FAQ - Additional Skills for Adult Pre-Registration Nursing Students

Additional skills opportunities will not be provided at the expense of students achieving ESCs.

Venepuncture and Cannulation – Formally part of the adult programme from September 2016 (first delivered as a pilot in May 2016 to stage 3 students). Collaborative delivery between NHSG and RGU (content, skills practice and competency document). Once signed off as competent, students: may take bloods or cannulate without direct supervision if mentor/supervising practitioner/senior nurse on duty at the time agrees. Exceptions: students may not take bloods for BTS or blood cultures, and may not flush the cannula.

Preparation for Intravenous drug administration (Bolus, Continuous infusion by gravity/electronic infusion devices) – Students will be able to participate in appropriate learning and supervised practice commencing with Stages 3 and 4 in September 2016. Delivery of theory and practical sessions are collaborative between NHSG and RGU. There is an associated NHSG competency document which is modified to reflect which parts of the procedure the student may perform, and which they can only observe until becoming a registered practitioner. Broadly, students may not actually administer medication to the patient but may participate fully in all other components of the skill under direct supervision at all times: checks, calculations, preparation of medication for bolus/infusion, and observation of administration.

Male (and female) catheterisation – Formally part of the adult programme from September 2016 (for deliver stage 2 second semester). Once a mentor deems the student competent to do so the student can catheterise a female and re-catheterise a male patient. If the mentor deems the student competent then the student may catheterise without direct supervision if mentor/supervising practitioner/senior nurse on duty at the time agrees, except for use of instilagel which must be individually prescribed, and given under direct supervision even once competent (medication). (Currently delivered Stage 2).

Near patient testing: INR Provided the student is already competent in blood glucose testing, and has received instruction and supervised practice on near patient INR testing from competent registered staff, the student may perform INR testing without direct supervision provided that the mentor/supervising practitioner/senior nurse on duty at the time agrees. Students may not undertake dose management. Results are to be conveyed to the responsible registrant within agreed timescales (which is the responsibility of the supervising registrant to advise), who will then undertake the dosage management.

Guidance for additional Skills acquisition by RGU/other pre-registration Adult students:

Advice for PEFs/SCNs/Mentors about competency attainment in practice. Depending on student placement area and whether the opportunity arises on placement to undertake the skills, it may be some time since the student has had the theory and practice associated with the aforementioned skills (at least 6 months). If this is the case, advise the student to revisit the theory component online (via Moodle) and if possible observe a competent member of staff undertaking the skills a couple of times in practice or they can use a part task trainer (borrowed from PPDU) to practice prior to patient contact.

Some students, for example ERASMUS, will already be competent in these skills. If this is the case, ask the student to observe a competent member of staff once prior to doing 4 observed practices. They will have a separate booklet with only 4 observed practices before they can be deemed competent.

There are a number of important caveats to be aware of, all of which have been communicated to the students as well:

- The acquisition of additional skill sets cannot take precedence over essential skills they need to meet their sign-off requirements to enable registration with NMC

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Hence, if “Spoke” requests are made because the student is keen to gain competency and the opportunity is not available within their placement, I would anticipate that the student would be facilitated to do this, provided it did not interfere with meeting any outstanding essential competencies.

- Nursing Students must be supervised by a competent Registered Nurse (not a phlebotomist, medical student etc etc.)
- They must be **directly supervised** until signed off as competent. Students cannot have final competency for IV drug administration signed off (yellow columns) until **after** they have received their NMC PIN post qualification.
- The number of attempts required to achieve competency is not particularly important; it is about the consistency in achieving the competent level i.e. level 4. Minimum of 2 attempts rated at 4 prior to the final sign-off attempt which must also score a 4.
  - However, with a particular patient on a particular occasion, no more than 2 attempts at any procedure should be allowed. The competent practitioner should take over and complete under these circumstances.
  - The supervising practitioner must take responsibility for helping to identify situations in which the student has a good chance of being successful, and this is why an experienced supervisor is essential.
- If competency is achieved, the back page should be photocopied and returned to PPDU. **The student must keep the original.** If employment is taken up within NHSG, their competency will be credited on AT at that time.
- **NB Nursing Students cannot flush a cannula with saline – their supervisor must do that part of the procedure (as for HCSWs at present). Students can give instillagel, but only if prescribed to the individual patient and under direct supervision.**
- If performing Venepuncture, **they must not take blood cultures or samples for Blood Transfusion Service** – there are additional risks/competencies for these, which they can complete following registration.
- For those students who do not manage to obtain experience in practice/achieve competency while on their last placement, but who do require these skills in their substantive post on employment, arrangements will be made for them regarding appropriate refresher sessions at that time.