Buddy

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Definitions

Buddy	an individual, identified by the preceptee, who helps support and identify learning opportunities for the preceptee. They do not hold responsibility for signing off any competencies or preceptorship paperwork
Child or Young Person (CYP)	an individual below the age of 18 years
Human Factors	the environmental, organisational and individual characteristics that influence health and safety and impact upon care delivery
Lead Nurse Educator for Preceptorship	an individual who possess ultimate responsibility to facilitate the deliverance of the regional preceptorship programme through identifying and working with members of the wider healthcare team to meet the needs of the preceptee and national recommendations
Local Nurse Educator	a nurse who is employed by your Trust to oversee and deliver education and training to all nursing staff
New registrant	an individual whose name is held on a section of the NMC register for the first time
Preceptee	an individual who is newly qualified in their registration point on the NMC register and are within their preceptorship period
Preceptor	an individual, identified by the employer, who possesses the responsibility for supporting, identifying learning opportunities and for signing off any competencies for the preceptees
Preceptorship	a period of time agreed by their employer in which new registrants are guided and supported to build on clinical skills and knowledge that help their transition from student to registered practitioner
Statutory and Mandatory training	training that is determined necessary by law or an organisation to ensure that employees have the knowledge to maintain a healthy and safe working environment
Supernumerary	allocated time in which an individual is not counted in the nursing numbers. The duration of supernumerary may vary according to individual needs
SWOT	a structured approach that uses the acronym for helping individuals to identify the strengths, weaknesses, opportunities, and threats that may impact upon the outcome of planned change
SNOB	a structured approach that uses the acronym for strengths, needs, opportunities, and barriers that may impact upon achieving and supporting the developmental needs of an individual
Wessex	an area on the South coast of the United Kingdom that extends between Hampshire, Dorset and Wiltshire and includes healthcare teams in Basingstoke, Chichester, Dorchester, Isle of Wight, Poole, Portsmouth, Salisbury, Southampton and Winchester
Wider healthcare team	any individual who is employed within child health services to deliver care to children and young people in the region

SECTION 1

PRECEPTOR / PRECEPTEE MEETING

Section 1: Preceptor/Preceptee Meeting

Meeting 2

Date:

Items discussed:

Actions:

Signature of preceptor:

Signature of preceptee:

Meeting 3

Date:

Items discussed:

Actions:

Signature of preceptor:

Signature of preceptee:

Section 1: Preceptor/Preceptee Meeting

Meeting 4

Date:

Items discussed:

Actions:

Signature of preceptor:

Signature of preceptee:

Meeting 5

Date:

Items discussed:

Actions:

Signature of preceptor:

Signature of preceptee:

Section 1: Preceptor/Preceptee Meeting

Meeting 6 (final meeting)

Date:

Items discussed:

Actions:

Signature of preceptor:

Signature of preceptee:

Section 1: Preceptor/Preceptee Meeting

Additional Meeting

Date:

Items discussed:

Actions:

Signature of preceptor:

Signature of preceptee:

Additional Meeting

Date:

Items discussed:

Actions:

Signature of preceptor:

Signature of preceptee:

SECTION 2

INDIVIDUAL LEARNING NEEDS ANALYSIS

Section 2: Individual Learning Needs Analysis: Month 6

Date:

Comments from preceptor:

Comments from preceptee:

Strengths:

What do you do well? What are you confident about?

Needs:

What would you like to do better?

	Essential			Desirable	
	1	2	3	4	5
1.					
2.					
3.					

Opportunities:

Are there any learning opportunities available? What is happening in your part of the profession?

Barriers:

What barriers might stop you from taking the opportunities and developing and how can you overcome them?

Section 2: Individual Learning Needs Analysis: Month 12

Date:

Comments from preceptor:

Comments from preceptee:

Strengths:

What do you do well? What are you confident about?

Opportunities:

Are there any learning opportunities available? What is happening in your part of the profession?

Needs:

What would you like to do better?

	Essential			Desirable	
	1	2	3	4	5
1.					
2.					
3.					

Barriers:

What barriers might stop you from taking the opportunities and developing and how can you overcome them?

SECTION 3

CORE COMPETENCIES AND SKILLS

Adaptation from:

- Department of Health NHS KSF framework (2004)
- RCN Core Competences for nursing children and young people (2012)
- Competences: An education and training framework for paediatric dermatological nursing (RCN 2012)
- Competences: an integrated career and competency framework for children's endocrine nurse specialists (RCN 2013)
- Competences: A competence framework for orthopaedic and trauma practitioners (RCN 2013)
- Competences: Palliative care for children and young people (RCN 2012)
- NMC Standards for Competence (2014)
- Children and young people's cardiac nursing (RCN 2014)
- Career and education framework for cancer nurse (RCN 2017)
- NMC Standards for Competence (2014)

Section 3: Core Competencies and Skills

C1: Communication Communicate with a range of people on a range of matters				
Level 1	Level 2	Level 3	Level 4	Level 5
✓ Works in partnership with other professionals and agencies, sharing information to facilitate coordinated packages of care and support for CYP/family. Recognises role as an advocate (and with supervision) and acts as an advocate to ensure all needs are met	✓ Works in partnership with individuals, groups, communities and agencies, sharing information to facilitates coordinated packages of care and support for CYP/family, establishing and maintaining advocate role to ensure all needs are met	<input type="checkbox"/> Develops and sustains partnership-working with individuals, groups, communities and agencies, sharing information and contributing to coordinated packages of care and support for CYP/family. Undertakes advocate role to ensure complex needs are identified and met	<input type="checkbox"/> Develops, sustains and evaluates partnership-working with individuals, groups, communities and agencies, identifying options and actions for coordinated packages of care and support for CYP/family and undertakes advocate role to ensure difficult and complex care needs are recognised and met	<input type="checkbox"/> Enables individuals, groups, communities and agencies to work effectively in partnership, leading and establishing agreed mechanisms for instigating coordinated packages of care and support for CYP/family and supervises colleagues to act as advocates
Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:
date:	date:	date:	date:	Date:
Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:
date:	date:	date:	date:	Date:

