**RSC Skills passport**

This passport summarises the role essential skills required for a Registered Support Clinician (RSC) to function in a surge model of care in an intensive care unit (ICU) during the COVID-19 pandemic. In March 2020, the NMC and other national bodies recognised, in the [Joint Statement on Developing Immediate Critical Care Nursing Capacity](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/03/critical-care-joint-statement-25-march-2020.pdf), during surges of Covid-19, there may be a requirement to temporarily depart from established procedures in order to care for patients and people using health services. Updated national guidance for workforce management during this time was published on 10 December 2020, [Advice on Acute Sector Workforce Models During Covid-19](https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/12/C0833_advice-on-acute-sector-workforce-models-during-COVID_with-apps_10dec.pdf).

An RSC may be:

* a junior ICU nurse who has not yet achieved their step 1 competencies in the National Competency Framework,
* a registered nurse, who works outside of ICU or
* a registered (non-nursing) health care professional.

**How to use the passport**

The passport can be used as a self-assessment tool and/or as an assessment tool with a supervisor. The supervisor may be the individuals’ manager, educator or delegated other.

The RSC should complete the self-assessment column. The responsibility to identify whether they have the relevant knowledge and proficiency sits with the registered support clinician (RCS). The passport should be reviewed as part of a supportive conversation where the supervisor may check and challenge.

The supervisor and individual should identify any areas marked areas for development. If the RSC identifies any areas for development, they can use the suggested resources on e-Learning for Healthcare (eLfH) or use local training resources. Some proficiencies may require a competency assessment depending on local protocol. The RSC and supervisor may identify that, where the RSC requires further development to achieve competence, they may need to seek assessment from a different supervisor or educator who is competent and experienced in the skill.

When the RSC and supervisor agree the RSC is proficient in all aspects of the passport this should be signed by both parties. It may be helpful to add the “RSC” skill to Healthroster or their local system for recording skills.

**Page 2-4:** Passport Assessment tool for RSC Staff

**Page 4:** Statement of Competence – to be completed by RSC and supervisor

**Page 5-8:** Links to e-LfH resources identified to help achieve RSC status if needed (e-LfH log in required – you just need to register)

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| **Assessment tool for RSC Staff** |
| **Domain**  |  | **Self-assessment Record:** **Met (M), Initial and date**  | **Supervisor Review Record:** **Met (M), Initial and date**  |
| **Safety** |  |  |
| PPE | Describe the Public Health England guidance for donning and doffingDescribe the relevant action in the event of a Personal Protective Equipment (PEE) breach |  |  |
|  | Able to perform donning and doffing of all PPE in Critical Care  |  |  |
| Vital Signs | Recognises normal parameters and escalates abnormal findings (Able to correctly calculate and is able to explain local escalation process) |  |  |
|  | Can demonstrates the ability to take and record vital signs (Heart rate, temperature, respiratory rate, Sa02, Blood pressure (invasive and non-invasive) and is able to identify the correlating waveform on the monitor. Able to calculate an accurate fluid balance. |  |  |
| Bed space  | Can identify equipment and consumables required for preparation of a bedspace in ICU |  |  |
|  | Able to prepare a bedspace in ICU for admission  |  |  |
| **Documentation**  |  |  |
| Generic  | Demonstrate (through discussion) essential knowledge of (and its application to practice) NMC record keeping guidance (2009) Demonstrates knowledge of own legal responsibility in written documentation and record keeping |  |  |
| Local  | Demonstrates the ability to access and document care in patient records using the local ICU system: Enter system used ……………………………………………………………… |  |  |
| **Equipment**  |  |  |  |
|  | Describe how to report faulty or broken equipment Able to identify infusion, volumetric and feeding pumps in ICU, able to respond to alarms and escalate concerns.Demonstrates ability to safely use syringe drives, volumetric and feeding pump, enter brand ……………………………………………………………………………………………… |  |  |
| **Medication** |  |  |  |
| Peripheral  | Competent to administer routine (not critical specific) drugs and fluids via peripheral intravenous access devices (local competence of Capital Nurse IV passport) |  |  |
| Central  | Competent to administer routine (not critical specific) drugs and fluids via temporary non tunnelled central venous access devices (local competence of Capital Nurse IV passport) |  |  |

