

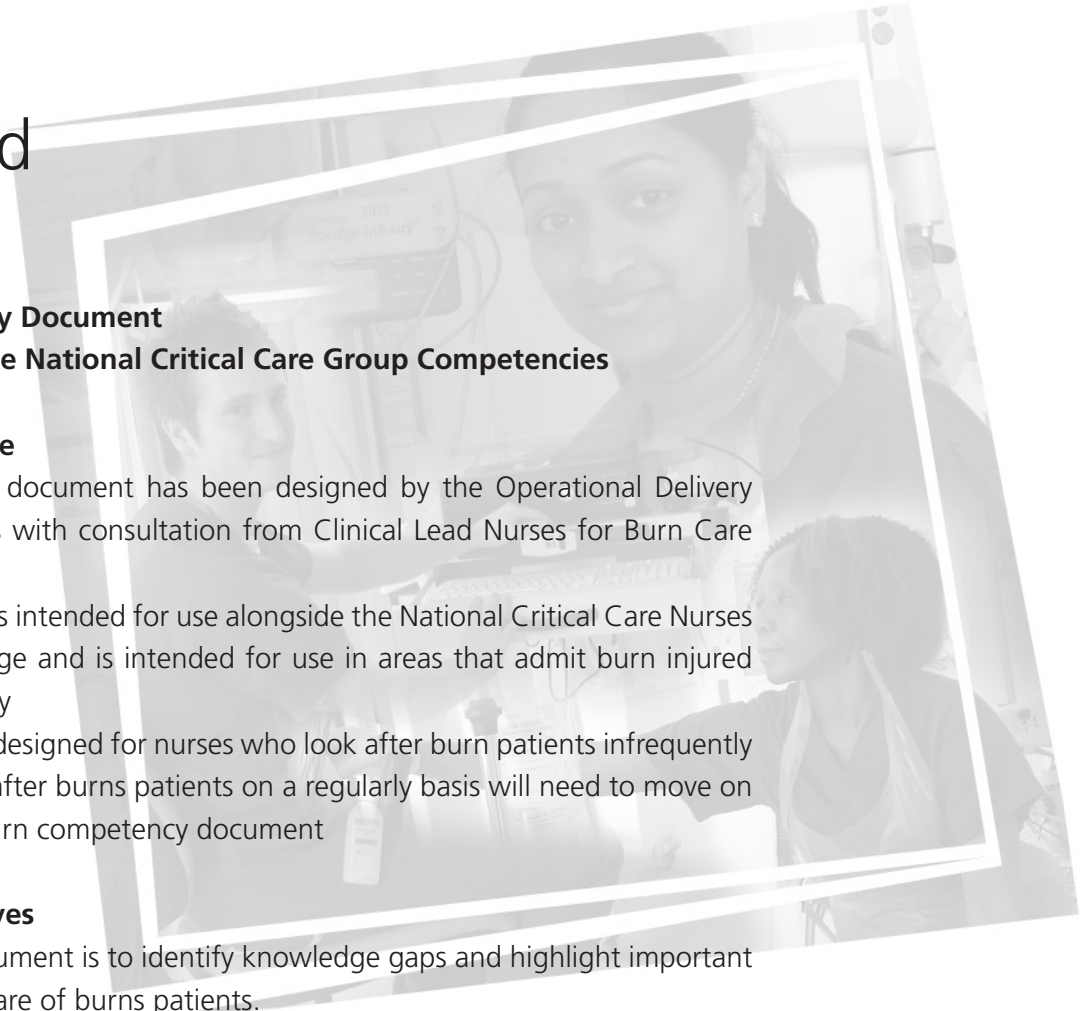
National Competency Framework
for Registered Nurses
in Adult Critical Care

Specialist Burns Competencies

For use in Non-Specialist Units



Foreword



**Burns Competency Document
For Inclusion in the National Critical Care Group Competencies**

Intended Audience

- This competency document has been designed by the Operational Delivery Networks for Burns with consultation from Clinical Lead Nurses for Burn Care across the UK
- This competency is intended for use alongside the National Critical Care Nurses Competency package and is intended for use in areas that admit burn injured patients infrequently
- This document is designed for nurses who look after burn patients infrequently
- Nurses that look after burns patients on a regularly basis will need to move on to the Advanced burn competency document

Aims and Objectives

The aim of this document is to identify knowledge gaps and highlight important issues around the care of burns patients.

The objectives in this competency document are largely knowledge based and are to be used to support the nurse giving the initial care of the burns patient. With this knowledge the nurse and medical team can care for and understand the needs of the burn injured patient and understand the importance of involving other specialities and regional burns services for ongoing care.

Assessment and Assessors

This competency is designed to be included into the National Critical Care Competencies and to be used with the assessment criteria in that document. Competencies can be signed by an Assessor who has had training in burns care and/or who has an educational qualification with a burns care element e.g. ICU course with burns element attended, attendance at network study day, local burns education session.

Learner Name <p style="text-align: center;">PRINT</p>	<p style="text-align: center;">SIGNATURE</p>
Lead Assesor/Mentor Name <p style="text-align: center;">PRINT</p>	<p style="text-align: center;">SIGNATURE</p>

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Learning Contract

The following Learning Contract applies to the Individual Learner, Lead Assessor and Unit Manager and should be completed before embarking on this competency development programme. It will provide the foundations for:

- Individual commitment to learning
- Commitment to continuing supervision and support
- Provision of time and opportunities to learn

LEARNERS RESPONSIBILITIES

As a learner I intend to:

- Take responsibility for my own development
- Successfully complete a period of induction/preceptorship as locally agreed
- Form a productive working relationship with mentors and assessors
- Listen to colleagues, mentors and assessor's advice and utilise coaching opportunities
- Use constructive criticism positively to inform my learning
- Meet with my Lead Assessor at least 3 monthly
- Adopt a number of learning strategies to assist in my development
- Put myself forward for learning opportunities as they arise
- Complete these competencies in the recommended 12 month time frame
- Use this competency development programme to inform my annual appraisal and development needs
- Report lack of supervision or support directly to unit manager at the first opportunity

Signature Date:

LEAD ASSESSOR RESPONSIBILITIES

As a Lead Assessor I intend to:

- Meet the standards of regulatory bodies (NMC 2008)
- Demonstrate on-going professional development/competence within critical care
- Promote a positive learning environment
- Support the learner to expand their knowledge and understanding
- Highlight learning opportunities
- Set realistic and achievable action plans
- Complete assessments within the recommended timeframe
- Bring to the attention of the HEI, Education Lead and/or Manager concerns related to individual nurses learning and development
- Plan a series of learning experiences that will met the individuals defined learning needs
- Prioritise work to accommodate support of learners within their practice roles
- Provide feedback about the effectiveness of learning and assessment in practice

Signature Date:

CRITICAL CARE LEAD NURSE/MANAGER

As a critical care service provider I intend to:

- Facilitate a minimum of 40% of learners' clinical practice hours with their mentor/assessor and/or Practice Educator or delegated appropriate other
- Provide and/or support clinical placements to facilitate the learner's development and achievement of the core/essential competency requirements
- Regulate and quality assure systems for mentorship and standardisation of assessment to ensure validity and transferability of the nurses' competence

Signature Date:

Specialist Burns Competencies Tracker Sheet

Competency	Date Achieved	Signature
A1: Demonstrates a knowledge of first aid and the initial emergency management of a burn injury		
A2: Demonstrate the ability to prepare for receiving a new burn injured patient and assess them		
A3: Demonstrate the ability to assess a burn wound		
A4: Demonstrate knowledge and skill in burn wound management including stages of wound healing and how this applies to modern burn care		
A5: Demonstrate knowledge and understanding of fluid management in a patient with a burn injury		
A6: Demonstrate an understanding of burn inhalation injury and its treatment		
A7: Demonstrate the ability to care appropriately for a patient receiving fluid resuscitation		
A8: Demonstrate the ability to support the patient with a burn injury who is in pain using appropriate preparations and administering them safely		
A9: Demonstrate knowledge and understanding of Nutritional requirements/management of a patient with a burn injury		
A10: Demonstrate knowledge and understanding of Infection Control measures in a patient with a burn injury		
A11: Demonstrate an understanding of the need for discharge preparation for the burn injured patient		
A12: Demonstrate knowledge and understanding of the Rehabilitation phase of a patient with a burn injury		
A13: Demonstrate the ability to care for a patient with an electrical burn		
A14: Demonstrate the ability to care for a patient with a chemical burn		
A15: Demonstrate a knowledge of Toxic Shock Syndrome in children that have a burn injury and its treatment		

Specialist Burns Competencies Tracker Sheet

Competency	Date Achieved	Signature
A16: Demonstrate the ability to care for a patient with exfoliative / necrotising diseases of the skin		
A17: Demonstrate an understanding of the psychological issues that can affect patients with a burn injury and possible interventions		
A18: Demonstrate an understanding of the safeguarding issues that can affect patients with a burn injury		
A19: Demonstrate an understanding of the issues around the care of the dying burn injured patient		

National Burn Competency Framework for Nurses

The following competency statements are related to the safe management of a burn injured patient requiring a higher level of care.

Pre Hospital Considerations:

A1: Demonstrates a knowledge of first aid and the initial emergency management of a burn injury

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Recognises the importance of personal safety in first aid • Explains the first aid treatment of burns and the rationale for this (stopping the burning, cooling the burn and covering) • Rationale for cooling a burn wound with cool water for 20 minutes up to 3 hours post injury (Gold Standard). • Understands the rationale for maintaining a warm environment • Explains the need to remove jewellery and clothing • Demonstrate an understanding of the burn network thresholds and referral criteria • Discuss what a primary and secondary survey are and their importance not to focus just on the burn injury 	

A2: Demonstrate the ability to prepare for receiving a new burn injured patient and assess them

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Identify the details required when a patient with a burn injury is initially referred e.g. TBSA does this require transfer to a burns specific area or advice • Identify and prepare the equipment required for a burn patient admission • Identify and prepare the appropriate environment and staff required • Identify and prepare the documentation required • Discuss the importance of early wound swabs on admission for wound surveillance • Discuss the need to check patient's tetanus status 	

Initial Assessment:

A3: Demonstrate the ability to assess a burn wound

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Describe the anatomy of the skin
- Explain the functions of the skin and relate this to the care of a patient with a burn
- Describe and recognise the different types and causes of burn wounds
- Recognise and assess the different burn wound depths and classifications (erythema, epidermal, dermal and full thickness)
- Calculate TBSA of burn wound using an appropriate tool e.g. Lund and Browder, Wallace rule of nines, Mersea burn app or use of the palmer surface 1% technique to calculate TBSA
- Discuss the differences in burns estimation between adults and children
- Recognise the indications for escharotomies and what action to take
- Consideration of pathophysiological changes in relation to Jacksons Burn Model and when systemic effects would be seen

A4: Demonstrate knowledge and skill in burn wound management including stages of wound healing and how this applies to modern burn care

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Discuss the different ways that a wound can heal e.g. by primary and secondary intention
- Describe and recognise the stages of wound healing
 - Initial insult – viable and non-viable tissue
 - Inflammation
 - Proliferation
 - Maturation
 - Types of Scaring
 - Contractures
- Discuss different factors that can affect wound healing looking at how long the wound should take to heal and when to seek expert advice
- Explain the different methods of wound cleansing and rationale for its use
- Explain the properties of different wound dressings available within your area
- Discuss requirements of a dressing for different burns wounds at different depths and stages of burn wound healing
- Demonstrate the ability to apply the dressings used in your area appropriately
- Explain the care of a burn wound that has blisters and demonstrate the correct procedure to Deroof blisters
- Demonstrate the correct use of bandaging in burns and describe the risks of incorrect bandaging

A5: Demonstrate knowledge and understanding of fluid management in a patient with a burn injury

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Describe the physiology of fluid loss following a burn injury • Explain when to administer fluids oral and IV • Demonstrate an understanding of different types of fluid that may be administered and rationale for the use looking at the following considerations: <ul style="list-style-type: none"> o Neonates (Desirable not essential criteria) o Children (Desirable not essential criteria) o Adults o Elderly • Calculate fluid requirements using the Parkland formula or any locally used burn fluid formula • Explain the importance of knowing the time that the burn injury occurred • Explain when 'maintenance' fluids are required, how to calculate and type of fluids required (desirable not essential criteria) 	

A6: Demonstrate an understanding of burn inhalation injury and its treatment

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Describe burn inhalation injury and the potential complications • Recognise the signs and symptoms of burn inhalation injury and when immediate action is required • Discuss the predisposing medical factors that may cause exacerbation • Explain the importance and relevance of checking carboxyhaemoglobin levels • Discuss the various treatment options for burn inhalation injury • Awareness of the effects of cyanide poisoning and use of antidotes (Cyanokit) 	

On – Going Management and Transfer to Definitive Care

A7: Demonstrate the ability to care appropriately for a patient receiving fluid resuscitation

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Explain how the effectiveness of fluid management may be monitored
- Discuss appropriate monitoring and how the following may be effected within burn injured patients:
 - Heart rate
 - Blood pressure
 - Respiratory rate
 - Urine output
 - Fluid balance
 - CRT
 - Blood gases
 - Blood results
- Discuss appropriate action when parameters deviate
- Understand the effects of swelling on circulation volume, soft tissues and the effects this may have on the patient
- Discuss the need to look at end organ perfusion with consideration to patients that may require increased fluid requirements or decrease according to systemic effects

A8: Demonstrate the ability to support the patient with a burn injury who is in pain using appropriate preparations and administering them safely

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Show awareness of current theories of pain physiology
- Demonstrate an ability to assess pain and manage it appropriately
- Discuss the various procedures that may require additional analgesia
- Demonstrate knowledge of local and network pain guideline
- Discuss the various analgesics that can be used and safety issues surrounding these
- Discuss the non-pharmacological methods for relieving pain
- Demonstrate an understanding of itch and its treatment

A9: Demonstrate knowledge and understanding of Nutritional requirements/management of a patient with a burn injury

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Describe the metabolic responses following a burn
- Explain the nutritional assessment required
- Discuss the need for early enteral feeding and the benefits of nutritional support
- Discuss the advantages and disadvantages of the following feeding regimes available for burn injured individuals
 - Naso-Gastric,
 - Naso-Jejunal
 - Jejunostomy, PEG
 - Intravenous route (Total Parental Nutrition)
 - Oral ingestion
- Describe types of feeds used locally
- Discuss local Feeding guidelines and importance of involvement of local dietitian
- Explain the importance of a baseline and weekly recording of weight of the burn injured patient

A10: Demonstrate knowledge and understanding of Infection Control measures in a patient with a burn injury	
You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Discuss why a burn injured patient is at a risk of acquiring an infection • Describe the signs and symptoms of infection and sepsis and how these may be differentiated from the systemic inflammatory response • Describe the actions taken in your service to help reduce the risk of the spread of infections e.g. isolation room • Show an understanding of the local Infection Control guidelines 	

A11: Demonstrate an understanding of the need for discharge preparation for the burn injured patient	
You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Explain the importance of effective discharge planning • Discuss the role of the Multi Disciplinary Team (MDT) in a patient's discharge • Describe the role and benefits of the local outpatient / dressing clinic service • Identify the external support services that may be required for the discharge of a patient and how to refer to these agencies • Understands the importance of information given on discharge i.e. washing, creaming, pressure garments, splints, sun protection, contact numbers • Understands the need for appropriate social and school/work reintegration • Understands the potential problems of patients transitioning from service to service 	

A12: Demonstrate knowledge and understanding of the Rehabilitation phase of a patient with a burn injury	
You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Explain the role of the following teams in the care of patients Physiotherapist Occupational Therapist • Discuss the of role of exercise during rehabilitation • Describe the importance of positioning and splinting • Discuss the importance of accurate burn scar assessment and management 	

Specialist Burn Considerations:

A13: Demonstrate the ability to care for a patient with an electrical burn

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Explain the mechanism of electrical burn injuries
- Explain signs of Entry and Exit wounds
- Understand differences between house hold and industrial currents
- Discuss the treatment of electrical burns, including wound assessment, fluid management and urine output,
- Understand the need for cardiac monitoring
- Discuss compartment syndrome and limb management
- Understand the differences between escharotomys and fasciotomys
- Understand reasons for monitoring Creatine Kinase (CK) levels
- Discuss signs and symptoms of rhabdomyolysis
- Understanding of when and how to gain advice or refer to your local burn service

A14: Demonstrate the ability to care for a patient with a chemical burn

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Explain mechanism of a chemical injury
- Explain the extra first aid considerations for chemical burns
- Know how to contact the poisons centre for advice on chemical burns
- Discuss the treatment of different types of chemical burns including
 - Alkali / Acid
 - Hydrofluoric acid
 - Bitumen
- Explain the importance of irrigation and measuring the pH of chemical burn wound
- If available, describe what Diphoterine® is and how it is use

A15: Demonstrate a knowledge of Toxic Shock Syndrome in children that have a burn injury and its treatment

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Describe Toxic Shock Syndrome and its relevance to burn patients
- Explain the signs and symptoms of Toxic Shock Syndrome and the importance of early recognition
- Discuss the treatment of Toxic Shock Syndrome
- Understanding of when and where to refer these patients within your network

A16: Demonstrate the ability to care for a patient with exfoliative/necrotising diseases of the skin

You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice

Competency Fully Achieved
Date/Sign

- Discuss the causes, presentation and treatment of:
 - Toxic Epidermal Necrolysis (TENS)
 - Stevens – Johnson Syndrome (SSJ)
 - Staphylococcal Scalding Skin Syndrome (SSS)
 - Necrotising Fasciitis
- Be aware of local policies regarding management within general ITU under dermatologists care or referral to your local burn service

Holistic and Palliative Care Needs of the Burn Injured Patient:

A17: Demonstrate an understanding of the psychological issues that can affect patients with a burn injury and possible interventions	
You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Describe what body image is and how this may be altered following a burn injury • Discuss the psychological impact of disfigurement on the patient and their family both the short and long term effects • Explain the role of the psychology team and other services/organisations in the care of patients with a burn injury • Discuss some of the psychological reactions a patient may show following a burn injury • Discuss what support is available for these patients • Demonstrates knowledge of local and national policies relating to Mental Health issues 	

A18: Demonstrate an understanding of the safeguarding issues that can affect patients with a burn injury	
You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Discuss the need of possible safeguarding interventions / referrals for: Adults Children • Explain the roles of other professionals e.g. Safeguarding Team, Social services • Demonstrate an understanding of the local and national guidelines that are used to assist in safeguarding patients • Discuss the support required for patients / family during safeguarding investigations • Explain the local safeguarding documentation that is used 	

A19: Demonstrate an understanding of the issues around the care of the dying burn injured patient	
You must be able to demonstrate the competent performance against each statement, whilst providing rationale and evidence base for your practice	Competency Fully Achieved Date/Sign
<ul style="list-style-type: none"> • Discuss the issues around comfort care only decisions • Ensure all cases are discussed with local burn services • Discuss the need for patient and family support within this process • Discuss the need for psychotherapy support for family's following a loved one's death from a burn injury • Understand the effects this may have on staff within the local unit • Understands the role of the coroner following a death from burn injury 	

Initial Assessment & Development Plan

Date | | |

This meeting between Learner and Lead Assessor should take place on commencement of these competencies. It is to identify the needs of the nurse and those competencies that should be attained within the first 3 months of commencing the competency development programme.

CURRENT CRITICAL CARE KNOWLEDGE, UNDERSTANDING AND SKILLS

COMPETENCIES TO BE ACHIEVED

SPECIFIC SUPPORTIVE STRATEGIES REQUIRED

Learners Signature:

Lead Assessors / Practice Educators Signature:

NEXT AGREED MEETING DATE: | | |

Ongoing Assessment & Development Plan

Date | | |

This meeting between Learner and Lead Assessor is to identify the progress made by the nurse in achieving competence in practice against those competencies identified in the initial/previous meetings. It is here further objectives will be set. Ongoing assessments should take place at least every 3 months. If the learner requires additional support a further action plan can be completed.

REVIEW OF COMPETENCIES ACHIEVED

ON TARGET: YES NO

IF NOT WHICH COMPETENCIES HAVE YET TO BE MET

REASONS FOR NOT ACHIEVING

SPECIFIC OBJECTIVES TO ACHIEVE COMPETENCE

KEY AREAS & ADDITIONAL COMPETENCIES TO BE ACHIEVED BEFORE NEXT MEETING

Learners Signature:

Lead Assessors / Practice Educators Signature:

NEXT AGREED MEETING DATE: | | |

Final Competency Assessment

Date | | |

This meeting is to identify that all the competencies have been achieved and that the nurse is considered a safe competent practitioner.

COMPETENCY STATEMENT

The nurse has been assessed against the competencies within this document and measured against the definition of competence below by critical care colleagues, mentors and assessors and is considered a competent safe practitioner within the critical care environment:

“The combination of skills, knowledge and attitudes, values and technical abilities that underpin safe and effective critical care nursing care and interventions”.

As part of quality assurance, the nurse is expected to maintain a portfolio of practice as part of NMC regulations to support on-going competence and declare any training development needs to their line manager or appropriated other.

Competency will be reviewed annually as part of staff personal development plans. Where necessary, objectives will be set to further develop any emerging competency required to work safely within the critical care environment.

LEAD ASSESSORS COMMENTS

LEARNERS COMMENTS

Learners Signature:

Lead Assessors / Practice Educators Signature:

NEXT AGREED MEETING DATE: | | |

Annual Competency Review

Date | | |

This record is a statement between the nurse who has completed their Burns competencies successfully and their Assessor /Practice Educator and/or Appraiser. It should be used and reviewed alongside local appraisal systems annually to ensure that the nurse continues to demonstrate themselves as a safe competent critical care practitioner

OVERALL COMPETENCY MAINTAINED YES NO

IF NOT WHICH COMPETENCIES REQUIRE FURTHER DEVELOPMENT

SPECIFIC OBJECTIVES TO ACHIEVE COMPETENCE

FURTHER COMMENTS

Signature:

Lead Assessors / Practice Educators Signature:

NEXT AGREED MEETING DATE: | | |

Abbreviations

ATLS	Advanced Trauma Life Support
BP	Blood Pressure
CRT	Capillary Refill Time
HR	Heart Rate
IV	Intra Venous
LDI	Laser Doplar Imaging
MDT	Multi-Disciplinary Team
NG	Nasal Gastric
NJ	Nasal Jejunum
PEG	Percutaneous Endoscopic Gastrostomy
SSJ	Stevens-Johnson Syndrome
SSS	Staphylococcal Scalding Skin Syndrome
TBSA	Total Body Surface Area
TENS	Toxic Epidermal Necrolysis
TPN	Total Parenteral Nutrition

Websites

<http://www.britishburnassociation.org/>

<http://www.ibidb.org/>

<http://www.midlandsburnnetwork.nhs.uk/>

<http://www.LSEBN.nhs.uk>

Acknowledgements

These specialist competencies have been compiled by the Critical Care Nurse Education Review Forum (CCNERF) with the kind permission of the Northern Burns Care Operational Delivery Network who wrote the original competencies for use.

Grateful Thanks are extended to all contributors.

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This document has been produced with support from these organisations and is available through the CC3N website: www.cc3n.org.uk. It has received interest internationally and may be available in the future in alternative languages, it has also be used to inform registered nurse competency development in specialities outside of critical care.