Section 3: Core Competencies and Skills

C2: Personal and Professional Development				
Develop own skills and knowledge and provide information to others to help their development				
Level 1	Level 2	Level 3	Level 4	Level 5
<p>✓ Reinforces information provided to the CYP/ family and student nurses supporting their learning of skills and knowledge and can identify poor practice but seeks support from other professionals to address it</p>	<p>✓ Contributes to the teaching of skills and knowledge to the CYP/family and student nurses, recognising poor practice/care and providing feedback to improve this</p>	<p><input type="checkbox"/> Provides teaching sessions for CYP/family, students and junior staff, recognising instances of poor practice and provides appropriate feedback to improve care. Undertakes role of buddy or preceptor for preceptee</p>	<p><input type="checkbox"/> Leads training sessions for individual/groups of CYP/family, student nurses and colleagues in clinical and academic settings. Supports others to recognise poor practice and to provide feedback to improve care. Supports buddy/preceptor.</p>	<p><input type="checkbox"/> Designs and implements training programmes on a variety of topics for groups of CPY/family and staff. Designs and implements strategies to identify and improve practice and supports staff to undertake buddy/preceptor role</p>
<p>✓ Meets care needs of allocated patients with support from senior colleagues , recognising where delegation of tasks is required and can reinforce information and supports for students learning basic skills</p>	<p>✓ Meets care needs of allocated patients with minimal support from senior colleagues appropriately delegating simple roles to colleagues. Contributes to student and junior staff teaching</p>	<p><input type="checkbox"/> Delivers care to allocated patients and supports colleagues in their patient care as require, appropriately delegating specialised roles to colleagues. Delivers teaching to individual students or colleagues in clinical setting</p>	<p><input type="checkbox"/> Delivers care to allocated patients and monitors and recognises when to support colleagues to meet their patient care needs, aiding them to delegating appropriately. Leads training sessions for groups of staff and students in clinical practice and academic settings</p>	<p><input type="checkbox"/> Leads on the development of strategies to enable patient needs to be recognised and met and designs and implements systems/ strategies that support appropriately delegation of nursing roles. Designs and implements training programmes on a variety of topics to address education needs across staff groups</p>
Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:
date:	date:	date:	date:	date:
Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:
date:	date:	date:	date:	date:

Section 3: Core Competencies and Skills

C4: Service Improvement Make changes in own practice and offer suggestions for improving services				
Level 1	Level 2	Level 3	Level 4	Level 5
✓ With support, gathers information that identifies and highlights elements of practice that require improvement and provides opinions on service improvement	✓ With support, adapts practice using policies, procedures and evidence-based research following identification of a solution to elements of practice that require improvement	<input type="checkbox"/> Interprets and analyses evidence-based research from a variety of sources to underpin decision-making and supports others to identify and adapt practice accordingly	<input type="checkbox"/> Initiates the use of processes that maximize knowledge and information management to underpin clinical decision-making and encourages colleagues to identify and implement appropriate changes	<input type="checkbox"/> Develops and implements processes that underpin effective knowledge and clinical decision-making, and engages with wider groups encourage others to monitor and improve practice appropriately
Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:
date:	date:	date:	date:	date:
Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:
date:	date:	date:	date:	date:

Section 3: Core Competencies and Skills

C5: Quality Maintain quality in own work and encourage others to do so				
Level 1	Level 2	Level 3	Level 4	Level 5
✓ Ensures own actions help to maintain quality of care and service provided and complies with local, regional and national legislation and guidance. Recognises personal limits of competence, reporting problems and seeking support appropriately	✓ Ensures own actions promote quality and alerts others to quality issues, working consistently in line with local, regional and national legislation and guidance. Recognises personal limitations and prioritises workload to reduce risks to quality of care delivered.	<input type="checkbox"/> Contributes to quality improvement, raising quality issues and related risks with relevant people, supporting introduction and maintenance of quality systems and processes in own area. Prioritises and evaluates wider workload of nursing team, to reduce risks to quality of care delivered, taking appropriate action when there are persistent quality problems	<input type="checkbox"/> Acts as a role model in quality improvement, monitoring activities against quality standards and contributes to local legislation and guidance. Prioritises and evaluates workload of local team to identify and reduce risks affecting quality and care delivered.	<input type="checkbox"/> Leads and implement practices, policies and strategies to improve quality, ensuring systems are in place to monitor against quality standards and actively promotes quality in all areas of work, working in own team and as part of whole organisation. Initiates the introduction and maintenance of quality and governance systems for organisation.
Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:
date:	date:	date:	date:	date:
Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:
date:	date:	date:	date:	date:

Section 3: Core Competencies and Skills

HWB2: Assessment and care planning to meet health and wellbeing needs Assess health and wellbeing needs and develop, monitor and review care plans to meet specific needs				
Level 1	Level 2	Level 3	Level 4	Level 5
✓ Assesses, plans, delivers, evaluates records and explains care with and to the CYP/family (under supervision). They identify and address clear goals, and risks of health related problems/needs whilst remaining aware of legislation, policy and respects the dignity, wishes and beliefs of the CYP	✓ With <i>minimal</i> supervision, works with CYP/family to assess, plan, evaluate and record patient care that addresses needs and any risks of health; following legislation, policy and procedures. Communicates clearly benefits and risks of care planned to the patients, respecting dignity, wishes and beliefs of the CYP	<input type="checkbox"/> Assesses, plans, delivers, evaluates and records complex care needs in conjunction with the CYP/family and available resources. Always identifies clear goals, stakeholder involvement and risks and adjusts basic care accordingly and always respecting individual beliefs, values and dignity.	<input type="checkbox"/> Clearly communicates and documents the assessment, plan, delivery and evaluation of various complex health related needs of CYP/family. Adjusts care to accommodate complex patient needs and stakeholder involvement and risks. Uses autonomous decision making.	<input type="checkbox"/> Leads and develops practice to meet specific health related problems/needs of individual children and young people across a diverse range of care needs; adjusting care to meet complex needs. Leads on the development and coordination of care plan delivery in relation to wider service planning
Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:
date:	date:	date:	date:	date:
Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:
date:	date:	date:	date:	date:

Section 3: Core Competencies and Skills

HWB5: Provision of Care to Meet Health and Wellbeing Needs				
Plan, deliver and evaluate care to meet people's health and wellbeing needs				
Level 1	Level 2	Level 3	Level 4	Level 5
<p>✓ Discusses individual care plans and health and wellbeing needs with care team and family. Understands own role in meeting patient needs and offers information on health promotion that encourages self care and (with support) supports the CYP/family to cope with changes in their wellbeing.</p>	<p>✓ Identifies with care team, CYP and family members specific care goals, including involvement of professionals. Uses evidence-based practice and guidelines to deliver consistent, appropriate care; including health promotion. Participates in supporting distressed parents and families, referring to members of the MDT</p>	<p>☐ Identifies with care team, CYP/family specific goals, involvement of professional. Uses evidence-based practice and guidelines to meet complex care needs, including potential risks and opportunities for health promotion. Prepares CYP/family for deterioration in health status, referring to members of the MDT</p>	<p>☐ Supports junior colleagues to identify with care team and CYP/family specific goals (including opportunities for health promotion), that would manage potential risks to wellbeing and care. Helps develop policies and support structures for distressed/bereaved parents and families, liaising with members of the MDT</p>	<p>☐ Contributes to wider service planning in relation to identifying appropriate care delivery and health promotion opportunities. Leads the development and implementation of policies and support structures for distressed, bereaved parents and families, liaising with members of the MDT</p>
<p>✓ Undertakes and records delegated tasks consistently and promptly alerts relevant individuals when changes in health and wellbeing or possible risks are identified</p>	<p>✓ Undertakes and evaluates effectiveness of care that is consistent with evidence-based practice and clinical guidelines. Takes appropriate action to address any issues/risks identified</p>	<p>☐ Delivers and evaluates care relating to complex patient needs consistent with evidence-based practice and clinical guidelines. Evaluations clinical effectiveness of care as it is delivered</p>	<p>☐ Supports colleagues and contributes to wider service planning to meet patient needs. Modifies care and takes action to address changing need/reactions. Evaluates effectiveness of all care</p>	<p>☐ Evaluates effectiveness of complex treatments. Uses knowledge and experience to influence wider service planning, the development of clinical guidelines and modifies care in accordance with unexpected reactions</p>
Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:
date:	date:	date:	date:	date:
Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:
date:	date:	date:	date:	date:

Section 3: Core Competencies and Skills

HWB7: Interventions and Treatments Plan, deliver and evaluate interventions and/or treatments				
Level 1	Level 2	Level 3	Level 4	Level 5
✓ Identifies potential or actual mental health problems and refers to more experienced practitioners as required to address specific interventions required	✓ Identifies potential or actual mental health problems, initiates plans of care to promote safety and emotional wellbeing and refers to more experienced practitioners as required	<input type="checkbox"/> Provides one to one counselling to individual CYP experiencing potential and actual mental health problems and refers to more experienced practitioners as required	<input type="checkbox"/> Provides one to one counselling to individual CYP experiencing mental health problems and liaises with members of the MDT and refers to specialist practitioners for specialist intervention as required	<input type="checkbox"/> Develops, implement and evaluates strategies for CYP experiencing mental health problems and promotes safety and emotional wellbeing
✓ Assists in monitoring and protecting CYP with support from others	✓ Monitors and contributes to protecting CYP at risk, providing children who have been abused with support from others	<input type="checkbox"/> Promotes a culture to safeguard CYP, providing support to CYP that have been abused	<input type="checkbox"/> Protects CYP at risk and contributes to developments in practice, supporting individuals where abuse has been disclosed	<input type="checkbox"/> Leads and develops strategies in practice to protect and safeguard CYP
Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:
date:	date:	date:	date:	date:
Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:
date:	date:	date:	date:	date:

Section 3: Core Competencies and Skills

G6: People Management				
Supervise people's work				
Level 1	Level 2	Level 3	Level 4	Level 5
<p>✓ Supports individuals to review personal patient care</p>	<p>✓ Provides individuals with clear feedback and opportunity to assess own activities in relation to patient care; including supporting the achievement of objectives set in appraisal</p>	<p><input type="checkbox"/> Contributes to the recruitment of the team according to team and organisational needs. Provides support to colleagues during appraisals to meet objectives and provides constructive feedback</p>	<p><input type="checkbox"/> Contributes to the development of workforce requirements to meet team and organisational strategies and vision. Provides constructive feedback and opportunities that encourage commitment and enthusiasm to develop</p>	<p><input type="checkbox"/> Develops, implements and monitors processes for recruitment and people management that follows organisational strategies and vision taking in to account current and future constraints and opportunities</p>
<p>✓ Recognises instances of poor performance and how to seek support in escalating this appropriately</p>	<p>✓ Understands how to escalate/report poor performance following legislation, guidance and policies</p>	<p><input type="checkbox"/> Contributes to decisions made in relation to courses of action implemented to address practice related issues</p>	<p><input type="checkbox"/> Delegates authority to individuals and monitors them against required outcomes, providing appropriate support and to address agreed practice-related improvements</p>	<p><input type="checkbox"/> Delivers support to individuals that allows improvement in their knowledge and understanding of people management and managing poor performance</p>
Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:	Preceptee signature:
date:	date:	date:	date:	date:
Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:	Preceptor signature:
date:	date:	date:	date:	date:

Section 3: Core Competencies and Skills

Airway						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Can undertake pulse oximetry and the rationale for rotating site of probe	✓			C3;C5; HWB5		
Can appropriately use equipment and patient positioning to maintain the patients airway	✓			C3;C5; HWB7		
How to recognise a partially obstructed and obstructed airway and take appropriate action	✓			C1;C3;C5; HWB5; HWB7		
Use appropriate suction technique to clear oral secretions (including identifying the appropriate sized catheter)	✓			C3;C5; HWB5		
Use appropriate suction technique to clear nasal secretions (including identifying the appropriate sized catheter)	✓			C3;C5; HWB5		
Understands the rationale for administering inhaled or nebulised medications	✓			C3;C5; HWB7		
Understand the rationale for the altered physiology of: <ul style="list-style-type: none"> - Asthma/wheeze - Bronchiolitis 	✓			C2;C5		
Can demonstrate care required by the patient with a Tracheostomy, including: <ul style="list-style-type: none"> - Recognise need for suctioning - Demonstrate appropriate suction technique through Tracheostomy (including identifying correct catheter size and suction depth) - Change of Tracheostomy tapes - Care of Tracheostomy site (cleaning and applying dressing, creams etc) - Change of Tracheostomy 			✓	C3;C5; HWB2; HWB5; HWB7		

Section 3: Core Competencies and Skills

Breathing						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Has an understanding of basic respiratory physiology and has completed associated diagram	✓			C3;C5; HWB7		
Understands the pathophysiology that leads to changes in respiratory effort, efficacy and chest movements and escalates any changes appropriately	✓			C2;C5		
Understands the pathophysiology that cause increased respiratory noises – grunting, wheeze, stridor and escalates any changes appropriately	✓			C2;C5		
Understand the rationale for the altered physiology of: <ul style="list-style-type: none"> - Croup - Pneumonia 	✓			C2;C5		
Can identify when you would need to use an appropriately sized rebreathe respiratory mask	✓			C3;C5; HWB5		
Can identify when you would need to use an appropriately sized non-rebreathe respiratory mask	✓			C3;C5; HWB5		
Can identify need for, and demonstrate appropriate use of Bag Valve Mask (BVM)		✓		C3;C5; HWB5		
Can identify need for, and apply appropriate size nasal cannulae	✓			C3;C5; HWB5		
Demonstrates safe administration of inhaled medications and awareness of clinical implications for administration (including side effects)		✓		C3;C5; HWB7		
Demonstrates safe administration of nebulised medications and awareness of clinical implications for administration (including side effects)		✓		C3;C5; HWB7		
Perform nasopharyngeal aspiration (NPA) for sampling		✓		C3;C5; HWB5		
Identify need for high flow oxygen delivery (e.g. optiflow/airvo) and identify colleagues who can competently deliver this		✓		C3;C5; HWB2; HWB7		
Provide care to the patient receiving high flow oxygen (e.g. optiflow/airvo) including the documentation of oxygen, flow and humidification temperatures delivered			✓	C3;C5; HWB5; HWB7		
Can perform an accurate peak flow measurement in a stable CYP			✓	C3;C5; HWB5		

Section 3: Core Competencies and Skills

Cardiac & Circulation						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Has an understanding of basic cardiovascular physiology and has completed associated diagram	✓			C3;C5; HWB7		
Can discuss the importance and rationale for blood glucose sampling may be required for certain conditions, including; <ul style="list-style-type: none"> - Diabetes or suspected diabetes - Suspected hypoglycaemia from reduced oral intake - Suspected sepsis or an unwell infant 	✓			C3;C5; HWB5; HWB7		
Are able to locate the nearest defibrillator and perform operational and safety checks	✓			C3;C5; HWB2		
Are able to apply defibrillator pads appropriately and connect leads	✓			C3;C5; HWB5		
Understand the rationale for blood transfusions (both red blood cells and platelets)		✓		C3;C5; HWB2		
Can recognise the signs and symptoms of a transfusion reaction		✓		C3;C5; HWB2		
Understands the management strategies that must be followed to treat any transfusion reactions		✓		C3;C5; HWB2		
Can identify when an ECG recording would be clinically indicated or useful			✓	C3;C5; HWB5		
Can identify who to contact if concerned an ECG is abnormal			✓	C3;C5;		
Can apply 3 lead ECG monitoring correctly			✓	C3;C5		
Understand the difference between group & save and cross-match sampling			✓	C3;C5		
Follow Trust policy in obtaining blood samples and understands the rationale of the safety elements involved			✓	C3;C5		
Understand the rationale for how patient blood groups (ABO) and Rh status are matched with transfused blood components			✓	C3;C5		
Can administer blood components (red blood cells and platelets) as authorised/prescribed and per Trust guidelines			✓	C3;C5; HWB5		
Understands the cause of shock and the appropriate treatment pathways			✓	C2;C3;C5		
Can discuss and identify when blood gas sampling may be required			✓	C3;C5; HWB2		
Can recognise the deterioration of a cyanotic child and the associated initial management			✓	C3;C5; HWB2		

Section 3: Core Competencies and Skills

Gastrointestinal Needs / Nutrition						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Can explain the anatomy and function of the normal gastrointestinal system (including completion of associate diagram)	✓			C2;C5		
Can discuss the pathophysiology of identify common conditions that can lead to abnormalities in the gastrointestinal system	✓			C2;C5; HWB2		
Can locate and have read Trust and national guidelines for enteral feeding	✓			C2;C3;C5; HWB2		
Can identify reasons why a CYP would need enteral feeding - to include conditions and treatments associated with requiring nutritional support	✓			C2;C3;C5; HWB2; HWB7		
Can describe the route of the NG tube and the ideal position of the tube tip and the clinical implications of incorrect NG placement	✓			C2;C5		
Can appropriately insert and check NG position (including identifying correct equipment. how to check placement and secure the tube)	✓			C3;C5; HWB5; HWB7		
Can demonstrate safe NG tube use – including positioning of patient, how and when to check tube placement and how to troubleshoot when placement cannot be confirmed or tube becomes blocked	✓			C3;C5; HWB5; HWB7		
Inspect the facial skin of patients with NG tubes for any signs of soreness or irritation	✓			C3;C5; HWB5		
Understands clinical indications for the insertion of a gastrostomy tube – including the difference of a PEG and button tube	✓			C2;C3;C5; HWB2		
Can appropriately prepare, administer and dispose of prescribed enteral feeds via gravity feeding set	✓			C3;C5; HWB5;		
Can appropriately prepare, administer and dispose of prescribed enteral feeds via pump and correct feeding set	✓			C3;C5; HWB5		
Can describe care of gastrostomy enteral feeding tubes – including how to clean, rotate and troubleshoot any issues regarding the tube (to include pain, bleeding/oozing from site, over granulation and blocked tubes)		✓		C3;C5; HWB5; HWB7		
Can identify common conditions that can cause bowel dysfunction		✓		C2;C3;C5; HWB2		
Can identify how to monitor bowel dysfunction and the main management of constipation or diarrhoea		✓		C2;C3;C5; HWB2		
Can describe what a stoma is and the common conditions and treatments that can lead to a formation of a stoma			✓	C2;C3;C5; HWB2		