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| **Arterial line management**  |  |  |
|  | Can recognise an arterial lineDemonstrates how to take the ABG sample to the machine and process the sample ABG machines familiar with ………………………………………………………………………………………….Demonstrate safe practice when drawing an arterial blood gasDemonstrate safe practice when processing an arterial blood gas Can explain the difference between an arterial line and venous access, including not injecting any drugs Explains the complications associated with arterial lines and able to escalate concerns. |  |  |
| **Care and management of nasogastric tubes on ICU** |  |  |
|  | Describe the procedure (indications/contraindications) for NGT insertion.Demonstrates ‘NEX’ measurement (measurement from the nose, earlobe, xiphisternum)Demonstrates administration of nasogastric drugs via NGT route securement of NGT.Demonstrates the importance of confirmation of position of nasogastric tubes according to local procedures which may vary between ICU’s. Demonstrate how to check and document NGT length. Describe escalation plan if NGT length has changed.Demonstrates how to document the procedure for NGT placement confirmation and the daily checks. |  |  |
| **Airway** |  |  |
| Suctioning | Demonstrate safe practice when performing closed suctioning via an endotracheal tube Demonstrate safe practice when preforming closed suction via a tracheostomy tubeDemonstrate safe practice when open suctioning via an endotracheal tubeDemonstrate safe practice when open suctioning a via tracheostomy tube. |  |  |
| Tracheostomy Care Basics | Able to competently care for tracheostomies, either detail via local Trust competency document (enter name of Trust ………………………………………………………………………………….)**Or** Demonstrate safe preparation of tracheostomy kit and daily checks.Demonstrate safe securing of a tracheostomy tube.Demonstrate safe tracheostomy dressing checks.Demonstrate accurate cuff pressure measurement.Describe how to recognise acute complications of tracheostomies.Describe the emergency management of a blocked or dislodged tracheostomy.Demonstrates awareness of own limitations of scope of practice and seeks advice appropriately. |  |  |

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| **Neurology**  |  |  |
| Delirium management  | Describe how to recognise delirium Describe the prevention and management of delirium in ICUDescribe how to implement non-pharmacological management of delirium |  |  |
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| **Statement of Competence of Registered Support Clinician (RSC)****The individual below has the appropriate knowledge, skills and competence to be redeployed to an RSC role in ICU:**  |
| Date:**Name of Registered Support Clinician (RSC):**Professional registration number:Professional email:Job title: Signature:Place of work (Hospital and Ward): | Date:**Name of supervisor:**Professional registration number:Professional email:Job title: Signature: | Date:**Name of** **additional assessor:**Professional registration number:Professional email:Job title: Signature: |

**Where the RSC skill has identified a knowledge gap they may wish to use the E Learning for Heath Resources below or refer to local training / education / guidance:**

