

CHILD HEALTH NETWORK
for the Greater Toronto Area

The Child Health Network for the
Greater Toronto Area

Competencies Required by Paediatric Emergency Nurses



CHILD HEALTH NETWORK
for the Greater Toronto Area
*working together for
children's health*

April 2002

CHN Competency Based Assessment Tool Paediatric Emergency Nurse

- Medication Administration
- Oxygen Therapy
- Care of the Patient with a Peripheral Intravenous
- Cardiopulmonary Arrest
- Care of Patient Requiring Medical Device Intervention
- Triage Physical Assessment and History Taking
- Paediatric Canadian Triage and Acuity Scale (P-CTAS)
- Provision of Family Centred Care
- Cultural Awareness
- Developmental A
- Child Abuse and
- Crisis Managemen



B a c k g r o u n d

In November 1998, a local Coroner's Inquest responding to the death of a five year old child in an Emergency Department included the following recommendation:

"That triage nurses be required to have undergone a mandatory standardized triage training course every two years. This course must include paediatric triage and a section on anxious parents and patients".

In response, The Child Health Network Task Force that met to review the Coroner's Inquest recommendations decided to define the skills and qualifications of nurses who will be triaging paediatric patients. The basis of the discussions of this Task Force in relation to this particular recommendation included the following:

- that there would be an initial period of time of employment in an Emergency Department prior to assuming the role of triage nurse (time period to be determined by each organization)
- that prior to assuming the role of paediatric triage nurse that education related to this position occur
- that prior to assuming the role of paediatric triage nurse that the competency of the triage nurse be assessed
- that on a regular basis, the competency of the nurse performing paediatric triage be assessed and that education and on-going development based on individual needs be provided to maintain competency
- that the specifications of local paediatric educational offerings be compiled and made available to nurses so that specific education and on-going development could be offered based on the outcomes of the competency assessment.

Guidelines for Use

Definitions:

Competency

The following tool identifies the knowledge, skill and judgment that the ER Nurse must demonstrate in order to competently triage and care for paediatric patients. Competence is defined by Speers and Ziolkowski as “the capacity to perform job functions by an individual who has the knowledge, skills, behaviors, and personal characteristics necessary to function well in a given situation”.

Competency based education is grounded in adult learning principles of self-directed learning, motivation, and responsibility for a change in one’s own behaviors and knowledge. The important features of competency are twofold: (1) competency focuses on the ability to integrate knowledge, skills, attitudes and judgement into the practice setting and (2) competency is determined in relation to the practice requirements according to the role of the practitioner and the setting (Alspach, 1994, Benner, 1982).

Instructional Strategies

In order to achieve competency as an outcome of a continuing education activity, it must be defined in relation to the specific subject of the curriculum. A list of competency statements helps the professional understand the expected level of skill and knowledge to perform the expected role, in this case, paediatric triage. Once the nurse identifies the areas requiring improvement, appropriate learning strategies can be selected.

Instructional strategies may include:

- formal courses
- reading
- research
- role modeling
- certification programs
- reflection on practice
- conferences
- inservices

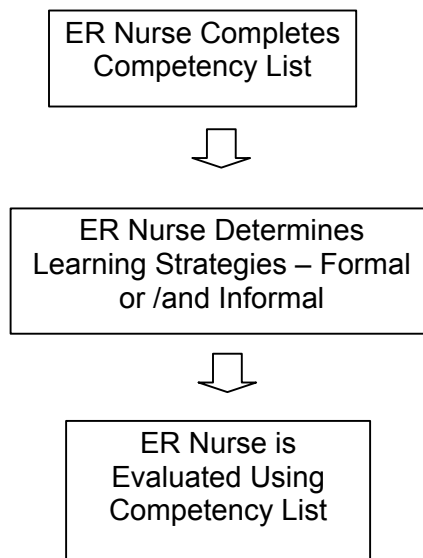
Instructional strategies should be chosen based on individual learning preferences.