Section 3: Core Competencies and Skills

Gastrointestinal Needs / Nutrition						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Can explain the two main types of stoma that can be formed and the differences between them			✓	C3;C5;		
Can identify clinical conditions a CYP may require Total Parenteral Nutrition (TPN)			✓	C2;C3;C5		
Can safely check and administer TPN according to Trust guidance			✓	C2;C3;C5; HWB5; HWB7		

Neurological						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Understand the rationale for using AVPU and can undertake an assessment of their patient using this scale	✓			C3;C5; HWB2		
Understand what seizures are (including common types of seizures)	✓			C3;C5; HWB2		
Can identify common triggers for seizures and the local management of seizures	✓			C3;C5; HWB2		
Can appropriately identify the CYP with altered neurological status and describe the appropriate management of abnormal findings		✓		C3;C5; HWB2		
Are aware of how to manage a CYP experiencing seizures according to local policy; to include escalation, medication and documentation required			✓	C1; C3; C5;HWB7		

Section 3: Core Competencies and Skills

Pain						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Understand the role and structure of the nervous system (including the completion of system diagram)	✓			C3;C5; HWB2		
Can describe different types of pain and the clinical factors that influence them	✓			C3;C5; HWB2		
Can identify common analgesics prescribed for pain relief in clinical area	✓			C5; HWB2		
Can identify specific observational or nursing care needs of the patient with pain and/or receiving analgesia e.g. pain chart/scoring system		✓		C3;C5; HWB2		
Can identify and use specific documentation (tools) that should be used for patients experiencing pain/receiving analgesia		✓		C3;C5; HWB6		
Can recognise a CYP experiencing withdrawal of or overdose of analgesia and how to manage this – including use of withdrawal charts/scoring system			✓	C3;C5; HWB2; HWB7		

Skin & Bone						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Understand the anatomy and physiology of skin (including the completion of the diagram)	✓			C2;C5; HWB2		
Understand the pathophysiology of common childhood dermatological conditions (eczema, cellulitis and urticaria)	✓			C2;C5; HWB2		
Understand the implications of compromised skin integrity and specialist team members that can be contacted to help manage concerns	✓			C2; HWB2		
Can identify documentation and tools used for monitoring skin integrity	✓			C1;C3;C5; HWB6		
Understand treatment strategies used to manage common dermatological conditions (eczema, cellulitis and urticaria)		✓		C2; HWB2		
Understand the reasons for using pressure relieving devices and treatments used for pressure sores		✓		C2; HWB2		

Section 3: Core Competencies and Skills

Skin & Bone						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Demonstrate and can explain the need for regular turning, monitoring elimination and pain when caring for an immobilised patient	✓			C2;C5; HWB5		
Understand the structure of the musculoskeletal system (including the completion of the diagrams)		✓		C2;C5; HWB2		
Can explain what distal, proximal and midshaft factures are		✓		C2;C5		
Can explain what compartment syndrome is and how it is managed		✓		C2;C5		
Can conduct a full neurovascular assessment and understand reasons for abnormal findings (escalating appropriately): <ul style="list-style-type: none"> - Pain - Colour of limb and extremities - Temperature of limb and extremities - Pulses – knows where these are found - Sensation - Movement – passive or active 		✓		C1;C3;C5		
Can recognise early warning signs that necessitate the unplanned and immediate removal of a cast; including who to contact to split a cast		✓		C2;C5; HWB5		
Can identify and explain the causes of the following common orthopaedic conditions; including the signs and symptoms and management: <ul style="list-style-type: none"> - Fractures - Hip dysplasia - Septic arthritis 			✓	C2;C5; HWB2		
Can explain what a Thomas splint is and when it used						
Understand why common management strategies for common musculoskeletal injuries (including traction, slings and POP)			✓	C2;C5; HWB2		
Can identify common mobility aids and where to access these locally			✓	C2;C5; HWB2		

Section 3: Core Competencies and Skills

Surgical						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Demonstrate appropriate pre-operative checks, including frequency of observations and appropriate preparation for the CYP and family	✓			C3;C5; HWB2; HWB6		
Understand the health and safety risks of delivering and collecting patient to and from theatre and identifies specific equipment and documentation that will ensure the patient remains safe	✓			C3;C5; HWB6		
Demonstrates appropriate post-operative care, including the recognition of the frequency of observations, pain management, education needs of the CYP and appropriate escalation pathway in the event of changes to condition	✓			C3;C5; HWB2; HWB6		
Understand what VTE is and identify the CYP who is most at risk of this	✓			C2;C5; HWB2		
Understand the prevention strategies for VTE in the CYP	✓			C2;C5;		
Understand the prevention strategies for the CYP with a VTE	✓			C2;C5		
Understands the rationale for early mobilisation post-operatively	✓			C2;C5; HWB2		
Understands the principles of wound care – to include frequency of wound site check, clean and redress wound and the risks associated		✓		C2;C3;C5; HWB5; HWB6		
Can identify the reasons a CYP may require a chest drain and the implications this will have (including safety issues)		✓		C2;C3;C5		

Renal						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Has an understanding of basic renal physiology and has completed associated diagram	✓			C3;C5; HWB7		
Can explain what Acute Kidney Injury (AKI) is and patients at risk of AKI	✓			C2;C3; C5		
Can identify pre-renal factors that cause AKI in the CYP	✓			C2;C3;C5; HWB2		