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| **Safety** |
| **PPE** | Describe the Public Health England guidance for donning and doffingDescribe the relevant action in the event of a Personal Protective Equipment (PEE) breach |
|  | Able to perform donning and doffing of all PPE in Critical Care  |
| **e-LfH resources** | [Infection Prevention and Control (IPC) Highlights (Document)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/918091/IPC_Highlights_Quick_Reference_Guide.pdf) [Donning of Personal Protective Equipment (PPE) (video 7 mins)](https://portal.e-lfh.org.uk/Component/Details/604876)   [Removal and disposal of Personal Protective Equipment (PPE) (video 5 mins)](https://portal.e-lfh.org.uk/Component/Details/659589) |
| **Vital Signs** | Recognises normal parameters and escalates abnormal findings (Able to correctly calculate and is able to explain local escalation process) |
|  | Can demonstrates the ability to take and record vital signs (Heart rate, temperature, respiratory rate, Sa02, Blood pressure (invasive and non-invasive) and is able to identify the correlating waveform on the monitor. Able to calculate an accurate fluid balance. |
| **e-LfH resources** | [Taking and recording respiratory Rate (video 2mins)](https://portal.e-lfh.org.uk/Component/Details/662475)[Taking and recording of vital signs: Blood Pressure (Video 2.5 mins)](https://portal.e-lfh.org.uk/Component/Details/663966)[Taking and recording of vital signs: Temperature (video 3mins)](https://portal.e-lfh.org.uk/Component/Details/664149)[Taking and recording of vital signs: Pulse (video 3 mins)](https://portal.e-lfh.org.uk/Component/Details/664143)[360 bed space orientation](https://ltlc360.viewin360.co/share/7x9jB)[Basic Principles of Intensive Care Nursing, Circulation (Video 7 mins)](https://portal.e-lfh.org.uk/Component/Details/669062)[Safe Use of Pulse Oximetry Equipment (e Learning)](https://portal.e-lfh.org.uk/Component/Details/663856) |
| **Bed space**  | Can identify equipment and consumables required for preparation of a bedspace in ICU |
|  | Able to prepare a bedspace in ICU for admission  |
| **e-LfH resources** | [360 bed space orientation](https://ltlc360.viewin360.co/share/7x9jB)[Bedspace Safety Checks](https://portal.e-lfh.org.uk/Component/Details/668012) |
|  | Additional Suggested Core Resources re patient safety:[RESCUE: Reducing Errors through Safe, Clear, Unambiguous English (workshop)](https://www.clinicalsafety.org/downloads) , [Human Factors: A Quick Guide (video 6mins)](https://youtu.be/aGZz3w5Hy8Y) [Human Factors in Critical Care Medicine (Article)](https://healthmanagement.org/uploads/article_attachment/icu2-v20-human-factors-in-critical-care-medicine.pdf) |

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| **Documentation**  |
| **Documentation**  | Demonstrate (through discussion) essential knowledge of (and its application to practice) NMC record keeping guidance (2009) Demonstrates knowledge of own legal responsibility in written documentation and record keeping: |
|  | Demonstrates the ability to access and document care in patient records using the local ICU system Enter system used ……………………………………………………………… |
| **e-LfH resources** | [Documentation lesson plan](https://portal.e-lfh.org.uk/Component/Details/680431) – contains a documentation exercise (further resources in development) |
| **Equipment**  |
|  | Describe how to report faulty or broken equipment Able to identify infusion, volumetric and feeding pumps in ICU, able to respond to alarms and escalate concerns.Demonstrates ability to safely use syringe drives, volumetric and feeding pump, enter brand ……………………………………………………………………………………………….. |
| **e-LfH resources** | [Bedspace Safety Checks](https://portal.e-lfh.org.uk/Component/Details/668012)[360 bed space orientation](https://ltlc360.viewin360.co/share/7x9jB)[Equipment Matrix](https://portal.e-lfh.org.uk/Component/Details/676791) |
| **Medication** |
| **Peripheral**  | Competent to administer routine (not critical specific) drugs and fluids via peripheral intravenous access devices (local competence of Capital Nurse IV passport) |
| **Central**  | Competent to administer routine (not critical specific) drugs and fluids via temporary non tunnelled central venous access devices (local competence of Capital Nurse IV passport) |
| **e-LfH resources** | [Medicines Learning Portal: Injection compatibility (e Learning)](https://portal.e-lfh.org.uk/Component/Details/616628)[Preparation and Administration of IV Medicines (e Learning)](https://portal.e-lfh.org.uk/Component/Details/666793)[Vascular Access Devices (e Learning)](https://portal.e-lfh.org.uk/LearningContent/Launch/665507)[Cannula Care (e Learning)](https://portal.e-lfh.org.uk/Component/Details/624803) |

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| **Arterial line management**  |
|  | Can recognise an arterial lineDemonstrates how to take the ABG sample to the machine and process the sample (insert machine? drop down list of common bands) Demonstrate safe practice when drawing an arterial blood gasDemonstrate safe practice when processing an arterial blood gas Can explain the difference between an arterial line and venous access, including not injecting any drugs Explains the complications associated with arterial lines and able to escalate concerns. |
| **e-LfH resources** | [360 bed space orientation](https://ltlc360.viewin360.co/share/7x9jB)[Arterial Line Care ( Video 25 mins)](https://portal.e-lfh.org.uk/Component/Details/669386)[ANTT (Video 12 mins)](https://portal.e-lfh.org.uk/Component/Details/622814)[Processing a blood gas sample (video 3 mins)](https://portal.e-lfh.org.uk/Component/Details/671334)  |
| **Care and management of nasogastric tubes on ICU** |
|  | Describe the procedure (indications/contraindications) for NGT insertion.Demonstrate ‘NEX’ measurement (measurement from the nose, earlobe, xiphisternum) Demonstrate administration of nasogastric drugs via NGT route iii) securement of NGT.Discuss the importance of confirmation of position of nasogastric tubes according to local procedures which may vary between ICU’s. Demonstrates how to check and document NGT length. Describe escalation plan if NGT length has changed. Demonstrates how to document the procedure for NGT placement confirmation and the daily checks. |
| **e-LfH resources** | [**Basic Principles of Intensive Care Nursing (NGT)**](https://youtu.be/7CVnh2NzXGY?t=251) [360 bed space orientation](https://ltlc360.viewin360.co/share/7x9jB) |

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| **Airway** |
| **Suctioning** | Demonstrate safe practice when performing closed suctioning via an endotracheal tubeDemonstrate safe practice when preforming closed suction via a tracheostomy tube Demonstrate safe practice when open suctioning via an endotracheal tube Demonstrate safe practice when open suctioning a via tracheostomy tube. |
| **e-LfH resources** | [Use of Closed-Circuit In-line Suction](https://portal.e-lfh.org.uk/Component/Details/661802)[Open suction (video 3mins)](https://www.youtube.com/watch?v=EWMGjl-pM3M&feature=youtu.be) [360 bed space orientation](https://ltlc360.viewin360.co/share/7x9jB)[Basic Principles of Intensive Care Nursing, tubes & lines](https://portal.e-lfh.org.uk/Component/Details/669078)[suctioning (e learning)](https://portal.e-lfh.org.uk/LearningContent/Launch/673386)[Inline Suctioning a Tracheostomy ( Video 4mins)](https://portal.e-lfh.org.uk/Component/Details/680394)[open & closed suctioning (e-Learning)](https://portal.e-lfh.org.uk/Component/Details/677517)[Cuff Pressure measurement ( Video 1 min )](https://portal.e-lfh.org.uk/Component/Details/680726)  |
| **Tracheostomy Care Basics** | Able to competently care for tracheostomies, either detail via local Trust competency document enter which……………………………………………………………..**Or** Demonstrate safe preparation of tracheostomy kit and daily checks.Demonstrate safe securing of a tracheostomy tubeDemonstrate safe tracheostomy dressing checksDemonstrate accurate cuff pressure measurement Describe how to recognise acute complications of tracheostomiesDescribe the emergency management of a blocked or dislodged tracheostomy.Demonstrates awareness of own limitations of scope of practice and seeks advice appropriately. |
| **e-LfH resources** | [360 bed space orientation](https://ltlc360.viewin360.co/share/7x9jB) |
| **Neurology**  |
| **Delirium management**  | Describe how to recognise delirium Describe the prevention and management of delirium in ICUDescribe how to implement non-pharmacological management of delirium |
| **e-LfH resources** | [Sedation Assessment (e Learning)](https://portal.e-lfh.org.uk/Component/Details/608333) [Rass Scoring and sedation Bundle (e Learning)](https://portal.e-lfh.org.uk/Component/Details/668575) |

***To access all the LTLC training resources and the skills matrix outlining the additional RSC competencies staff may want to consider revising / preparing for please visit*** [***tinyurl.com/ltlc2020***](https://www.e-lfh.org.uk/programmes/london-transformation-and-learning-collaborative-ltlc/)