Methods of Evaluation

To truly evaluate competency, the actual practice setting must be used in some manner. High-risk procedures or those that rarely occur may be observed in a clinical lab simulation or video simulation. Written testing may also be used in situations where a cognitive knowledge base is essential to actual performance in the clinical area.

How to Use this Tool:

1. Using the principles of self-assessment, the ER nurse will read each competency statement indicating that she/he is competent (C) or not competent (NC).
2. The ER nurse will determine which instructional strategy to be utilized and record the information at the end of each section of the tool.
3. The ER nurse will indicate the date and initial when practice or review has occurred.
4. The ER nurse will date and initial when competency has been demonstrated.
5. The ER nurse will note the method of evaluation used in the appropriate space at the end of each section of the tool.



R e f e r e n c e s

Alspach, G. (1994). Concern and Confusion Over Competence. *Critical Care Nurse*, 12, 9 – 11.

Benner, Patricia. (1982). Issues in Competency Based Testing, *Nursing Outlook*, May 303 – 309.

Speerts, AT, Ziolkowski, L. Preparing for the future: Perianesthesia orientation, *JOPAN* 11(3): 133 – 142, 1996.

**CHN Competency-based Assessment Tool
Paediatric Emergency Nurse**

Medication Administration

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Demonstrates the nursing knowledge, skill, judgment in the management of patients requiring medication administration</i>			
Performance Criteria:			
▪ states the principles of medication administration			
▪ identifies appropriate resources to obtain information regarding medications			
▪ states the following criteria for each medication: a) indications for use b) side effects c) adverse reaction d) contraindications e) normal dosage ranges f) method of administration g) special considerations			
▪ demonstrates calculation of dosage required			
▪ prepares medication using aseptic technique and safe administration precautions			
▪ demonstrates the administration of medication by (if applicable): a) oral route b) subcutaneous c) intramuscular d) intradermal e) intravenous f) topical g) inhalation h) intrathecal			

All foundational competencies apply	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
i) rectal j) intraosseous k) endotracheal l) sublingual m) enterally n) eye, ear, nose drops			
<ul style="list-style-type: none"> ▪ identifies expected outcomes 			
<ul style="list-style-type: none"> ▪ anticipates potential unexpected outcomes 			
<ul style="list-style-type: none"> ▪ manages unexpected outcomes 			
<ul style="list-style-type: none"> ▪ evaluates patient response to medication 			
Instructional Strategies: 			
Method of Evaluation: <ul style="list-style-type: none"> ▪ achieves 100% on drug calculation questions ▪ achieves 80% on post test 			

Comments:

**CHN Competency-based Assessment Tool
Paediatric Emergency Nurse**

Oxygen Therapy

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Incorporates nursing knowledge, skill and judgment caring for the child requiring oxygen therapy</i>			
Performance Criteria:			
<ul style="list-style-type: none"> ▪ states rationale for oxygen therapy 			
<ul style="list-style-type: none"> ▪ identifies clinical indicators for patient's requiring oxygen therapy 			
<ul style="list-style-type: none"> ▪ states rationale for application of the following oxygen delivery systems: <ul style="list-style-type: none"> a) nasal prongs b) face mask c) non rebreather mask d) face tent e) tracheotomy mask f) endotracheal tube g) CPAP 			
<ul style="list-style-type: none"> ▪ identifies clinical indicators for patient's requiring the following: <ul style="list-style-type: none"> a) Nasal prongs b) Face mask c) Non rebreather mask d) Face tent e) Tracheotomy mask f) Endotracheal tube g) CPAP 			
<ul style="list-style-type: none"> ▪ demonstrates application and maintenance of each of the following: <ul style="list-style-type: none"> a) Nasal prongs b) face mask 			