Section 3: Core Competencies and Skills

Renal						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Can identify post-renal factors that can cause AKI in the CPY	✓			C2;C3;C5; HWB2		
Accurately records patient fluid input and output on a fluid balance chart and calculate the patients fluid balance correctly	✓			C1;C3;C5; HWB5; HWB7		
Can accurately calculate a urine output in ml/kg/hour and its relevance to renal function	✓			C2;C3; C5		
Recognise the importance of calculating urine output in mls/kg/hr and understands the normal range	✓			C2;C3;C5; HWB2		
Appropriately identify a frequency in which a patients fluid balance should be measured and calculated	✓			C1;C3;C5; HWB5; HWB7		
Can identify situations in which a urine sample is required and can appropriately obtain urine sample for laboratory testing	✓			C2;C3;C5; HWB2		
Can undertake urinalysis testing in clinical area, interpret and document the results and highlight any abnormalities or concerns to the appropriate staff members	✓			C2;C3;C5; HWB5		

Endocrine						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Can explain what the endocrine system is (including labelling the associated diagram)	✓			C2		
Can describe the role of the endocrine system in maintaining growth, sexual function, mood and metabolism	✓			C2		
Can describe what diabetes mellitus is	✓			C2; HWB2		
Can describe the common signs and symptoms of diabetes mellitus	✓			C2; HWB2		
Can safely perform a blood glucose level using appropriate equipment	✓			C2;C3;C5; HWB2		
Can identify the normal ranges of blood glucose levels and how to escalate variations outside of the norm	✓			C2; HWB2		

Section 3: Core Competencies and Skills

Endocrine						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Can describe the difference between diabetes type 1 and type 2	✓			C2; HWB2		
Can explain appropriate treatment strategies for type 1 diabetes	✓			C2; HWB5		
Can explain appropriate treatment strategies for type 2 diabetes	✓			C2; HWB5		
Can explain what DKA is		✓		C2		
Are able to describe the treatment for high blood glucose levels (hyperglycaemia)		✓		C2;HWB5		
Are able to describe the treatment for low blood glucose levels (hypoglycaemia)		✓		C2;HWB5		
Can explain what the HbA1c is and its importance in diabetes management			✓	C2;C3; HWB2		

Oncology care skills						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Can describe what childhood cancer is	✓			C3;C2;C5; HWB5		
Can identify appropriate sources of written information for oncology CYP and family		✓		C3;C2;C5; HWB2		
Can describe what neutropenia is		✓		C3;C5;		
Can identify what febrile neutropenia is and the associated management strategies		✓		C3;C5; HWB5		
Can identify common physical side effects of chemotherapy and their impact on the CYP/family		✓		C3;C5; HWB2; HWB5		
Can identify common psychological side effects of chemotherapy and their impact on the CYP/family		✓		C3;C5; HWB2; HWB5		
Can identify the social and economical impact childhood cancer has and the resources available to manage these		✓		C3;C5; HWB2;		

Section 3: Core Competencies and Skills

Oncology care skills						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Can identify how to escalate any questions or concerns regarding an oncology CYP appropriately		✓		C3;C5; HWB5		
Are aware of tools available to triage the needs of the oncology CYP/family over the telephone			✓	C3;C5; HWB5		

Palliative care skills						
The preceptee has demonstrates that they:	0-3 months	3-6 months	6-12 months	KSF point	Achieved (sign) Preceptee/Preceptor	Date
Understand what palliative care means and can describe patient groups often involved		✓		C1;C3;C2; C5; HWB2		
Can identify personal responsible for meeting physical palliative care needs (locally and regionally)		✓		C1;C3;C2; C5; HWB7		
Can identify personal responsible for meeting psychological palliative care needs (locally and regionally)		✓		C1;C2;C3; C5; HWB7		
Understand what an Advanced Care Plan (ACP) is and how this is used to guide care of the CYP			✓	C1;C2;C3; C5; HWB7		
Understand what a Symptom Management Plan (SMP) is and how this is used to guide care of the CYP			✓	C1;C2;C3; C5; HWB7		
Have an awareness of the processes that must be followed when a child dies			✓	C3;C5; HWB2; HWB7		

SECTION 4: COMPETENCY REFLECTIONS

Adapted from:

- Department of Health NHS KSF framework (2004)
- RCN Core Competences for nursing children and young people (2012)
- NMC Standards for Competence (2014)

Section 4: Competency Reflections

Reflection 1: Care of the Acutely Unwell Child or Young Person

Learning Outcome:

The preceptee will be able to demonstrate knowledge and understanding of how to recognise and manage an acutely unwell child or young person in their clinical area.

The preceptee will be able to demonstrate knowledge and understanding through achieving the following actions:

1. Has completed mandatory resuscitation training
2. Demonstrates understanding on the importance of maintaining safe clinical environment through daily checking and cleaning of patient bed space
3. Demonstrates a good understanding of the pathophysiology of the child or young person's underlying condition and, through comparing this to normal pathophysiology, identifies why their condition has led to an acute episode of care
4. Demonstrates knowledge of the resuscitation trolley and is able to carry out routine checks on all resuscitation equipment
5. Demonstrates the use of the ABCDE approach to assess the unwell child or young person
6. Appropriately changes patient care when a child or young person begins to deteriorate
7. Demonstrates appropriate level of urgency when escalating concerns of unwell child or young person to appropriate team members; including knowledge of how to fast bleep and contact resuscitation team and the use of SBAR
8. Discusses and demonstrates understanding of the importance of documenting changes in the child or young person's condition in a timely manner; using tools such as PEWS
9. Demonstrates understanding roles undertaken (including own) when care team are managing a deteriorating patient
10. Demonstrates understanding of how to discharge patient following acute care episode; including the use of appropriate communication and documentation
11. Identifies sources of appropriate supportive evidenced-based information and services that can be used when a child or young person becomes acutely unwell
12. Produces clear and accurate documentation in line with Trust policy

Preceptor:

I confirm that has demonstrated the above competency to a level

SIGNED.....DATE.....

Preceptee:

I confirm that I have met the above competency at the level agreed with my preceptor. I will continue to practice and develop myself and others in area of patient care.

SIGNED.....DATE.....

