Children and Young People’s Cardiac Nursing
RCN guidance on roles, career pathways and competency development
Acknowledgements

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This document has been designed in collaboration with our members to ensure it meets most accessibility standards. However, if this does not fit your requirements, please contact corporate.communications@rcn.org.uk

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1. Introduction

The aim of this Royal College of Nursing (RCN) publication is to provide optimum standards for the nursing care of infants, children and young people with congenital heart disease. It includes recommendations for education and training, underpinned by competency frameworks and career pathways. It is envisaged that this third edition will continue to facilitate appropriate and structured workload planning based on the Congenital Heart Disease (CHD) Standards and Specifications (NHSE, 2016). Clinical competency documents have already been developed in some centres based on earlier editions of this RCN document. However, career pathways need to be contemporaneous, reflecting the changing needs of children and young people (CYP), their families and the services required.

In addition to the CHD standards and specifications, which cover the UK and Ireland (Health Improvement Scotland, 2019; NHSE, 2016; NHSS, 2018; North-South Inter-Parliamentary Association, 2015), the needs of infants, children and young people are also at the forefront of the NHS Long-Term Plan (NHSE, 2019a) with development of a Children and Young People’s Transformation Programme alongside a Maternity Transformation Programme, to oversee the delivery of commitments to the NHS Long-Term Plan (NHSE, 2019a). Furthermore, by 2028 the aim is to move to person-centred and age-appropriate service models; implementing a selective ‘0–25 years’ service model to improve children’s experiences of care, outcomes and continuity of care (NHSE, 2019a p.55).

This publication provides a competency framework reflecting the key roles outlined within the CHD standards (NHSE, 2016) and from which a CYP nurse can work within the principles of nursing practice and their professional standards (RCN, 2010; NMC, 2018a). Different roles require varying levels of competence depending on the nature of the work and level of responsibility. Consequently, this framework considers roles spanning levels 5–9 of the career pathway (DH, 2006; 2007a; 2007b; Skills for Health, 2010; RCN, 2007).

This publication sits alongside Adult Congenital Heart Disease Nursing: RCN guidance on roles, career pathways and competence development (RCN, 2014).
2. Career pathway for children and young people’s cardiac nursing

Clear career pathways for CYP cardiac nurses need to be in place to ensure that future service development reflects the needs of service users. Additionally, succession planning and consistency is essential in order to maintain a high standard of nursing care for children, young people and their families, both now and in the future. The NHS and the nursing role are continuously evolving. This provides opportunities for creative thinking in the development of innovative new roles that meet the needs of contemporary health care, both from the perspective of the child or young person and their family, and the health care professional.

The need for flexibility and the development of career pathways was highlighted in Modernising Nursing Careers: setting the direction (DH, 2006) and more recently in the NHS Long-Term Plan (NHSE, 2019a, p.86). The Interim People Plan (NHSE, 2019b) sets a vision for how people working in the NHS will be supported to deliver that care and identifies the actions that will be taken. A review of ‘how to increase both national and local investment in continuing professional development (CPD) and workforce development, with the aim of achieving a phased restoration, over the next five years, of previous funding levels for CPD’ (p.31) is the key action identified to inform We are the NHS: People Plan for 2020–21 – action for us all (NHSE, 2020). There is recognition that nurses need support to develop in their careers, and that a diverse range of options for career progression are needed, for example, as advanced practitioners within multi-professional teams or as academics and educators of the next generation (NHSE, 2019b, p.40).

This career framework encompasses clinical, management and leadership, education and research roles (see Section 3). This is an essential aspect in the ongoing development of the CYP cardiac nursing workforce, as recognised by the CHD standards (NHSE, 2016a) and therefore clinically based education roles have been included in this framework.

For nurses currently working within CYP cardiac services there are clear opportunities for progression both academically and professionally (see Table 1). Progression from staff nurse to ward sister/charge nurse, for example, indicates specific development of clinical knowledge and skills as well as appropriate academic enhancement.
Table 1: Career pathway: Congenital cardiac nursing (updated 2021)

<table>
<thead>
<tr>
<th>Career pathway, congenital cardiac nursing</th>
<th>Benner’s level</th>
<th>National Career Framework</th>
<th>Career Framework level</th>
<th>Career pathway</th>
<th>Related knowledge and skills</th>
<th>Underpinning education</th>
<th>Academic pathway/academic level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief nurse/professor/dean of faculty</td>
<td>Expert</td>
<td>Staff with the ultimate responsibility for clinical caseload, decision-making and full on-call responsibility</td>
<td>9</td>
<td>Director of services/chief nurse</td>
<td>Skills in leadership, management, strategy, business, administration, negotiating and influencing, assertiveness Requires oversight of service needs for both staff and patients</td>
<td>Professional qualification: RN Additional education: variable, but management and business qualifications desirable</td>
<td>PhD/L8</td>
</tr>
<tr>
<td>Lead nurse/consultant practitioners/advanced practitioner</td>
<td>Expert</td>
<td>Staff working at a very high level of clinical expertise and/or have responsibility for planning of services</td>
<td>8 7</td>
<td>Associate professor/reader/head of department/principal lecturer/nurse consultant/lead nurse Cardiac educator/ANP/CCNS/ATCNS/ACHDNS</td>
<td>PhD Master’s-level skills in education, leadership, advanced clinical practice Strategic awareness of population of children and young people with cardiac needs</td>
<td>Professional qualifications: RN assessment and diagnosis, independent and supplementary prescribing qualification (V700) Leadership, negotiating and influencing NMC identified requirements for advanced practice</td>
<td>PhD/L8 Master’s degree/L7</td>
</tr>
</tbody>
</table>
### Matrons/educators/trainee advanced practitioners

<table>
<thead>
<tr>
<th>Role</th>
<th>Description</th>
<th>Level</th>
<th>Advanced clinical practitioner/CCNS/CCTN/ACHDNS/matron/educators/ward sister</th>
<th>Skills to include: good knowledge of treatments and medication management; high level of interest and awareness in public health; ability to identify long-term needs of population; case management, multi-professional/agency working</th>
<th>Professional qualification: RN. May be an independent nurse prescriber or working towards Master’s-level education/advanced practice</th>
<th>PG Cert/Diploma, working towards Master’s/L7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proficient</td>
<td>Experienced clinical professionals who have developed their theoretical knowledge to a very high standard. They are empowered to make high level clinical decisions and will often have their own caseload. Non-clinical staff at level 7 will typically be managing a number of service areas</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Senior practitioners/specialist practitioners

<table>
<thead>
<tr>
<th>Role</th>
<th>Description</th>
<th>Level</th>
<th>SSN senior research nurse</th>
<th>Equipment with a variety of clinical skills related to effective management of children and young people with cardiac needs, including care co-ordination skills</th>
<th>Professional qualification: RN. Additional education: working towards top-up degree or Postgraduate certificate and mentorship/qualification. Various CPD accredited qualifications – relating to specified congenital/acquired cardiac disease</th>
<th>PG Certificate CPD Modules (L6/7)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competent (in the specialty 2–3 years)</td>
<td>Staff would have a higher degree of autonomy and responsibility than ‘practitioners’ in the clinical environment, or would be managing one or more service areas in the nonclinical environment</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Practitioners

<table>
<thead>
<tr>
<th>Role</th>
<th>Description</th>
<th>Level</th>
<th>Registered nurse</th>
<th>Consolidating learning from registration and putting a range of skills into practice. Developing a portfolio of competence relating to congenital cardiac nursing</th>
<th>Professional qualifications: RN (at degree or diploma level) Additional education: undertaking CPD modules related to client group need</th>
<th>BSc (Hons) L6/Diploma L5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advanced Beginner (new to specialty)</td>
<td>Most frequently registered practitioners in their first and second post-registration/professional qualification job</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


Purpose and scope of this framework

This framework focuses on knowledge, skills and interventions that are enhanced or specific to nurses working in CYP cardiac nursing. Although the intention is for this framework to have a stand-alone function, it should be used in conjunction with other frameworks that focus on core skills and competencies for health care professionals, such as the Principles of Nursing Practice (RCN, 2010); Future nurse: Standards of proficiency for registered nurses (NMC, 2018b), Quality standards for the care of critically ill children (PICS, 2015); and the Multi-professional framework for advanced clinical practice (NHSE, 2017).

Benefits of the framework

The competency framework provides benefits for nurses, their employers, patients and the public.

Nurses benefit because the framework helps to:

• set a standard of care to be delivered, which is transparent to children and families receiving care
• deliver consistently high standards of care
• identify the level of practice and enable them to plan a career in a more structured way
• pinpoint personal education and development needs
• realise potential more effectively
• seize opportunities to influence the direction of nursing
• ensure nursing is key to the safe, high quality, child friendly and effective service for children, young people and their families.

Employers benefit because the framework provides:

• a model to deliver consistently high standards of care
• clearer insight into the expertise and competence of staff, for example, in assessment of risk management
• assistance in organisational and workforce planning.

Patients and the public benefit because the framework enables:

• consistently high standards of patient care
• increased effectiveness of service provision
• improved access and choice for care provision
• a consistent pathway of care from fetal/diagnosis to transition into adult cardiac services
• improved quality
• improved management of risk
• improved experience
• improved outcomes
• the support of integrated care management and delivery.

Using the framework

The framework should be used as a tool to guide practice development and meet clinical aims and objectives. It can also be used for personal development plans, and by mentors and managers in the performance appraisal process. The framework needs to be used with reference to local and national guidelines and policies, incorporating the Knowledge Skills Framework (KSF) and National Occupational Standards (Skills for Health, 2006; 2010; NHS Employers, 2019) for:

• assessing clinical competence at differing levels
• developing personal goals and objectives
• performance appraisal
• supporting job descriptions and pay reviews/negotiations by detailing targets in accordance.

It must be recognised that a nurse specialist working in the field of CYP cardiac nursing undertakes a vast role.

Currently there are very different job descriptions and, therefore, not every competency is relevant to each practitioner. The aim of this framework is to assist in achieving consistency of standards and roles across CYP cardiac nursing.

When this framework is used as an organisational tool, the relevance of specific competencies must be made clear. This document is a starting point and practitioners using the framework need to ensure that they keep up-to-date with changes in legislation, policy and practice that can impact on their role, in line with the Nursing and Midwifery Council Code (NMC, 2018a) and the Principles of Nursing Practice (RCN, 2010).
3. Key nursing roles across children and young people’s cardiac services

Introduction

Specific nursing standards were published by the RCN to develop the nursing care of children and young people (CYP) with congenital heart disease (RCN, 2011; 2014), while also providing innovative career pathways for CYP nurses. These nursing roles all contribute to a larger multi-professional cardiac team. The key roles originally identified in the RCN standards (2011) and revised for the second (2014) and this third edition, will now be described with a brief overview of the aim of each role. The updated job descriptions and person specifications can be found in the appendices.

Lead nurse for the network (career framework level 8)

The CHD standards state that each congenital heart network will have a formally appointed lead nurse who will provide professional and clinical leadership to the nursing team across the network (NHSE, 2016, standard A23, L1, p.35). Furthermore, each specialist children’s cardiology centre must have a formally nominated nursing clinical lead who has a direct collaborative working partnership with the lead nurse for the network (p.159). The post-holder must have specified time working in children’s cardiology, with an agreed list of responsibilities. The time available for these responsibilities will be specified by the network (NHSE, 2016, standard A19, L2, p. 229).

As a senior member of the clinical team at the tertiary centre, the lead nurse (see Appendix 1) will also contribute to the strategic development of the whole service across the network. The post-holder will be accountable for providing professional and clinical leadership, ensuring the provision and delivery of a high standard of specialist cardiac nursing care to children and young people with congenital heart disease and those requiring surgery and/or medical/interventional treatment. This remit will include the specialist children’s surgical centre (Level 1), specialist children’s cardiology centre (Level 2), and local children’s cardiology centre (Level 3). Networking across, as well as between, the services will be a central component of the role, developing and building links with and between staff to ensure streamlined care for the children and their families.

The post encompasses a lead role in shaping the vision and future development of the family-focused specialist cardiac nursing service, working in collaboration with children’s cardiac nurse specialists and children’s nurses with an interest in cardiology, across the network. This will include educational pathways for ensuring the implementation of high-quality, evidence-based care, nursing education, training and leadership responsibilities.

The role also involves creating an efficient, comprehensive and integrated approach to multi-professional working, in line with the individual hospital’s protocols, guidelines and relevant national policies.
The lead nurse will be responsible for:

- shaping the vision and future development of the children’s cardiac nurse specialist service, in collaboration with the continuum of children’s cardiac nurse specialist and children’s nurses with an interest in cardiology, across the network
- leading the development and delivery of child- and family-focused cardiac care and support
- developing and implementing effective nursing communications across the network
- maintaining their own clinical practice, aiming for 20% of their time over the period of a month
- leading nursing education, research and development, working in collaboration with other lead members of the multidisciplinary team.

Children’s cardiac nurse specialist (CCNS) (career framework levels 6–7)

NHSE (2016) standards state that each congenital heart network will employ a minimum of either seven whole time equivalents (WTE) children’s cardiac nurse specialists or one per 600,000 of the catchment population (whichever is the larger), distributed across the network according to geography and population. Included in this complement will be at least one WTE fetal cardiac nurse specialist and one WTE children’s cardiac transition nurse (p.157). The network children’s cardiac nurse specialist team will support the specialist children’s cardiology centre. An appropriate number of children’s cardiac nurse specialists will be based at the specialist children’s cardiology centre (the number will depend on geography, population and the congenital heart network) (NHSE 2016, standard B13, L2, p.231). The network children’s cardiac nurse specialist team will also provide support, education and a link to the outpatient and ward nursing staff at the local children’s cardiology centre. A local registered children’s nurse, with an interest in CHD (see Appendix 6), will be identified who can be a point of contact within the local children’s cardiology centre (NHSE, 2016, standard B5, L3, p.273).

The children’s cardiac nurse specialist (CCNS) team will collaborate across CYP cardiac services and can encompass the whole age trajectory, ensuring that all patients have access to a children’s cardiac nurse specialist (NHSE, 2016, standard H9, L1–3) and that patients with complex needs have a named children’s cardiac nurse specialist responsible for coordinating their care (NHSE, 2016, p.149). An appropriate number of children’s cardiac nurse specialists will be based at the specialist children’s cardiology centre and supported by the team at the specialist children’s surgical centre. Where a fetal cardiology service exists, this must be supported by a children’s cardiac nurse specialist with experience in fetal counselling (NHSE, 2016, p. 159).

The CCNS team of nurses will provide specialist nursing care through:

- provision of practical information, education and emotional support to parents following antenatal or postnatal diagnoses, in collaboration with fetal cardiac nurse specialists
- availability at all outpatient appointments to help explain diagnosis and management of the child’s condition and to provide relevant literature (NHSE, 2016, standard H13, L1, p. 207; H10, L2–3, p.250, 286)
• assessment of family resiliency in terms of factors that may impact on adjustment and adaptation to potentially traumatic events (NHSE, 2016, standard H14, L1, p.207; H11, L2–3, p. 250, 286)

• assessment of the social, cultural, spiritual, psychological, emotional and physical needs of children, young people and their families

• working in partnership with children, young people and their families to meet their identified needs, to include planning, negotiating, implementing and evaluating an agreed plan of care; support parents and children/young people throughout the consent process (NHSE, 2016, standard H23, L1, p.209; H20, L2–3, p. 251, 287)

• involvement and making referrals to other health care professionals, where need indicates, such as psychological support or for children with learning disabilities (NHSE, 2016, standard H15, L1, p.207; H12, L2–3, p. 250, 286)

• provision of advice and support for children, young people and their families during the transition between home, community and hospital cardiac care

• provision of a children’s cardiac nurse specialist/fetal cardiac nurse specialist telephone advice service for patients and their families/carers, health care professionals and non-health care and voluntary sector professionals (NHSE, 2016, p. 149)

• co-ordination and facilitation of out-of-hospital care delivery and provision of support for children and young people and their families, ensuring continuity of care and effective communication across the network throughout their journey. Also acting as an expert resource for the multidisciplinary team, providing specialist education, advice and support to colleagues across the network and wider community (including health, social care and education colleagues)

• working in collaboration with the children’s cardiac transition nurse (CCTN) and adult congenital heart disease nurse specialists to empower young people and their families during their transition from children’s to adult services (NHSE, 2016, standard I7, L1, p.211; I7, L2–3, p.253, 289)

• providing support and advice to nursing staff within intensive care, high dependency care and inpatient wards (NHSE, 2016 standard F19, L1, p.202)

• provision of support to children/young people and their families/carers with palliative and end of life care decisions, liaising with teams to arrange formal ongoing bereavement support (NHSE, 2016, standard L28, L1–3, p.221, 263, 299).

The suggested team profile would include a range of roles from AfC bands 6–8 (RCN, 2009) – the lead CCNS at a minimum band 8 role (see Appendix 4), an AfC band 7 (see Appendix 3) and possibly a band 6 role (see Appendix 2), rotating the team to develop knowledge and skills. This team will be an integral part of a wider cardiac team that includes fetal cardiac nurse specialists, transition nurses, adult congenital heart disease nurse specialists and other health and social care professionals, such as social workers, psychologists and family support workers.

Career pathways will ensure that each CCNS has experience in all aspects of the service. Importantly, the expert CCNS post-holder (career framework level 7) should have advanced health assessment skills and advanced communication skills but is not required to be an advanced nurse practitioner (ANP).
Rotation (possibly for six to 12 months) into the team will provide a development opportunity for career framework level 6 (experienced/proficient) nurses, enabling them to learn about the role of the CCNS whilst developing transferable knowledge and skills to support the work of the team. This development post would not expect autonomous practice, however, it will enable succession planning for the future of the CCNS team.

The children’s cardiac nurse specialist service is fundamental to the development of a high-quality CYP cardiac service and, as such, should be resourced and maintained to cover the whole clinical network. Evidence obtained from parents demonstrates that their role is universally appreciated by CYP and their families, therefore, all CYP and their families should have equitable access to the CCNS service throughout their health care journey.

**Children’s cardiac transition nurse (CCTN) (career framework levels 6–7)**

It is expected that the children’s cardiac transition nurse (CCTN) role will be at a minimum AfC band 7 (see Appendix 5). Each network shall have a minimum of one WTE designated CCTN to co-ordinate the transition process (NHSE, 2016, standard B29 L1, p.186). The CCTN will practice autonomously to provide a framework of care as a core member of the cardiac team across the network, to include intra-professional collaboration with the CCNS, adult congenital heart disease nurse specialist and adult congenital heart disease network.

There should not be a fixed age of transition from children’s to adult services but the process of transition should be initiated no later than 12 years of age, taking into account individual circumstances and special needs (NHSE, 2016, standard I4, L1, p.211). The CCTN will be available to support young people up to the age of 25 (NHSE, 2019a).

Rotation (possibly for six to 12 months) into the team will provide a development opportunity for level 6 (experienced/proficient) children’s cardiac nurses, enabling them to learn about the role of the CCTN while developing transferable knowledge and skills to support the work of the team. This development post would not expect the individual to function as an autonomous practitioner; however, it would enable succession planning for the future of the CCTN team. The CCTN is a new and developing role within the wider cardiac team and is responsible for shaping, developing and implementing services for young people across the network, in line with current research and best practice guidelines (DH, 2011; NHSE, 2016).

The aim of the CCTN role is to act as a liaison between young people, their carers, the children’s cardiac nurse specialist, the adult congenital heart disease specialist nurse and the wider multidisciplinary team to facilitate the transition process (NHSE, 2016 p.12). A named children’s cardiac transition nurse will act as a main point of contact and provide support to the young person and their family through the transition process; assisting in the development of skills, information and experience needed to become independent, confident and capable users of adult health care services.

Post-holders must ensure that all young people and their families across the network have equitable access to the CCTN service; evidence obtained from parents demonstrates that the role of the CCTN is universally appreciated by young people and
their families as they strive to manage the challenges that adolescence brings.

The CCTN will provide specialist nursing care in collaboration with other nursing colleagues, to all young people aged 12 and over with a congenital cardiac condition through:

- assessment of the social, cultural, psychological, physical, educational and career aspiration needs of young people and their families, with particular focus on the developing needs of adolescents
- assessment of young person and family resiliency in terms of factors that may impact on adjustment and adaptation to potentially traumatic events
- provision of practical information, education and emotional support to young people and their families
- ensuring young people understand the importance of follow up during adulthood and know how to recognise and what action to take in the event of any deterioration or acute episode of ill health
- general and cardiac specific health promotion to encourage the adoption of long-term healthy lifestyle behaviours in the young person and their family, including discussion of smoking, drugs, alcohol, puberty and sexual health
- engaging young people and their families and working in partnership to meet their identified needs; planning, negotiating, implementing and evaluating an agreed plan of care
- co-ordination and facilitation of out-of-hospital care delivery and provision of support for young people and their families, ensuring continuity of care and effective communication across the network throughout their journey
- involvement of other health care professionals where need indicates, such as psychological support
- provision of specialist advice and support for young people and their families during the transition between children and adult services, supporting young people to become independent, confident and capable when managing their own health care needs, while simultaneously supporting parents to adopt a more supportive role and adjust to the change in responsibility that this entails
- liaising within and across organisational boundaries to ensure co-ordination and facilitation of transition to adult services for all co-morbidities and additional needs
- acting as an expert resource, clinical role model and leader in transition care for the multidisciplinary team, providing specialist education, advice and support to colleagues across the network and wider community (including health, social care and education colleagues)
- working in collaboration with the adult congenital heart disease nurse specialists to empower young people and their families and to ensure an efficient and effective transition process
- advocating for young people and their families at a local and national level
- working within the network to reduce the lost to follow-up rates between children and adult services.
Cardiac clinical nurse educator (career framework levels 6–7)

There should be a team of clinical educators for the network who will ideally be led by a cardiac clinical nurse educator, AfC band 8a (see Appendix 7). There must be sufficient cardiac clinical nurse educators provided across the network (specialist children’s surgical centre, specialist children’s cardiology centre), to deliver standardised training and education competency-based programmes. They will also be responsible for ensuring the continuing professional development of nursing staff in the local children’s cardiology centre and for community children’s nurses (NHSE, 2016, standard E5, L3, p.279). The competency programmes will commence with preceptorship for newly registered nurses and must subsequently focus on the acquisition of knowledge and skills, such as, clinical examination, assessment, diagnostic reasoning and treatment, facilitating and evaluating care, evidence-based practice and communication. Skills in teaching, research, audit and management will also be part of the programme (NHSE, 2016, standard E6, L1-3, p199, 243).

The aim of this cardiac educator role is to work in conjunction with the lead nurse for the network in leading the development and implementation of the nursing education vision across the network. The post-holder will work autonomously, leading an effective strategy for education and training within the context of evidence-based practice, using research, audit, clinical guidelines and pathways of care. Effectiveness of the education process will be evident through measurement of nurse sensitive outcome measures. Close collaboration with the other network cardiac educators is essential.

The post-holder will also work closely with multi-professional, research and highly specialised teams, to develop a well-regarded local and national nursing body of knowledge. The post-holder will also work across organisational boundaries (collaborating with other cardiac clinical educators and universities nationally) to support the educational development of a world class service, which is able to lead on educational and evidence-based resources across and beyond the network.

Fetal cardiac nurse specialist (career framework levels 6–7)

It is expected that the fetal cardiology nurse specialist role will be at a minimum AfC band 7 (see Appendix 8). Each clinical network will have at least one fetal cardiology nurse specialist and their role will be to:

- work in collaboration with providers of maternity and children’s cardiac services to ensure that NHS Fetal Anomaly Screening Programme standards are consistently met and results reported (NHSE, 2016, standard K2, L1, p.214)
- be present during the consultation or contact all prospective parents whose baby has been given an antenatal diagnosis of cardiac disease to provide information and support on the day of diagnosis
- provide parents with contact details for relevant local and national support groups at this point
• work with the cardiologist and the fetal medicine team to ensure that condition-specific information, explanation of treatment options, and psychosocial support is provided
• act as the point of contact for the family throughout pregnancy for support and further information (NHSE, 2016, standard K8, L1–3, p.216, 258, 293).

Nurse staffing levels across children’s cardiac services

Nursing care across CYP cardiac services must be provided by a dedicated team of nursing staff who are trained and educated in the care of CYP with congenital cardiac medical, interventional and surgical health care needs. The inpatient nursing teams (theatres, interventional suites, intensive care, high dependency care, wards, outpatient departments, assessment units, etc) will be led by senior children's nurses with specialist knowledge and experience in the care of children with cardiac medical, interventional and surgical health care needs. These senior nurses will be professionally accountable to the lead nurse.