All foundational competencies apply	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<ul style="list-style-type: none"> c) non rebreather mask d) face tent e) tracheotomy mask f) endotracheal tube g) CPAP 			
<ul style="list-style-type: none"> ▪ demonstrates one man rescue breathing using the following: <ul style="list-style-type: none"> a) self-inflating device b) anaesthesia bag 			
<ul style="list-style-type: none"> ▪ demonstrates two man rescue breathing using the following: <ul style="list-style-type: none"> a) self-inflating device b) anaesthesia bag 			
<ul style="list-style-type: none"> ▪ states the organizational approved guidelines for oxygen administration 			
<ul style="list-style-type: none"> ▪ evaluates patient response to oxygen therapy 			
<ul style="list-style-type: none"> ▪ collaborates with all members of the multidisciplinary team 			
Instructional Strategies:			
Method of Evaluation:			

Comments:

**CHN Competency-based Assessment Tool
Paediatric Emergency Nurse**

Care of the Patient with a Peripheral Intravenous

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Demonstrates the nursing knowledge, skill, and judgment for management of patients receiving peripheral Intravenous therapy (PIV)</i>			
Performance Criteria:			
▪ states rationale for PIV therapy			
▪ states unexpected outcomes			
▪ states rationale for changing of IV site, infusion rate and patient specific IV solution			
▪ assesses hourly: <ul style="list-style-type: none"> a) the patient's response b) the site c) the tubing d) the pump e) the fluid type 			
▪ assesses for compatibility of solution with patient's medications and other intravenous therapies			
▪ demonstrates change of IV solution and tubing according to HSC policy			
▪ demonstrates management of infusion pump(s)			
▪ demonstrates capping and flushing of PIV			
▪ demonstrates removal of a PIV			
▪ measures intake and output			
▪ identifies unexpected outcomes			
▪ demonstrates management of unexpected outcomes			
▪ states patient indications for use of the following angiocatheters: <ul style="list-style-type: none"> a) 24 ga. b) 22 ga. 			

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
c) 20 ga. d) 18 ga. e) 16 ga. f) 14 ga.			
<ul style="list-style-type: none"> ▪ Demonstrates successful initiation of peripheral I.V. using age appropriate distraction and aseptic techniques 			
<ul style="list-style-type: none"> ▪ Evaluates patient response to interventions 			
Instructional Strategies:			
Method of Evaluation:			

Comments:

**CHN Competency-based Assessment Tool
Paediatric Emergency Nurse**

Cardiopulmonary Arrest

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Incorporates nursing knowledge, skill and judgment when responding to life support situations</i>			
Performance Criteria:			
▪ Identifies common causes of medical emergencies in children			
▪ Identifies clinical situations may result in medical emergencies in children			
▪ States the anatomical differences of the paediatric patient in relation to airway, breathing and circulation			
▪ States mild, moderate and severe signs and symptoms of respiratory distress			
▪ States mild, moderate and severe signs and symptoms of cardiovascular compromise			
▪ Identifies treatment modalities and pharmacological interventions as they relate to signs and symptoms of respiratory distress			
▪ Identifies treatment modalities and pharmacological interventions as they relate to signs and symptoms of cardiovascular compromise			
▪ Locates equipment used during resuscitation on the unit			
▪ States patient criteria for initiating a code team response according to organizational guidelines			
▪ Demonstrates how to initiate a code team response according to organizational guidelines			
▪ Identifies roles and responsibilities of each code team member according to organizational guidelines			
▪ Identifies roles and responsibilities of nursing staff of department according to organizational guidelines			
▪ Responds to emergent situations and provides ongoing supportive measures			

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
▪ provides psychosocial support to patient's family			
▪ participates in a debriefing process			
▪ evaluates the effectiveness of the code team's response			
Instructional Strategies:			
Method of Evaluation:			

Comments:

**CHN Competency-based Assessment Tool
Paediatric Emergency Nurse**

Care of the Patient Requiring Medical Device Intervention

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Demonstrates the nursing knowledge, skill, judgment for the management of the patient requiring medical devices supporting patient care:</i>			
Performance Criteria:			
<ul style="list-style-type: none"> ▪ states organizational guidelines that direct the use of medical devices 			
<ul style="list-style-type: none"> ▪ states clinical indicators that require the following: <ul style="list-style-type: none"> a) blood/fluid warmer b) iv controller/pump c) iv rapid infuser d) ECG monitoring e) defibrillator f) cardioversion g) transthoracic pacemaker h) pneumatic tourniquet i) electronic thermometer j) electronic scales k) arterial line monitoring l) ventilator m) overhead warmer n) Glucometer o) other institutional equipment 			
<ul style="list-style-type: none"> ▪ states pharmacological indicators that require medical device support 			
<ul style="list-style-type: none"> ▪ identifies factors that may interfere with functioning of medical devices 			
<ul style="list-style-type: none"> ▪ identifies a patient requiring medical device support 			

All foundational competencies apply	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
▪ identifies correct medical device to be initiated based on patient assessment			
▪ demonstrates placement of chosen non-invasive electronic monitoring			
▪ demonstrates the setting of alarm parameters based on individual patient requirements			
▪ demonstrates ongoing physical assessment of patient			
▪ correlates assessment findings with monitoring data			
▪ integrates physical assessment and monitoring data into plan of care			
▪ communicates relevant physical and monitoring data findings to health care team			
▪ evaluates effectiveness of intervention			
Instructional Strategies:			
Method of Evaluation:			

Comments:

**CHN Competency-based Assessment Tool
Paediatric Emergency Nurse**

Triage Physical Assessment and History Taking

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Incorporates nursing knowledge, skill and judgment when initiating and performing triage physical assessment and history taking</i>			
Performance Criteria:			
▪ identifies factors influencing paediatric triage assessment			
▪ identifies the differences between the following: a) across the room assessment b) primary assessment c) secondary assessment d) focused assessment			
▪ states methods of obtaining subjective and objective data			
▪ demonstrates an 'across the room assessment' and identifies findings			
▪ demonstrates primary assessment' and identifies findings			
▪ demonstrates a secondary assessment' and identifies findings			
▪ performs a systematic head to toe assessment to collect data of the health status of each patient:			
▪ obtains subjective and objective data through: a) history taking using 'CIAMPEDS' guidelines b) physical examination c) review of patient records d) communication with family e) communication with health care team			
▪ demonstrates age specific assessment techniques:			

All foundational competencies apply	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<ul style="list-style-type: none"> a) physical needs b) developmental needs c) cognitive needs d) psychosocial needs 			
<ul style="list-style-type: none"> ▪ demonstrates a focused assessment on each of the following: <ul style="list-style-type: none"> a) neurological b) eyes, ears, nose and throat c) respiratory d) cardiovascular and circulatory e) gastrointestinal f) genitourinary and reproductive g) musculoskeletal h) integumentary i) psychosocial 			
<ul style="list-style-type: none"> ▪ differentiates between normal from abnormal findings for the individual patient 			
<ul style="list-style-type: none"> ▪ performs a focused assessment of patient based on abnormal findings 			
<ul style="list-style-type: none"> ▪ integrates findings within a holistic nursing framework 			
<ul style="list-style-type: none"> ▪ initiates appropriate interventions to support patient and family based on assessed findings 			
<ul style="list-style-type: none"> ▪ communicates relevant data to appropriate health care team member(s) 			
<ul style="list-style-type: none"> ▪ documents relevant data on triage record according to organizational guidelines 			
Instructional Strategies:			
Method of Evaluation:			

Comments:

<p>CHN Competency-based Assessment Tool Paediatric Emergency Nurse</p> <p>Triage Category Assignment</p>
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<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Incorporates nursing knowledge, skill and judgment when assigning a triage category to the paediatric emergency patient</i>			
Performance Criteria:			
<ul style="list-style-type: none"> ▪ states the rationale for paediatric triage 			
<ul style="list-style-type: none"> ▪ states the goals of paediatric triage 			
<ul style="list-style-type: none"> ▪ describes clinical indicators for the following categories: <ul style="list-style-type: none"> a) Level I - Resuscitation b) Level II - Emergent c) Level III – Urgent d) Level IV – Less Urgent e) Level V – Non Urgent 			
<ul style="list-style-type: none"> ▪ states time criteria for assessment and reassessment for both nursing and physician for the following categories: <ul style="list-style-type: none"> a) Level I – Resuscitation b) Level II – Emergent c) Level III – Urgent d) Level IV – Less Urgent e) Level V – Non Urgent 			
<ul style="list-style-type: none"> ▪ identifies 4 patient conditions for each of the following: <ul style="list-style-type: none"> a) Level I – Resuscitation b) Level II – Emergent 			

c) Level III – Urgent d) Level IV – Less Urgent e) Level V – Non Urgent			
<ul style="list-style-type: none"> ▪ states organizational guidelines and triage processes 			
Instructional Strategies: 			
Method of Evaluation: 			

Comments:

**Child Health Network Competency Based Assessment Tool
Paediatric Emergency Nurse**

Provision of Family-Centred Care

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Incorporates nursing knowledge, skill and judgment when providing family centred care.</i>			
Performance Criteria:			
▪ states the importance of recognizing one's own values, beliefs, and attitudes towards 'family'			
▪ states the importance of recognizing the patient and family's cultural beliefs, attitudes, values and practices that may influence the plan of care			
▪ states the organizational philosophy of family centred care			
▪ assesses the family's cultural beliefs, attitudes, values and practices that may influence the plan of care			
▪ identifies the patient's and family's individual needs			
▪ assesses the resources that are available to support the patient and family's needs			
▪ develops the plan of care in collaboration with the patient, family and health care team			
▪ implements the plan of care to meet the needs of patient and family			
▪ evaluates the effectiveness of the plan of care			
▪ modifies the plan of care in collaboration with the patient, family and health care team			

Instructional Strategies:

Method of Evaluation:

Comments:

**CHN Competency-based Assessment Tool
Paediatric Emergency Nurse**

C u l t u r a l A w a r e n e s s

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initial)
<i>Incorporates nursing knowledge, skill and judgment when providing care which is sensitive to the cultural uniqueness of the patient and family</i>			
Performance Criteria:			
▪ states the importance of recognizing one's values, beliefs, and attitudes and how these influence the therapeutic relationship			
▪ states the importance of developing one's cultural knowledge			
▪ states the importance of integrating cultural awareness and cultural knowledge in order to meet the patient and family needs			
▪ assesses patient and family's individual cultural beliefs and practices			
▪ identifies the cultural beliefs and practices that influence the plan of care			
▪ integrates relevant findings into plan of care in collaboration with the patient and family			
▪ accesses resources required to support the patient and family's expressed cultural needs			
▪ implements plan of care that respects patient and family's values and expectations			
▪ evaluates the effectiveness of nursing care			
▪ states the knowledge obtained as a result of each therapeutic encounter			

Instructional Strategies:
Method of Evaluation:

Comments:

<p>CHN Competency-based Assessment Tool Paediatric Emergency Nurse</p> <p>Developmental Approaches</p>
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<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Incorporates nursing knowledge, skill and judgment when caring for the paediatric patient at different stages of growth and development</i>			
Performance Criteria:			
<ul style="list-style-type: none"> ▪ states paediatric differences related to: <ul style="list-style-type: none"> a) anatomy and physiology b) gross and fine motor skills c) psychosocial skills d) cognitive levels e) language skills 			
<ul style="list-style-type: none"> ▪ identifies the growth and developmental stage of the patient 			
<ul style="list-style-type: none"> ▪ integrates developmental knowledge into nursing assessment 			
<ul style="list-style-type: none"> ▪ integrates developmental assessment into nursing plan of care 			
<ul style="list-style-type: none"> ▪ demonstrates developmental approach when caring for: <ul style="list-style-type: none"> a) neonate b) infant 			