Section 4: Competency Reflections

Reflection 1: Care of the Acutely Unwell Child or Young Person

Reflection: Care of the Acutely Unwell Child or Young Person

Learning Actions:

Review Date:

Preceptor/ Supervisor Comments:

Signature:

Date:

Section 4: Competency Reflections

Reflection 2: Care of the Chronically Unwell Child or Young Person

Learning Outcome:

The preceptee will be able to demonstrate knowledge and understanding of how to deliver safe and appropriate care to a chronically unwell child or young person in their clinical area.

The preceptee will be able to demonstrate knowledge and understanding through achieving the following actions:

1. Demonstrates understanding on the importance of maintaining safe clinical environment through daily checking and cleaning of patient bed space including the presence of and function of any specialist equipment
2. Undertakes training for any specialist equipment necessary for delivering care to the child or young person and demonstrates competence in using the equipment, including how to troubleshoot when required
3. Demonstrates a good understanding of the pathophysiology of the child or young person's underlying condition and, through comparing this to normal pathophysiology, identifies why their condition requires care as planned
4. Demonstrates the use of appropriate and agreed care plans to identify needs of the chronically child or young person
5. Appropriately changes patient care to meet needs of the child or young person according to care plan
6. Demonstrates appropriate level of urgency when escalating concerns or changes in the child or young person's health to appropriate team members
7. Discusses and demonstrates understanding of the importance of documenting changes in the child or young person's condition in a timely manner
8. Demonstrates understanding different roles of care team (including own) involved in meeting needs of the chronically unwell child or young person
9. Demonstrates appropriate delivery of support and education to the child or young person and family members to understand condition and to safely undertake agreed elements of care
10. Clearly communicates patient needs and changes to care to appropriate care team members; including those outside of the hospital or clinical setting
11. Demonstrates understanding of how to discharge patient following chronic care episode; including the use of appropriate communication and documentation
12. Produces clear and accurate documentation in line with Trust policy

Preceptor:

I confirm that has demonstrated the above competency to a level

SIGNED.....DATE.....

Preceptee:

I confirm that I have met the above competency at the level agreed with my preceptor. I will continue to practice and develop myself and others in area of patient care.

SIGNED.....DATE.....

Section 4: Competency Reflections

Reflection 2: Care of the Chronically Unwell Child or Young Person

Reflection: Care of the Chronically Unwell Child or Young Person

Learning Actions:

Review Date:

Preceptor/ Supervisor Comments:

Signature:

Date:

Section 4: Competency Reflections

Reflection 3: Mental Health

Learning Outcome:

The preceptee will be able to demonstrate knowledge and understanding of how to recognise and support patients in their clinical area who have mental health needs

The preceptee will be able to demonstrate knowledge and understanding through achieving the following actions:

1. Demonstrates understanding the differing mental health needs of the child or young person and their family
2. Demonstrates ability to identify causes of any changes to an individual's mental health
3. Demonstrates appropriate support and education to the child or young person and their family with mental health needs
4. Demonstrates understanding different roles of care team (including own) involved in caring for the child or young person and their family with mental health needs
5. Identifies appropriate documentation and resources that will support care
6. Clearly communicates patient needs and changes to care to appropriate care team members; including those outside of the hospital or clinical setting
7. Discusses and demonstrates understanding of the importance of documenting changes in the child or young person's care needs in a timely manner
8. Demonstrates understanding of how to discharge patient following mental health care episode; including the use of appropriate communication and documentation
9. Produces clear and accurate documentation in line with Trust policy
10. Demonstrates awareness of how to safeguard self when working with the child or young person and their family with mental health needs

Preceptor:

I confirm that
has demonstrated the above competency to
a level

SIGNED.....DATE.....

Preceptee:

I confirm that I have met the above competency
at the level agreed with my preceptor. I will
continue to practice and develop myself and
others in area of patient care.

SIGNED.....DATE.....

Section 4: Competency Reflections

Reflection 3: Mental Health

Reflection: Mental Health

Learning Actions:

Review Date:

Preceptor/ Supervisor Comments:

Signature:

Date:

Section 4: Competency Reflections

Reflection 4: Care of the Child/Young Person with life-limiting or life-threatening needs

Learning Outcome:

The preceptee will be able to demonstrate knowledge and understanding of how to recognise and manage the child or young person with life-limiting or life-threatening care needs.

The preceptee will be able to demonstrate knowledge and understanding through achieving the following actions:

1. Identifies common conditions that are life-limiting or life-threatening to the child or young person and their pathophysiology
2. Identifies specific risks to the child or young person with life-limiting or life-threatening conditions and discusses how to minimise these risks to maximise the quality of life
3. Undertakes training for any specialist equipment necessary for delivering care to the child or young person and demonstrates competence in using the equipment, including how to troubleshoot when required
4. Demonstrates a good understanding of the pathophysiology of the child or young person's underlying condition and, through comparing this to normal pathophysiology, identifies why their condition requires care as planned
5. Recognises the use of appropriate care plans to identify needs of the child or young person and changes patient care to meet changing needs according to the care plan
6. Discusses and demonstrates understanding of the importance of documenting changes in the child or young person's condition in a timely manner and produces clear and accurate documentation in line with Trust policy
7. Demonstrates appropriate level of urgency when escalating concerns or changes in the child or young person's health to appropriate team members
8. Demonstrates understanding different roles of care team (including own) involved in recognising, communicating and supporting the child or young person during changes in care
9. Demonstrates appropriate support and education to the child or young person and family members to safely undertake agreed elements of care
10. Demonstrates understanding of the discharge process following care episode
11. Recognises the personal impact of caring for the child or young person with life-limiting or life-threatening needs can have and manages impact through use of appropriate support available

Preceptor:

I confirm that
has demonstrated the above competency to
a level

SIGNED.....DATE.....

Preceptee:

I confirm that I have met the above competency
at the level agreed with my preceptor. I will
continue to practice and develop myself and
others in area of patient care.

SIGNED.....DATE.....