Children’s cardiac intensive care units and high dependency care will be staffed according to national standards (PICS, 2015). A children’s cardiac specialist nursing team will be available to provide support and advice to nursing staff across CYP cardiac services (intensive care, high dependency care, wards, outpatient departments and assessment units).

The CHD standards (NHSE, 2016, section 4.2, p.157) outline the key workforce requirements for nursing across the networks. Each network will have:

• a formally appointed lead nurse who will provide professional and clinical leadership to the nursing team across the network
• annual training plans in place, to ensure ongoing education and professional development for all health care professionals involved in the care of children with congenital heart problems.

Specialist cardiac surgical centre (section 4.2.1, p.157–158)

• Each specialist cardiac surgical centre will have a senior children’s nurse (band 7) who leads a team (band 5/6), with specialist knowledge and experience in the care of children in children's cardiology and cardiac surgery. They will lead a dedicated team of nursing staff trained in the care of children who have received cardiac surgery.
• Each specialist children’s surgical centre will provide sufficient clinical cardiac nurse educators to deliver competency-based programmes for nurses across the network.
• Each congenital heart network will employ a minimum of either seven WTE children’s cardiac nurse specialists or one per 600,000 of the catchment population (whichever is the larger) distributed across the network according to geography and population. Included in this complement will be at least one WTE fetal cardiac nurse specialist and one WTE children’s cardiac transition nurse.

Specialist children’s cardiology centres (section 4.2.2, p159)

• Each specialist children’s cardiology centre must have a formally nominated nursing clinical lead who has a direct collaborative working partnership with the lead nurse for the network and has specified time working in children’s cardiology.
• Each specialist children’s cardiology centre must have designated registered children’s nurses with a special interest in children’s cardiology, trained and educated in the care of children and young people with heart disease.

• There must be a minimum of two registered children’s nurses allocated to the children’s cardiology beds who are trained according to the RCN competency framework.

• An appropriate number of children’s cardiac nurse specialists will be based at the specialist children’s cardiology centre and supported by the team at the specialist surgical centre. Where a fetal cardiology service exists, this must be supported by a children’s cardiac nurse specialist with experience in fetal counselling.

Local children’s cardiology centres (section 4.2.3, p.160)

The local children’s cardiology centre will have a locally designated registered children’s nurse with a specialist interest in children’s cardiology, trained and educated in the care of cardiac children and young people. 0.25 WTE must be available to participate in cardiology clinics.

### Additional nursing roles

In addition to the roles described in this document, and with the *Long-Term Plan* (NHS, 2019a) in mind, the future emphasis on care provision should be through integrated care management and delivery. Therefore, further nursing roles are required to assist the CYP cardiac team. The CHD standards (NHSE, 2016) indicate that the identified teams and the relationships will include nurses and other professionals who will be working with and linking to the cardiac nursing teams across the three level settings and into the community. Thus, the wider nursing teams will need to be informed and skilled in working within the partnership approach to care (NHSE, 2016, standard D10, L1 – D46, L1 p.193–197; D5, L2; D44, L2 p.237–241 and A10, L3 p.269). So, a key competency of the cardiac nursing team will be to develop collaborative working so that the CHD service is more joined-up and co-ordinated in its care (NHS, 2019a), with the aim of:

‘breaking down traditional barriers between care institutions, teams and funding streams so as to support the increasing number of people with long-term health conditions, rather than viewing each encounter with the health service as a single, unconnected ‘episode’ of care.’ (NHS, 2019a. p.12).

### Infection control

An infection control team, experienced in the needs of children’s cardiac surgery patients (NHSE, 2016, standard D20, L1, p.194), should ideally be located on the same hospital site as the specialist children’s surgical centre. All health care professionals at the specialist children’s surgical centre, specialist children’s cardiology centre, and local children’s cardiology centre must take part in a programme of continuing professional development, including infection control. In the specialist children’s cardiology centre there should be an infection control nurse experienced in the needs of children’s cardiac patients (NHSE, 2016, standard D22, L2, p.238).

Registered children’s nurses working in a specialist children’s cardiology centre, a local children’s cardiology centre or community settings (including primary and pre-hospital care), must have the required competence, knowledge and skills to assess ill
CYP with congenital heart disease, and have advanced communication skills. Specialist competence, knowledge and skills will be required if providing complex and palliative care to CYP who are technologically dependent (for example, on long-term ventilation) (NHSE, 2016, standard E1, L2, 3, p.242, 279).

Registered children’s nurses working in specialist children’s surgical centre theatres, interventional suites or specialist children’s cardiology centres, local children’s cardiology centres, emergency care and assessment units must have the required competence, knowledge and skills to care for CYP with congenital heart disease, and have completed children’s intermediate life support education (NHSE, 2016, standard E1, L1–3, p.198, 242, 279).
4. The future vision for nursing within the children’s cardiac specialty

Introduction

A national survey of CYP cardiac nurses roles (Gaskin, 2019) has demonstrated that some progress has been made with this vision since 2014, such as the employment and growth of advanced nurse practitioner roles across several specialist children's surgical centres, the first consultant nurse in electrophysiology and inherited cardiac conditions in London; cardiac research nurses in Bristol and an honorary cardiac nurse researcher (principal lecturer, career framework level 8) in Birmingham.

Developing a world class evidence-based nursing service requires an ongoing planned, co-ordinated approach that will meet the dynamic needs of children, young people and their families, ensuring excellent care in a highly skilled and specialist field of practice. Continued development and modernisation of nursing roles and contemporary career pathways that are fit for purpose and fit for future practice, will enable greater realisation of innovation underpinned by nursing research.

Children’s cardiac nurse consultants (career framework level 8)

The children’s cardiac nurse consultant role may focus in specific areas, such as surgery, transplant, electrophysiology, arrhythmias, inherited cardiac conditions, pulmonary hypertension and cardiac intensive care. It is expected that this post will be at a minimum of AfC band 8b. The nurse consultant (see Appendix 9) is an autonomous practitioner with the delegated authority to practice independently, both professionally and organisationally. They will lead on strategic developments and contribute to national service changes in children's cardiac services, linking closely with stakeholders, maximising clinical capacity and coordinating service delivery while exploring strategic demands. This post will offer clinical leadership and incorporate both research and education into clinical practice. The post-holder will cover the four domains integral to nurse consultant roles. The clinical component of care will take up to 50% of their time (Woodward et al., 2005). Nurse consultants (NC) roles are expected to differ from other advanced practice roles, clinical nurse specialists and nurse practitioners (DH, 1999); with 50% of the nurse consultant’s time spent providing expert practice and the remaining 50% divided between leadership and consultancy; education and training; and service development, research and evaluation (Gerrish, McDonnell & Kennedy, 2013).

The post-holder will demonstrate:

- expert practice function
- professional leadership and consultancy function
- education, training and development function
- practice and service development
- research and evaluation function.
For more information see *Becoming and Being a Nurse Consultant* (RCN, 2012). The nurse consultant role will work in conjunction with consultant medical colleagues to develop and deliver a comprehensive service reflective of patient need. Focus will be on aspects of the service that need to meet national targets, shaping service delivery and maximising the knowledge and skills of existing practitioners. This will require complex knowledge and expert skills, with a strong emphasis on multi-professional collaboration. The post-holder will provide highly specialised professional advice, consultancy and clinical expertise in practice. Leadership skills will promote both internal and external networking opportunities, facilitation and management of change through collaboration.

As well as project-specific audit and research evaluation schemes, a contribution to research and clinical governance on a broader basis will also be sought. The nurse consultant supports modernisation strategies through service development and is engaged in the education and development of CYP cardiac nurses, both in terms of their existing role and that of highly specialised roles. The nurse consultant will be expected to work in close collaboration with other key nursing staff, such as lead nurses and clinical educators. It is desirable for the nurse consultant to engage in collaborative projects with nurse researchers, academics and professorial teams, and to hold an honorary academic contract with local higher education institutions.

**Children’s cardiac advanced nurse practitioners (career framework level 7)**

The children’s cardiac advanced nurse practitioner role is expected to be at a minimum AfC band 8a (see Appendix 10). The post-holder will demonstrate achievement of knowledge and skills to the standard outlined in the *Multi-professional Framework for Advanced Clinical Practice* (NHSE, 2017). The four pillars underpinning this level of practice are: clinical practice, leadership and management, education and research. Individuals working at this level are required to ‘operate at master’s level i.e. have the ability to make sound judgements in the absence of full information and to manage varying levels of risk when there is complex, competing or ambiguous information or uncertainty’ (p.8).

The development of this role requires the organisation to support the governance around the role development and the intrinsic need for ongoing change and adaptation of practice. High level autonomous advanced clinical decision-making will be evident within the management of the post-holder’s own caseload, the minimum amount of clinical time will be decided upon by the specialist children’s surgical centre/specialist children’s cardiology centre to meet the needs of the role, sector and specialism (NHSE, 2017). The post-holder will communicate closely with the lead nurse and other key nursing post-holders for the network. The role enables clinical decisions to be made in a timely fashion, meeting the needs of the child and their family throughout the patient journey. It is envisaged that there will be advanced clinical practitioners in all areas of the network.
Professor of congenital cardiac nursing (career framework level 9) – national post

The professor role is expected to be at career framework level 9 and will be a national post. A reader/associate professor (Appendix 12) or professorial post (Appendix 13) would reflect NHS and academic collaboration, leading and developing congenital cardiac nursing research and implementation of evidence-based practice across all children’s cardiac networks. The aim is for the post-holder to work collaboratively with other key nursing post-holders, such as lead nurses, nurse consultants, advanced practitioners and clinical educators to produce high quality research outputs. They will contribute not only to the academic development of staff and students within both organisations, but also to progress the development of a dedicated nursing research focused infrastructure within the NHS. The post-holder will have a PhD in a relevant clinical practice discipline.
5. The Knowledge and Skills Framework for children and young people’s cardiac nurses

Introduction

The Knowledge and Skills Framework (KSF) competencies are presented in this section. These cover:

• core dimensions for children’s cardiac nursing
• specific dimensions for children’s cardiac nursing
• knowledge
• skills.

The levels of competence, which had previously been based on Benner’s novice to expert continuum, have been translated into this third edition RCN publication. The levels in this framework refer to competent, experienced and senior or expert practitioners. They align to levels 5, 6 and 7 of the Career Framework for Health (DH, 2004; Skills for Health, 2006); a simplified KSF is now available (NHS Employers, 2019). These levels refer to a lifelong learning continuum and do not directly correlate with the Agenda for Change pay bandings.

Progression through the levels will obviously be different for each nurse, depending on context, level of skill, performance appraisal, and individual objectives. However, it is envisaged that movement towards ‘experienced’ (level 6) should occur after being in post for approximately 18 months to two years. Dependent on the patient population, workload, and individual needs, the children’s cardiac nurse should be achieving ‘expert’ (level 7) status after approximately five years in post. It should be stressed that nurses should always be working to advance their practice (NMC, 2018).
## 5.1 Core dimensions

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<th>Practitioner competent nurse (level 5)</th>
<th>Senior practitioner specialist/practitioner experienced/practitioner proficient nurse (level 6)</th>
<th>Children's cardiac specialist nurse (level 6)</th>
<th>Expert Nurse must be level 7</th>
<th>Advanced practitioner (level 7)</th>
<th>Lead clinical educator for the network (level 8)</th>
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### 5.2 Specific dimensions

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<th>Practitioner competent nurse (level 5)</th>
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<th>Practitioner specialist nurse (level 6)</th>
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<th>Reader/professor (level 8-9)</th>
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<td>Knowledge and skill in promotion of heart health, including provision of advice on diet, exercise, medications, stress and psychosocial functioning (KSF HWB1)</td>
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<td>Actively promoting heart health, including provision of advice on diet, exercise, medications, stress and psychosocial functioning (HWB1)</td>
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<td>Patient assessment skills: vital sign monitoring, fluid balance, recognition of abnormal heart rhythm, knowledge of common cardiac drugs – diuretics, angiotensin converting enzyme (ACE) inhibitors, drug calculations</td>
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<td>Refining patient assessment skills – vital sign monitoring, fluid balance, management of abnormal heart rhythm</td>
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<td>Advanced life support skills</td>
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<td>Proactive medicine management in clinical practice</td>
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<td>Administering medication to Patient Group Directive (PGD) criteria</td>
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<td>Partnership working with children and young people to enable compliance and concordance with medication and heart health</td>
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<td>Family dynamics, stress and coping – recognition of poor coping, awareness of appropriate referral system</td>
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<td>Counselling skills, advanced communication skills to optimise family coping</td>
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<td>Preparation of the child and family for investigations and interventions/ treatment (KSF HWB2, HWB3, HWB4, HWB5, HWB6, HWB7)</td>
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<td>Co-ordinates the preparation of the child and family for investigations and interventions/ treatment (KSF HWB2, HWB3, HWB4, HWB5, HWB6, HWB7)</td>
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<td>Data management and documentation – care-planning, record-keeping, audit data collection (KSF IK2, IK3)</td>
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<td>Exemplar record-keeping, using data and audit cycles to affect care quality and outcome</td>
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<td>Expert practitioner, making autonomous clinical decisions</td>
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<td>In-depth knowledge of anatomy and physiology to facilitate advanced clinical assessments</td>
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<td>Case manage children ensuring that the care, fully reflects the latest evidence or research developments</td>
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<td>Provide consultancy for nursing and medical staff across the network, demonstrating advanced generalist as well as specialist knowledge of practice, clinical skill and problem solving ability</td>
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<td>Involvement in research and audit within the cardiac specialty</td>
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<td>Develop and drive policy, protocol and pathway development for improved patient case management</td>
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### 5.3 Knowledge and skills

#### 5.3.1 Knowledge (levels 5-6)

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<td>Understand the long-term implications of heart transplantation and when referral is indicated</td>
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<td>Identify the role of the specialist transplant team in organisation, co-ordination and follow-through care of children requiring transplantation</td>
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<td>36</td>
<td>Knowledge of specialist teams, for example, pulmonary hypertension, arrhythmia, transplant, sudden death</td>
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<td>Identify psychological post-operative problems</td>
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<td>Knowledge of complication post cardiopulmonary by-pass</td>
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5.3.2 Knowledge (levels 7-9)

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<th>Lead clinical educator for the network (level 7)</th>
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<td>Knowledge of specialist teams, for example pulmonary hypertension, arrhythmia, transplant, sudden death</td>
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<td>Care of child requiring tracheotomy and long-term respiratory support (CPAP/BiPAP)</td>
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### 5.3.3 Skills (levels 5-6)

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<td>1</td>
<td>Observe and assess patients’ condition relating to their general, respiratory, cardiovascular, neuro-developmental and elimination needs</td>
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<td>Maintain an airway and use recognised artificial airways, prongs, tracheotomies etc.</td>
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<td>Suction, positioning and assisting with physiotherapy</td>
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<td>5</td>
<td>Perform non-invasive vital sign monitoring including Sao2</td>
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<td>ECG monitoring and recognise deviations from normal for the CYP</td>
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<td>Arterial/CVP monitoring and recognise deviations from normal for the CYP</td>
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<td>Undertake 12 lead and 24hr ECG monitoring</td>
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<td>Drawing of blood samples and use of laboratory services/point of care analysis:</td>
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<td>• APTT analysis</td>
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<td>Safe administration of medication (oral and IV)</td>
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<td>Safe administration and knowledge of side-effects of drugs used in HDU</td>
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<td>Safely care for central venous access catheters</td>
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<td>15</td>
<td>Safely administer drugs via inhalers and nebulisers</td>
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<td>A&amp;E</td>
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<td>Identify the role of the specialist transplant team in organisation, co-ordination and follow-through care of children requiring transplantation</td>
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### 5.3.3 Skills (levels 5-6) (continued)

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<td>Recognise when support is required for families with long-term difficulties and direct to appropriate services</td>
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<td>Find appropriate information for staff and families about conditions identified</td>
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<td>22</td>
<td>Communicate with families regarding family issues and direct to relevant support services as required</td>
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<td>23</td>
<td>Assisting parent support/community liaison</td>
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<td>24</td>
<td>Preparation of child/family for surgery including safe transfer of patient to theatre</td>
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<td>25</td>
<td>Pre-operative/anaesthetic management including surveillance intra-op and post-op</td>
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<td>26</td>
<td>Identify physical post-operative problems (surgical centre)</td>
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<td>27</td>
<td>Identify pulmonary hypertensive crises</td>
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<td>28</td>
<td>Safely manage infusion devices for monitoring lines and zeroing techniques</td>
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<td>29</td>
<td>Assessment and management of low cardiac output states</td>
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<td>30</td>
<td>Maintain an airway, and competency trained in the use of recognised airway adjuncts including tracheostomy</td>
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<td>Actively manage the child requiring assisted ventilation techniques – such as CPAP. Troubleshoot effectively equipment malfunction</td>
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<td>Apply ventilation strategies in response to blood gas analysis in line with local policy</td>
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<td>Actively manage deviations from normal electrophysiology, for example cardioversion, pacing, medication, cooling</td>
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<td>34</td>
<td>Refer to specialist inherited cardiac disorders team, for example, PHT, EP, heart failure</td>
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<td>Manage the child with suspected pulmonary vascular disease, engaging with pulmonary hypertensive specialist team for advice and support</td>
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<td>Identify the role of the specialist transplant team in organisation, co-ordination and follow-through care of children requiring transplantation</td>
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<td>Organisation and timely planning of patients for discharge from clinical areas</td>
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<tr>
<td>38</td>
<td>Planning and undertaking internal and external patient transfer</td>
<td></td>
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<tr>
<td>39</td>
<td>Understands importance of discharge planning to ensure efficient use of resources</td>
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<tr>
<td>40</td>
<td>Understands the importance of follow up care post-surgery (at surgical centre)</td>
<td></td>
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</tr>
<tr>
<td>41</td>
<td>Understands the importance of follow up care and how to arrange it (community, networks clinics, etc.)</td>
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<td></td>
</tr>
</tbody>
</table>

**Yes** ✅ | **No** ❌
### 5.3.4 Skills (levels 7-9)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

1. Observe and assess patients’ condition relating to their general, respiratory, cardiovascular, neuro-developmental and elimination needs

2. Recognition of child with acute airway obstruction – ABC

3. Maintain an airway and use recognised artificial airways, prongs, tracheotomies etc.

4. Suction, positioning and assisting with physiotherapy

5. Perform non-invasive vital sign monitoring including Svo2

6. ECG monitoring and recognise deviations from normal for the CYP

7. Arterial/CVP monitoring and recognise deviations from normal for the CYP

8. Undertake 12 lead and 24hr ECG monitoring

9. Drawing of blood samples and use of laboratory services/point of care analysis:
   - blood gas analysis
   - electrolytes
   - blood sugar
   - INR
   - APTT analysis

10. Use of portable equipment

11. Maintenance/recording of accurate fluid/colloid balance

12. Safe administration of medication (oral and IV)

13. Safe administration and knowledge of side-effects of drugs used in HDU

14. Safely care for central venous access catheters

15. Safely administer drugs via inhalers and nebulisers

16. Safe administration of post-operative drugs (surgical centre)

17. Assessment and preparation for transplantation (surgical centre)

18. Long-term management of transplantation and follow-up

19. Identify the role of the specialist transplant team in organisation, co-ordination and follow-through care of children requiring transplantation

20. Recognise when support is required for families with long-term difficulties and direct to appropriate services

21. Find appropriate information for staff and families about conditions identified

22. Communicate with families regarding family issues and direct to relevant support services as required

23. Assisting parent support/community liaison

24. Preparation of child/family for surgery – including safe transfer of patient to theatre (surgical centre)
### 5.3.4 Skills (levels 7-9) (continued)

<table>
<thead>
<tr>
<th>No.</th>
<th>Skill Description</th>
<th>Children’s cardiac specialist nurse (level 6-7) Expert</th>
<th>Advanced practitioner (level 7)</th>
<th>Lead clinical educator for the network (level 7)</th>
<th>Consultant nurse (level 8)</th>
<th>Lead nurse for the network (level 8)</th>
<th>Reader/professor (level 8-9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>25</td>
<td>Pre-operative/anaesthetic management including surveillance intra-op and post-op</td>
<td></td>
<td></td>
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<tr>
<td>26</td>
<td>Identify physical post-operative problems (surgical centre)</td>
<td></td>
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<tr>
<td>27</td>
<td>Identify pulmonary hypertensive crises</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>28</td>
<td>Safely manage infusion devices for monitoring lines and zeroing techniques (ITU/HDU)</td>
<td>(ITU/HDU)</td>
<td></td>
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<td></td>
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<tr>
<td>29</td>
<td>Assessment and management of low cardiac output states (ITU/HDU)</td>
<td></td>
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<tr>
<td>30</td>
<td>Maintain an airway, and competency trained in the use of recognised airway adjuncts including tracheostomy</td>
<td>(ITU/HDU)</td>
<td></td>
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<tr>
<td>31</td>
<td>Actively manage the child requiring assisted ventilation techniques – such as CPAP. Troubleshoot equipment malfunction (ITU/HDU) effectively</td>
<td>(ITU/HDU)</td>
<td></td>
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<tr>
<td>32</td>
<td>Apply ventilation strategies in response to blood gas analysis in line with local policy (ITU/HDU)</td>
<td>(ITU/HDU)</td>
<td></td>
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<td></td>
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<tr>
<td>33</td>
<td>Actively manage deviations from normal electrophysiology, for example cardioversion, pacing, medication, cooling (ITU/HDU)</td>
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<tr>
<td>34</td>
<td>Refer to specialist inherited cardiac disorders team, for example, PHT, EP, heart failure</td>
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<tr>
<td>35</td>
<td>Manage the child with suspected pulmonary vascular disease, engaging with pulmonary hypertensive specialist team for advice and support</td>
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<tr>
<td>36</td>
<td>Identify the role of the specialist transplant team in organisation, co-ordination and follow-through care of children requiring transplantation</td>
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<tr>
<td>37</td>
<td>Organisation and timely planning of patients for discharge from clinical areas</td>
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<tr>
<td>38</td>
<td>Planning and undertaking internal and external patient transfer</td>
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<tr>
<td>39</td>
<td>Discharge planning to ensure efficient use of resources</td>
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<tr>
<td>40</td>
<td>Proactive planning of transitional care needs for the child requiring adult services</td>
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<tr>
<td>41</td>
<td>Act as an expert practitioner demonstrating advanced clinical skills and knowledge, addressing the needs of a children and young people with congenital heart disease and their families</td>
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<tr>
<td>42</td>
<td>Advanced communication skills to promote team assessment planning and evaluation of collaborative and co-ordinated care</td>
<td></td>
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<tr>
<td>43</td>
<td>Participate in and advance the audit and research process</td>
<td></td>
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<tr>
<td>44</td>
<td>Order, interpret and act upon investigations</td>
<td></td>
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<tr>
<td>45</td>
<td>Manage effective therapeutic care, facilitating the evaluation of progress and comprehensive discharge planning throughout the illness trajectory</td>
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<tr>
<td>46</td>
<td>Demonstrate advanced problem-solving and critical thinking skills</td>
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<tr>
<td>47</td>
<td>Provide leadership for all nurses within children’s cardiac specialist nursing through role modelling, educational and academic resource, mentor and practice developer</td>
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</tbody>
</table>
### 5.3.4 Skills (levels 7-9) (continued)

