



NHS

Critical Care Network
East Midlands

Critical Care Nurse Education, Training and Development Strategy

2023 - 2025

January 2023

Classification: General

Organisation	East Midlands Adult Critical Care Network
Document Purpose	Guidance
Title	Critical Care Nurse Education, Training and Development Strategy (2023 - 2025)
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Date and Version	May 2023, Version 4
Linkages	East Midlands Adult Critical Care Network; Registered Nurse Workforce Framework and Toolkit
Circulation	East Midlands Adult Critical Care Network: Lead Nurse Group Clinical Group Quality Service Improvement Group Network Board
Description	This strategy is designed to assist Trusts across the East Midlands Adult Critical Care Network in determining Critical Care nursing educational requirements that will meet the current and future demands of the service
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Introduction

In order to care for Critical Care patients to a high standard nurses need expert knowledge and skills (Credland et al, 2021; Woodrow, 2006; Baid & Hargreaves, 2015).

Continuing professional development and lifelong learning is essential for the Critical Care nursing workforce.

The aim of this strategy is to support Critical Care units to create an environment that supports the development of the Critical Care nursing workforce. It will:

- Support the development of a competent and capable Critical Care nursing workforce.
- Support the growth and retention of the Critical Care nursing workforce.
- It will promote collaboration between the Critical Care clinical educators of the NHS trusts within the East Midlands Critical Care Network and local Higher Education Institutes.

Aim

The aim of this strategy is to support NHS Trusts within the East Midlands Critical Care Network (EMCCN) to create an environment that supports the development of the Critical care nursing workforce. All nurses working in Critical Care units across the Network must be supported to provide individualised patient care for critically unwell patients as well as providing support and care for their family and friends. This requires Critical Care units to have robust mechanisms to provide development opportunities for all nursing staff.

This strategy will provide recommended standards, gold standards and future ambitions in relation to all groups of nursing staff working in Critical Care. It is anticipated that all units within the EMCCN will meet the required standards within 12 to 18 months. This strategy acknowledges that education is not organised in the same way in each of the member organisations, therefore how the standards are achieved will vary between organisations. The audit tool contained in appendix one will provide organisations with the opportunity to establish baseline compliance with the standards providing evidence to support the development of action plans to devise strategies to meet the required standard in the most appropriate way for that organisation (See Appendix 2). The EMCCN Lead Clinical Educator will support the development of these action plans if required. Some of the member organisations will already have achieved the recommended standards contained in this strategy and the gold standard and future ambitions will provide further goals.

This strategy builds on previous versions, updated to include most recent guidance. It is key to facilitating and supporting clinical practice by guiding educational provision for nurses at all levels within the Network, underpinned by a multi-disciplinary, multi-professional lifelong learning and sharing approach.

The implementation of this strategy will provide evidence for the Network Lead Nurse and Lead Clinical Educator to influence priorities in service development within the Network.

The Critical Care Clinical Educators' Group (CCCEG)

The Critical Care Clinical Educators Group contains representatives from the following member organisations:

- Chesterfield Royal Hospital NHS Foundation Trust
- Kettering General Hospital NHS Foundation Trust
- Northampton General Hospital NHS Trust
- Nottingham University Hospitals NHS Trust
- Sherwood Forest Hospitals NHS Foundation Trust
- United Lincolnshire Hospitals NHS Trust
- University Hospitals of Derby & Burton NHS Foundation Trust
- University Hospitals of Leicester NHS Trust

The pressures placed on Critical Care Units by the Covid-19 pandemic seem to have reduced engagement with the CCCEG. Additionally, since 2020 University Hospitals of Leicester, Kettering General Hospital, Northampton General Hospital and Chesterfield Royal Hospital have joined the Network increasing membership of the CCCEG.

It is hoped that implementation of this strategy will encourage re-engagement with the CCCEG.

The CCCEG will meet 4 times a year to provide a forum to discuss best practice and share challenges encountered in order to support Clinical Educators with their role.

Implementation

The principles outlined below underpin the implementation of the Nurse Education, Training and Development Strategy:

- A dedicated Critical Care Clinical Educator will be the key to successful implementation of the strategy at a local level.
- Each Critical Care unit will provide representation at the CCCEG as per the terms of reference of the Clinical Nurse Educators Group to share ideas and support with implementation of this strategy.
- Critical Care Clinical Educators will liaise internally with their own Trust education forums, as appropriate, to facilitate local collaboration, support, guidance and co-ordination of the Strategy.
- The Chair or nominated representative from the CCCEG will attend the quarterly meetings of the Network Lead Nurse Group to discuss any issues relating to the Strategy and its implementation and provide two-way feedback.
- Monitoring compliance with the Strategy will be the responsibility of the individual Clinical Educators in each local unit, using the audit tool provided and communicated back to the CCCEG in order to provide up to date evidence, compliance and assurance.