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<ul style="list-style-type: none"> c) toddler d) preschooler e) school age f) early adolescent g) late adolescent h) adult 			
<ul style="list-style-type: none"> ▪ demonstrates use of age appropriate distraction techniques when caring for: <ul style="list-style-type: none"> a) neonate b) infant c) toddler d) preschooler e) school age f) early adolescent g) late adolescent h) adult 			
<ul style="list-style-type: none"> ▪ evaluates the effectiveness of nursing care 			
<p>Instructional Strategies: General Orientation Session Paediatric Text Book of choice Computer Assisted Instruction Material (if available) Role modeling Child Life Workers</p>			
<p>Method of Evaluation: Demonstration and return demonstration with supervision Written documentation Obtain feedback from patient and family</p>			

Comments:

<p>CHN Competency-based Assessment Tool Paediatric Emergency Nurse</p> <p>Child Abuse and Welfare</p>

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Incorporates nursing knowledge, skill and judgment caring for the child with suspected child abuse and welfare issues</i>			
Performance Criteria:			
<ul style="list-style-type: none"> ▪ identifies the child at risk for maltreatment, neglect, and/or abuse 			
<ul style="list-style-type: none"> ▪ identifies indicators of the child who may be at risk for the following: <ul style="list-style-type: none"> a) physical abuse b) sexual abuse and assault c) emotional abuse d) neglect 			
<ul style="list-style-type: none"> ▪ states the legal implication for reporting any of the above 			
<ul style="list-style-type: none"> ▪ states the importance of preserving evidence during examination and sample collection 			
<ul style="list-style-type: none"> ▪ demonstrates age appropriate history taking and physical assessment for each of the following: <ul style="list-style-type: none"> a) physical abuse b) sexual abuse and assault 			

c) emotional abuse d) neglect			
▪ states organizational guidelines related to child welfare and abuse			
▪ states legal implications for documentation of findings			
▪ documents according to organizational guidelines			
▪ demonstrates a non-judgmental approach to patient, family and/or caregiver			
▪ collaborates with all members of the multidisciplinary team			
Instructional Strategies:			
Method of Evaluation:			

Comments:

**CHN Competency-based Assessment Tool
Paediatric Emergency Nurse**

C r i s i s M a n a g e m e n t

<i>All foundational competencies apply</i>	Self-Assessment (C, N/C)	Practiced / Reviewed (Date)	Demonstrates Competency (Date, Initials)
<i>Incorporates nursing knowledge, skill, and judgment to effectively manage a crisis situation</i>			
Performance Criteria:			
▪ identifies the principles of stress management			
▪ states coping strategies			
▪ states the importance of anticipating and identifying rapidly changing situations			
▪ states factors which influence coping mechanisms of patients and family			
▪ states the effects of change on the patient's and family's physical and psychological health and safety			
▪ identifies nursing intervention & strategies that may prevent further escalation of crisis situation			
▪ recognizes patient and/or family in crisis			
▪ assesses the contributing factors to the crisis situation			
▪ notifies appropriate personnel when a crisis situation requires further staff support			
▪ implements a plan of care which attempts to stabilize the patient's and/or family's physical and psychological safety			
▪ minimizes stressors that may be contributing to escalation in a crisis situation			
▪ implements plan of care to meet organizational Policies and Procedures for specific emergency situations			
▪ integrates documentation according to organizational guidelines			
▪ evaluates the effectiveness of the crisis intervention			
▪ states the rationale for a debriefing process			

Instructional Strategies:

Method of Evaluation:

Comments: