



National HIV Nurses Association

National HIV Nursing Competencies

October 2013

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Preface

The National HIV Nursing Competencies were developed through a wide consultation process and were launched at the 9th Annual Conference of the National HIV Nurses Association on 28 June 2007 in London. The preparation and original production of the competencies was funded through a grant from the Department of Health. The Executive Committee Competency Working Party continually evaluates the document and this current version was comprehensively updated in spring 2013.

The Competencies have been re-launched as an e-book and are also available as a Word® document with an assessment framework to enable you to easily copy and paste a competency document appropriate to your job and individual development plan.

The new document includes competencies for untrained staff working in Health Care Assistant-type roles. For community-based nurses we have incorporated competencies throughout all sections which are appropriate for the community setting, and which can be pulled out to adapt a personalised framework.

We appreciate your support in continuing to implement these National HIV Nursing Competencies locally across your clinical areas where HIV patients are cared for.

This tool is intended to:

- Assess and guide nursing competence in the field of HIV care in the UK, and be utilised in the mapping and planning of HIV nursing careers.
- Indicate the specific knowledge and skills required by individual nurses caring for people living with HIV/AIDS, thereby improving equity and quality of patient care.
- Complement and be used alongside national and/or local skills and performance appraisal frameworks.
- Be used at national network, service and individual levels.

The structure of the competencies is as follows:

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Nathaniel Ault

Chair, NHVNA

Introduction from First Edition of Competencies

Aims and objectives

Purpose

The development of the *NHIVNA National HIV Nursing Competencies* has been an incremental project that has taken place over the past 3 years with considerable consultation with nurses working in the HIV field. The document is designed as a tool to assess and guide nursing competence in caring for people with HIV/AIDS in the UK and can be utilised for mapping skills development for career progression.

Scope of the competency framework

The competency framework is aimed at trained nurses working with people with HIV/AIDS in the UK irrespective of size of HIV cohort or geographical location. The revised competency document now includes healthcare assistant/support worker competencies. Since the first edition, the roles of healthcare assistants has expanded within HIV services and therefore competencies are now within the scope of this document.

Background

The Royal College of Nursing's *Sexual Health Competencies*¹ were launched in 2004, and were the first national competency framework in the field of sexual health nursing. This framework provided a clear career outline for sexual health nurses and assisted in validating the knowledge and skills required to develop sexual health nursing roles within the context of the *National Strategy for Sexual Health and HIV*².

Prior to this in 2003, and with specific reference to HIV, the Medical Foundation for AIDS and Sexual Health (MedFASH) published the *Recommended Standards for NHS HIV Services*, which features 12 standards based on a patient journey³. The underpinning principle of this document is the delivery of these standards through managed service networks as advised in the *Implementation Action Plan for the National Strategy for Sexual Health and HIV*⁴. More recently, *Standards for HIV Clinical Care* has specified the structure of HIV managed service networks by classifying how routine and complex HIV care should be provided⁵.

The essence of these benchmark documents has provided the foundation for the *National HIV Nursing Competencies* and the basis for defining the skills and knowledge to deliver viable nursing care to HIV patients at different points across service networks.

The publication of the *Knowledge and Skills Framework (KSF)*⁶ has enabled the *National HIV Nursing Competencies* to develop within a national competency structure that will hopefully ease the integration of these specialist competencies into appraisal and performance development. The future of nursing in the UK, as outlined in the Chief Nursing Officers' paper on *Modernising Nursing Careers*⁷, has set the scene for a more flexible, influential and contemporary nursing workforce. It is anticipated that the appropriate application of the *National HIV Nursing Competencies* will make a valid contribution to the delivery of key health policy goals.

References

1. Royal College of Nursing. *Sexual Health Competencies: An Integrated Career and Competency Framework for Sexual and Reproductive Health Nursing*. London, Royal College of Nursing, 2004.
2. Department of Health. *The National Strategy for Sexual Health and HIV*. London, Department of Health, 2001.
3. Medical Foundation for AIDS and Sexual Health. *Recommended Standards for NHS HIV Services*. London, Medical Foundation for AIDS and Sexual Health, 2003.
4. Department of Health. *The National Strategy for Sexual Health and HIV Implementation Action Plan*. London, Department of Health, 2002.
5. British HIV Association, Royal College of Physicians, British Association for Sexual Health and HIV, British Infection Society. *Standards for HIV Clinical Care*. London, BHIVA, 2007.
6. Department of Health. *The NHS Knowledge and Skills Framework (NHS KSF) and the Development Review Process*. London, Department of Health, 2004.
7. Department of Health. *Modernising Nursing Careers, Setting the Direction*. London, Department of Health, 2006.

Using the HIV nursing competencies framework

The *National HIV Nursing Competencies* are designed for use alongside the Knowledge and Skills Framework (KSF)⁶. These competencies can either be incorporated into an individual KSF post outline or can be used as an addendum to a more generic KSF outline. For areas where the KSF is not in use, the competencies can be used as a stand-alone document for all nurses who look after HIV patients whether as part of their job or in an HIV specialist capacity (Table 1). The competencies found in this document are intended as specialist HIV nursing competencies that will complement other competency frameworks such as the Royal College of Nursing's Core Competencies⁸ and the National Occupational Standards⁹.

Table 1: Suggested use of the HIV nursing competencies

- At national and network level:
 - Provision of national standards for HIV nursing
 - Support recruitment and career pathways
 - Improve quality and equity of patient care
 - Inform educational programmes
 - Inform sector-wide commissioning
- Service level:
 - Enable standardisation of job descriptions
 - Inform KSF and performance review
 - Ensure quality of care delivery
 - Inform nurse-led services and modernisation
- Individual level:
 - Provide career structure
 - Personal and professional development
 - Enhance retention of staff
 - Provide recognition of individual specialist skills

Assessing competencies

The principle for assessing competent practice is to adopt a multifaceted approach that can range from direct observation of practice, through reflective diaries to implementing change in practice. Since the introduction of KSF many nurses will be familiar with the requirement to provide evidence of competence as part of their personal development plan. There is, at present, no national tool for assessing competence in relation to HIV nursing; however, we would encourage nurse assessors to develop their own assessment frameworks based on the HIV nursing competencies.

References

8. The Royal College of Nursing's Core Competencies can be found at: www.rcn.org.uk/resources/corecompetences/
9. For further information about the National Occupational Standards, see: www.topssengland.net/

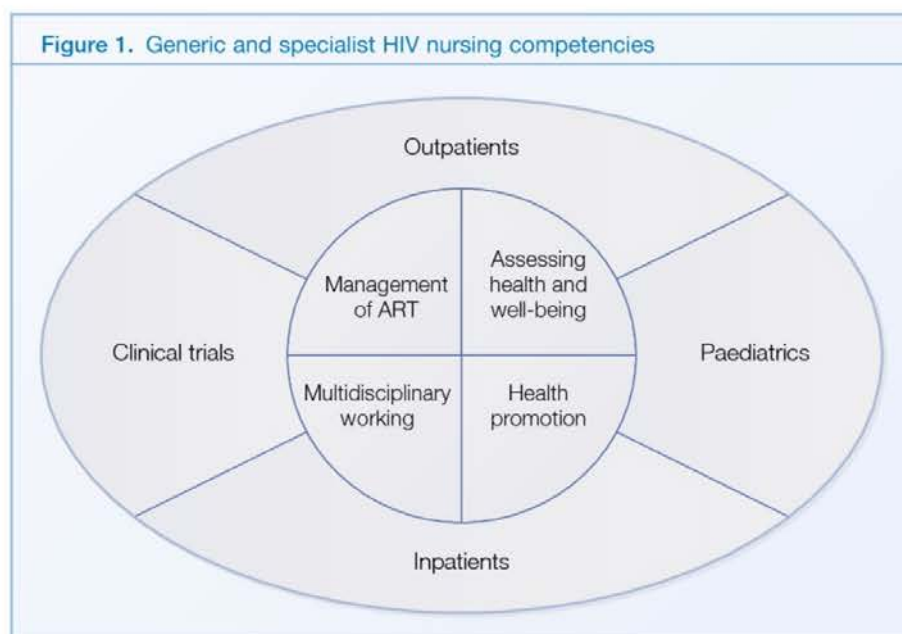
Structure of the competencies

The *National HIV Nursing Competencies* comprise four generic competencies and four specialist competencies (see Figure 1). The generic HIV competencies are applicable to all nurses working in HIV care irrespective of where they are clinically based and are as follows:

1. Assessing health and well-being
2. Management of antiretroviral therapy
3. Health promotion
4. Working in partnerships including clinical networks and multidisciplinary working

The specialist competencies apply to nurses working in HIV outpatient clinics, HIV inpatient units, clinical trial centres or HIV paediatric units, or nurses whose role involves looking after patients in any of these areas as part of their clinical caseload and are as follows:

5. HIV outpatients
 - Triage and minor illness support
 - Management and support of well/stable patients
 - Management and support of patients with co-infection and co-morbidity
 - Support and management of people taking post-exposure prophylaxis
6. HIV inpatients
7. Clinical trials
8. Paediatric care



Competency levels

The levels of competence defined in the *National HIV Nursing Competencies* reflect the nursing career structure described in the Department of Health document, *Making a Difference*¹⁰. They are also informed by the level descriptors within the NHS KSF⁶.

Structure of the competencies

The competency levels relate not only to job banding and job specification, but also to the level of specialist HIV care that is required within a nurse's role. For example, a district nurse who works at level 3 with her/his general caseload may only require level 2 competence to provide care to a small caseload of HIV patients in the community. Whereas, an HIV clinical nurse specialist may function at level 4 in expert practice with antiretroviral care, but at level 3 in setting up pathways for antiretroviral care across a managed service network.

The key to utilising these competencies effectively is to interpret and adapt them to local circumstances. For example, some services may specify that nurses need to be competent in HIV triage skills before undertaking nurse-led clinics.

Level 2: Registered practitioner

This level defines the entry point for registered nurses working in a specialist HIV area. However, it also applies to registered nurses at any grade working with HIV patients as part of a non-specialist role or in a non-HIV specialist area.

Level 3: Senior registered practitioner

Level 3 competency applies to experienced HIV practitioners working in a specialist HIV role such as team leader, charge nurse or clinical nurse specialist.

Level 4: Consultant practitioner

This level of practice reflects the role of expert HIV practitioners working in advanced practice roles such as nurse consultant, senior clinical practitioner or senior nurse manager.

Scope of practice

As with all nursing practice, any self-assessment of competence must include recognition of limitations and skills in keeping with the Nursing and Midwifery Council guidelines¹¹.

References

10. Department of Health. *Making a Difference: Strengthening the Nursing, Midwifery and Health Visiting Contribution to Health and Healthcare*. London, Department of Health, 1999.
11. Nursing and Midwifery Council (NMC). *The NMC Code of Professional Conduct: Standards for Conduct, Performance and Ethics*. London, Nursing and Midwifery Council, 2004. See: www.nmc-uk.org/

G1 Assessing health and well-being

Health Care Assistant Competencies

- Has basic knowledge and understanding of HIV, signs and symptoms of infection and its impact on health and well-being.
- Is aware of the impact of stigma on people living with HIV and the relevant statutory and voluntary agencies that provide social care and support for patients with HIV infection.
- Demonstrates an awareness and understanding of the psychological and emotional impact of living with HIV and how that may vary for different individuals.
- Has an understanding of the impact of health beliefs on the self-management of HIV, including adherence to medication and onward transmission risk etc.
- Is aware of the differing spiritual needs of patients with HIV and ensures an individual's beliefs and wishes are respected.

Nurse Competencies

For all nurses looking after HIV patients irrespective of where they are clinically based.

	LEVEL 2	LEVEL 3	LEVEL 4
(a) Physical	<p>Contributes to assessing the health and well-being needs of an HIV-positive patient and plans how to meet those needs</p> <p>Demonstrates a knowledge and understanding of, and can identify the major presenting signs and symptoms of acute and chronic HIV-related conditions and risks of illness associated with relevant CD4 counts</p> <p>Accesses evidence-based local/national clinical guidelines on the care and management of HIV-related conditions, co-infections and co-morbidities [12–14]</p> <p>Demonstrates an understanding of the assessment of a patient presenting with palliative care needs</p> <p>Is aware of the assessment needs of a patient who requires terminal care and the evidence-based tools available</p> <p>Identifies appropriate methods, and equipment needed to carry out assessment and prepares appropriately, taking into consideration any risk. Completes the nursing assessment of the patient's physical well-being and reports relevant findings to the care team</p>	<p>Assesses health and well-being needs of an HIV-positive patient and develops, monitors and reviews plans of care to meet specific needs</p> <p>Obtains clear and concise information on the presenting physical signs and symptoms of HIV-related conditions and co-morbidities</p> <p>Recognises signs and symptoms of complex and unstable health problems requiring review by senior colleagues</p> <p>Makes a comprehensive assessment of a patient's palliative care needs</p> <p>Fully assesses the physical needs of a patient who requires terminal care</p> <p>Interprets all clinical information available including that documented by colleagues</p>	<p>Assesses complex health and well-being needs of HIV-positive patients and develops, monitors and reviews plans of care to meet those needs</p> <p>Works autonomously to obtain a clinical history from identified patients with complex physical needs as defined by local policy/national guidelines</p> <p>Provides advice and support to colleagues and students in the use of different methods of assessing an HIV-positive patient's health and well-being.</p> <p>Works with education providers to meet staff education needs for patient assessment in HIV care</p> <p>Initiates and contributes to research partnerships to develop the patient assessment evidence base in HIV</p>

G1 Assessing health and well-being

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Records and reports new information related to clinical assessment in a timely manner</p> <p>Participates in the development of a plan of care to meet the identified needs. Facilitates patient participation in the assessment process</p> <p>Participates in the assessment of clinically stable patients on and off therapy as part of routine follow-up care within the outpatient or community setting</p>	<p>Develops a plan of care, working with the patient, and ensures ongoing monitoring and evaluation of the care within the team</p> <p>Assesses a caseload of patients with non-complex care needs, on or off ART, on an ongoing basis</p>	<p>Develops an appropriate plan of care to meet complex needs and implements a monitoring and evaluation process</p> <p>Works autonomously, in partnership with the MDT, to assess a caseload of clinically stable patients with complex care needs, on or off ART, on an ongoing basis</p>
(b) Social	<p>Completes an accurate nursing assessment of the social care needs of a patient with HIV</p> <p>Is aware of the relevant agencies, both statutory and voluntary, providing social care and support for patients with HIV</p> <p>Understands the importance of sensitively assessing the family and social support network for individual patients</p> <p>Understands the potential impact of drug and alcohol use and where to refer patients should this be identified as a problem</p> <p>Understands relevant diversities in the social, cultural and sexual lifestyles of patients, and the potential impact on health and well-being</p>	<p>Comprehensively assesses social care needs and develops a care plan to meet the needs identified, in partnership with the patient</p> <p>Assists and enables the patient to access the appropriate social care package and makes the relevant referral to the support agencies</p> <p>Ensures the social care provision is coordinated, monitored and evaluated</p>	<p>Identifies complex social care needs and coordinates a package of care</p> <p>Acts as a point of referral for patients with more complex social care needs</p> <p>Coordinates the delivery of care plans, feeding in relevant information to support wider service planning</p> <p>Improves coordination between health and social care provision to enhance joint assessment of patients</p> <p>Works within the organisation and across networks to identify longer-term planning around social needs which reflects the diversity of the patient caseload</p>
(c) Psychological/emotional	<p>Demonstrates an awareness and understanding of the psychological impact of:</p> <ul style="list-style-type: none"> • an HIV diagnosis • starting or switching therapy • an acute illness • diagnosis of a chronic condition • diagnosis of a co-morbidity • reaching a terminal stage in disease progression [16] <p>Demonstrates an understanding of the impact of health beliefs on the self-management of HIV, including adherence to medication</p> <p>Provides an environment and opportunities that enable patients with HIV to express their emotional and psychological needs</p> <p>Recognises own limitations and seeks advice from senior colleagues and refers appropriately</p>	<p>Assesses psychological and emotional barriers to effective health maintenance, especially at vulnerable times, from new diagnosis and throughout disease progression</p> <p>Liaises with colleagues and refers patients for psychological assessment and support where appropriate</p>	<p>Works autonomously to comprehensively assess complex psychological and emotional needs from new diagnosis and throughout disease progression</p> <p>Develops service links and multidisciplinary working with psychological/psychiatric services to enhance case-by-case assessment</p>

G1 Assessing health and well-being

	LEVEL 2	LEVEL 3	LEVEL 4
(d) Spiritual	<p>Is aware of the requirement to assess capacity to make decisions within the terms of the Mental Capacity Act [17]</p> <p>Understands the referral process to local statutory and voluntary professionals and agencies that provide psychological support and refers within the limits of local protocol</p> <p>Demonstrates an understanding of differing spiritual needs of patients with HIV and their families and friends</p> <p>Ensures an individual patient's beliefs are respected and their wishes understood at all times throughout the assessment process</p> <p>Completes a nursing assessment of these needs promptly and appropriately</p> <p>Refers patient to relevant spiritual support as appropriate</p>	<p>Assesses a patient's spiritual needs and incorporates these into the plan of care</p> <p>Assesses the impact of spiritual beliefs that may impact on the health and well-being of the patient</p> <p>Ensures the assessment of spiritual needs and incorporates these, including those of a patient's significant others, where appropriate, and particularly regarding disclosure and in end-of-life care</p>	<p>Builds effective networks with faith-based and different cultural organisations where relevant</p>

References

- Nelson *et al.* British HIV Association and British Infection Association guidelines for the treatment of opportunistic infection in HIV-seropositive individuals 2011, *HIV Med* (2011), **12** (Suppl. 2), 1–5.
- Pozniak *et al.* British HIV Association guidelines for the treatment of TB/HIV coinfection 2011, *HIV Med* (2011), **12**, 517–524.
- Brook *et al.* British HIV Association guidelines for the management of coinfection with HIV-1 and hepatitis B or C virus 2010, *HIV Med* (2010), **11**, 1–30
- Note: this reference has been removed.
- British Psychological Society, British HIV Association Et Medical Foundation for AIDS Et Sexual Health (2011) Standards for psychological support for adults living with HIV. See: www.medfash.org
- Mental Capacity Act 2005. Elizabeth II. Chapter 9. London, The Stationery Office. See: www.opsi.gov.uk

G2 Management of antiretroviral therapy (ART)

Health Care Assistant Competencies

- Demonstrates awareness of the rationale for starting antiretroviral therapy and the importance of adherence to prescribed regimens.
- Is aware of some of the common side-effects of ART and the potential impact on a patient's well-being.
- Demonstrates an awareness of potential problems with adherence and reports appropriately to the nurse in charge if there are any difficulties with ART administration.
- Demonstrates awareness of commonly used prophylaxis medications used for the prevention of opportunistic diseases and common tests and investigations used in the early detection of HIV-related complications.
- Is aware of the use of Advanced Directives and their role in HIV care.

Nurse Competencies

For all nurses looking after HIV patients irrespective of where they are clinically based.

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Contributes to care planning and delivery and monitoring of ART-related interventions</p> <p>Demonstrates an understanding of how ART works and is administered, and of relevant local and national guidelines and policies</p> <p>Demonstrates awareness of the risk of drug interactions and where to access advice on this</p> <p>Demonstrates an awareness of ART-related tests and investigations, (*according to national and local protocols)</p> <p>Demonstrates how to obtain help and advice on HIV treatments and related issues. Able to explain the basics of ART treatment to patients in a relevant manner</p> <p>Recognises situations which may be detrimental to an individual's ability to take treatment as prescribed and alerts the MDT to this</p> <p>Facilitates correct administration of ART in both specialist and non-specialist settings (*)</p>	<p>Plans and delivers care and evaluates ART-related interventions</p> <p>Demonstrates an in-depth and up-to-date knowledge of ART, including commonly used combinations, mechanisms of different classes of antiretroviral drugs and drug resistance</p> <p>Demonstrates knowledge of key drug interactions</p> <p>Demonstrates ability to order and interpret appropriate tests for surrogate markers, ART-related toxicities and routine monitoring tests (*)</p> <p>Assesses patient information needs and develops an appropriate plan of care to address these, with a view to facilitating self management within the patient's ability</p> <p>Describes the nurse's role in assessing and promoting adherence and is proactive in delivering this aspect of care</p> <p>Correctly administers and/or advises patients and other MDT members on the administration of ART</p> <p>Anticipates any threats to ART administration, intervening to facilitate optimal adherence</p>	<p>Establishes systems to plan and deliver care, and evaluate ART where complex clinical situations exist</p> <p>Demonstrates advanced expertise in managing patients on ART (in line with local policies and national policies [18–21] and with an holistic, patient-centred approach</p> <p>Demonstrates in-depth knowledge of drug interactions, advises patients accordingly, in discussion with MDT</p> <p>Establishes and leads clinics for monitoring and supporting clinically stable patients on therapy, working both autonomously and in partnership with the MDT as appropriate</p> <p>Able to assess complex adherence behaviours and apply in-depth knowledge and evidence-based strategies to facilitate behaviour change</p> <p>Establishes and monitors systems to ensure correct ART administration for patients across disciplines, services and settings</p> <p>Establishes and evaluates systems for adherence assessment and support, in conjunction with MDT</p>

G2 Management of antiretroviral therapy (ART)