Section 4: Competency Reflections

Reflection 4: Care of the Child/Young Person with life-limiting or life-threatening needs

Reflection: Care of the Child or Young Person with life-limiting or life-threatening needs

Learning Actions:

Review Date:

Preceptor/ Supervisor Comments:

Signature:

Date:

Section 4: Competency Reflections

Reflection 5: Human Factors

Learning Outcome:

The preceptee will be able to demonstrate understanding of the importance human factors have upon achieving high quality patient care

The preceptee will be able to demonstrate knowledge and understanding through achieving the following actions:

1. Demonstrate a clear understanding of what is meant by human factors
2. Understands the relationship between human factors and patient safety
3. Demonstrates an understanding as to how human factors can be used to influence healthcare systems or services
4. Recognises the impact personal emotions, experience, knowledge and communication can influence adverse events and errors

Preceptor:

I confirm that has demonstrated the above competency to a level

SIGNED.....DATE.....

Preceptee:

I confirm that I have met the above competency at the level agreed with my preceptor. I will continue to practice and develop myself and others in area of patient care.

SIGNED.....DATE.....

Section 4: Competency Reflections

Reflection 5: Human Factors

Reflection: Human Factors

Learning Actions:

Review Date:

Preceptor/ Supervisor Comments:

Signature:

Date:

SECTION 5

REFERENCES / WIDER READING

Section 5: References/Wider Reading

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APPENDICES 1

PRECEPTORSHIP PLEDGE

Appendices 1: Preceptorship Pledges

The Preceptee promises to:	Preceptor and buddy promise to:	The wider paediatric team promises to:	The Lead Nurse Educator for the preceptorship programme promises to:
<ul style="list-style-type: none"> • take responsibility for identifying specific learning needs and opportunities • be open to, and give feedback on, personal progress and the preceptorship programme • ensure that clinical practice relates to evidence based research • always adhere to NMC and Trust regulations • acknowledge own limitations and seek information and support where necessary • utilise real-life experiences to develop clinical reasoning and critical thinking skills and document key learning events in reflective diary • participate in all Action Learning Sets (ALS)/clinical supervision 	<ul style="list-style-type: none"> • help orientate preceptee to clinical environment • agree individual learning needs with preceptee • provide support and recognise teaching opportunities that will facilitate the preceptees development • provide an environment that allows the preceptee to focus on skill acquisition and clinical reasoning • act as positive role model • facilitate integration of preceptee in to clinical team • develop working relationship with preceptee that enables open communication and trust • work collaboratively with Lead Nurses/Practice Educators to arrange clinical time away from clinical are 	<ul style="list-style-type: none"> • participate in the orientation of the preceptee to the clinical environment • identify opportunities that own role and expertise can support preceptee in their skill and knowledge development • provide any bedside and/or classroom teaching to preceptees as appropriate • support the preceptee in the development of their clinical skills and knowledge where necessary • provide constructive feedback on the preceptees progress and performance to the Preceptor and Preceptee as necessary • act as a positive role model • respect any preceptees inexperience and need for additional support and teaching 	<ul style="list-style-type: none"> • provide written and practical guidance and support to all preceptees, preceptors and the wider paediatric team members • communicate information pertaining to the preceptorship programme to all preceptees, preceptors and the wider paediatric team • deliver Action Learning sets to preceptees during preceptorship study days • provide relevant programme updates, support and related educational material through the use of social media • Chair the Wessex paediatric Nurse Educator forum to allow discussions pertaining to developing and improving the preceptorship programme • undertake annual audit of the programme

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The Preceptee promises to:	Preceptor and buddy promise to:	The wider paediatric team promises to:	The Nurse Educator for the preceptorship programme promises to:
<ul style="list-style-type: none"> ensure all mandatory training is kept up to date as requested by employing Trust provide completed preceptorship portfolio to line manager/educator by the end of the preceptorship period commit time to attend all allocated study days; including Trust induction, local orientation and preceptorship create professional relationships that facilitate integration in to the clinical team and preceptorship group Participate in service improvement projects, and with support of preceptor and line manager, initiate any necessary change management processes 	<ul style="list-style-type: none"> provide continual constructive feedback to preceptee in timely manner and facilitate how to use feedback to develop further provide feedback to Preceptorship Programme Lead Nurse Educator on the preceptees progress and the preceptorship programme 	<ul style="list-style-type: none"> support all preceptors and buddy's in their roles provide feedback to Preceptorship Programme Lead Nurse Educator on the preceptorship programme 	<ul style="list-style-type: none"> provide access to support and training to preceptors and their managers to ensure that they are prepared and supported in facilitating the preceptorship programme disseminate feedback and work with all paediatric Nurse Educators to utilise data to inform subsequent programmes

APPENDICES 2

LEVELS OF CLINICAL COMPETENCE

Appendices 2: Levels of clinical competence

Level 1

Individual has no experience off the situation and lack confidence to demonstrate safe practice. They demonstrate the need for continual verbal and physical cues and practice that is prolonged and excludes signs of flexible judgement.

Level 2

Individual possesses prior experience of the situation and displays practice that is efficient and includes some skilful practice. They are guided by standards, local procedures and clinical orders and depend on expertise of others. There is clear evidence of knowledge development.

Level 3

Individual possesses 2-3 years of experience of the same or similar situations. They demonstrate efficient and coordinated care that includes considerable planning that includes conscious and analytical contemplation of any problems. They deliver care within an appropriate time frame without supporting cues.

Level 4

Individual demonstrates awareness of the situation in a holistic, wider context; including appreciation of short and long term care goals and needs. They exhibit development from typical events and how plans should be changed accordingly. They recognise expected and unexpected outcomes, displayed in quick decision making and the ability to prioritise attributes and aspects of the situation.

Level 5

Individual demonstrates an intuitive grasp on the situation that includes an accurate focus on the problem that does not involve wasteful consideration of a range of unfruitful, alternative solutions. They possess a deep understanding of the situation and their approach is flexible and includes analytical skills that allow them to effectively handle previously unknown situations/problems.

Adapted from Benner P, Tanner CA, Chesla CA (2009) *Expertise in Nursing Practice: Caring, Clinical Judgement, and Ethics*. (2nd ed.). New York: Springer Publishing Company.