- An annual report will be provided by the Network Clinical Educator Lead to the Network Lead Nurse that will include data obtained from the audit tool to provide assurance of compliance and identify the learning needs for the Network as a whole

Standards

This strategy will consider the recommended standard, gold standard and future ambitions in the following domains:

- Overarching Educational Standards in Critical Care
- Requirements of Band 5 Critical Care Nurses in their First Year
- Requirements of Band 5 Critical Care Nurses with more than One Year's Experience
- Requirements of Band 6, 7 and 8a Critical Care Nurses
- Requirements of Registered Nursing Associates
- Requirements of Health Care Support Workers
- Requirements of Students Undertaking Placements in Critical Care
- Critical Care Nurse Educators

Overarching Educational Standards for Critical Care

Recommended Standard

- Critical Care nursing staff should be supported by an appropriately sized education team. There should be 1.0 Whole Time Equivalent (WTE) dedicated clinical nurse educator per 75 nursing staff (NHS England, 2019; Faculty of Intensive Care Medicine, 2022).
- 50% of the Registered Nurse workforce should be in possession of a post registration qualification in Critical Care (CC3N, 2018; Faculty of Intensive Care Medicine, 2022).
- At least 70% of nursing staff should be appropriately trained in and competent with the medical devices in use within the clinical area. There must be a clear plan in place detailing how all staff will become competent with the medical devices in use within the clinical area. Training records must be maintained to demonstrate this.
- Each Trust will have learning and development opportunities available for staff bands 2-8a.
- Each Trust will produce an annual training needs analysis and identify how any gaps in training provision will be filled.
- Critical Care nursing staff will be encouraged to publish their work and/or present at conference.
- Evidence is available to demonstrate that agency staff receive local induction in each locality (CC3N, 2018).
- The CC3N National Competency Framework for Registered Nurses in Adult Critical Care will be embedded within local Critical Care education strategies with 'specialist

bolt on' competencies, being reviewed and used as appropriate in individual clinical areas/Trusts (Faculty of Intensive Care Medicine, 2022).

- Assessors signing off competencies will be competent in the skills they are signing off. I.e. they will have that competency signed off in their own competency book
- There should be mechanisms in place to ensure that all members of the nursing team are working within their scope of practice and appropriate supervision is in place.
- Staff debrief should be available to promote learning from incidents and to support staff
- There will be one member of staff transfer trained on each shift.

Gold Standard

- The education team supporting the Critical Care nursing staff will have 1.0 WTE educators per 50 nursing staff. (NHS England, 2019; Faculty of Intensive Care Medicine, 2022).
- Each Trust will produce an annual plan detailing progress towards the target of 50% of nurses being in possession of a post registration qualification in Critical Care. This will be submitted 6 monthly to the CCCEG.
- All nursing staff must be appropriately trained in and competent with the medical devices in use within the clinical area. Training records must be maintained to demonstrate compliance with this (Faculty of Intensive Care Medicine, 2022).
- Each Trust will have career pathways in place for staff bands 2-8a detailing how staff can progress their careers within Critical Care.
- There will be provision within each Trust for academic support in order to encourage nursing staff to publish their work. If not available within the Trust individuals could be supported by another clinical educator within the Network.
- Units should ensure that registered nurses supplied by an agency are able to provide evidence of appropriate experience and competence to care for critically ill patients (Faculty of Intensive Care Medicine, 2022).
- Achievement of step competencies should form part of appraisal and be included in job descriptions within all Trusts in the Network.
- Assessors signing off competencies will have completed all their own step one competencies.
- The Critical Care Related (Learning) Events Database (CCRED) will be shared with the Clinical Nurse Educator Group to support learning from incidents.
- 30% of nursing staff within each Critical Care unit will be competent in inter-hospital transfer.

Future Ambition

- Each Trust will be able to demonstrate continued competence with the medical devices in use within the clinical area.

- Only staff who have achieved a post-registration qualification in Critical Care nursing will sign off national competency documents.
- 50% of nursing staff within each Critical Care unit will be competent in inter-hospital transfer.

Band 5 Critical Care Nurses in their First Year

Recommended Standard

- All registered nurses joining or returning to the Critical Care team will receive a supernumerary period. The length of this will be agreed locally however all newly registered nurses will require a minimum of 6 weeks (CC3N, 2015). This supernumerary period should be structured to meet each new starter's requirements.
- All newly registered nurses should receive preceptorship in their first year post registration. This should include all nurses previously registered overseas (NMC, 2020; NHS England, 2022)
- Educational packages and resources should be available in each member organisation.
- Each member organisation will make 'Step One' competencies available for all new nurses in Critical Care.

Gold Standard

- Nurses should be supported to complete the purple shaded step one competencies within their supernumerary period.
- All Trusts with the Network should provide an education programme for new staff in order to support them to complete step one competencies.

Future Ambition

- The education programme provided for new starters in Critical Care should be accredited by an appropriate organisation, e.g., a local Higher Education Institution or the Royal College of Nursing.



Band 5 Critical Care Nurses with more than One Years' Experience

Recommended Standard

- Following completion of step one competencies staff should be offered the opportunity to complete a post registration qualification in Critical Care incorporating completion of step 2 and step 3 competencies.
- A trajectory will be produced by each Trust to provide evidence for predicted training needs for the following three years, this will aid planning and funding support required.
- CC3N specialist competencies will be used within Critical Care units as appropriate.
- All staff will have completed an Immediate Life Support Course (or equivalent)

Gold Standard

- Critical Care units will provide opportunities for nurses to attend conferences and be able to provide evidence of the sharing of this knowledge.
- Opportunities will exist for nurses to develop their leadership skills, e.g., leadership of a cohort of patients, shadowing shift leaders.

Future Ambition

- Opportunities should exist for nurses to rotate into specialist teams to support their development, e.g. Critical Care Outreach teams or ACCOTS
- Opportunities will exist for nurses to attend leadership training to support their development to band 6 roles.
- Consideration should be given to senior band 5s starting to complete step 4 competencies.
- Senior band 5s will be given the opportunity to complete an Advanced Life Support Course

Band 6, 7 and 8a Critical Care Nurses

Recommended Standard

- All senior nurses (including Nurses In Charge/shift coordinators and Matrons (Senior Nurses)) should have a post registration qualification in Critical Care
- All senior nurses should have completed CC3N Step four competencies or equivalent (Faculty of Intensive Care Medicine, 2022).
- All Critical Care nurses in leadership roles should have access to relevant education.
- Critical Care units will provide opportunities for nurses to attend conferences and be able to provide evidence of the sharing of this knowledge.

Gold Standard

- Critical Care nurses in leadership roles should be in possession of a leadership qualification, e.g. leading an empowered organisation (LEO)
- Consideration should be given to providing opportunities for nurses to train for advanced roles, e.g. Advanced Critical Care Practitioners.

Future Ambition

- Senior Nurses/Matrons should be educated to Masters level.

Registered Nursing Associates

Recommended Standard

- All nursing associates joining the Critical Care team will receive a supernumerary period. The length of this will be agreed locally however all newly registered nursing associates will require a minimum of 6 weeks (CC3N, 2021). This supernumerary period should be structured to meet each new starter's requirements.
- All newly registered nursing associates should receive preceptorship in their first year post registration (NMC, 2020; NHS England, 2022).
- Each member organisation will make nursing associate competencies available for all new nursing associates in Critical Care.

Gold Standard

- Nursing associate competencies should be completed with the first year of working in Critical Care
- Nursing associates should be encouraged to develop their skills and knowledge beyond their initial qualification and training in line with local policy and guidelines. This may include but is not limited to intravenous fluid and drug administration.

Future Ambition

- Where available opportunities exist, nursing associates can be encouraged to consider going on to train as registered nurses by putting their training towards a shortened nursing degree or registered nurse degree apprenticeship.

Health Care Support Workers (HCSWs)

Recommended Standard

- All HCSWs joining the Critical Care team will receive a supernumerary period the length of which should be agreed locally (CC3N, 2022).
- HCSWs new to Critical Care should undertake an education programme to support knowledge acquisition alongside work-based learning (CC3N, 2022).

- All HCSWs should have completed or be working towards their care certificate.
- Each member organisation will make the CC3N HCSW competencies available for all HCSWs in Critical care.

Gold Standard

- Each unit should offer ongoing training opportunities and development for HCSWs.

Future Ambition

- A career pathway for non-registered staff should be available to support individuals to develop into registered nursing associates and/or registered nurses if they wish.

Critical Care as a Student Placement

Recommended Standard

- All units will ensure that there are sufficient practice supervisors available to support student nurses and trainee nursing associates in practice (NMC, 2018)
- All students undertaking placement on Critical Care will be assigned to a practice assessor (NMC, 2018)
- Nurses undertaking the role of practice assessor should have undertaken training to prepare them for this role.
- Evaluation of pre-registration student feedback should be provided in each Critical Care unit.
- Each unit should have a nominated person to actively support students and address any concerns.

Gold Standard

- Each unit will maintain a register of pre-registration supervisors and assessors.
- Nurses undertaking the role of practice supervisor should have undertaken training to prepare them for the role.
- Units should offer opportunities for student nurses/trainee nursing associates to undertake insight visits to associated areas, e.g. Critical Care outreach
- Each unit should have up-to-date protocols and guidelines to support student nurse placement within Critical Care.

Future Ambition

- Students on placement should be given the opportunity to lead the care of a Critical Care patient under supervision.



Critical Care Nurse Educators

Recommended Standard

- Critical Care clinical educators should be fully supported as supernumerary to ensure the provision of education and support to the Critical Care nursing workforce.
- Critical Care clinical educators will be in possession of a post registration qualification in Critical Care nursing.
- Critical Care clinical educators will be responsible for the co-ordination, promotion and delivery of Critical Care education and training.
- Each member organisation will be represented at 75% of CCCEG meetings.

Gold Standard

- Critical Care clinical educators will have regular communication with Higher Education Institutions (HEIs) in order to contribute to programme planning, review, evaluation and revalidation of courses to ensure the programme met the needs of practice.
- Critical Care clinical educators should have opportunities to contribute to National Groups, e.g. Critical Care Network Education Review Forum (CCNERF). Feedback should be provided to the Clinical Nurse Educators Group.
- There will be succession planning in place for future Critical Care clinical educators. This might include opportunities within organisations for 'future educators', these might include bedside teaching or opportunities to teach sessions within study days.
- Educators should explore opportunities to teach at their local HEI.
- Care clinical educators should be in possession of a post graduate certificate in Health Education (or equivalent)
- Each member organisation will be represented at all CCCEG meetings.

Future Ambition

- Lead Critical Care clinical educators should be possession of a MSc in Health Care Education

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Appendix One – Audit Tool

Please complete via the online link below.

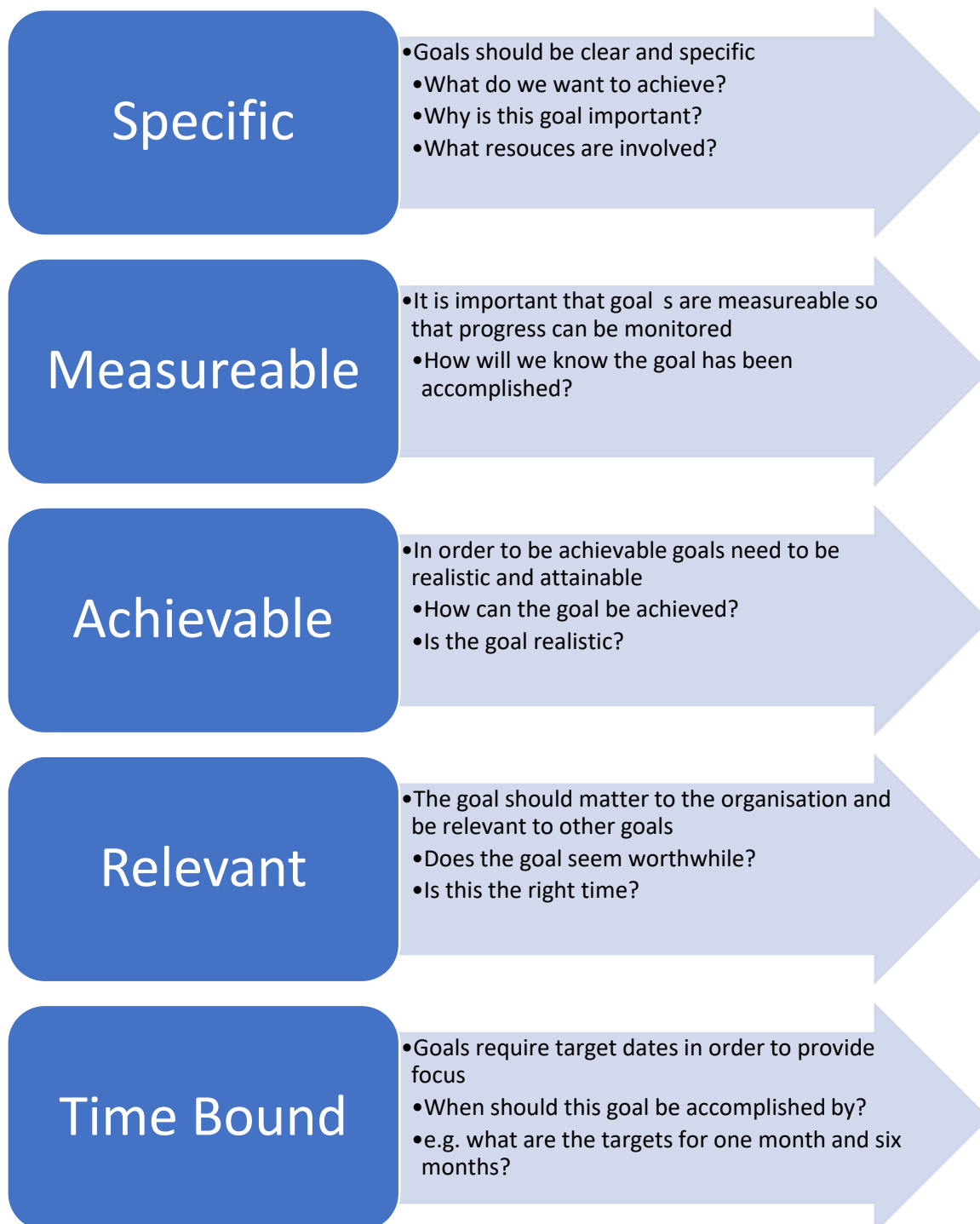
<https://forms.office.com/e/KSixRsRNZz>

East Midlands Critical Care Network Education, Training and Development Audit			
Assessment Criteria			
Red = Problem meeting criteria (<80% compliant)		Amber = Good progress made with work on-going (80 -89% compliant)	Green = Criteria fully met (90-100% compliant)
Critical Care Unit:		Number of Critical Care Beds:	
Hospital Trust:		Number of nursing staff employed on the unit	
Date Completed:		WTE Clinical Educator/Banding	
Name of person completing form:		Other information:	
			Assessment
There is 1 WTE Educator per 75 members of staff who is supernumerary			
There is 1 WTE Educator per 50 members of staff who is supernumerary			
Critical Care Educators are in possession of a post graduate certificate in medical education or equivalent			
50% of the Registered Nurse workforce are in possession of a post registration qualification in Critical Care			
If a unit does not have 50% of staff in possession of a post-registration qualification in criteria, there is a plan in place meet this requirement			

All members have staff have completed training and are competent in the use of medical devices used within the clinical area	
Agency staff receive local induction	
CC3N National Competency Framework for Registered Nurses in Adult Critical Care are in use with the clinical area	
CC3N additional competencies are in use in the clinical area where appropriate, e.g maternal, cardiac and neurological competencies	
Competencies are signed off by an appropriate assessor who has completed their own competencies	
Staff debrief is available to promote learning from incidents and to support staff	
Career pathways in place for Bands 2-8a	
CC3N Step competencies form a part of appraisal and is included in job descriptions	
New starters of all bands will receive a structure supernumerary period. (For newly registered staff this should be a minimum of 6 weeks)	
All newly registered staff will receive preceptorship. This should include all newly registered nurses and nursing associated including nurses previously registered overseas	
New staff complete 'shaded competencies' with their supernumerary period	
An accredited education programme is provided to support staff development	
All nurses in bands 6-8a are in possession of a post qualification in Critical Care	
All shift leaders have completed CC3N step 4 competencies (or equivalent)	
Nursing associates have completed CC3N Nursing Associate Competencies	
Health Care Support Workers have completed CC3N HCSW Competencies	
Units have sufficient number of practice supervisors to support student nurses in practice	
All students undertaking placement on Critical Care are assigned to a practice assessor	

Appendix Two – Action Plans

When writing an action plan, **SMART** principles can be employed





Critical Care Network
East Midlands