<table>
<thead>
<tr>
<th>No.</th>
<th>Skill Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>48</td>
<td>Excellent leadership skills</td>
</tr>
<tr>
<td>49</td>
<td>Excellent strategic and management skills</td>
</tr>
<tr>
<td>50</td>
<td>Recognition as an innovator in the field of children’s cardiac nursing</td>
</tr>
<tr>
<td>51</td>
<td>Clinical governance concepts and techniques</td>
</tr>
<tr>
<td>52</td>
<td>Organisational skills e.g. time management, ability to meet deadlines</td>
</tr>
<tr>
<td>53</td>
<td>Project management: able to set priorities and meet deadlines in collaboration with a range of professionals</td>
</tr>
<tr>
<td>54</td>
<td>Masters degree in a relevant discipline</td>
</tr>
<tr>
<td>55</td>
<td>Teaching children’s cardiac care at undergraduate and post-qualification levels in academic and clinical settings</td>
</tr>
<tr>
<td>56</td>
<td>Recordable teaching qualification</td>
</tr>
<tr>
<td>57</td>
<td>Recognised teaching qualification</td>
</tr>
<tr>
<td>58</td>
<td>Excellent networking skills nationally and internationally</td>
</tr>
<tr>
<td>59</td>
<td>High level presentation skills</td>
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<tr>
<td>60</td>
<td>Strong record of publication</td>
</tr>
<tr>
<td>61</td>
<td>Excellent publication skills (in peer reviewed journals)</td>
</tr>
<tr>
<td>62</td>
<td>Evidence of ability to contribute new knowledge to the field of children’s cardiac nursing</td>
</tr>
<tr>
<td>63</td>
<td>Proven ability to apply research to practice</td>
</tr>
<tr>
<td>64</td>
<td>Good research practice/research governance skills</td>
</tr>
<tr>
<td>65</td>
<td>Excellent research skills (which has made an impact on policy and/or practice)</td>
</tr>
<tr>
<td>66</td>
<td>A national reputation in the children’s cardiac care field</td>
</tr>
<tr>
<td>67</td>
<td>Excellent interpersonal and communication skills</td>
</tr>
<tr>
<td>68</td>
<td>Excellent ability to work both independently and as a team leader</td>
</tr>
<tr>
<td>69</td>
<td>Ability to motivate staff</td>
</tr>
<tr>
<td>70</td>
<td>Able to work under pressure</td>
</tr>
<tr>
<td>71</td>
<td>Production of research proposals and grant applications</td>
</tr>
<tr>
<td>72</td>
<td>Significant experience as a principal investigator</td>
</tr>
<tr>
<td>73</td>
<td>Substantial success in securing external research funding</td>
</tr>
<tr>
<td>74</td>
<td>Supervision of research staff</td>
</tr>
<tr>
<td>75</td>
<td>Successful supervision of post graduate research students</td>
</tr>
</tbody>
</table>
6. The KSF competencies

Introduction

This section highlights the core and specific KSF competencies that are relevant to children's cardiac nurses (AfC band 7–8) and relate to 'pre-intervention (diagnostic and surgical)' and 'during treatment'. This set of competencies is at KSF levels 3/4 (DH, 2004; NHS Employers 2019) and refer to the 'expert' level of care (Benner, 1984), equating to level 7 of the Key Elements of the Career Framework (Skills for Health, 2010).
## The KSF competences

### Pre-intervention (diagnostic/surgical)

<table>
<thead>
<tr>
<th>Level</th>
<th>Competence</th>
<th>KSF</th>
<th>Performance criteria</th>
<th>Knowledge and understanding</th>
<th>Attitudes and behaviours</th>
<th>Contextual factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Develop an ongoing relationship with the child/young person and family</td>
<td>Core 1 Level 4</td>
<td>Records clearly demonstrate an auditable trail of contact and support provided relevant to the child/young person's needs</td>
<td>Cultural and social diversity issues applicable to the child/young person and their family/carers</td>
<td>Confident social skills Empathic</td>
<td>Skills for Health competences CS19, CS22</td>
</tr>
<tr>
<td>7</td>
<td>Empower the child/young person and family to be actively involved in managing their condition and making decisions regarding their plan of care</td>
<td>HWB4 Level 4</td>
<td>Records clearly demonstrate child/young person and their family being actively involved in decision-making regarding their plan of care</td>
<td>Enabling behaviours to promote individual development and independence</td>
<td></td>
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</tr>
<tr>
<td>7</td>
<td>Refer to other agencies when appropriate (for example, support groups, PHT, sudden death, EP)</td>
<td>HWB6 Level 4</td>
<td>Accurate completion of referral documentation and clear records of other agency involvement</td>
<td>Relevant agencies. Referral pathways to relevant agencies/support groups</td>
<td>Enabling Empowering</td>
<td>Laming report – Climbie</td>
</tr>
<tr>
<td>7</td>
<td>Using advanced clinical skills to assess and investigate and plan complex health and wellbeing needs of the child or young person</td>
<td>HWB6 HWB7 Level 4</td>
<td>Clearly records clinical examination findings appropriate. Requesting investigations, interpreting results, counselling appropriately</td>
<td>Chronic illness on family dynamics Child development Communication Counselling skills</td>
<td>Empathy Clinical expert insight into own level of practice and limitations Reflective practitioner</td>
<td>NHSE (2017) NMC’s The Code (2018)</td>
</tr>
<tr>
<td>7</td>
<td>Advance on educational role with the child and family with a suspected congenital or acquired heart defect Expert resource for health care providers</td>
<td>G1 Level 4</td>
<td>Preparation for surgery/intervention: psychological/emotional Physical Life changing event</td>
<td>Process knowledge Referral Counselling Interpersonal communication</td>
<td>Quality Empowering</td>
<td></td>
</tr>
<tr>
<td>Level</td>
<td>Competence</td>
<td>KSF</td>
<td>Performance criteria</td>
<td>Knowledge and understanding</td>
<td>Attitudes and behaviours</td>
<td>Contextual factors</td>
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<tr>
<td>7</td>
<td>See child/young person and/or family independently in nurse led clinic/services</td>
<td>HWB6 Level 4</td>
<td>Carrying out appropriate assessment processes applicable to the child/young person’s condition</td>
<td>Relevant anatomy and physiology Relevant agencies Health assessment Advanced clinical physical assessment Local organisational policies/procedures Confidentiality Risk assessment processes</td>
<td>Sensitive Counselling skills</td>
<td>Skills for Health competences: CS15</td>
</tr>
<tr>
<td>7</td>
<td>Case management of complex conditions and treatment regimens</td>
<td>HWB6 Level 4</td>
<td>Autonomy of clear discussion with the child/young person using language appropriate to age and level of understanding. Clear records of condition and treatment regimens discussed. Practice undertaking nurse led clinics Clinical decision making Evaluation of service efficiency</td>
<td>In depth knowledge of complex conditions and treatment regimens (for example, hypoplastic left heart syndrome (HLHS), late effects in survivors) Audit to inform practice</td>
<td>Time management Expert practitioner</td>
<td>Skills for Health competences: CS9</td>
</tr>
<tr>
<td>7</td>
<td>Address educational, social and cultural needs of the family around education and support and future health needs</td>
<td>HWB4 Level 4</td>
<td>Records clearly demonstrate the education support required, agreed, provided and clarified with the child/young person and their family Empowering families to become expert carers</td>
<td>Educational and social support mechanisms available Recognise contribution of other professionals and parent support groups</td>
<td>Equality and diversity Empowering Team-working Pro-activity</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Prescribe safely and cost effectively</td>
<td>HWB7 Level 4</td>
<td>Patient records clearly identify appropriate prescription for the child/young person’s clinical needs</td>
<td>Side-effects and contraindications of medications used in clinical practice</td>
<td>Sensitive</td>
<td>Completion of a recognised independent prescriber course and registration as an independent prescriber with the NMC Skills for Health competences: CM_A7, CS15</td>
</tr>
<tr>
<td>7</td>
<td>Contributing to the evidence base regarding children’s cardiac care to positively impact on patient experience</td>
<td>IK2 G2 Level 3</td>
<td>Instigating and leading on audit activity Evidence of integration of findings into clinical practice International/national presentation/dissemination</td>
<td>Good clinical practice course Engaging with R&amp;D processes</td>
<td>Critical thinking Problem solving Reflective</td>
<td>Evidence-based medicine Patient experience</td>
</tr>
</tbody>
</table>
## The KSF competences
### During treatment (continued)

<table>
<thead>
<tr>
<th>Level</th>
<th>Competence</th>
<th>KSF</th>
<th>Performance criteria</th>
<th>Knowledge and understanding</th>
<th>Attitudes and behaviours</th>
<th>Contextual factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Develop and update evidence-based protocols during treatment Initiate new innovation where indicated</td>
<td>IK2 Level 3</td>
<td>Protocols clearly referenced to appropriate timely research Clear review dates included in the protocols</td>
<td>How to appraise critically available research to inform the evidence base used to develop the protocols</td>
<td>Organised Critically analytical</td>
<td>Skills for Health competences: CHS170</td>
</tr>
<tr>
<td>7</td>
<td>Accept direct referrals from other consultants/health care professionals reflecting autonomy of practice</td>
<td>HWB6 Level 4</td>
<td>Patient experience and satisfaction Documentation re: referral activity</td>
<td>Own limitations Relevant anatomy and physiology In depth knowledge of all aspects of cardiac interventional surgical care</td>
<td>Empathic with children and families</td>
<td>Skills for Health competences: CS4</td>
</tr>
<tr>
<td>7</td>
<td>Demonstrate the ability to manage transition of cardiac caseload</td>
<td>HWB7 Level 4</td>
<td>Patient records clearly demonstrate appropriate management Evaluation of patient experience</td>
<td>The needs and requirements of the child/young person/family during transition episodes</td>
<td>Liaison Empathic Sensitive</td>
<td>Skills for Health competences: CHS170 Staying positive</td>
</tr>
<tr>
<td>7</td>
<td>Lead in educating young people and families about their ongoing health needs and how these will change over time</td>
<td>HWB1 Level 3 - 4</td>
<td>Provide and use appropriate educational materials relevant to the young person’s needs</td>
<td>Educational strategies to empower young people to manage their health and wellbeing with chronic disability illness Patterns of coping</td>
<td>Empowering</td>
<td>Skills for Health competences: CS11, CS12, CS20, CS30</td>
</tr>
<tr>
<td>7</td>
<td>Ensure young people become more responsible for their own health and more involved in consultations with the multidisciplinary team (MDT) and adult congenital heart disease services (ACHD)</td>
<td>HWB4 Level 4</td>
<td>Patient records will clearly show the young person has been involved in the discussion with the MDT and has involvement with ACHD</td>
<td>Enabling and empowering strategies to encourage independence and the development of self-management of condition Aware of treatment regimes and assessment and strategies to determine management of lifelong cardiac conditions</td>
<td>Empowering Advocating Pro-activity</td>
<td>NICE guidelines ACHD Skills for Health competences: CS22, CS15</td>
</tr>
<tr>
<td>7</td>
<td>Identify the gaps in service provision Work closely with appropriate commissioning departments to establish appropriate services (for example, home monitoring)</td>
<td>Core 5 Level 3</td>
<td>Service improvement and development plans demonstrating stakeholder engagement across organisational boundaries</td>
<td>How to analyse service provision to identify gaps How to engage colleagues and stakeholders across adult and paediatric congenital cardiac network How to identify and engage key stakeholders external to the cardiac network</td>
<td>Liaises Team worker Negotiates</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Ongoing resource for child/family after discharge home</td>
<td>HWB3 Level 3-4</td>
<td>Using expert knowledge to provide ongoing advice and support Accurate documentation of consultations Meeting the needs of discharged families and addressing identified gaps in service</td>
<td>Lifelong impact of congenital heart disease Impact on future family life/pregnancy/activity Stress and coping</td>
<td>Compassion Understanding Empathy</td>
<td>NHSE (2016)</td>
</tr>
</tbody>
</table>
7. Education and learning for children’s cardiac nursing

Introduction

The future provision of education and training will change to reflect dynamic and contemporary health care, and the needs of the service and of individual professionals. Accessible and flexible modes of learning need to expand to include utilising in-house objective structured clinical examinations (OSCE), residential courses and online learning to enable knowledge and skills acquisition. This section provides an overview of the expected education and learning needs for children’s cardiac nurses across the network from AfC bands 5–8.

It focuses on:

- core knowledge and skills
- continuing development – knowledge and skills
- attitudes and values
- means of acquiring knowledge and skills.
## Section 6
### Education and learning for children’s cardiac nursing

<table>
<thead>
<tr>
<th>Post/title</th>
<th>Core knowledge and skills</th>
<th>Knowledge and skills</th>
<th>Attitudes and values</th>
<th>Means of acquiring knowledge and skills</th>
</tr>
</thead>
</table>
| Band 5 – newly registered nurse | Induction to cardiac clinical setting(s) – includes use of SBAR and paediatric early warning (PEW), introduction to team members. Completion of standardised workbook across ALL centres in the network (passport – developed collaboratively by network lead clinical educators):  
- normal anatomy and physiology  
- cardiac pathophysiology  
- cardiac pharmacology  
- clinical logbook and reflective diary of cardiac experience gained during rotation and supernumerary shifts (clinical, community, high dependency, intensive)  
- Indication of transferable skills (IV administration/PGDs). | All mandatory learning, for example:  
- basic life support  
- drugs, oral, enteral, IV  
- safeguarding children  
- moving and handling  
- fire and security  
- electronic patient record  
- conflict resolution. | | In-house/preceptorship |
| Band 5 (first 18 months) | Completion of the following within the first 12–16 months:  
- basic paediatric life-support skills  
- IV administration competences would depend on where working (for example, peripheral IV or central lines eg HDU/ITU)  
- patient group direction training  
- mentorship preparation in line with NMC standards and evidence of mentorship episode. | Paediatric intermediate life support  
Student supervisor mentorship | Resuscitation Council/ALSG HEI | |
| Band 5 (first 18 months) | • Continued learning re: congenital heart defects – pathophysiology, aetiology, epidemiology, pharmacology, psycho-social, sequelae.  
• Care/management of the child with CHD/Transplant/acquired/ inherited diseases/thoracic – according to clinical environment (ward, HDU, ITU) (see skills list).  
• Liaison team /specialist nurse team roles.  
• Recognition of illness and deterioration.  
• Device management/ technology – including mechanical ventilation.  
• Self-awareness, communication styles and interpersonal skills in different situations. | As above  
Ventilator workshops (HDU/ITU staff)  
Academic opportunities:  
Degree Level stand alone modules.  
For example:  
- assessing ill/injured children  
- assessment and stabilisation of the acutely ill child (HDU 1)  
- management of the HDU child (HDU 2)  
- introduction to CHD  
- introduction to CHD week  
- pain management  
- cardiac assessment (degree/ Masters level) senior band 5  
- PICU modules. | | In-house |

HEI
### Section 6

**Education and learning for children’s cardiac nursing (continued)**

<table>
<thead>
<tr>
<th>Post/title</th>
<th>Core knowledge and skills</th>
<th>Knowledge and skills</th>
<th>Attitudes and values</th>
<th>Means of acquiring knowledge and skills</th>
</tr>
</thead>
</table>
| Band 6 (ward/HDU/ITU) | • Management of the ventilated child (weaning and extubation) (ITU staff).  
• Management of the child requiring technical support (for example, peritoneal dialysis, left ventricular assist devices, extra corporeal therapies).  
• Transfer/emergency transport.  
• Advanced paediatric life support.  
• Leadership.  
• Research.  
• Clinical decision making. | European paediatric life support (EPLS)  
For example:  
Cardiac assessment (degree/Masters level)  
Advanced Respiratory Management (degree/Masters level)  
Extra corporeal membrane oxygenation (ECMO) course  
Transplant co-ordination  
The adolescent and young adult with congenital heart disease  
Independent and supplementary prescribing  
Transfer of patients | | Resuscitation Council  
HEI  
In-house/university  
In-house  
Regional in house training (for example, CATS) |
| Band 7 | Master’s-level education  
• Critical analysis, synthesis, evaluation Paediatric non-medical prescribing. | For example:  
MSc Advanced Nursing Practice  
MSc Advanced Clinical Nursing Practice. | | |
| Band 8 | Master’s level  
PhD  
• Research skills. | | | |
Appendix 1:
Example job description: Lead network nurse

**Role description:** Lead nurse children’s heart network

**Pay band:** Ideally AfC band 8c*

**Reports to:** Network clinical director

**Professionally accountable to:** Director of nursing (lead centre)

**Responsible for:** Nursing staff across the CHD network

**Role purpose**

- The post-holder will work in partnership with the network clinical director, nurse specialists, lead clinicians and nurses to ensure the development and implementation of the network service delivery plan, including the development of workforce, education and training, as agreed by the network board.

- To provide nursing leadership for the development of the networks and act as the focal point for nursing within the network.

- To support and promote the regional network strategy for cardiac services. The post-holder will deliver real improvements in cardiac care in a complex environment, encompassing many organisations and all personnel involved in providing services for patients and their families.

- To be a clinical expert in the care of children and young people with cardiac conditions.

- To provide strategic, professional and clinical nursing leadership across a defined network, including voluntary sector organisations and charities, when necessary. This will ensure the delivery of excellent nursing care and treatment for children with cardiac conditions throughout the patient pathway.

- To ensure ongoing improvement in health outcomes, quality of care, patient and family experience.

- To work with relevant members of the multidisciplinary team to ensure an integrated approach to care pathway development and delivery.

- To shape the vision and future development of the children’s cardiac specialist nursing service in collaboration with the continuum of children’s cardiac nurse specialists across the network.

- To lead the development and delivery of child- and family-focused cardiac care and support.

- Together with the lead nurse educator, local education and training boards, to support effective workforce planning across the network, including education, training and professional development of all nurses involved in the care of children with cardiac conditions.

- To work in a collaborative manner to ensure an efficient, comprehensive and integrated approach to multi-professional working across the network.
Management and leadership

- To provide strategic and professional nursing leadership for the development and delivery of network activities.
- To promote a culture of clinical engagement and influence, working collaboratively to achieve the best outcomes, embedding this approach throughout the network.
- To ensure that nationally set specifications and standards of service are consistently met, common protocols are in use across the network and, in particular, to deliver the CHD standards (NHSE, 2016) and the implementation programme for children’s cardiac services.

Clinical responsibility

- To provide a clinically visible profile, having both an advisory and clinical input into patient care, spending 0.2 WTE in clinical practice, and working in an expert role.
- To meet regularly with all network lead nurses, developing a culture of collaboration to ensure that there is a consistent implementation of standards and an integrated, co-ordinated approach to the care of children with cardiac conditions.
- To ensure a high level of quality and efficient nursing care, influencing and changing practice where required, and to challenge and highlight inadequate practice through the appropriate clinical governance mechanisms.
- To lead in the promotion and development of nursing competencies across all grades of nursing staff throughout the network, linked to Skills for Health, Agenda for Change and accreditation based on the Modernising Nursing Careers framework (DH, 2006).
- To provide clinical leadership to ensure the delivery of quality, holistic, expert patient-and family-centred care to children undergoing medical/interventional/surgical intervention through to transfer to adult services or palliative/end of life care.
- To ensure that child protection and safeguarding legislation is adhered to within own practice and the service.
- To uphold organisational policies and principles on the promotion of equality and to create an inclusive environment, where diversity is valued and everyone can contribute, meeting the needs of those patients with cultural and mental/physical disability.
- To engage with national and local support groups, charities, and patient and public forums to ensure service user engagement and the child/young person’s voice are demonstrated in the development, design and delivery of services.

Training and education

- To lead in facilitating, encouraging, supporting and evaluating the expansion, innovation and development of nursing roles within the network. This is in line with patients, service need and the NMC’s The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates (2018a).
- To ensure annual performance reviews for all children’s cardiac nurses within the network and setting objectives in line with CHD standards (NHSE, 2016), the implementation programme for children’s heart services, and future Department of Health, National Institute for Health Protection and NHS England guidelines.
• To support the lead nurse educator in the development of continuing professional development (CPD) programmes in cardiac specialist nursing, ensuring regular audit and evaluation of curricula in association with local education and training boards, and to ensure lead universities deliver effective, cost effective and patient-centred education and training to nurses.

• In partnership with the lead nurse educator, children’s cardiac nurse specialist and the children’s cardiac advanced nurse practitioner, to meet the following criteria throughout the network:
  - identify staff training needs
  - structured assessment and evaluation of learning performance
  - structured implementation and recording of training and education programmes
  - consultation regarding the appropriate deployment of skills and abilities within the network.

• To actively liaise and maintain links with all professionals involved in education, training and the delivery of care throughout the network, including the educational establishments.

Evaluation and research

• To work with organisational leads to promote nursing research and higher academic attainment, empowering nurses to be become more research-active, and to encourage national/international publications.

• To foster a culture of innovation, developing strong partnerships with local universities, and to collaborate with the medical research lead to promote multi-professional research and development.

• In partnership with the interdisciplinary team, to work towards developing evidence-based practice to promote high quality and cost-effective care.

Quality assurance

• To ensure the network respects patient and family experience as the central focus to clinical/service revision and development, supporting improved quality of care and outcomes.

• To take a lead role in shaping the future of the children’s cardiac services in accordance with contemporary drivers, such as the CHD standards (NHSE, 2016) Long-Term Plan (NHS, 2019a), Interim NHS People Plan (NHS, 2019b).

• To participate in the activities of professional bodies and associations to develop and revise nursing practice guidelines and protocols relevant to children's cardiac specialist nursing such as, Congenital Cardiac Nurses’ Association (CCNA); British Adult Congenital Cardiac Nurses’ Association (BACNNA); British Congenital Cardiac Association (BCCA); Association for European Paediatric and Congenital Cardiology (AEPC).

• In conjunction with the medical lead for the network, to lead the clinical governance processes, including adverse incident reporting/investigation and the management of complaints, as appropriate.
• To co-ordinate clinical quality groups across the network and ensure timely and accurate communication of clinical and non-clinical information.
• To work with the National Quality Board to develop an accreditation programme for care providers.

Workforce

• To provide local and national leadership on workforce issues and to empower local strategies. To identify innovative workforce strategies and implement roles.
• To support the continuing service review and workforce planning projects of the network. In conjunction with the workforce/educational leads, to provide a workforce overview of the network and be instrumental in the development of the workforce strategy.
• In partnership with the lead nurse educator, work with educational providers to ensure appropriate curriculum and course development to meet service needs. To create a competency-based framework for workforce development.
• To identify current and projected workforce pressures and to create strategies for improvement.
• To challenge recruitment and workforce issues within the network and in conjunction with the network leads, developing a five-year view on workforce issues.
• In conjunction with the lead nurse educator and trust lead nurses, to provide an annual workforce/skill mix review based on unit activity. This will form part of the annual report of the network.

Professional development

• To continue to develop self and the role through clinical supervision, reflection and self-awareness and continuing professional development.
• To build professional links and represent the network, both nationally and internationally, for the benefit of service improvement.
• To promote a culture of shared governance across the network.
• To maintain professional NMC revalidation requirements for continued registration and to identify own learning needs, ensuring own professional development is maintained by keeping up-to-date with practice developments.
• At all times, to work to reflect the nursing principles (RCN, 2010) laid down in The Code (NMC, 2018a), and own limitations.
• To provide professional advice, influencing, informing and coordinating all key nursing roles, such as children’s cardiac nurse consultants, children’s cardiac advanced nurse practitioners, children’s nurse educators/researchers, children’s cardiac nurse specialists and fetal cardiac nurse specialists.
### Person specification – lead network nurse

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education and qualifications</td>
<td>• Registered children’s nurse.</td>
<td>• PhD, or working towards.</td>
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<tr>
<td></td>
<td>• Master’s degree in a health-related discipline.</td>
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<tr>
<td></td>
<td>• Mentoring/teaching qualification.</td>
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<td></td>
<td>• Evidence of management/leadership development.</td>
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<tr>
<td></td>
<td>• Mentoring/teaching qualification.</td>
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<tr>
<td></td>
<td>• Evidence of management/leadership development.</td>
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<tr>
<td>Experience</td>
<td>• Minimum of five years’ post-registration experience in children’s cardiac care in a senior clinical leadership/clinical services management position.</td>
<td>• Curriculum development at academic level.</td>
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<td></td>
<td>• Evidence of change management (such as workforce redesign).</td>
<td>• Representation on relevant regional, national or international committees, boards or networks.</td>
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<td></td>
<td>• Recognition as an innovator in the field of children’s cardiac care.</td>
<td>• Experience in community nursing.</td>
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<td></td>
<td>• Networking at all levels</td>
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<tr>
<td></td>
<td>• Resource management.</td>
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</tr>
<tr>
<td>Research, publications and special interests</td>
<td>• Significant record of publication or other forms of dissemination (such as policy or service delivery advice) in children’s cardiac care.</td>
<td>• International reputation in children’s cardiac nursing.</td>
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<tr>
<td></td>
<td>• Evidence of dissemination of research and applying research to clinical practice.</td>
<td>• Production of research proposals and grant applications.</td>
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<td>• Evidence of audit undertaken and outcomes.</td>
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<td></td>
<td>• Presentations at national and international meetings, conferences and symposia.</td>
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<tr>
<td>Knowledge</td>
<td>• Evidence of ability to contribute new knowledge to the field of children’s cardiac care.</td>
<td>• Evidence of leading initiatives within multi-professional teams.</td>
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<td></td>
<td>• Clinical governance and risk management concepts and techniques.</td>
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<td></td>
<td>• Critical appraisal techniques.</td>
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<td></td>
<td>• Sound knowledge of safeguarding legislation.</td>
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<tr>
<td>Interpersonal skills</td>
<td>• Flexibility.</td>
<td>• Advanced communication skills training.</td>
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<td>• Leadership style which promotes collaborative working.</td>
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<td>• Excellent verbal and written communication skills.</td>
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<td>• Effective and strategic influencing.</td>
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<td>• Ability to work autonomously.</td>
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<td></td>
<td>• Excellent leadership qualities.</td>
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<td></td>
<td>• Critical appraisal and analytical skills.</td>
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<tr>
<td>Job-related skills and aptitudes</td>
<td>• Awareness of changing policies in children’s cardiac care.</td>
<td>• Ability to teach to a range of CPD, undergraduate and postgraduate students.</td>
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<td>• Project management: able to set priorities and meet deadlines in collaboration with a range of professionals.</td>
<td>• High levels of competence in applied research skills.</td>
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<td>• Quality improvement/practice development skills.</td>
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<td>• Political astuteness.</td>
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<td></td>
<td>• High level of oral, written and IT communication and presentational skills to a range of audiences.</td>
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<td>• Proven ability to apply research to practice.</td>
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<td>• Driving licence.</td>
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<tr>
<td>Other requirements</td>
<td>• Evidence of self-directed career-long learning.</td>
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<td>• Willingness to undertake further education and training to meet requirements of post.</td>
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<td>• Commitment to promoting the values that underpin the specialty and applied research activities.</td>
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<td></td>
<td>• Resilience.</td>
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Appendix 2:
Example job description: Children’s cardiac nurse specialist (career framework level 6)

Role description: Children’s cardiac nurse specialist (CCNS)

Pay band: Minimum AfC band 6*

Reports to: Lead children’s cardiac nurse specialist (level 6, AfC band 6 – see Appendix 1)

Professionally accountable to: Lead nurse for the network

Essential qualifications: Registered children’s nurse, accredited teaching qualification

Minimum experience: Minimum of two years’ experience in caring for children in the cardiac specialty

The intricate detail of the role and what is expected is reflected in the specific competency framework in Section 3 and Section 4

Note: Where ‘network’ is mentioned, this refers to the children’s congenital heart network.

Role purpose

The CCNS (level 6) will:

• be a development post in the CCNS team to learn about the role and gain insight into the service provision for CYP and their families
• develop transferable knowledge and skills to enable succession planning for future recruitment to the CCNS team
• support the work of the team.

While this post will be an integral member of the team, the post-holder will not be expected to practice autonomously and will need ongoing guidance, support and supervision.

Summary of duties and responsibilities

Working 90% with direct patient contact, the children’s cardiac nurse specialist (CCNS) should, under supervision and guidance, develop skills to participate in, and contribute towards:

• working across the network as a key advocate for CYP by ensuring the partnership they have with the family and health and social care professionals is central to, and focuses on, meeting their needs and expectations within care delivery. This includes working in a collaborative manner with all members of the multi-professional team
• providing specialist and practical information and education to parents following antenatal or postnatal diagnoses (while working in collaboration with fetal nurse specialists) and offering a high level of emotional and counselling support
• providing specialist and practical information and education following a later diagnosis of acquired or congenital heart disease to the CYP and their family, and offering a high level of emotional and counselling support

• providing the unique and specialist knowledge required to work in partnership with CYP and their families, focusing on meeting their identified needs through planning, negotiating, implementing and evaluating an agreed plan of care, while keeping the CYP at the centre of care delivery

• delivering expert communication skills to impart complex and potentially distressing information to CYP and their families, supporting them through the consent process and ensuring informed decision making

• undertaking enhanced and specialist health assessments, contributing to early identification of potential cultural, spiritual, biopsychosocial needs of CYP and their families and, where appropriate, referring to other health care professionals, such as psychological or mental health support, for advice

• collaboratively working with social work colleagues and child protection teams when the holistic assessment of need indicates safeguarding issues

• coordinating and facilitating care delivery and provision of support across the network for CYP and their families, ensuring continuity of care and effective communication between health care professionals

• acting as principal liaison contact for the GP, health visitor, school nurse, community children’s nurse, and other members of the primary care team, to ensure an integrated provision of pre- and post-hospital. If required, this will be within a common assessment framework to ensure safeguarding of the CYP

• using agreed protocols to assess family resiliency, including initial first-line assessment of parental anxiety and depression, while recognising factors that may impact on adjustment and adaptation to potentially traumatic and life changing events and circumstances

• providing relevant nursing support and referring to other specialists, where appropriate, if parents demonstrate signs of increased anxiety or potential depression

• providing outreach advice and support across the network for CYP and their families during their transition between home, community and hospital cardiac care. For example, this could be through nurse-led clinics, attending outreach services, telephone, text

• message, email, and online resources such as teleconferencing or videoconferencing (according to local hospital policy)

• acting as an expert resource for the multidisciplinary team, providing specialist education, advice and support to colleagues across the network and wider community (including health, social care and education colleagues)

• working in collaboration with the children’s cardiac transition nurse and adult congenital heart disease nurse specialists to empower young people and their families during their transition from children to adult services

• measuring the impact and quality of the service by ongoing audit of the CYP and family experience and using this data as the focus for adjustment and development of the service
• evaluating the quality and service user experience of the CCNS team, through research and audit, and disseminating findings nationally
• practising, as a key member of the multidisciplinary team across the network, in the development of evidence-based local and national policies, protocols and standards, to meet clinical, service and service user needs.

Clinical practice

• Establish contact with CYP and their families from the time of initial diagnosis or referral and provide specialist nursing advice and information to support their practical and biopsychosocial needs.
• Ensure accessibility to the CCNS for families and develop efficient systems to enable families to be able to contact a consistent port of call in the network.
• Work in partnership with CYP and their families to meet their identified needs by planning, negotiating, implementing and evaluating an agreed plan of care. The CYP must always be kept at the centre of any decisions and actions that may impact on outcomes of care delivery.
• Participate in the use of integrated care pathways at the point of diagnosis for CYP with complex and palliative care needs.
• Use competent communication skills to impart sensitive, complex and potentially distressing information to CYP and their families and provide them with advice and emotional support in hospital and at home.
• Develop and provide information in a variety of different formats for CYP and families in relation to diagnosis, investigations, treatment, long-term management, palliative and end of life care, empowering them to access available information at various points throughout their care pathway.
• Communicate in ways that empower CYP and their families to make informed choices about their health and health care, enabling informed consent.
• Act as an advocate for CYP and their families to ensure equity and consistency of service delivery, while focusing on the individual package of care required throughout their access to treatment and surveillance, when and wherever this is delivered across the network.
• Help facilitate discharge planning to ensure continuity of care and effective communication across the network, collaborating with community nursing and primary care services where necessary.
• Participate in the assessment of CYP and family resiliency in terms of factors that may impact on adjustment and adaptation to potentially traumatic events, including initial first-line assessment of parental anxiety and potential depression and, where indicated, refer to other health care professionals, such as psychological and mental health support.
• Participate in undertaking enhanced and specialist health assessments to identify the potential cultural, spiritual and biopsychosocial needs of CYP and their families which may indicate a referral to associate care personnel within the wider multi-professional team.
• Assist in undertaking regular nurse-led clinics and attend multi-professional clinics across the network, working within authorised levels of autonomy.
• Maintain adequate patient documentation to NMC requirements for all patients seen and advice given in any practice setting and contribute to clinical activity/data collection as required.

• Use clinical judgement and practise supervised levels of autonomous decision-making on the interpretation and analysis of information from a variety of sources.

Management and leadership

• Act as principal liaison for the GP, health visitor, school nurse, community children’s nurse and other members of the multidisciplinary team to ensure integrated care across the network. Work collaboratively and in partnership with other health care professionals, offering appropriate leadership, guidance and supervision to colleagues.

• Work with the CCNS team and associate colleagues to develop achievable shared goals; ensure that the team’s purpose and objectives are clear.

• Contribute towards the development and implementation of evidence-based standards of care, practice guidelines and integrated care pathways, continually evaluating the quality of patient care.

Training and education

• Develop competence to provide appropriate education to CYP and their families, to promote health and to encourage self-care and participation in the planned programme of treatment and care.

• Ensure competence development includes the building of knowledge and skills to provide first-line assessment and recognition of key psychological themes, such as family resiliency, stress and coping strategies, adjustment and adaptation, classical and operant conditioning, locus of control, potentially traumatic events and post-traumatic stress syndrome, anticipatory grief and grieving.

• Share good practice through creating positive opportunities to communicate the role of the CCNS team across the unit and network.

Evaluation and research

• Listen to, and collect, user service feedback via patient satisfaction surveys and audit, and relay this to the senior team to ensure contribution of user involvement into future design, delivery and evaluation of services.

• Participate in critical appraisal and synthesis of the outcomes of other relevant research, evaluations and audits.

Professional development

• Maintain a structured development profile during the secondment period to the post.

• Develop an insight into the development of network, national and international agendas for the care of children with cardiac conditions.

• Be proactive in developing and improving own knowledge, skills and attitudes in structured ways, including reflection on personal development by participating in clinical supervision and performance review.

• Work within agreed policies of trust and adhere to The Code (NMC, 2018a).
## Person specification – children's cardiac nurse specialist (CCNS) (level 6)

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
</tr>
</thead>
</table>
| **Education and qualifications** | • Current registration with NMC.  
  • Registered children’s nurse.  
  • Qualification in teaching/mentoring and assessing.  
  • Sound communications skills.  
  • Full, clean driving licence.                                                                 | • CAF training.  
  • Experience in delivering counselling skills under supervision.  
  • Recognised high dependency module.                                                                                                                                                                                                                                  |
| **Experience**                  | • Minimum 2 years’ post-registration experience in children’s cardiac care.  
  • Knowledge and understanding of child protection/safeguarding.  
  • Knowledge and understanding of current nursing policy and practice issues.  
  • Knowledge and understanding of infection control.  
  • Recent involvement in changing service initiatives.  
  • Appreciation of risk management and governance issues application.                                                                                                                                       | • Experience of involvement in initiatives within multi-professional teams.  
  • Insight and/or experience in conflict resolution situations.                                                                                                                                                                                                                                                                  |
| **Research, publications and special interests** | • Contribution to research/audit data collection.  
  • Ability to apply relevant research and evidence-based knowledge and skill to delivering paediatric care.                                                                                                 | • Course/module in research or evidence-based medicine.                                                                                                                                                                                                                   |
| **Knowledge**                   | • Sound developing specialist knowledge, underpinned by theory and experience.  
  • Relevant level clinical governance and risk management training and experience.                                                                                                                                   | • Experience in dealing with situations requiring analysis and interpretation.  
  • Critical, analytical and appraisal skills.                                                                                                                                                                                                                           |
| **Interpersonal skills**        | • Flexibility.  
  • Good sound verbal and legible written skills.  
  • Ability to work within a team and take on authorised autonomy as required.  
  • Excellent time management.                                                                                                                                  | • Leadership skills.  
  • Collaborative leadership of associate nursing team members.                                                                                                                                                                                                         |
| **Job-related skills and aptitudes** | • Good, sound interpersonal and communication skills  
  • Self-motivated.  
  • Works well within a team.  
  • Ability to work independently and take on additional responsibility as directed and appropriate.  
  • Ability to manage own workload.  
  • Ability to be assertive.  
  • Developing confidence and competence in working with a higher level team.  
  • Well organised and able to manage time effectively.  
  • Ability to work in a challenging and busy environment to contribute towards set deadlines.  
  • Flexibility to meet service needs.  
  • Awareness of changing local, regional and national policies in children’s cardiac care.                                                                                                        | • Leadership experience.  
  • Experience in contributing towards developing policies, protocol, guidelines, service operational procedures.                                                                                                                                                  |
| **Other requirements, such as values and behaviours** | • Ability to commit to engaging in and/or contributing to advancing services.  
  • Respect of the team contribution of deliverance of care.  
  • Compassion for the nature and effect of paediatric cardiology care both for the child, family and staff members.                                                                                                                |                                                                                                                                                                                                                                                                       |
Appendix 3: Example job description: Children’s cardiac nurse specialist (career framework levels 6–7)

Role description: Children’s cardiac nurse specialist (CCNS)

Pay band: Minimum AfC band 7*

Reports to: Lead children’s cardiac nurse specialist (AfC band 7 – see Appendix 1)

Professionally accountable to: Director of nursing (lead centre)

Essential qualifications: Registered children’s nurse, accredited teaching qualification, recognised course in children’s assessment skills

Minimum experience: Three years’ experience of caring for children in the cardiac specialty.

The intricate detail of the role and what is expected is reflected in the specific competency framework in Section 3 and Section 4

Note: Where ‘network’ is mentioned, this refers to the children’s congenital heart network.

Role purpose

The CCNS (level 7) will:

• work in partnership with the CYP and family to co-ordinate and facilitate their biopsychosocial needs through assessment, planning, education, advice and support, in collaboration and negotiation with associate health, social care and education providers

• ensure smooth transition between services for CYP and their families across the network service

• participate in the development of service initiatives and monitor the effectiveness of their provision in line with CYP and family experience and outcome.

Summary of duties and responsibilities

The CCNS (level 7) should provide a ratio of 20% leadership to 80% direct patient contact, depending on the patient population of the network, which covers the following:

• work across the network as the key advocate for the CYP by ensuring the partnership they have with the family and health and social care professionals is central to, and focuses on, meeting their needs and expectations within care delivery, and working in a collaborative manner with all members of the multi-professional team

• provide specialist and practical information and education to parents following antenatal or postnatal diagnoses (while working in collaboration with the role of the fetal nurse specialists) and offer a high level of emotional and counselling support
• provide specialist and practical information and education following a later diagnosis of acquired or congenital heart disease to the CYP and their family, and offer level two emotional and counselling support, referring to counselling or psychology services as required

• use unique and specialist knowledge to work in partnership with CYP and families, focusing on meeting their identified needs through planning, negotiating, implementing and evaluating an agreed plan of care while keeping the CYP at the centre of care delivery

• use expert communication skills to impart complex and potentially distressing information to CYP and their families, supporting them through the consent process and ensuring informed decision-making

• undertake enhanced and specialist health assessments, contributing to early identification of potential cultural, spiritual, biopsychosocial needs of children, young people and their families and, where appropriate, refer to other health care professionals, such as psychological or mental health support, for advice

• collaborate with social work colleagues and child protection teams when the holistic assessment of need indicates safeguarding issues

• co-ordinate and facilitate care delivery and provision of support across the network for CYP and their families, ensuring continuity of care and effective communication between health care professionals

• act as principal liaison for the GP, health visitor, school nurse, community children’s nurse, and other members of the primary care team and relevant specialist teams to ensure an integrated provision of pre- and post-hospital care and, if required, within a common assessment framework to ensure safeguarding of the CYP

• use agreed protocols to assess family resiliency, including initial first-line assessment of parental anxiety and depression, whilst recognising factors that may impact on adjustment and adaptation to potentially traumatic and life changing events and circumstances

• deliver relevant nursing support and refer to other specialists, where appropriate, if parents demonstrate signs of increased anxiety or potential depression

• deliver outreach advice and support across the network for CYP and their families during their transition between home, community and hospital cardiac care. For example, this could be through nurse-led clinics, attending outreach services, telephone, text message, email, and online resources such as teleconferencing or videoconferencing (according to local hospital policy)

• act as an expert resource for the multidisciplinary team, providing specialist education, advice and support to colleagues across the network and wider community (including health, social care and education colleagues)

• work in collaboration with the children’s cardiac transition nurse and adult congenital heart disease nurse specialists to empower young people and their families during their transition from children’s to adult services

• measure the impact and quality of the service by ongoing audit of the CYP and family experience and use this data as the focus for adjustment and development of the service
• evaluate the quality and service user experience of the CCNS team through research and audit and disseminate findings nationally

• practise, as a key member of the multidisciplinary team across the network, in the development of evidence-based local and national policies, protocols and standards, to meet clinical, service and service user needs.

Clinical practice

• Establish contact with CYP and their families from the time of initial diagnosis or referral and provide specialist nursing advice and information to support their practical and biopsychosocial needs.

• Ensure accessibility to the CCNS for families and develop efficient systems to enable families to be able to contact a consistent port of call within the network.

• Work in partnership with CYP and their families to meet their identified needs; planning, negotiating, implementing and evaluating an agreed plan of care whilst keeping the CYP at the centre of any decisions and actions that may impact on outcomes of care delivery.

• Ensure that integrated care pathways are in place at the point of diagnosis for CYP with complex and palliative care needs.

• Use expert communication skills to impart sensitive, complex and potentially distressing information to CYP and their families and provide them with advice and emotional support in hospital and at home.

• Develop and provide information in a variety of different formats for CYP and families in relation to diagnosis, investigations, treatment, long-term management, palliative and end of life care; empowering them to access available information at various points throughout their care pathway.

• Communicate in ways that empower CYP and their families to make informed choices about their health and health care, enabling informed consent.

• Be the designated key worker for CYP, their families and health professionals across the network, ensuring referrals are prioritised and managed appropriately.

• Act as an advocate for CYP and their families to ensure equity and consistency of service delivery while focusing on the individual package of care required throughout their access to treatment and surveillance, whenever and wherever this is delivered across the network.

• Facilitate discharge planning to ensure continuity of care and effective communication across the network, collaborating with community nursing and primary care services where necessary.

• Assess CYP and family resiliency in terms of factors that may impact on adjustment and adaptation to potentially traumatic events, including initial first-line assessment of parental anxiety and potential depression and, where indicated, refer to other health care professionals such as psychological and mental health support.

• Undertake enhanced and specialist health assessments to identify the potential cultural, spiritual and biopsychosocial needs of CYP and their families which may indicate a referral to associate care personnel within the wider multi-professional team.
• Undertake regular nurse-led clinics and attend multi-professional clinics across the network, working within authorised levels of autonomy.

• Maintain adequate patient documentation to NMC requirements for all patients seen and advice given in any practice setting and contribute to clinical activity/data collection as required.

• Use clinical judgement and autonomous decision-making concerning the interpretation and analysis of information from a variety of sources.

Management and leadership

• Act as principal liaison for the GP, health visitor, school nurse, community children’s nurse, and other members of the multidisciplinary team, to ensure integrated care across the network.

• Work collaboratively and in partnership with other health care professionals, offering appropriate leadership, guidance and supervision to colleagues.

• Lead the development of service and nurse-led initiatives in conjunction with medical and nursing colleagues to advance the quality of care for CYP and their families across the network.

• Work with associate colleagues to develop achievable shared goals; ensure that the team’s purpose and objectives are clear.

• Participate in the development and implementation of evidence-based standards of care, practice guidelines and integrated care pathways, continually evaluating the quality of patient care.

Training and education

• Be highly competent to provide appropriate education to CYP and their families, to promote health and encourage self-care and participation in the planned programme of treatment and care.

• Ensure competence development includes the measurement of knowledge and skills ability to perform first-line assessment and recognition of key psychological themes, such as family resiliency, stress and coping strategies, adjustment and adaptation, classical and operant conditioning, locus of control, potentially traumatic events and post-traumatic stress syndrome, anticipatory grief and grieving.

• Collaborate with the lead clinical educator to develop specific specialist education programmes and in-service training activities across the network, in line with the Knowledge and Skills Framework (KSF).

• Act as an educational resource for nursing and other professionals across health, social care and education services.

• Exercise a high degree of personal and professional authority and act as an expert for all disciplines of staff.

• Share good practice through creating positive opportunities to communicate and collaborate locally across the network, regionally, nationally and internationally, and contribute to the wider development of practice through publication and dissemination.
Evaluation and research

• Collaborate with the lead CCNS to initiate and undertake evaluation of the quality of
the CCNS service. This will involve service users in the design, delivery and evaluation
of services through CYP and parent satisfaction surveys and audit.

• Listen to and collect user service feedback via patient satisfaction surveys and audit, to
ensure service users are involved in the design, delivery and evaluation of services.

• Critically appraise and synthesise the outcomes of other relevant research, evaluations
and audits and act on this information in collaboration with colleagues to continually
develop the service.

• Contribute to, and participate in, the dissemination of findings of service evaluation
locally, across the network, regionally and nationally, sharing best practice with
colleagues.

Professional development

• Maintain a high profile and actively contribute to the development of network, national
and international agendas for the care of children with cardiac conditions.

• Be proactive in developing and improving own knowledge, skills and attitudes in
structured ways, including accessing clinical supervision.

• To work within the agreed policies of the trust and adhere to The Code (NMC, 2018a).

• Develop an insight into the development of network, national and international agendas
for the care of children with cardiac conditions.

• Be proactive in developing and improving own knowledge, skills and attitudes in
structured ways, and participating in clinical supervision and performance review.
### Person specification – children's cardiac nurse specialist (CCNS) (level 7)

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
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<tbody>
<tr>
<td><strong>Education and qualifications</strong></td>
<td>- Current registration with NMC.</td>
<td>- Post registration qualification in cardiology nursing.</td>
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<td></td>
<td>- Registered children's nurse.</td>
<td>- Qualification in paediatric community nursing.</td>
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<td></td>
<td>- Qualification in teaching/mentoring and assessing.</td>
<td>- Course/module in research or evidence-based medicine.</td>
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<td>- Expert communications skills training or willing to undertake the training.</td>
<td>- Independent non-medical prescribing course or working towards it.</td>
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<td>- Level 2 counselling training/qualification or evidence of working towards level 2.</td>
<td>- CAF training.</td>
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<td>- Full clean driving licence.</td>
<td>- APLS / PALS.</td>
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<td>- PILS.</td>
<td>- Recognised high dependency/PICU module.</td>
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<td>- Recognised paediatric assessment skills course.</td>
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<tr>
<td><strong>Experience</strong></td>
<td>- Minimum 3 years' post-registration experience in children's cardiac care of which 1 year (minimum) as band 6 role/evidence of a previous secondment post to a CCNS team.</td>
<td>- Experience in paediatric community nursing.</td>
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<td></td>
<td>- Embedded experience in paediatric cardiac nursing.</td>
<td>- Recent involvement in initiatives within multi-professional teams.</td>
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<td></td>
<td>- Knowledge and understanding of child protection/safeguarding.</td>
<td>- Insight and/or experience in conflict resolution management.</td>
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<td>- Knowledge of NHS Direction and policy initiative.</td>
<td>- Knowledge and understanding of patient/public involvement, management of complaints and investigations into governance issues.</td>
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<td>- Knowledge and understanding of current nursing policy and practice issues.</td>
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<td>- Knowledge and understanding of infection control.</td>
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<td>- Recent involvement in changing service initiatives.</td>
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<td></td>
<td>- Insight and appreciation of risk management and governance issues.</td>
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<tr>
<td><strong>Research, publications and special interests</strong></td>
<td>- A sound knowledge and application of relevant paediatric and children's cardiac research.</td>
<td>- Undertaking research.</td>
</tr>
<tr>
<td><strong>Knowledge</strong></td>
<td>- Well-developed specialist knowledge, underpinned by theory and experience.</td>
<td>- Experience in dealing with complex facts or situations requiring analysis and interpretation.</td>
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<td></td>
<td>- Up-to-date clinical governance and risk management training and experience.</td>
<td>- Critical, analytical and appraisal skills.</td>
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<tr>
<td><strong>Interpersonal skills</strong></td>
<td>- Flexibility</td>
<td>- Operational leadership skills.</td>
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<tr>
<td></td>
<td>- Excellent verbal and legible writing skills</td>
<td>- Leadership of a junior nursing team.</td>
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<td>- Ability to work within a level of autonomously and within a team</td>
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<td></td>
<td>- Excellent time management</td>
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<tr>
<td><strong>Job-related skills and aptitudes</strong></td>
<td>- Leadership experience.</td>
<td>- Experience in contributing towards developing policies, protocol, guidelines and service operational procedures.</td>
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<td>- Excellent interpersonal and communication skills.</td>
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<td>- Proactive and self-motivated.</td>
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<td>- Works well within a team.</td>
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<td>- Ability to work independently and demonstrate a safe and appropriate degree of autonomy.</td>
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<td>- Ability to manage own workload.</td>
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<td>- Assertive and confident.</td>
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<td>- Well organised and able to manage time effectively.</td>
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<td>- Ability to work in a challenging and busy environment whilst meeting set deadlines.</td>
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<td>- Flexible to meet service needs.</td>
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<td>- Awareness of changing local, regional and national policies in children's cardiac care.</td>
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<tr>
<td><strong>Other requirements, such as values and behaviours</strong></td>
<td>- Ability to commit to engaging in and/or advancing services.</td>
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<td>- Respect for the team contribution of deliverance of care.</td>
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<td></td>
<td>- Compassion for the nature and effect of paediatric cardiology care, both for the CYP and their family, and for staff members.</td>
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Appendix 4: Example job description: Lead children’s cardiac nurse specialist (CCNS) (career framework level 7)

**Role description:** Children’s cardiac nurse specialist (CCNS) – Team leader

**Pay band:** Minimum AfC band 8a*

**Reports to:** Lead children’s cardiac nurse specialist (AfC band 8a – see Appendix 1)

**Professionally accountable to:** Director of nursing (lead centre)

**Essential qualifications:** Registered children’s nurse, accredited teaching qualification, evidence of academic achievement at master’s level/evidence of working towards a master’s degree, recognised course in children’s assessment skills

**Minimum experience:** Five years’ experience of caring for children in the cardiac specialty, two years (minimum) as band 7 CCNS. The intricate detail of the role and what is expected is reflected in the specific competency framework in Section 3 and Section 4

Note: Where ‘network’ is mentioned, this refers to the children’s congenital heart network.

**Role purpose**

The lead children’s cardiac nurse specialist (CCNS) will:

- develop, lead and co-ordinate the children’s cardiac nurse specialist team to ensure smooth transition between services for CYP and their families across the network services
- lead and support the CCNS team to work in partnership with CYP and their families through co-ordination and facilitation of their biopsychosocial needs
- develop a service framework whereby the assessment, planning, education, advice and support is carried out in collaboration, and negotiation with, associate health, social care and education providers
- line manage the CCNS team, ensure a high level of competency development and provide ongoing leadership, guidance and supervision.

**Summary of duties and responsibilities**

The lead CCNS should provide professional line management of the network CCNS team while working a ratio of 30-40% leadership to 60-70% direct patient contact (depending on the patient population size of the network), which covers:

- working across the network as the key advocate for CYP by ensuring the partnership they have with their family and health and social care professionals is central to, and focuses on, meeting their needs and expectations within care delivery, working in a collaborative manner with all members of the multi-professional team
• providing specialist and practical information and education to parents following antenatal or postnatal diagnoses (while working in collaboration with the role of the fetal nurse specialists) and offering a high level of emotional and counselling support

• providing specialist and practical information and education following a later diagnosis of acquired or congenital heart disease to the CYP and their family, and offering level two emotional and counselling support, referring to counselling or psychological services as required

• using their unique and specialist knowledge to work in partnership with CYP and their families, focusing on meeting their identified needs through planning, negotiating, implementing and evaluating an agreed plan of care while keeping the CYP at the centre of care delivery

• using expert communication skills to impart complex and potentially distressing information to CYP and their families, supporting them through the consent process and ensuring informed decision-making

• undertaking enhanced and specialist health assessments, contributing to early identification of potential cultural, spiritual, biopsychosocial needs of children, young people and their families. Where appropriate, referring to other health care professionals, such as psychological or mental health support, for advice

• collaborating with social work colleagues and child protection teams when the holistic assessment of need indicates safeguarding issues coordinating and facilitating care delivery and provision of support across the network for CYP and their families, ensuring continuity of care and effective communication between health care professionals

• act as principal liaison for the GP, health visitor, school nurse, community children’s nurse and other members of the primary care and relevant specialist teams, to ensure an integrated provision of pre- and post-hospital care, if required, within a common assessment framework to ensure safeguarding of the CYP

• using agreed protocols to assess family resiliency, including initial first-line assessment of parental anxiety and depression, whilst recognising factors that may impact on adjustment and adaptation to potentially traumatic and life-changing events and circumstances

• providing relevant nursing support and refer to other specialists where appropriate if parents demonstrate signs of increased anxiety or potential depression

• providing outreach advice and support across the network for CYP and their families during their transition between home, community and hospital cardiac care. This is through, for example, nurse-led clinics, attending outreach services, telephone, text message, email and online resources, such as teleconferencing or videoconferencing (according to local hospital policy)

• acting as an expert resource for the multidisciplinary team, providing specialist education, advice and support to colleagues across the network and wider community (including health, social care and education colleagues)

• working in collaboration with the children’s cardiac transition nurse and adult congenital heart disease nurse specialists to empower young people and their families during their transition from children’s to adult services
• measuring the impact and quality of the service by ongoing audit of the CYP and family experience and use this as the focus for adjustment and development of the service

• evaluating the quality and service user experience of the CCNS team through research and audit, and disseminating findings nationally

• practising, as a key member of the multidisciplinary team across the network, in the development of evidence-based local and national policies, protocols and standards, to meet clinical, service and service user needs.

Clinical practice (60-70% of the role)

• Establish contact with CYP and their families from the time of initial diagnosis or referral and provide specialist nursing advice and information to support their practical and biopsychosocial needs.

• Ensure accessibility to the CCNS for families and develop efficient systems to enable families to be able to contact a consistent port of call within the network.

• Work in partnership with CYP and their families to meet their identified needs; planning, negotiating, implementing and evaluating an agreed plan of care whilst keeping the CYP at the centre of any decisions and actions that may impact on outcomes of care delivery.

• Ensure that integrated care pathways are in place at the point of diagnosis for CYP with complex and palliative care needs.

• Use expert communication skills to impart sensitive, complex and potentially distressing information to CYP and their families and provide them with advice and emotional support in hospital and at home.

• Develop and provide information in a variety of different formats for CYP and families in relation to diagnosis, investigations, treatment, long-term management, palliative and end of life care; empowering them to access available information at various points throughout their care pathway.

• Communicate in ways that empower CYP and their families to make informed choices about their health and health care, enabling informed consent.

• Be the designated key worker for CYP, their families and health professionals across the network, ensuring referrals are prioritised and managed appropriately.

• Act as an advocate for CYP and their families to ensure equity and consistency of service delivery while focusing on the individual package of care required throughout their access to treatment and surveillance, whenever and wherever this is delivered across the network.

• Facilitate discharge planning to ensure continuity of care and effective communication across the network, collaborating with community nursing and primary care services where necessary.

• Assess CYP and family resiliency in terms of factors that may impact on adjustment and adaptation to potentially traumatic events, including initial first-line assessment of parental anxiety and potential depression and, where indicated, refer to other health care professionals, such as psychological and mental health support.
• Undertake enhanced and specialist health assessments to identify the potential cultural, spiritual and biopsychosocial needs of CYP and their families which may indicate a referral to associate care personnel within the wider multi-professional team.

• Undertake regular nurse-led clinics and attend multi-professional clinics across the network, working within authorised levels of autonomy.

• Maintain adequate patient documentation to NMC requirements for all patients seen and advice given in any practice setting and contribute to clinical activity/data collection as required.

• Use clinical judgement and autonomous decision-making concerning the interpretation and analysis of information from a variety of sources.

Management and leadership (30-40% of the role)

• Lead delivery of the strategic and operational goals as directed by the lead nurse for the network.

• Give professional line management of the network CCNS team through clear directed leadership, ensuring ongoing support, guidance, supervision and monitoring to maintain high levels of competency development and service provision at all times.

• Act as principal liaison for the GP, health visitor, school nurse, community children’s nurse and other members of the multidisciplinary team, to ensure integrated care across the network.

• Work collaboratively and in partnership with other health care professionals, offering appropriate leadership, guidance and supervision to colleagues.

• Lead the development of service and nurse-led initiatives in conjunction with medical and nursing colleagues to advance the quality of care for CYP and their families across the network.

• Work with associate colleagues to develop achievable shared goals ensuring that the team’s purpose and objectives are clear.

• Develop and implement evidence-based standards of care, practice guidelines and integrated care pathways, continually evaluating the quality of patient care.

• Participate in strategic planning for future quality service development, including evidence-based policy planning, both locally across the network and nationally.

• Lead in the appraisal process of members of the CCNS team.

Training and education

• Be highly competent to provide appropriate education to CYP and their families, to promote health and encourage self-care and participation in the planned programme of treatment and care.

• Ensure competency development includes the measurement of the team’s knowledge and skills for provision of first-line assessment and recognition of key psychological themes, such as family resiliency, stress and coping strategies, adjustment and adaptation, classical and operant conditioning, locus of control, potentially traumatic events and post-traumatic stress syndrome, anticipatory grief and grieving.
• Collaborate with the lead clinical educator to develop specific specialist education programmes and in-service training activities across the network, in line with the Knowledge and Skills Framework (KSF)

  • Act as an educational resource for nursing and other professionals across health, social care and education services.
  • Exercise a high degree of personal and professional authority and act as an expert for all disciplines of staff.
  • Share good practice by creating positive opportunities to communicate and collaborate locally across the network, regionally, nationally and internationally.
  • Contribute to the wider development of practice through publication and dissemination.

Evaluation and research

• Collaborate with the lead nurse and other key nursing post-holders, such as clinical educators and readers/professors, in initiating and undertaking evaluation of the quality of the CCNS service.
• Involve service users in the design, delivery and evaluation of services through CYP and parent satisfaction surveys and audit.
• Critically appraise and synthesise the outcomes of other relevant research, evaluations and audits. Act on this information in collaboration with colleagues to continually develop the service.
• Disseminate findings of service evaluation locally across the network; regionally and nationally, sharing best practice with colleagues.
• Collaborate with the lead nurse and other key nursing post-holders, such as clinical educators and readers/professors, to initiate and undertake nursing research, contributing to the wider congenital cardiac research agenda.

Professional development

• Maintain a high profile and actively contribute to the development of network, national and international agendas for the care of children with cardiac conditions.
• Be proactive in developing and improving own knowledge, skills and attitudes in structured ways, including accessing clinical supervision and performance review.
• Work within agreed policies of the trust and adhere to The Code (NMC, 2018a).
Person specification – lead children's cardiac nurse specialist (CCNS) (level 8A)

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<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
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<tbody>
<tr>
<td>Education and qualifications</td>
<td>• Current registration with NMC. • Registered children’s nurse. • Master’s level qualification or evidence of working towards a Master’s Degree in a health-related discipline. • Qualification in teaching/mentoring and assessing. • Qualification in leadership and management. • CAF training. • Expert high level communications skills training or willing to undertake at earliest opportunity. • Level 2 counselling training/qualification or evidence of working towards. • Full, clean driving licence. • PILS. • Recognised course in paediatric assessment skills.</td>
<td>• Post-registration qualification in cardiology nursing. • Qualification in paediatric community nursing. • Recognised qualification in health management. • Course/module in research or evidence-based medicine. • Independent non-medical prescribing course. • APLS / PALS. • Recognised high dependency/PICU module.</td>
</tr>
<tr>
<td>Experience</td>
<td>• Minimum 5 years’ post-registration experience in children’s cardiac care of which 2 years (minimum) as band 7 CCNS. • Extensive experience in paediatric cardiac nursing. • Knowledge and understanding of child protection/safeguarding. • Experience in supervising/managing staff – including performance review. • Recognised leadership and service/staff development experience. • Proven change management skills and evidence of outcome. • Knowledge of NHS Direction and policy initiative. • Knowledge and understanding of current nursing policy and practice issues. • Knowledge and understanding of nursing recruitment and retention issue. • Knowledge and understanding of infection control. • Experience in budgetary and resource management. • Knowledge, understanding and experience in risk management and governance issues. • Knowledge and understanding of patient/public Involvement, management of complaints and investigations into governance issues.</td>
<td>• Experience in paediatric community nursing. • Evidence of leading initiatives within multi-professional teams. • Ability to provide clinical supervision of members of the CCNS team. • Experience in conflict resolution management.</td>
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<tr>
<td>Research, publications and special interests</td>
<td>• Insight into children’s and/or cardiac research with relevance to service provision and performance. • Involvement in audit and/or research studies.</td>
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<tr>
<td>Knowledge</td>
<td>• Well-developed specialist knowledge, underpinned by theory and experience. • Up-to-date clinical governance and risk management training and experience • Critical, analytical and appraisal skills.</td>
<td>• Experience in dealing with complex facts or situations requiring analysis, interpretation and comparison of options.</td>
</tr>
<tr>
<td>Interpersonal skills</td>
<td>• Excellent operational and leadership skills. • Flexible and inspirational. • Excellent verbal and legible writing skills. • Ability to work autonomously. • Excellent time management.</td>
<td>• Strategic leadership skills. • Ability to develop a high-performing team to deliver individual team and team outputs and targets.</td>
</tr>
<tr>
<td>Criteria</td>
<td>Essential (lead nurse)</td>
<td>Desirable</td>
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<tr>
<td>Job-related skills and aptitudes</td>
<td>• Proven leadership skills.</td>
<td>• Previous line management position.</td>
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<td>• Excellent interpersonal and communication skills.</td>
<td>• Experience in developing and writing policies, protocol, guidelines, service and operational procedures.</td>
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<td>• Proactive, self-motivated, with the ability to motivate others.</td>
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<td>• Works well within a team.</td>
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<td>• Ability to work independently and demonstrate a high degree of autonomy.</td>
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<td>• Ability to manage own workload and that of others.</td>
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<td>• Well organised and able to manage time effectively.</td>
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<td>• Ability to work in a challenging and busy environment whilst meeting set deadlines.</td>
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<td>• Flexible to meet service and team needs.</td>
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<td>• In-depth awareness of changing local, regional and national policies in children’s cardiac care.</td>
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<tr>
<td>Other requirements, such as values and behaviours</td>
<td>• Proven commitment to engaging in and/or advancing services and role developments of team skills.</td>
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<td>• Respect of the team contribution of deliverance of care.</td>
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<td></td>
<td>• Compassion for the nature and effect of paediatric cardiology care, both for the child and their family, and colleagues.</td>
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Appendix 5:
Example job description: Children’s cardiac transition nurse (CCTN) (career framework levels 6–7)

**Role description:** Children’s cardiac transition nurse (CCTN)

**Pay band:** Minimum AfC band 7*

**Responsible to:** Directorate/head of nursing

**Professionally accountable to:** Director of nursing/chief of nursing

**Essential qualifications:** Registered nurse (RNC or RNA), teaching experience or qualification, academic achievement at master’s level/evidence of working towards a master’s level degree, recognised course in congenital heart disease

**Minimum experience:** Five years’ experience of caring for CYP or adults with congenital heart disease. The intricate detail of the role and what is expected is reflected in the specific competency framework

**Note:** Where ‘CCHN’ is mentioned, this refers to the children’s congenital heart network.

**Role purpose**

The children’s cardiac transition nurse (CCTN) will:

• work in partnership with young people and their families to co-ordinate and facilitate their biopsychosocial needs through assessment, planning, education, advice and support. This is in collaboration and negotiation with associate health, social care and education providers

• ensure smooth transition between child and adult services for young people and their families across the CCHN services

• participate in the development of service initiatives and monitor the effectiveness of their provision in line with young people and family experience and outcome.

**Summary of duties and responsibilities**

The children’s cardiac transition nurse CCTN should:

• work across the CCHN as the key advocate for young people by ensuring the partnership they have with their family and health and social care professionals is central to, and focuses on, meeting their needs and expectations within care delivery, working in a collaborative manner with all members of the multi-professional team

• liaise within and across organisational boundaries to ensure co-ordination and facilitation of transition to adult services for all co-morbidities and additional needs

• provide practical, tailored information, education and emotional support to young people and their families
• use their unique and specialist knowledge to work in partnership with young people and their families, focusing on meeting their identified needs through planning, negotiating, implementing and evaluating an agreed plan of care whilst keeping the young person engaged and at the centre of care delivery

• support young people to become independent, confident and capable when managing their own health care needs, whilst simultaneously supporting parents to adopt a more supportive role and adjust to the change in responsibility that this entails

• use expert communication skills to impart complex and potentially distressing information to young people and their families, supporting them through the consent process and ensuring informed decision-making

• undertake enhanced and specialist health assessments, contributing to early identification of potential social, cultural, educational, biopsychosocial needs of young people and their families with particular focus on the developing needs of adolescents. Where appropriate, refer to other health care professionals, such as psychological or mental health support, for advice

• ensure young people understand the importance of adult follow-up and know how to recognise what action to take in the event of any deterioration or acute episode of ill-health

• provide general and cardiac-specific health promotion to encourage the adoption of long-term healthy lifestyle behaviours in the young person and their family, including discussion of smoking, drugs, alcohol, puberty and sexual health

• collaborate with social work colleagues and child protection teams when the holistic assessment of need indicates safeguarding issues

• co-ordinate and facilitate care delivery and provision of support across the CCHN for young people and their families, ensuring continuity of care and effective communication between health care professionals

• act as principal liaison for all young people with a congenital heart disease aged 12 years and over; liaising with the GP, school nurse, community children's nurse and other members of the primary care team and relevant specialist teams to ensure an integrated provision of pre- and post-hospital care and, if required, within a common assessment framework to ensure safeguarding of the young person

• deliver relevant nursing support and refer to other specialists, where appropriate, if a young person demonstrate signs of increased anxiety or potential depression

• deliver outreach advice and support across the CCHN for young people and their families during their transition between child and adult services, home, community and hospital cardiac care. For example, this could be through nurse-led clinics, attending outreach services, telephone, text message, email and online resources such as teleconferencing or videoconferencing (according to local hospital policy)

• act as an expert resource, clinical role model and leader in transition care for the multidisciplinary team, providing specialist education, advice and support to colleagues across the CCHN and wider community (including health, social care and education colleagues)
• work in collaboration with the adult congenital heart disease nurse specialists to empower young people and their families, and ensure an efficient and effective transition process

• measure the impact and quality of the service by an ongoing audit of the young person and family experiences, and use this as the focus for adjustment and development of the service

• evaluate the quality and service user experience of the children’s cardiac transition nurse team through research and audit, and disseminate findings nationally

• practise, as key member of the multidisciplinary team across the CCHN, in the development of evidence-based local and national policies, protocols and standards, to meet clinical, service and service user needs.

Clinical practice

• Establish contact with young people and their families from the time of initial diagnosis or referral, and provide specialist nursing advice and information to support their practical and biopsychosocial needs.

• Referrals can be made to the children’s cardiac transition nurse when the young person reaches 12 years of age, or earlier or later depending on the young person’s individual development and circumstances.

• Ensure accessibility to the children’s cardiac transition nurse for young people and families and develop efficient systems to enable young people and families to be able to make contact with a consistent port of call within the CCHN.

• Work in partnership with young people and their families to meet their identified needs; planning, negotiating, implementing and evaluating an agreed plan of care whilst engaging the young person and keeping them at the centre of any decisions and actions that may impact on outcomes of care delivery.

• Use expert communication skills to impart sensitive, complex and potentially distressing information to young people and their families, and provide them with advice and emotional support in hospital and at home.

• Develop and provide information in a variety of different formats for young people and families in relation to diagnosis, investigations, treatment, long-term management, transition, sexual health and lifestyle advice, palliative and end of life care; empowering them to access available information at various points throughout their care pathway.

• Communicate in ways that empower young people and their families to make informed choices about their health and health care, enabling informed consent.

• Be the designated key worker for young people, their families and health professionals across the CCHN, ensuring referrals are prioritised and managed appropriately.

• Act as an advocate for young people and their families to ensure equity and consistency of service delivery while focusing on a tailored pathway through transition based on assessment of the individual’s needs.

• Facilitate discharge planning to ensure continuity of care and effective communication across the CCHN, collaborating with community nursing and primary care services where necessary.
• Assess young people and family resiliency in terms of factors that may impact on adjustment and adaptation to potentially traumatic events, including assessment of anxiety and potential depression and, where indicated, refer to other health care professionals such as psychological and mental health support.
• Undertake enhanced and specialist health assessments to identify the potential cultural, educational, spiritual and biopsychosocial needs of young people and their families which may indicate a referral to associate care personnel within the wider multi-professional team.
• Undertake regular nurse-led clinics and attend multi-professional clinics across the CCHN, working within authorised levels of autonomy.
• Maintain adequate patient documentation to NMC requirements for all patients seen and advice given in any practice setting and contribute to clinical activity/data collection, as required.
• Use clinical judgement and autonomous decision-making on the interpretation and analysis of information from a variety of sources.

Management and leadership
• Act as principal liaison for the GP, health visitor, school nurse, community children’s nurse, social worker and other members of the multidisciplinary team to ensure integrated care across the CCHN.
• Act as an advocate, negotiating and influencing on behalf of young people and families at a local and national level.
• Work collaboratively and in partnership with other health care professionals, offering appropriate leadership, guidance and supervision to colleagues.
• Have the ability to identify the long-term health needs of the population.
• Lead the development of service and nurse-led initiatives in conjunction with medical and nursing colleagues to advance the quality of care for young people and their families across the CCHN.
• Work with associate colleagues to develop achievable shared goals; ensure that the team’s purpose and objectives are clear.
• Participate in the development and implementation of evidence-based standards of care, practice guidelines and integrated care pathways, continually evaluating the quality of patient care.
• Contribute to service reports and evaluation of the role.
• Work collaboratively with outside agencies, charities and organisations and encourage working across organisational boundaries.

Training and education
• Be highly competent to provide appropriate education to young people and their families, to promote health and encourage self-care and participation in the planned programme of treatment and care.
• Tailor education to meet the individual’s needs to ensure they are engaged and fully understand the implications of their condition on their lifestyle and health decisions.
• Ensure competency development includes the measurement of knowledge and skill ability to perform first-line assessment and recognition of key psychological themes, such as family resiliency, stress and coping strategies, adjustment and adaptation, classical and operant conditioning, locus of control, potentially traumatic events and post-traumatic stress syndrome, anticipatory grief and grieving.

• Collaborate with the lead adolescent and transition clinical nurse specialist to develop specific specialist education programmes and in-service training activities across the CCHN, in line with the Knowledge and Skills Framework (KSF).

• Act as an educational resource for nursing and other professionals across health, social care and education services.

• Exercise a high degree of personal and professional authority and act as an expert for all disciplines of staff.

• Share good practice by creating positive opportunities to communicate and collaborate locally across the CCHN regionally, nationally and internationally, and contribute to the wider development of practice through publication and dissemination.

**Evaluation and research**

• Collaborate with the lead adolescent and transition nurse specialist, initiating and undertaking evaluation of the quality of the adolescent and transition service.

• Involve service users in the design, delivery and evaluation of services through young people and parent satisfaction surveys and audit.

• Listen to and collect user service feedback via patient satisfaction surveys and audit, to ensure service users are involved in the design, delivery and evaluation of services.

• Critically appraise and synthesise the outcomes of other relevant research, evaluations and audits and act on this information in collaboration with colleagues to continually develop the service.

• Contribute to and participate in the dissemination of findings of service evaluation locally across the CCHN, regionally and nationally, sharing best practice with colleagues.

**Professional development**

• Maintain a high profile and actively contribute to the development of CCNH, national and international agendas for the care of young people with cardiac conditions.

• Be proactive in developing and improving own knowledge, skills and attitudes in structured ways, including accessing clinical supervision.

• Work within agreed policies of the trust and adhere to *The Code* (NMC, 2018a).

• Develop an insight into the development of CCHN, national and international agendas for the care of young people with cardiac conditions.

• Be proactive in developing and improving own knowledge, skills and attitudes in structured ways and participating in clinical supervision and performance review.
### Person specification – adolescent and transition clinical nurse specialist (ATCNS)

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
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</table>
| **Education and qualifications** | • On the relevant part of the NMC register, RNA/RNC or equivalent  
• Evidence of ongoing, dynamic continuing professional development within the specialty, linked to demonstrable clinical competences.  
• An assessing and mentoring qualification or ENB 998.  
• Possession of a relevant degree or in the process of obtaining one.  
• Leadership or management training.  
• Basic and advanced life support  
• Adolescent and adult with congenital heart disease module, or adult congenital heart disease module, undertaken or willing to do so as part of the role. | |
| **Skills/abilities** | • Clinical expert in paediatric/adult clinical skills.  
• Relevant specialist skills and abilities for the department/specialty, such as experience of working with children and adults. Experience of general cardiothoracic work.  
• Excellent managerial, leadership and organisational skills, including:  
  • ability to motivate and develop a multi-professional team  
  • ability to problem solve and initiate change  
  • negotiating skills  
  • interviewing skills  
  • appraisal skills  
  • ability to delegate and prioritise  
  • excellent verbal and written communication and listening skills  
  • excellent teaching, training and preceptorship skills, and ability to demonstrate experience in education of adults or young people  
  • ability to present ideas and thoughts at discussion and in a formal presentation  
  • ability to work across professional teams and organisational boundaries.  
• Administration of IV drugs, as appropriate.  
• Phlebotomy and cannulation skills, as appropriate.  
• Administering medication under patient group directives or independent prescribing, as appropriate.  
• Computer literate (word processing, PowerPoint presentation).  
• Ability to use technology, such as mobile phones, Skype, video link, internet and meet current communication technology needs.  
• Completion of adolescent e-learning for health modules, particularly transition module. | |
| **Experience** | • Experience within the relevant clinical environment.  
• Experience of leadership abilities, such as taking charge of a ward area.  
• Experience of leading and managing a team of nurses.  
• Previous experience of change management and problem solving.  
• Experience of handling clinical incidents and complaints.  
• Experience of both clinical and formal teaching.  
• Experience of working with young people in transition, coaching young people and life skills development. | • Previous experience of research and audit. |
Person specification – adolescent and transition clinical nurse specialist (ATCNS) (continued)

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
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<tbody>
<tr>
<td>Knowledge</td>
<td>• Thorough knowledge relevant to the specialty department/field of practice.</td>
<td>• Knowledge of adolescent development and lifestyle challenges.</td>
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<td>• Knowledge of transition theories and key documents, information resources, national standards.</td>
<td>• Detailed understanding of audit and research methodologies.</td>
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<td></td>
<td>• Understanding of professional and current issues around nursing young adults and adolescents, and how health care can support these issues.</td>
<td>• The use of information technology to promote health and communication.</td>
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<td></td>
<td>• Understanding of resource management, health and safety, clinical risk and quality issues.</td>
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<td></td>
<td>• Child protection procedures.</td>
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<td></td>
<td>• Handling clinical incidents and complaints.</td>
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<td></td>
<td>• Awareness of equality and diversity.</td>
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<td></td>
<td>• Clinical governance.</td>
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<tr>
<td>Other requirements</td>
<td>• Ability to initiate, manage and sustain change.</td>
<td>• Ability to motivate, support and empower young people.</td>
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<td>• Good attendance record.</td>
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<td></td>
<td>• A flexible approach to work.</td>
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<td>• Evidence of fulfilling Prep.</td>
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<td></td>
<td>• Ability to work as an integral part of the multidisciplinary team.</td>
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<td>• Ability to deal with conflict situations.</td>
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<td></td>
<td>• Accountability – taking responsibility for own actions and promoting good team working.</td>
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<td></td>
<td>• Openness – sharing information and good practice appropriately.</td>
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<td></td>
<td>• Mutual respect – treating others with courtesy and respect at all times.</td>
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</table>
Appendix 6: Example job description: Children’s nurse with interest in congenital heart disease (CNIC)/local children’s cardiology centre (career framework levels 5–6)

**Role description:** CNIC in Level 3/ local children’s cardiology centre (0.25 WTE)

**Pay band:** Minimum AfC bands 5–7

**Responsible to:** Director of nursing

**Responsible for:** Creating links across the CCHN and caring for patients with CHD

**Essential qualifications:** Registered children’s nurse

**Minimum experience:** Two years’ experience as a CYP nurse

Note: Where ‘CCHN’ is mentioned, this refers to the children’s congenital heart network.

**Role purpose**

Children’s nurses with interest in congenital heart disease (CNICs) are defined as qualified nurses, working in clinical areas within the CCHN, who take responsibility for participating in the care of a child or young person with congenital heart disease. They will develop relationships with staff in the specialist centres, with the aim of improving communication channels with patients and families and facilitating education of other staff within their area of work.

The CNIC’s usual place of work may be the outpatient clinic, a hospital ward, neonatal unit, community, or palliative care environment; they will have contact with patients with congenital heart disease and their families. Each local children’s cardiology centre must have identified registered children’s nurses with an interest and training in CYP cardiology (NHSE, 2016, A17, L3). The local children’s cardiology centre must have a locally designated registered children’s nurse with a specialist interest in children’s cardiology, trained and educated in the assessment, treatment and care of cardiac children and young people (NHSE, 2016, B2, L3). Each local children’s cardiology centre must have a locally designated 0.25 WTE registered children’s nurse with a specialist interest to participate in cardiology clinics, provide support to inpatients and deal with requests for telephone advice (NHSE, 2016, B4, L3). Nurses working within a local children’s cardiology centre must be offered allocated rotational time working in the specialist children’s surgical centre to enhance development of clinical knowledge and skills, enabling professional development and career progression. A formal annual training plan should be in place (NHSE, 2016, E6, L3).
The CNIC will support or participate in the congenital cardiology clinics (this may be one day a week). They will not be expected to undertake the role of a clinical nurse specialist (CCNS) but have the role of advice, support, signposting and an understanding of the congenital heart disease CCHN.

Be confident in undertaking the assessment of children and young people with congenital heart disease in terms of clinical observations as appropriate – blood pressure, oxygen saturations, height, weight, New York Heart Association (NYHA) classification (NYHA, 1994).

Work alongside the visiting consultant and level 3 cardiologists to provide additional support with regards to onward treatment plan and enable the cardiologist to see more patients. This may be on the ward, outpatient clinic or in the community.

Provide high quality information and support to patients with CHD and their families.

Ensure patients and families are signposted to, and can access, up-to-date relevant information and websites.

Provide information about facilities and resources at the specialist children's surgical centre relating to cardiac surgery, cardiology interventions, transition and transfer from children to adult services, and signpost to support for patients with learning disabilities.

Provide contact details to patients and families for the CCNS, children’s or adult teams in the specialist children's cardiology centre or the specialist children's surgical centre, who will be able to provide more specific advice and detailed support, for example, on pre-pregnancy.

Counselling and contraception for CHD patients, lifestyle advice and support, and also support for patients and families with end of life care.

Be able to identify and support the high-risk CHD patients in the CCHN and signpost to appropriate additional support.

Support inpatients at the level 3 centre on the rare occasions there are admissions. A telephone advice line may be established for the CNIC to deal with questions from the family and as a point of referral for specialist advice. This would be to respond to non-urgent queries.

**Education**

The nurse would develop their knowledge and skills by visiting the level 1 centre, CHD outpatient clinics, children’s congenital joint cardiac case conferences and cardiac wards. This will enable them to have a broad understanding of the patient pathway.

Participate in educational opportunities on the diagnosis and treatment of congenital CHD conditions, as offered by the specialist children’s surgical centre, CHD CCHN, national conferences, and stand-alone children's congenital study days.

**Management**

Participate in service developments in the local congenital heart disease service.

Facilitate local education opportunities for other nurses working in the level 3 centre. Communicate with the lead nurse for the CCHN and the CCNS who supports the level 3 centres.
• Work closely with the local clinical educators to facilitate education of staff.
• Develop resources for local staff such as teaching boards, education resources and signposting to relevant web-based materials.
• Assist in keeping a record of the high-risk CHD patients in the level 3 centre.
• Support and share practice with other CNICs within the local area through network-led activities and events.

Professional support
• CNIC will be offered professional support relating to CHD by the lead nurse for the CCHN, CCNS and PEC(s) (paediatrician with expertise)/adult consultant with an interest in CHD). This would be offered via:
  - CNIC study days
  - opportunities for shared learning/debrief
  - rotation/shadowing at the specialist children’s cardiology centre level 2 and/or specialist children’s surgical centre/level 1
  - learning bursts/short teaching sessions at the local children’s cardiology centre from the CCNS/lead nurse
  - regular contact with the local PEC consultant with an interest in CHD.

Audit
• Collect simple data about the numbers of patients supported and the particular type of support given. This information can be used to contribute to evaluating the workload of the role and contribute to appraisal and revalidation requirements.
Person specification – children's nurse with interest in congenital heart disease (CNIC)/local children's cardiology centre

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
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| Education and qualifications | • Current registration with NMC.  
• Registered children's nurse.  
• Qualification in teaching/mentoring and assessing.  
• Sound communications skills. | • CAF training.  
• Recognised high dependency module. |
| Experience | • Knowledge and understanding of child protection/safeguarding.  
• Knowledge and understanding of current nursing policy and practice issues.  
• Knowledge and understanding of infection control.  
• Recent involvement in changing service initiatives.  
• Appreciation of risk management and governance issues application. | • Minimum 2 years' post-registration experience in children's cardiac care.  
• Experience of involvement in initiatives within multi-professional teams.  
• Insight and/or experience in conflict resolution situations. |
| Research, publications and special interests | • Ability to apply relevant research and evidence-based knowledge and skill to delivering care to children and young people. | • Course/module in research or evidence-based practice. |
| Knowledge | • Sound developing specialist knowledge, underpinned by theory and experience.  
• Relevant level clinical governance and risk management training and experience. | • Experience in dealing with situations requiring analysis and interpretation.  
• Critical, analytical and appraisal skills. |
| Interpersonal skills | • Flexibility.  
• Good sound verbal and legible written skills.  
• Ability to work within a team and take on authorised autonomy as required.  
• Excellent time management. | • Leadership skills.  
• Collaborative leadership of associate nursing team members. |
| Job-related skills and aptitudes | • Good, sound interpersonal and communication skills.  
• Self-motivated.  
• Works well within a team.  
• Ability to work independently and take on additional responsibility as directed and appropriate.  
• Ability to manage own workload.  
• Ability to be assertive.  
• Developing confidence and competence in working with a higher-level team.  
• Well organised and able to manage time effectively.  
• Ability to work in a challenging and busy environment to contribute towards set deadlines.  
• Flexibility to meet service needs.  
• Awareness of changing local, regional and national policies in children's cardiac care. | • Leadership experience.  
• Experience in contributing towards developing policies, protocol, guidelines service operational procedures. |
| Other requirements, such as values and behaviours | • Ability to commit to engaging in and/or contributing to advancing services.  
• Respect of the team contribution of deliverance of care.  
• Compassion for the nature and effect of children's cardiology care both for the child, family and staff members.  
• Knowledge of managing databases.  
• IT skills – for example: Word, PowerPoint, Excel, Microsoft Teams. | • Experience of running teaching sessions and/or study days. |
Appendix 7: Example job description: Lead clinical educator for the CCHN (career framework level 7)

**Role description:** Lead clinical educator for the CCHN

**Pay band:** Minimum AfC band 8a*

**Responsible to:** CCHN lead nurse (8c)

**Responsible for:** Education of nursing staff across the children's congenital heart network

**Essential qualifications:** Registered children’s nurse, NMC recordable teacher qualification, MSc/postgraduate study in area of expertise, project management experience and/or qualification

**Minimum experience:** Five years’ experience as a CYP cardiac clinical educator

Note: Where ‘CCHN’ is mentioned, this refers to the children’s congenital heart network.

**Role purpose**

The specialist children’s surgical centre must provide sufficient cardiac clinical nurse educators to deliver standardised training and competency-based education programmes across the congenital heart CCHN, including linked neonatal units. They will be responsible for ensuring the continuing professional development of nursing staff in the local children’s cardiology centre and for community children’s nurses (NHSE, 2016, E5, L3, p.279). Each specialist children’s cardiology centre must have one clinical educator who is responsible for ensuring the continuing professional development of nursing staff in the specialist children’s cardiology centre (NHSE, 2016, E6, L2, p.243). The competency-based programme must focus on the acquisition of knowledge and skills such as clinical examination, assessment, diagnostic reasoning, treatment, facilitating and evaluating care, evidence-based practice and communication. Skills in teaching, research, audit and management will also be part of the programme (NHSE, 2016, E6, L1, p.198).

The lead nurse educator will:

- be a clinical expert and experienced educator in the care of the child/young person with a cardiac condition, lead the development and implementation of the vision for nursing education and development for the CCHN, working across organisational boundaries to deliver excellence in educational programmes and resources, in line with *Modernising Nursing Careers: setting the direction* (DH, 2006) NHS nurses to have the right values/skills to deliver the highest possible care

- be able to work autonomously to assess and provide an effective strategy for education and develop succinct frameworks of training in which to improve nurses’ performance. This will be within the context of best practice, using evidence-based research, audit, clinical guidelines and pathways of care to develop an environment of critical thinking and informed decision-making to enhance expert care delivery
• manage the CCHN practice education team
• ensure provision of professional and clinical cardiac education and support to cardiac nurses caring for CYP across the defined CCHN. They will ensure the provision and delivery of a high standard of specialist cardiac nursing education required to inform the care delivery, demonstrate the effectiveness of the education processes and develop nurse-sensitive outcome measurements together with the lead nurse, local education and training boards and trust education leads. Support effective workforce planning across the CCHN, including training and professional development of all nurses involved in the various care pathways for children with cardiac conditions, and negotiate in-reach/outreach opportunities between CCHN centres to enhance nurse education
• work in collaboration with the CCHN lead nurse in shaping the vision and future development of the children's congenital heart service across the CCHN. This will include educational pathways for ensuring the implementation of high quality/evidence-based care, as well as nurse education, training and leadership responsibilities
• foster an efficient, comprehensive and integrated approach to the multi-professional team working across the CCHN and work to ensure the advancement of child and family-focused cardiac care – support known to improve patient outcomes – and instigate methods to reduce risk and focus on safety
• be responsible for working in collaboration with senior staff across the CCHN (in order to maintain high standards of nursing care of CYP with cardiac conditions) and ensure, maintain and resolve matters regarding training needs and education of staff in order to maintain the highest level of expertise in delivering patient care
• collaborate with other health care education providers to ensure that appropriate education resources are available within the CCHN for the health care support workforce
• work with provider trust leads for education and training and local education and training boards to ensure, when necessary, education is commissioned from the most competent higher education institute (HEI) provider.

Management and leadership
• Lead the shaping of the education programme for children’s cardiac services in accordance with contemporary drivers, such as the CHD standards (NHSE, 2016), the *Long-Term Plan* (NHS, 2019a), *Interim NHS People Plan* (NHS, 2019b).
• Develop and enhance the educational input and working relationships and practices across the CCHN, including the secondary/tertiary care interface and other relevant agencies and organisations.
• Evaluate the educational opportunities and their relationship to clinical nursing practices and service delivery across the CCHN, working with the CCHN lead nurse to implement change where necessary.
• Chair children’s cardiac CCHN education meetings and participate in meetings regarding the national children’s cardiac agenda with other lead nurse educators. Form collaborative links through the transition programme to adult congenital cardiac care.
• Act as an integral member of the CCHN management team on service development, education and planning improvement, ensuring the development of effective educational standards and governance frameworks.

• Lead and manage the CCHN clinical educators (bands 6–7), ensuring ongoing professional review, and assist the educators to support, facilitate and enhance the delivery of high-quality educational programmes to meet the CHD standards (NHSE, 2016, Section E, Training and Education).

**Clinical responsibility**

• Provide a visible clinical profile, act as a role model in the clinical environment and support staff, having both an advisory and expert clinical input role.

• Ensure a high level of quality educational opportunities to support efficient clinical cardiac nursing care to the client group, acting as change agents to enhance practice where required and promote effective critical thinking and informed decision-making to enhance expert care delivery.

• Ensure the delivery of expert cardiac teaching, educational programmes and resources to support the nursing management of children, from initial presentation to medical/interventional/surgical intervention, long-term management, palliative and end of life care, and/or through to the transition to adult services across the CCHN.

• Contribute to an environment which fosters effective practice and encourages implementation, evaluation and dissemination of new practices.

• Uphold organisational policies and principles on the promotion of equality.

• Promote an inclusive environment where diversity is valued and everyone can contribute, and, in an equitable way, meet the needs of those patients with cultural differences and cognitive, mental or physical disability.

• Work within *The Code* (NMC, 2018a).

**Training and education**

• Lead in coordinating and supporting the educational initiatives and developments of the children’s cardiac nursing role across the CCHN.

• Lead in the promotion, development and, when necessary, delivery of educational opportunities across all grades of nursing staff throughout the CCHN and raise the profile of nursing education within the CCHN. Effectively disseminate information on the educational opportunities across the CCHN, including generalist areas (when necessary).

• Be responsible for managing the changing teaching and learning environments within health care, synthesising information about individuals, groups, programme areas and institutions. Produce appropriate learning strategies and innovations in education by continuously developing and promoting modern teaching facilities and techniques, such as electronic resources and simulation where available, to enhance clinical skills and knowledge relevant to advancing evidence-based nursing practice.

• Develop, implement, evaluate and support suitable tools to teach patients/carers clinical skills and integrate into pathways of care across the CCHN.
• Ensure a strategy to provide educational support from orientation of new staff through to expert management and continuing professional development. Lead and organise events and conferences to promote the profile of the CCHN at national and international level.

• Demonstrate the effectiveness of the education process through audit of the education programmes, evaluative feedback and development of nurse-sensitive outcome measures. Encourage and support active networking by helping staff to attend study days, courses and conferences, and facilitate them presenting at such events.

• Provide support to the course director/module leader for relevant CPD courses for children’s cardiac nurses across the CCHN; this should involve regular audit and evaluation of curricula in association with local universities and national programmes.

• Lead in the design and development of assessment techniques in conjunction with staff from the higher education establishments, utilise accepted good practice such as determination of reliability, validity, acceptability, cost effectiveness and educational impact.

Research

• Actively seek out and inform any clinical research studies and educational opportunities within the field of children’s cardiac specialist nursing, focusing on both improving clinical outcomes of CYP and their families, and the study of educational input to all levels of staff across the hospital.

• Collaborate in studying and developing educational strategies to improve patient care.

• As part of the education and training framework, ensure promotion of nursing research and higher academic attainment, empowering nurses to become more research active. Encourage national/international publications, working in collaboration with the clinical reader/professor of congenital cardiac nursing.

• Foster a culture of innovation, develop strong partnerships with local universities. Collaborate with the medical research lead to promote multi-professional research and development; encourage dissemination of research findings to support delivery of care across the national/international profile.

Quality assurance

• Collaborate with the CCHN lead nurse in promoting a culture of quality and excellence. Develop the role of monitoring and further development of standards of care relevant to CYP with cardiac conditions and influence national developments.

• Ensure the requirements of statutory and other regulatory bodies are met in the provision and quality assurance of nursing education.

• Participate in the activities of professional bodies and associations to develop and revise educational programmes, nursing practice guidelines and protocols relevant to children’s cardiac specialist nursing.

• Lead quality initiatives across the CCHN and implement effective processes of change and innovation.
• Be proactive in the management of clinical risk and promote the study of human factors in risk management.

Professional development

• Continue to develop self and role through clinical supervision, reflection and self-awareness, continuing professional education and postgraduate academic attainment.

• Maintain professional NMC revalidation requirements for continued registration. Be able to identify own learning needs and ensure own professional development is maintained by keeping up-to-date with practice developments.

• Participate in, and network with, the specialist groups relating to the specialty.

• Actively build professional links and represent the CCHN both nationally and internationally for the benefit of educational development.

• Promote a culture of shared governance across the CCHN.

• At all times, work to reflect the nursing principles (RCN, 2010) laid down in The Code (NMC, 2018a), and own personal limitations.

• Work within The Code (NMC, 2018a).

• Provide advice and support for cardiac clinical educators across the CCHN.

• Provide professional advice, educational support and career development to cardiac nurses across the CCHN, as required.
Person specification – lead clinical educator for the network

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<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
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<tbody>
<tr>
<td>Education</td>
<td>• Registered children’s nurse.</td>
<td>• Instructor status for APLS/EPLS.</td>
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<td>• Master’s degree/post-graduate study in a health-related discipline.</td>
<td>• Simulation training/experience.</td>
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<td>• Resuscitation qualifications such as APLS/EPLS.</td>
<td>• Further/higher education teaching qualification and NMC recordable teacher qualification.</td>
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<td></td>
<td>• Instructor status for APLS/EPLS.</td>
<td>• PhD, or working towards. Eligible for membership of the Institute of Learning and Teaching/Higher Education Academy.</td>
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<tr>
<td></td>
<td>• Simulation training/experience.</td>
<td>• Project/audit/strategic management experience.</td>
</tr>
<tr>
<td></td>
<td>• Further/higher education teaching qualification and NMC recordable teacher qualification.</td>
<td>• Production of research proposals and grant applications.</td>
</tr>
<tr>
<td></td>
<td>• PhD, or working towards. Eligible for membership of the Institute of Learning and Teaching/Higher Education Academy.</td>
<td>• Curriculum development at academic level.</td>
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<tr>
<td>Experience</td>
<td>• Minimum of five years’ post-registration experience in children’s cardiac care.</td>
<td>• Experience in managing or working with educational commissioning and working with different educational partners.</td>
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<td>• Teaching children’s cardiac care at undergraduate and post-qualification levels across different academic and clinical settings for 5 years.</td>
<td>• Experience of working in formal clinical networks within the NHS.</td>
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<td>• Leadership and management of an academic or clinical team, including workforce planning, interviewing and recruitment/retention work.</td>
<td>• Representation on relevant regional, national or international committees, boards or networks.</td>
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<td></td>
<td>• Reputation for professional excellence with a track record of practice development and scholarship in the field of children’s cardiac care.</td>
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<td></td>
<td>• Recognition as an innovator in the field of children’s cardiac care.</td>
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<tr>
<td>Research, publications and special interests</td>
<td>• Significant record of publication or other forms of dissemination of educational approaches in children’s cardiac care.</td>
<td>• International reputation in a relevant field.</td>
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<tr>
<td></td>
<td>• Presentations at national and international meetings, conferences and symposia.</td>
<td>• Research governance awareness.</td>
</tr>
<tr>
<td>Knowledge</td>
<td>• Evidence of ability to contribute new knowledge to the field of children’s cardiac care.</td>
<td>• Knowledge of working in formal clinical networks within the NHS.</td>
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<td></td>
<td>• Clinical governance and risk management concepts and techniques.</td>
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<td></td>
<td>• Critical appraisal techniques.</td>
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<tr>
<td>Interpersonal skills</td>
<td>• Flexibility.</td>
<td>• Strategic leadership skills.</td>
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<tr>
<td></td>
<td>• Excellent leadership qualities.</td>
<td>• Ability to develop a high-performing team to deliver individual and team outputs and targets.</td>
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<td></td>
<td>• Leadership style which promotes collaboration and open two-way communication.</td>
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<td></td>
<td>• Excellent verbal and written communication skills.</td>
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<td>• Excellent ‘people skills’/ interpersonal skills; ability to communicate effectively with all levels of health service provider and academician.</td>
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<td></td>
<td>• Ability to work autonomously.</td>
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</table>
### Person specification – lead clinical educator for the network (continued)

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
</tr>
</thead>
</table>
| Job-related skills and aptitudes| • Desire to strive for high standards in clinical practice.  
• Awareness of changing policies in children’s cardiac care.  
• Project management skills: able to set priorities and meet deadlines in collaboration with a range of professionals.  
• Good information technology skills in:  
  • word processing  
  • spreadsheet  
  • database  
  • internet/academic resources  
  • e-learning/web-based materials/electronic communications.  
• Organisational skills, such as time management and ability to meet deadlines.  
• High level of oral, written and IT communication, and presentational skills to a range of audiences.  
• Proven ability to apply research to practice.                                                                                                                                                                          | • Ability to teach to a range of CPD, undergraduate and postgraduate students.  
• High levels of competence in applied research skills.                                                                                                                                                                      |
| Other requirements, such as values and behaviours | • Evidence of self-directed career-long learning.  
• Willingness to undertake further education and training to meet requirements of post.  
• Commitment to promoting the values that underpin the specialty and applied research activities.  
• Commitment to develop nursing and to build and preserve a high-profile reputation, nationally or internationally for the network.                                                                                       | • Honorary contract with higher education institution.                                                                                                                                                                          |
Appendix 8: Example job description: Fetal cardiology nurse specialist (Career framework levels 6–7)

Role description: Fetal cardiology nurse specialist

Pay band: Minimum AfC band 7*

Responsible to: CCHN lead nurse

Responsible for: Providing expert information and ongoing support to parents who have a fetal diagnosis of congenital heart disease into the first month of life, or to support end of life care

Essential qualifications: Registered children’s nurse

Minimum experience: Three to five years’ experience as a CYP cardiac nurse

Note: Where ‘CCHN’ is mentioned, this refers to the children's congenital heart network.

There should be at least one WTE fetal cardiac nurse specialist, shared with the fetal network (Standard B29, L1, p.187–188).

Key responsibilities

• Provide appropriate counselling and support for families following a prenatal diagnosis of congenital heart disease (CHD).
• Provide individual and family support after diagnosis.
• Manage own caseload of patients.
• Communicate diagnosis and counselling outcome to the referring obstetric team, midwifery team and local primary care team. Plan management of ongoing pregnancy in collaboration with the pregnant woman’s obstetrician, continuing care midwife and all personnel likely to be involved in perinatal management, in order to try to improve outcome.
• Communicate with midwifery team, bereavement team, psychology and social care teams as per local service model.
• See patients in tertiary and secondary/peripheral hospital settings.

Management and leadership

• Provide formal and informal education about skills required by staff to facilitate holistic family care.
• Provide staff support, as required, individually or in a group, and informal or formal.
• Communicate with other trust departments, including midwives, chaplaincy, medical staff, end of life care teams, symptom care team staff, obstetricians and midwives external to the trust and other agencies, such as GP surgeries.
• Use the trust’s psychosocial support structure to ensure accurate information is cascaded and relevant support is provided for the family.

• Be involved in developments in the field of fetal cardiology as part of the multidisciplinary team.

• Provide counselling with the support of the psychology team.

• Ensure staff are familiar with relevant policy and guidance material, and review, develop and update literature as necessary.

• Maintain involvement with relevant professional bodies and support organisations, such as CCNA, ARC, SANDS, Little Hearts Matter and Children’s Heart Federation.

• Actively promote the service through conference presentation, publication and external teaching.

• Provide relevant information packages for families.

• Maintain a database to enable regular audit of activity and obtain outcome data to monitor sensitivity, specificity false negative and false positive diagnosis.

• Develop referral pathways from the referring hospital to the fetal department.

• Organise regular communication and meetings within the fetal service where the multi-professional team can discuss individual cases, service provision and service vision.

**Clinical practice**

• Maintain confidentiality surrounding the family and baby’s admission and treatment at all times.

• Provide information, clinical advice and support to families within a defined caseload and act as a resource to other professionals involved in a family’s care.

• Work clinically 20% of the time in order to maintain own clinical skills to be able to advise parents and families appropriately.

• Contribute to departmental teaching programmes, orientation and study days.

• Lead in the development of policies and guidelines for the support of parents with an antenatal diagnosis of congenital heart disease, and represent their needs on appropriate committees.

• Keep accurate documentation and communication records.

• Have knowledge of, and adhere to, ward and trust policies and professional standards; ensure that team members do likewise.

**Clinical nurse specialist – role-specific components**

• Develop and maintain written information for families and external health professionals.

• Offer education and support to all professionals, internal and external to the trust, caring for families with a CHD diagnosis.

• Develop a range of resources with colleagues to ensure support and education for families.
• Provide and present data to the cardiac unit management and other meetings, as required.
• Participate in relevant conferences.

Professional development

• Demonstrate a professional approach to work and act in accordance with the trust’s personal responsibilities framework and *The Code* (NMC, 2018a) at all times.
• Participate in staff appraisal, staff development and in-service training activities in line with the Knowledge and Skills Framework.
• Meet NMC revalidation requirements; identify own learning needs and ensure own professional development is maintained by keeping up-to-date with practice developments.
• Undertake further training and academic qualifications as relevant to the role and service requirements.

Health and safety

In carrying out these duties, the employee is required to take responsible care to avoid injury or accident, which may be caused by work. These duties must be performed in accordance with the directorate/trust’s health and safety policy, which is designed to secure safety in working practice and in handling materials and equipment.
### Person specification – fetal cardiology nurse specialist

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential (lead nurse)</th>
<th>Desirable</th>
</tr>
</thead>
</table>
| **Education, qualifications and training** | • Registered children’s nurse.  
• Honours degree in nursing or relevant area. | • Counselling experience.  
• CPD module (L6–7) in congenital heart disease.  
• MSc or working towards. |
| **Skills and abilities**         | • Clinical supervision skills.  
• Ability to work independently and as part of a team.  
• Good written and verbal skills at all levels.  
• Basic IT skills  
• Presentation skills.  
• Ability to lead a team.  
• Ability to support change. | • Experience with databases e.g. Excel. |
| **Experience**                  | • Two years as a band 6 children’s cardiac nurse.  
• Supervision/mentorship.  
• Caring for critically/terminally ill children and their families.  
• Experience in supporting parents following diagnosis of CHD. | • Bereavement counselling.  
• Debriefing.  
• Running a support group.  
• Leading audit/service evaluations.  
• Presenting papers at national conferences.  
• Writing for publication. |
| **Knowledge**                   | • Knowledge of simple and complex congenital heart disease.  
• End of life and palliative care. | • Research, audit, service evaluation methodology.  
• Multi-agency involvement, responsibilities and processes in bereavement. |
| **Other requirements**          | • Ability to work flexibly, depending on the demands of the service.                    |                                                                           |
Appendix 9: Example job description: Nurse consultant (career framework level 8)

Role description: Nurse consultant

Pay band: Minimum AfC band 8c*

Responsible to: Director of nursing

Professionally accountable to: Director of nursing

Essential qualifications: Registered children’s nurse, accredited teaching qualifications, MSc in Advanced Nursing Practice/MSc in Advanced Clinical Practice

Minimum experience: Five years’ experience of caring for children with CHD

Role purpose

The nurse consultant role will maximise clinical capacity and co-ordinate service delivery while exploring strategic demands. The post offers leadership and incorporates both research and education into clinical practice. The post covers the four domains of advanced clinical practice (expert practice, leadership, education and research) (NHSE, 2017). Ideally, the clinical component of care will represent 50% of the job plan, in line with trust requirements.

The nurse consultant will work in conjunction with medical colleagues to develop and deliver a comprehensive service, focusing on identifying areas of service that need to meet national targets. Clinically, the nurse consultant will provide highly-specialised professional advice, consultancy and clinical expertise in practice. Leadership skills will promote both internal and external networking opportunities, facilitation and management of change through collaboration.

The nurse consultant role is designed to:

- facilitate collaborative working with multidisciplinary teams, CYP and their families, to plan and deliver services to better meet patient need and achieve better health outcomes
- facilitate comprehensive and evidence-based assessment and re-evaluation of service provision to meet the CYP’s and families’ needs
- facilitate partnership and promotion of health with service users, including the implementation and evaluation of outcomes for evidence-based therapeutic interventions
- examine activity and develop strategies to make the best use of any available resources in the interests of service users
- where necessary, utilise technical skills to deliver safe, effective, efficient interventions in line with already established protocols
- be an independent prescriber (IP) and registered as an IP with the NMC

Please note these are example job descriptions and the bandings are purely indicative. Employers and members would need to work together to develop job descriptions and to ensure they are properly job evaluated and matched.
• build on links with local HEIs to integrate research and to establish educational programmes to ensure continuous development of professional caring for children with congenital and acquired cardiac conditions.

Core functions

It is recognised that the nurse consultant role, based within the four domains of advanced clinical practice (NHSE, 2017) (expert practice; leadership; education, research), will help to establish standards of care and shape future strategy in relation to children’s cardiac services, while striving to advance and improve quality patient care by providing needs-led, effective, efficient and evidence-based services.

Expert practice

• Demonstrate advanced knowledge and expertise in the provision of children and young people’s cardiac care.

• Utilise expert-level knowledge to make decisions regarding the appropriate treatment and disposition of patients with emergent and non-emergent clinical conditions.

• Utilise solitary reflective practice, ‘critical colleague’, inter-disciplinary peer-review processes and patient satisfaction reviews to critically appraise own practice and support colleagues in doing the same.

• Provide expert clinical advice and support both internal and external to the trust, to clinical staff at all levels, and across all disciplines.

• Be an active member of the relevant clinical governance and risk management frameworks within the trust, representing children’s cardiac services.

• Deliver clinical sessions within the job plan to 50% in line with trust requirements.

Professional leadership

• Offer expert clinical advice and mentorship for nursing and medical staff at all times and, in particular, during their participation in higher education.

• On behalf of the trust, provide expert membership of national and professional bodies, such as CCNA, PICS, and PCICS.

• In collaboration with a range of health service professionals, agree the type and location of relevant programmes to ensure local health needs are best met and to maximise integration with existing services.

• Encourage the development of an advanced practice skillset amongst trainee advanced clinical practitioners and other nursing staff, establishing clear goals and objectives and a culture of continuous improvement and mutual support.

Practice and service development, research and evaluation

• Contribute to the development of cost-effective, efficient, quality and, where possible, evidence-based services, such as patient group directives for drugs administered by nurses.

• Lead the development of cross-professional care pathways in conjunction with multidisciplinary working groups.
• Lead the development, implementation and evaluation of QIPP initiatives within cardiac services for children.

• Evaluate various models for all aspects of service provision. In particular, how each contributes to the health improvement programme and ensures equity of access at a local level.

• Link into national programmes of education, taking a key role in developing and delivering training and education to the NHS workforce via HEIs, specifically in relation to the specialist training of medical students, post-registration students and allied health practitioners, as well as children’s cardiac nurse specialists. Have an honorary contract with HEIs and deliver regular educational sessions.

• Participate in the development of a programme of research related to children’s cardiac care and engage in research activities appropriate to the post and appropriate to the trust’s research agenda. Contribute to the development of strategies to support education for cardiac specialist nurses working with children and young people.

• Lead the development of research and audit associated within children’s cardiac specialist practice.

• Collaborate in the development of the trust’s research agenda, supporting, mentoring, and facilitating trust and external staff in undertaking research relevant to the sphere of children’s cardiac care.

• Disseminate research and audit findings, both internally and externally, through publication of papers in peer-reviewed and professional journals and via presentations at conferences and seminars. Ensure the findings of research and audit are put into practice.

• Support and encourage staff in the production and publication of papers and in preparing presentations for conferences.

• Actively seek to provide input to local, national and international bodies, developing clinical guidelines for practice, and represent the trust on appropriate external committees when nominated to do so.

• Conduct primary research and education projects, to be based on existing knowledge, relevant to practice and evidence based.

**Education, training, and development**

• In collaboration with the lead cardiac educator, design and establish an educational programme and support network for nurses involved in the care of children and young people with congenital and acquired cardiac conditions, within all areas of care delivery.

• Support staff in HEIs in the development and delivery of specialist programmes of higher education within the discipline of cardiac care.

• Collaborate in facilitating the validation of higher specialist practice education and training programmes by the NMC and/or the RCN to support professional registration to practice.

• Identify the need for, and undertake, relevant CPD to ensure maintenance and development of own professional role.
- Through formal education and informal mentorship programmes, develop critical analysis and synthesis skills in advanced practitioners to improve patient care.
- Develop a journal club to encourage the discussion and distribution of research and audit findings throughout the trust.
- Provide expert advice to professional bodies on the development of higher education programmes for higher specialist practice.
- Contribute to the development and delivery of specialist modules supporting MSc level education for a range of health professionals within the CCHN.
## Person specification – consultant nurse

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential</th>
<th>Desirable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong></td>
<td>• Registered children’s nurse.</td>
<td>• Honorary contract with HEI.</td>
</tr>
<tr>
<td></td>
<td>• Master’s degree in advanced practice.</td>
<td>• PhD or working towards.</td>
</tr>
<tr>
<td></td>
<td>• Mentoring/teaching qualification.</td>
<td>• APLS/PALS instructor status.</td>
</tr>
<tr>
<td></td>
<td>• Honorary contract with HEI.</td>
<td>• Curriculum development at academic level.</td>
</tr>
<tr>
<td></td>
<td>• PhD or working towards.</td>
<td>• Representation on relevant regional, national or international committees, boards or networks.</td>
</tr>
<tr>
<td></td>
<td>• APLS/PALS instructor status.</td>
<td></td>
</tr>
<tr>
<td><strong>Experience</strong></td>
<td>• Minimum of five years’ post-registration experience in children’s cardiac care at an advanced practice level.</td>
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<tr>
<td></td>
<td>• Teaching children’s cardiac care at undergraduate and postgraduate levels in academic and clinical settings.</td>
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<td></td>
<td>• Networking at all levels.</td>
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<td></td>
<td>• Clinical guidelines/protocol development.</td>
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<td></td>
<td>• Recognition as an innovator in the field of children’s cardiac care.</td>
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<td></td>
<td>• Resource management.</td>
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<tr>
<td></td>
<td>• Expert clinical practice.</td>
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<td></td>
<td>• Ability to work autonomously and manage a defined caseload.</td>
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<tr>
<td></td>
<td>• Curriculum development at academic level.</td>
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<tr>
<td></td>
<td>• Representation on relevant regional, national or international committees, boards or networks.</td>
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</tr>
<tr>
<td><strong>Research, publications and special interests</strong></td>
<td>• Evidence of health services audit and research activity within specialty.</td>
<td>• Record of publication.</td>
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<tr>
<td></td>
<td>• Evidence of dissemination of evidence-based research and applying research to clinical practice.</td>
<td>• Production of research proposals and grant applications.</td>
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<tr>
<td></td>
<td>• Presentation at national and international meetings, conferences and symposia.</td>
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<tr>
<td></td>
<td>• Good research practice/research governance (current GCP consent).</td>
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<td></td>
<td>• Development of integrated care pathways.</td>
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<tr>
<td><strong>Knowledge</strong></td>
<td>• Reputation for professional excellence, with a track record of practice development and scholarship in the field of children’s cardiac care.</td>
<td>• Evidence of leading initiatives within multi-professional teams.</td>
</tr>
<tr>
<td></td>
<td>• Recognition of an innovator in the field of children’s cardiac care.</td>
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<tr>
<td></td>
<td>• Evidence of the contribution of new knowledge to the field of children’s cardiac care.</td>
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<td></td>
<td>• Clinical governance and risk management concepts and techniques.</td>
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<td></td>
<td>• Critical appraisal and analytical skills.</td>
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<td></td>
<td>• Sound knowledge of safeguarding legislation.</td>
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<tr>
<td><strong>Interpersonal skills</strong></td>
<td>• Flexibility.</td>
<td>• Advanced communication skills training.</td>
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<td></td>
<td>• Demonstrates clinical leadership, promoting collaborative working.</td>
<td>• Conflict resolution skills.</td>
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<td></td>
<td>• Excellent verbal and written communication skills.</td>
<td>• Clinical supervision and facilitation skills.</td>
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<td></td>
<td>• Effective and strategic influencing.</td>
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<td></td>
<td>• Ability to work autonomously.</td>
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<td></td>
<td>• Demonstrates high level expert communication with children and families via a variety of channels.</td>
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<td></td>
<td>• Manages emotive situations of shock, anger and grief with advanced communication skills.</td>
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### Person specification – consultant nurse (continued)

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential</th>
<th>Desirable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job-related skills and aptitudes</td>
<td>• Independent and supplementary prescribing.</td>
<td>• Ability to teach to a range of CPD, undergraduate and postgraduate students.</td>
</tr>
<tr>
<td></td>
<td>• Monitors quality and promotes high standards of care (quality improvement/practice development skills).</td>
<td>• High levels of competence in applied research skills.</td>
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<tr>
<td></td>
<td>• Has awareness of changing policies in children’s cardiac care.</td>
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<tr>
<td></td>
<td>• Project management: able to set priorities and meet deadlines in collaboration with a range of professionals.</td>
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<tr>
<td></td>
<td>• Political astuteness.</td>
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<tr>
<td></td>
<td>• High level of oral, written and IT communication and presentational skills to a range of audiences.</td>
<td></td>
</tr>
<tr>
<td>Other requirements</td>
<td>• Organisational skills.</td>
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<tr>
<td></td>
<td>• Willingness to undertake further education and training to meet requirements of post.</td>
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</table>
Appendix 10: Example job description: Children’s cardiac advanced nurse practitioner

**Role description:** Children’s cardiac advanced nurse practitioner (career framework level 7)

**Pay band:** Minimum AfC band 8a*

**Responsible to:** Directorate/head of nursing

**Professionally accountable to:** Director/Chief of nursing

**Essential qualifications:** Registered children’s nurse, accredited teaching qualification, MSc in advanced clinical practice

**Minimum experience:** Five years’ experience of caring for children in relevant specialty

**Role purpose**

To provide nursing at advanced clinical practitioner level to CYP with congenital heart disease through and at all stages of an illness trajectory. This will be delivered with the autonomy of decision-making and therapeutic action. This level of practice encompasses a documented responsibility for education, training, clinical expertise and clinical leadership, following the *Multi-professional Framework for Advanced Clinical Practice* (NHSE, 2017). The post-holder is responsible for the promotion of high quality evidenced-based practice within their caseload and the achievement of development, research and audit goals throughout the specialty.

The role is part of multi-professional cardiac team with an aim to meet the care pathway of the CYP with congenital heart disease and their family to the highest level of safety, quality and effectiveness of service.

**Summary of duties and responsibilities**

The academic level and education to MSc level allows the CYP cardiac advanced clinical practitioner to practice at an autonomous level as part of the multi-professional team, to:

- deliver an advanced level of care to children through the integration of therapeutic and nursing care. The care is delivered in an autonomous context founded upon an expert knowledge base within the specialty
- advance an integrated role that improves safety, continuity and quality of care for patients, both in respect to treatment and the patient journey across the primary/secondary/tertiary care interfaces and other relevant agencies
- participate in risk management assessments and the development of evidence-based strategies to improve the quality of care, both for the individual patient and the target population, contributing to improved patient outcomes and the patient experience
- promote the advancement of nursing practice in children’s services and the role of the advanced nurse practitioner; act as a credible role model to colleagues
• participate in and advance the audit and research process in the service, including the identification of research questions, data collection and analysis as well as the implementation and dissemination of findings across professional groups and at a national and international level

• use the principles of education and learning, coaching and guidance, to empower children and families, in addition to the learning of health promotion

• participate in strategic planning of future quality service development, including policy planning, both locally and nationally.

Management and leadership

• Makes autonomous clinical decisions and differential diagnoses using educational background, evidence-based practice and clinical experience as part of the multi-professional inpatient and CCHN team.

• Using case management of CYP within the specialty, ensures that this carefully reflects the latest evidence-based or research developments and interdisciplinary working.

• Provides a consultancy for all nursing staff across the organisation, demonstrating an advanced generalist as well as advanced specialist knowledge of practice, clinical skill and problem-solving ability.

• Acts as a change agent in practice, policy development and education, locally and nationally.

• Advises on best practice within the specialty on a local and national basis.

• Acts as a representative and negotiator for the nursing specialty and influences local and national policy development.

• Actively works to address government-endorsed targets for children's services and the specialty. Leads and implements nurse-led initiatives to advance safe, high quality and effective care of patient and family.

• Develops and drives integrated care pathways for improved patient case management.

• Has the ability to work across professional and demographic boundaries, keeping the child at the centre of care.

Professional leadership

• Acts as an expert practitioner demonstrating advanced clinical skills, complex decision making and knowledge, addressing the needs of a defined patient population.

• Leads and influences the organisation’s policies on the development and change of the advanced nurse practitioner role.

• Critically applies advanced clinical expertise across professional and service boundaries, locally and across the CCHN.

• Participates and leads on the vision for the development of children and young people’s care locally, regionally and nationally.

• Provides consultancy and supervision for all nursing staff across the organisation.
• Acts as a resource and support for all health care professionals interfacing with children within the cardiac specialty, in all health care settings; primary, secondary and tertiary.

• Promotes and actions a positive culture of questioning practice and care delivery to improve the quality of care delivered, influencing care policy locally and nationally.

• Acts as an advocate for the rights and desires of the child and family within the health care domain, promoting choice and ethical decision-making in partnership.

Clinical skills

• Makes autonomous clinical decisions around the patient caseload.

• Provides clinical support to all levels of the multi-professional team.

• Provides a holistic journey for the child and family using advanced clinical practitioner skills (NHSE, 2017).

• Has the ability to assess clinical state of a child using advanced practice skills, working with the consultant team and referring on to other appropriate specialties as needed.

• Acts as an expert practitioner, demonstrating advanced clinical skills in health assessment, clerking, admission and discharge, as well as differential diagnosis and complex care planning, utilising expert advanced knowledge to underpin decision-making and problem solving.

• Manages effective therapeutic care; facilitates the evaluation of progress and comprehensive discharge planning throughout the illness trajectory.

• Undertakes both a supplemental and independent prescribing role for all children within the specialty, meeting the current standards for prescribing as outlined by the NMC.

• Maintains a thorough knowledge and a full understanding of the treatment and the follow-up care of children within the specialty; manages babies and children who need a higher level of care back into the local networks; contributes to and appraises the evidence base for this work, locally and nationally.

• Demonstrates an ability to develop advanced psychomotor skills with appropriate training and knowledge.

Advanced communication skills

• Provides strategic leadership for all nurses within a defined specialist group as a role model, educational and academic resource, mentor and clinical practice developer.

• Demonstrates high level expert communication with CYP, their families and other health professionals on an inpatient, outpatient and CCHN level. This may be where there are challenging circumstances, anxiety or limited understanding of a clinical situation or agreed plan of care.

• Uses a wide range of communication channels with relevant safety and understanding of the challenges, such as face to face, phone, video linking and text messaging, especially where there are challenges of culture or language.
Practice and service development, research and development

- Continues to update and reassess policies and procedures related to patient care, utilising an evidence-based practice approach, disseminating information organisation-wide.
- Initiates and develops research strategies within the specialty that benefit patient care and add to the evidence base, optimising and supporting patient care and outcomes.
- Participates in research projects established within the organisation and liaises with research nurses.
- Continually updates own knowledge around research activities in the care of children and young people, within the organisation, regionally, nationally and internationally.
- Maintains a professional resource role within ongoing clinical trials.
- Develops integrated care pathways on an ongoing basis.
- Critically engages in research and audit activity.
- Identifies need for further research to strengthen evidence for best practice.
- Facilitates collaborative links between the three levels of care provision; to engage in audit and research; share practice and provide equity of standards of clinical care.
- Leads and maintains clinical databases for the effective audit of practice and its outcomes. Participates in and advances the audit and research process within area of practice, including the identification of research questions, data collection and analysis as well as the implementation and dissemination of findings.
- Advances the audit and research process throughout the patient journey, including the identification of research questions, data collection and analysis, as well as the implementation and dissemination of findings.
- Uses audit tools to critically appraise daily practice and best use of current practices.
- Critically evaluates research findings and their application to practice, patient groups and effects on outcomes.

Training and education

- Participates in the identification of training needs and works with the education and training teams to develop programmes for both nursing and medical staff, within the specialty and throughout the organisation.
- Actively promotes staff developments across the CCHN, utilising such formats as presentations and posters; works with CCHN clinical teams to provide education and support.
- Continues to develop in collaboration with other colleagues, comprehensive evidence-based education and training packages for the support of families caring for their children at home.
- Participates in nursing staff development through leadership, academic and clinical support, and clinical supervision.
- Actively participates in hospital/CCHN-wide educational programmes.
• Disseminates expertise and knowledge through presentation and lectureship, outside of the CCHN.
• Evaluates educational outcomes set in training programmes and development plans on an ongoing basis.
• Acts as a mentor/supervisor and role model for colleagues undertaking further training at an advanced level.
• Constantly endeavours to identify and utilise opportunities to educate patients and their carers on aspects of health promotion across the spectrum of child health issues.
• Ensures own professional development continues and maintains competence as an ACP, in line with national ACP role developments.
• Provides coaching and guidance for CYP, parents, carers, families, colleagues.
• Advocates for collaborative learning across the CCHN, supporting the wider team and the clinical educator.

Communication
• Ensures all relevant information is effectively compiled and adequately recorded.
• Develops, reviews and promotes information materials for patients and families in relation to diagnosis, treatment and long-term problems.
• Promotes and maintains effective channels of communication in a sensitive and professional manner within the hospital and shared care agencies for continuity of care, including for parents, patients and professionals.
• Provides and receives highly complex information from and to children, their families and health care professionals, and sensitively discusses emotive issues, in a competent and transparent manner.
• Effectively manages highly emotive situations of shock, anger and grief with advanced communication, negotiation and assessment skills, in an autonomous yet collaborative manner.
• Demonstrates consistent, advanced communication skills across all levels of care and across the diversity of needs of children and families.
• Has the confidence to work across multi-professional groups/boundaries and a variety of care areas.

Management of quality
• Monitors and further develops standards of care related to caring for children within own specialty, utilising patient and professional views.
• Continues to participate in risk management assessment and patient/parent satisfaction.
• Audits current care perspectives and makes recommendations for changes in practice.
• Enables families to exercise their rights and promote their equality and cultural diversity.
• Ensures the accurate reporting of risk and use of a quality improvement cycle to address any issues.

**Professional development**

• Takes opportunities to maintain and further advance own education, knowledge base, clinical and theoretical knowledge to ensure a continuum of self-development and those of the team members.

• Continues to develop self and role through clinical supervision, reflection and self-awareness, and continuing professional education and effective stress management.

• Endeavours to publish all aspects of service development to ensure this reaches a wider audience and contributes to the wider knowledge base.

• Actively contributes to the national agenda to develop congenital cardiac nursing and advanced practice.

• Continues to network and forge professional links in both the UK and abroad.

• Attends and completes mandatory in-service training days as prescribed by the trust.
<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential</th>
<th>Desirable</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong></td>
<td>• Registered children’s nurse.</td>
<td>• Mentoring/ teaching qualification.</td>
</tr>
<tr>
<td></td>
<td>• Master’s degree in advanced clinical practice.</td>
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</tr>
<tr>
<td><strong>Experience</strong></td>
<td>• Minimum of five years’ post-registration experience in children’s cardiac care.</td>
<td>• Curriculum development at academic level.</td>
</tr>
<tr>
<td></td>
<td>• Networking at all levels.</td>
<td>• Representation on relevant regional, national or international committees, boards or networks.</td>
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<td></td>
<td>• Clinical guidelines/protocol development.</td>
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<td></td>
<td>• Recognition as an innovator in the field of children’s cardiac care.</td>
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<td></td>
<td>• Resource management.</td>
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<td></td>
<td>• Clinical expert.</td>
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<td></td>
<td>• Ability to work autonomously and utilise case management.</td>
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</tr>
<tr>
<td><strong>Research, publications and special interests</strong></td>
<td>• Evidence of audit and research activity within specialty.</td>
<td>• Evidence of leading initiatives within multi-professional teams.</td>
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<td></td>
<td>• Evidence of dissemination of evidence-based research and applying research to clinical practice.</td>
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<td></td>
<td>• Presentations at national and international meetings, conferences and symposia.</td>
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<td></td>
<td>• Development of integrated care pathways.</td>
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<tr>
<td><strong>Knowledge</strong></td>
<td>• Contributes new knowledge to the field of children’s cardiac care.</td>
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<td></td>
<td>• Clinical governance and risk management concepts and techniques.</td>
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<td></td>
<td>• Critical appraisal and analytical skills.</td>
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<td></td>
<td>• Sound knowledge of safeguarding legislation.</td>
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<tr>
<td><strong>Interpersonal skills</strong></td>
<td>• Flexibility.</td>
<td>• Advanced communication skills training.</td>
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<tr>
<td></td>
<td>• Demonstrates clinical leadership, promoting collaborative working.</td>
<td>• Conflict resolution skills.</td>
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<tr>
<td></td>
<td>• Excellent verbal and written communication skills.</td>
<td>• Clinical supervision and facilitation skills.</td>
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<td></td>
<td>• Effective and strategic influencing.</td>
<td>• Advanced coaching and guidance skills.</td>
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<td></td>
<td>• Ability to work autonomously.</td>
<td>• Complex decision-making skills.</td>
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<td></td>
<td>• Demonstrates high level expert communication with children and families via a variety of channels.</td>
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<td></td>
<td>• Manages emotive situations of shock, anger and grief with advanced communication skills.</td>
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<tr>
<td><strong>Job-related skills and aptitudes</strong></td>
<td>• Monitors quality and promotes high standards of care (quality improvement/practice development skills).</td>
<td>• Non-medical prescribing.</td>
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<tr>
<td></td>
<td>• Awareness of changing policies in children’s cardiac care.</td>
<td>• Advanced clinical assessment knowledge and skills.</td>
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<td></td>
<td>• Contributes to project management: able to set priorities and meet deadlines in collaboration with a range of professionals.</td>
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<td>• Political astuteness.</td>
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<td></td>
<td>• High level of oral, written and IT communication and presentational skills to a range of audiences.</td>
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<td></td>
<td>• Proven ability to apply research to practice.</td>
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<tr>
<td><strong>Other requirements</strong></td>
<td>• Organisational skills.</td>
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</tbody>
</table>
Appendix 11: Example job description: Senior research nurse (career framework level 7)

Role description: Senior research nurse
Pay band: AfC band 6
Responsible to: Lead nurse for the CCHN
Minimum experience: Three to five years’ experience as a registered children’s nurse

Role purpose
The post-holder will act as a senior member of the multidisciplinary team, with responsibility for a number of clinical research studies within the areas of cardiovascular research in the CCHN. They will be expected to support the management and leadership of the research nurses and administrative staff within the research team. They will have knowledge and understanding of the regulatory and legal frameworks related to the planning, undertaking and closure of clinical research studies and, therefore, act as a resource for staff, researchers, research participants and patients. They will take a lead in ensuring the safe and effective delivery of a designated number of clinical research studies.

Communication
Demonstrate advanced communication skills, both verbal and non-verbal.

Patient care
- Study the set up.
- Ensure all elements of the set up are completed in accordance with UK and EU legal requirements, trust policies and ICH-GCP or ISO 14155 and CTEU guidance and standard operating procedures, as appropriate, whether conducted personally or through appropriate delegation.
- Provide advice and guidance on matters relating to research ethics and governance, and in preparing submissions for regulatory and trust approval. Have knowledge and understanding of research design and methodology
- Contribute to the assessment of study protocols and advise on any safety, regulatory and logistical issues.
- Provide oversight for the set up of a designated number of research studies within the team, acting as point of contact for R&I in the feasibility process.
- Work alongside university trial coordinators to project manage study set up with colleagues from around the trust (support departments, finance etc.) and within the university (academic studies).
Study conduct

- Support local principal investigators in meeting their responsibilities outlined in regulatory and legal frameworks.
- Carry out and co-ordinate clinical procedures and treatment interventions, where stipulated and according to protocol.
- Co-ordinate the collection and processing of research samples in the clinical areas, ensuring that these are taken at the correct time points and according to trial protocols.
- Be professionally accountable for all actions and recognise limitations of the role.
- Identify and screen appropriate study participants, in accordance with the protocol, and in conjunction with other members of the clinical and research team.
- Provide complex information and education in a way that is suitable for the child, their carers and families.
- Take informed consent for designated research studies as agreed within the protocol ensuring that the consent process is completed accurately according to ICH GCP guidelines and that the parent/carer and, when applicable, the child fully understands all aspects of the trial.
- Support patients and their parent/carers throughout the research process.
- Acting in a pivotal liaison role between the research and clinical functions for the ward/unit, by providing effective communication, direction and support for health care professionals, patients and relatives.
- Provide knowledge and demonstrate accurate attention to detail in documentation tasks, to include:
  - investigator site file maintenance
  - CRF completion
  - documenting source data.
- Contribute to the auditing and monitoring of research studies; respond to recommendations ensuring outcomes are shared within the team, division and wider research community as appropriate.
- Act as a resource to PIs in ensuring all adverse events and serious adverse events are reported in line with ICH-GCP, ISO 14155 and adverse events reporting policy.
- Where appropriate, liaise with the R&I department in identifying any blockages to recruitment and the running of the trial; support the study team in developing strategies to mitigate them.
- Support the study team in ensuring all reporting to regulatory bodies, R&I and research networks (if applicable) is done in a timely manner.
- Support the study team to ensure that all research study equipment used by the research nurse is checked and calibrated with supporting documentation retained.
- Liaise with sponsors to ensure all arrangements for research governance for each study are in place.
Study end

- Ensure all data clarification issues are resolved quickly.
- Manage the archiving of study-related documentation in line with the trial agreement and ICH-GCP/Medicines for Human Use (Clinical Trials) Regulations/ISO 14155, as appropriate.
- Where appropriate, ensure a smooth transition from the research pathway back to the conventional treatment pathway.

Organisation and planning

Staff management

- Provide day-to-day management of the research team in the absence of the research sister/charge nurse, ensuring all staff and activities comply with trust policies and guidelines.
- Ensure that standard operating procedures are followed by all members of the research team.
- Maintain standards of practice in accordance with the legal rules and statutory regulations set out by the NMC or appropriate professional body.
- Act as a resource to research staff within the team.
- Support the professional and educational development of the research unit’s nursing, allied health professional and administrative staff, assisting in identifying needs and finding solutions.
- Support the training and ensure the appropriate supervision of research team staff, contributing to their mentorship and monitoring.
- Line manages research nurses and A&C staff within the team, as and when agreed.
- Assist with the recruitment, selection, induction and orientation for new research nurses, allied health professional and administrative staff.
- Facilitate the team working effectively and cohesively together, developing the relevant clinical skills and delivering studies on time and target.
- Act as a role model in establishing good practice, standards of care and management that should be adhered to 24 hours a day.
- Promote an approach to patients, focused on care and compassion, ensuring courtesy and respect at all times.

Service development and research

Unit management

- Support the development and update of the unit’s policies and procedures.
- Manage a designated number of research studies.
- Respond to change in line with the needs of service provision.
- Work flexibly, to include evenings and weekends when required, to maintain a continuous service.
• Maintain a safe environment, for patients, staff and visitors, ensuring that all control measures comply with the current policies and procedures, and any statutory requirements, including all health and safety and clinical governance arrangements.

• Ensure that all record keeping within the department is appropriate, timely and clearly understood for the purpose of patient care, safety and data integrity.

Finance and resources

• Use judgment in relation to competing demands for funding, staff and unit resources.

• Contribute to the control of the research unit’s budget, ensuring adequate measures exist for the delivery of the research studies.

Leadership and management

Strategic role

• Be a champion of clinical research.

• Support and influence the embedding of clinical research within the division.

• Foster good relationships with key division research leads/support departments/ institutes and partners to promote the efficient running of clinical studies and develop the division research portfolio.

• Contribute to the development and update of research policies and procedures.

• Take an active role in the activities of professional forums and networks.

• Disseminate the results of research into clinical nursing practice.

Information resources

• Ensure that processes and procedures for ensuring participant confidentiality are developed and adhered to in compliance with the Data Protection Act and the Caldicott principles. Be aware that it may be necessary to override the usual principles of patient confidentiality if a child protection issue arises.
### Person specification – senior research nurse

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential</th>
<th>Desirable</th>
</tr>
</thead>
</table>
| **Education** | • Registered children’s nurse.  
• Evidence of continuing professional development. | • Undergraduate degree in nursing, science or a health-related discipline.  
• Postgraduate qualification in research.  
• Teaching qualification. |
| **Experience** | • Experience in research.  
• Clinical, organisational and management experience.  
• Broad range of clinical nursing skills. | • Project management experience. |
| **Research, publications and special interests** | | • Evidence of audit and research activity within specialty. |
| **Knowledge** | • Broad knowledge and experience of clinical nursing practice within an acute hospital environment within the paediatric specialties of cardiology and cardiac surgery.  
• Knowledge of the regulatory and legal frameworks related to undertaking clinical research.  
• Knowledge of Data Protection Act 1984 and Caldicott principles. | • Knowledge of research design and methodology.  
• Knowledge of Microsoft Office applications and willingness to develop computer skills further. |
| **Interpersonal skills** | • Good interpersonal and communication skills. | |
Appendix 12:
Example job description: Associate professor/reader (career framework level 8)

Role description: Associate professor/reader

Pay band: Academic grade 9

Responsible to: Dean of faculty

Minimum experience: PhD in a relevant discipline

Role purpose

- To provide direction, leadership and management of applied research in nursing.
- Effective and efficient management and leadership of an academic department.

Summary of duties and responsibilities

Generic:

- Provide leadership and vision on applied research in collaboration with other senior staff within the faculty to ensure the continuing academic health of the discipline.
- Lead and develop a team of academic staff, research fellows, assistants and students focused on delivering excellence in teaching; national, and possibly international, applied research outputs.
- Lead and undertake applied research activity at national and, possibly, international level.
- Commensurate with the seniority of the post and the norms of the discipline.
- Obtain, plan and manage the resources needed to deliver applied research projects: submission of bids, overseeing of progress in all aspects of project work, report information in line with university procedures and the needs of external funders.
- Develop individual academic staff, research fellows, assistants and students to achieve national, and, possibly, international, quality applied research outputs that make a contribution to overall team success.
- Oversee and manage course leaders to ensure key metrics are met/exceeded.
- Implement consistently high quality academic provision and deliver excellent levels of student satisfaction.
- Ensure the effective implementation of policies, processes and procedures, including academic quality processes; monitoring, assuring and enhancing the quality of the academic provision within the department.
- Lead and direct the development and delivery of applied research activities to ensure that personal and team income, and other targets and contractual duties, are met.
• Undertake, as appropriate to the demands of the post, research, teaching, scholarly
activity, supervision of research students and administration.
• Promote and encourage open communication at all levels and co-ordinate activities
across the full range of applied research work.
• Foster and develop fruitful relationships and partnerships inside and outside the
university with relevant public, private and voluntary sector funding bodies and
research, practice, academic and corporate organisations, as appropriate.
• Develop and preserve a prominent academic, professional and public profile and ensure
that their team, faculty and university enjoy a good reputation.
• Undertake suitable administrative duties and engage in, or chair, committee and
working groups and other activities as required by the faculty and university.
• Provide leadership in delivering the university’s wider applied research and teaching
objectives and develop collaborative and encouraging relationships with all relevant
staff across the university.
• Represent the university, as appropriate, on external committees, boards and at other
relevant meetings.
• Carry out such other duties as are within the scope and spirit of the job purpose, the
title of the post and its grading.

Post and role specific
• Build up and lead a team of applied researchers in the field of congenital cardiac
nursing and related areas.
• Seek and obtain funding to support the development of applied research activities in
nursing.
• Contribute to the design, teaching and operation of postgraduate and undergraduate
courses and modules, as appropriate.
• Conduct and publish personal research and supervise research students in a field of
nursing.

Supervision received
• Pro-vice chancellor (research).
• Dean of faculty.
• Associate dean of faculty.
• It is expected that the post-holder will use their own initiative within corporate and
specific frameworks and will be accountable for their actions.

Supervision given
• University: As required and agreed.
• Faculty: As required and agreed.
• Team: Assigned full-time, part-time, emeritus and honorary academic staff.
• Assigned research fellows and assistants.
• Assigned research students and other students.
• Assigned administrative and technical staff.

Contacts

• **University**: Staff at all levels within faculties and services across the university.
• **Faculty**: Staff at all levels within the faculty, including staff in the faculty’s departments, applied research groups and applied research centres within the faculty.
• **Funders**: Staff of partner organisations and funding bodies including research councils, European Commission and local, regional or national UK government bodies.
• **Collaborators**: External organisations and partners locally, nationally and internationally.
• **Other**: External organisations as necessary.
Person specification – principal lecturer/associate professor/reader

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Essential</th>
<th>Desirable</th>
</tr>
</thead>
</table>
| **Education** | - Registered children’s nurse.  
- PhD in a relevant discipline. | |
| **Knowledge and experience** | - High degree of specialist knowledge developed from academic and/or professional experience and qualification routes.  
- Capacity to develop high-level teaching and research programmes.  
- Required to be an externally recognised authority in the subject area.  
- Exercises a leadership role in relation to teaching/learning policies and pedagogy or research and consultancy activities for the school/department.  
- Is expected to take the lead on, and manage, delivery of the design and implementation of written course materials and guides.  
- Plays a leading role in institution-wide committees and/or external bodies.  
- Track record of delivering national level applied research outputs.  
- Track record of securing income or external funding.  
- Management of individual research and/or academic staff.  
- Supervision of research fellows, assistants and other postgraduate students.  
- Project management.  
- Partnership working. | - Strategic leadership of a subject-specific or interdisciplinary research team or similarly oriented body.  
- Leadership and management of an academic and/or research team.  
- Track record of delivering international-level applied research outputs.  
- Budgetary management.  
- Responsibility for managing staff recruitment, performance and retention.  
- Representation on relevant regional, national or international boards. |
| **Research, publications and special interests** | - Significant record of research and publication or other forms of dissemination (such as policy or service delivery advice) in a relevant field. | - International reputation in a relevant field. |
| **Job-related skills and aptitudes** | - High levels of competence in applied research skills.  
- Awareness of changing policies in a relevant field.  
- Organisational skills, such as time management and ability to meet deadlines.  
- High-level of oral, written and IT communication and presentational skills to a range of audiences.  
- Ability to teach to a range of CPD, undergraduate and postgraduate students | |
| **Interpersonal skills** | - Flexibility.  
- Excellent people skills.  
- Leadership style which promotes collaboration and open two-way communication.  
- Communicates regularly with colleagues in peer communities within and outside the university on professional/specialist topics, leading and building collaborative partnerships. | - Strategic leadership skills.  
- Ability to develop a high-performing team to deliver individual and team outputs and targets. |
| **Other** | - Commitment to promoting the values that underpin the discipline and applied research activities.  
- A commitment to develop the discipline to build and preserve a high profile national or international reputation for the university. | |
Appendix 13:
Example job description: Professor

Role description: Professor

Pay band: Academic Grade 10 (career framework level 9)

Responsible to: Dean of faculty

Minimum experience: PhD in a relevant discipline

Role purpose

• To provide strategic direction, leadership and management of applied research in the specialty of congenital cardiac nursing.

Summary of duties and responsibilities

Generic

• Provide strategic leadership and vision on applied research in collaboration with other senior staff within the faculty to ensure the continuing academic health of the discipline.

• Lead and develop a team of academic staff, research fellows, assistants and students focused on delivering national and international applied research outputs.

• Lead and undertake applied research activity at national and international level commensurate with the seniority of the post and the norms of the discipline.

• Obtain, plan and manage the resources needed to deliver applied research projects, oversee progress in all aspects of work, and prepare and present management information in line with university procedures and the needs of external funders.

• Develop individual academic staff, research fellows, assistants and students to achieve national or international quality-applied research outputs that make a contribution to overall team success.

• Lead and direct the development and delivery of applied research activities to ensure that personal and team income and other targets and contractual duties are met, including personal income per year equivalent to 40% of their own salary.

• Undertake, as appropriate to the demands of the post, research, teaching, scholarly activity, supervision of research students and administration.

• Promote and encourage open communication at all levels and co-ordinate activities across the full range of applied research work.

• Foster and develop fruitful relationships and partnerships inside and outside the university with relevant public, private and voluntary sector funding bodies and research, practice, academic and corporate organisations, as appropriate.

• Develop and preserve a prominent academic, professional and public profile and ensure that their team, faculty and university enjoy a good reputation.

• Undertake suitable administrative duties and engage in, or chair, committee and working groups and other activities, as required by the faculty and university.
• Provide leadership in delivering the university’s wider applied research and teaching objectives and develop collaborative and encouraging relationships with all relevant staff across the university.

• Represent the university, as appropriate, on external committees, boards and at other relevant meetings.

• Such other duties as are within the scope and spirit of the job purpose, the title of the post and its grading.

Post and role specific

• Build up and lead a team of applied researchers in a field of nursing and related areas.

• Seek and obtain funding to support the development of applied research activities in nursing.

• Contribute to the design, teaching and operation of postgraduate and undergraduate courses and modules, as appropriate.

• Conduct and publish personal research and supervise research students in the field of nursing.

• Such other duties as are within the scope and spirit of the job purpose, the title of the post and its grading.

Supervision received

• University: Pro-vice-chancellor (research).

• Faculty: Dean of faculty.

• Associate dean of faculty.

It is expected the post-holder will work largely on their own initiative within corporate and specific frameworks and will be accountable for their own actions.

Supervision given

• University: As required and agreed.

• Faculty: As required and agreed.

• Team: Assigned full-time, part-time, emeritus and honorary academic staff.

• Assigned research fellows and assistants.

• Assigned research students and other students.

• Assigned administrative and technical staff.

Contacts

• University: Staff at all levels within faculties and services across the university.

• Faculty: Staff at all levels within the faculty including staff in the faculty’s departments, applied research groups and applied research centres within the faculty.

• Funders: Staff of partner organisations and funding bodies, including research councils, European Commission and local, regional or national UK government bodies.
• **Collaborators:** External organisations and partners locally, nationally and internationally.

• **Other:** External organisations, as necessary.
## Person specification – professor

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<tr>
<th>Criteria</th>
<th>Essential</th>
<th>Desirable</th>
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<tbody>
<tr>
<td>Education and qualifications</td>
<td>• PhD in a relevant discipline.</td>
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<tr>
<td>Experience (paid and unpaid)</td>
<td>• Track record of delivering national and international level applied research outputs.</td>
<td>• Responsibility for managing staff recruitment, performance and retention.</td>
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<td></td>
<td>• Strategic leadership of a subject-specific or interdisciplinary research team or similarly oriented body.</td>
<td>• Representation on relevant regional, national or international committees, boards or networks.</td>
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<td></td>
<td>• Track record of securing income or external funding.</td>
<td>• Track record of delivering international level applied research outputs.</td>
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<td></td>
<td>• Leadership and management of a high performance team.</td>
<td>• Budgetary management.</td>
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<td></td>
<td>• Supervision of research fellows, assistants and other postgraduate students (for those from an academic background).</td>
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<td>• Project planning and budgetary management.</td>
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<td>• Partnership working at a senior level.</td>
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<td>Research, publications and special interests</td>
<td>• Substantial record of research and publication or other forms of dissemination (such as policy or service delivery advice) in a relevant field.</td>
<td>• International reputation in a relevant field.</td>
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<tr>
<td>Job-related skills and aptitudes</td>
<td>• Excellent applied research skills.</td>
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<td>• Sophisticated awareness of changing policies in a relevant field.</td>
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<td>• Organisational skills, such as time management and ability to meet deadlines.</td>
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<td></td>
<td>• High-level of oral, written and IT communication and presentational skills to a range of audiences.</td>
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<td></td>
<td>• Ability to teach to a range of CPD, undergraduate and postgraduate students.</td>
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<tr>
<td>Interpersonal skills</td>
<td>• Strategic leadership skills</td>
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<td></td>
<td>• Excellent ‘people skills’</td>
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<td></td>
<td>• Ability to develop a high-performing team to deliver individual and team outputs and targets.</td>
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<td></td>
<td>• Leadership style which promotes collaboration and open two way communication.</td>
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<tr>
<td>Other</td>
<td>• Commitment to promoting the values that underpin the discipline and applied research activities.</td>
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<td></td>
<td>• Commitment to develop the discipline to build and preserve a high-profile national or international reputation for the university.</td>
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# Glossary of acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ACE</td>
<td>Angiotensin converting enzyme</td>
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<tr>
<td>ALSG</td>
<td>Advanced life support group</td>
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<tr>
<td>APLS</td>
<td>Advanced paediatric life support</td>
</tr>
<tr>
<td>APTT</td>
<td>Activated partial thromboplastin time</td>
</tr>
<tr>
<td>ASD</td>
<td>Atrial septal defect</td>
</tr>
<tr>
<td>BiPAP</td>
<td>Bilevel positive airway pressure</td>
</tr>
<tr>
<td>CPAP</td>
<td>Continuous positive airway pressure</td>
</tr>
<tr>
<td>CVS</td>
<td>Cardiovascular system</td>
</tr>
<tr>
<td>CVP</td>
<td>Central venous pressure</td>
</tr>
<tr>
<td>CYP</td>
<td>Children and young people</td>
</tr>
<tr>
<td>ECG</td>
<td>Electrocardiogram</td>
</tr>
<tr>
<td>ECMO</td>
<td>Extra corporeal membrane oxygenation</td>
</tr>
<tr>
<td>EP</td>
<td>Electrophysiology</td>
</tr>
<tr>
<td>EPLS</td>
<td>European paediatric life support</td>
</tr>
<tr>
<td>HDU</td>
<td>High dependency unit</td>
</tr>
<tr>
<td>HLHS</td>
<td>Hypoplastic left heart syndrome</td>
</tr>
<tr>
<td>ICD</td>
<td>Implantable cardioversion devices</td>
</tr>
<tr>
<td>INR</td>
<td>International normalised ratio</td>
</tr>
<tr>
<td>OSCE</td>
<td>Objective structured clinical examinations</td>
</tr>
<tr>
<td>PALS</td>
<td>Paediatric advanced life support</td>
</tr>
<tr>
<td>PDA</td>
<td>Patent ductus arteriosus</td>
</tr>
<tr>
<td>PEW</td>
<td>Paediatric early warning</td>
</tr>
<tr>
<td>PGD</td>
<td>Patient group directives</td>
</tr>
<tr>
<td>PHT</td>
<td>Pulmonary hypertension</td>
</tr>
<tr>
<td>SAo2</td>
<td>Saturation of oxygen</td>
</tr>
<tr>
<td>SBAR</td>
<td>Situation, background, assessment, recommendation</td>
</tr>
<tr>
<td>VSD</td>
<td>Ventricular septal defect</td>
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</table>
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RCN quality assurance

Publication
This is an RCN practice guidance. Practice guidance are evidence-based consensus documents, used to guide decisions about appropriate care of an individual, family or population in a specific context.

Description
This publication provides optimum standards for the nursing care of infants, children and young people with congenital heart disease. It includes recommendations for education and training, underpinned by competency frameworks and career pathways.

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The Nine Quality Standards
This publication has met the nine quality standards of the quality framework for RCN professional publications. For more information, or to request further details on how the nine quality standards have been met in relation to this particular professional publication, please contact publicationsfeedback@rcn.org.uk

Evaluation
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