	LEVEL 2	LEVEL 3	LEVEL 4
	Shows ability in performing basic assessment of individuals' treatment adherence (*)	Assesses individuals' adherence in-depth using skilled questioning	Establishes clear patient referral pathways for further adherence support, to allied health professionals, relevant departments and community-based organisations
	Demonstrates an understanding of the physical and psychological needs of patients presenting with ART-related side-effects and refers patients on to MDT as appropriate	Able to assess the physical and psychological needs of patients presenting with ART side-effects and formulate a plan of care to address those needs	Ensures appropriate pathways are in place for referral to allied specialists with regard to ART side-effects
	Demonstrates the ability to recognise the most commonly occurring side-effects of ART	Aims to maximise prevention of side-effects through proactive assessment and monitoring, (where possible and appropriate, incorporating this into nurse-led clinics and patient group directions)	Establishes systems for proactive assessment, monitoring and treatment of side-effects (as listed) within nurse-led services as agreed locally
		Refers for, and/or administers therapeutic interventions where competent (*)	Establishes systems for prevention and treatment of side-effects where possible, and within complex situations where co-infections and co-morbidities exist
	Demonstrates awareness of current clinical trials in ART and how patients can access these within a service network	Supports patients who are considering clinical trials and acts as an advocate, liaising with clinical trial teams as required	Ensures systems, policies and procedures are in place to deliver therapeutic interventions under non-medical prescribing/PGD or other appropriate guidelines where appropriate
			Refers interested and suitable patients to the clinical trial team

Key

*As per local guidelines/policy

References

- Williams *et al.* British HIV Association guidelines for the treatment of HIV-1-positive adults with antiretroviral therapy 2012, *HIV Med* (2012), **13** (Suppl. 2), 1–8.
- Asboe *et al.* British HIV Association guidelines for the routine investigation and monitoring of adult HIV-1-infected individuals 2011, *HIV Med* (2012), **13**, 1–44.
- Gilleece *et al.* British HIV Association guidelines for antiretroviral treatment of HIV-2-positive individuals 2010, *HIV Med* (2010), **11**, 611–619
- British HIV Association Standards of care for people living with HIV in 2013. See: www.bhiva.org/standards-of-care-2013.aspx

G3 Health promotion

Health Care Assistant Competencies

- Demonstrates an awareness of the importance of maintaining a healthy lifestyle for HIV patients.
- Demonstrates an awareness of HIV/STI transmission risk and the resources available for prevention, e.g. free condoms, leaflets, post-exposure prophylaxis.
- Demonstrates awareness of issues around confidentiality and disclosure of HIV status to sexual partners, post-exposure prophylaxis and the potential criminalisation of HIV transmission.
- Demonstrates an awareness of the existence of external support organisations such as Living Well programmes, and the voluntary sector.
- Is aware how to access up-to-date and relevant information on HIV and to direct patients to such resources, including those of support services.

Nurse Competencies

For all nurses looking after HIV patients, irrespective of where they are clinically based.

	LEVEL 2	LEVEL 3	LEVEL 4
Information and education	<p>Plans, develops and implements approaches to promote health and well-being</p> <p>Demonstrates knowledge of the transmission dynamics of HIV</p> <p>Demonstrates an understanding of maintaining a healthy lifestyle and how this relates to HIV</p> <p>Accesses up-to-date information and clinical guidelines for the care and management of HIV</p> <p>Demonstrates knowledge of local referral pathways to specialist HIV services, e.g. counselling, community care, palliative care and outpatient services</p> <p>Recognises individual needs in relation to how health promotion, information and education is provided to clients, partners, family and friends</p> <p>Demonstrates an awareness of own role in supporting the learning environment (for patients/staff/carers) in the workplace</p> <p>Reflects on, and evaluates, the effectiveness of own health promotion activity</p> <p>Makes appropriate referrals when the limits of own health promotion knowledge are reached</p>	<p>Plans, develops and implements programmes to promote health and well-being and prevent adverse effects on health and well-being</p> <p>Possesses an in-depth knowledge of levels of risk for onwards transmission and multiple methods of prevention including Treatment as Prevention, PrEP and PEP</p> <p>Identifies health promotion needs for groups of patients. Develops and reviews strategies to meet these needs</p> <p>Involves people with HIV in developing health promotion initiatives, written information and service development</p> <p>Provides information, education and prevention advice to individuals and/or groups according to local need and defined role</p>	<p>Promotes health and well-being and prevents adverse effects on health and well-being by contributing to the development, implementation and evaluation of related guidance and policies</p> <p>Evaluates health promotion activity/strategies across a service/clinical network</p> <p>Undertakes training needs analysis and plans interventions to enable nursing staff across services to implement health promotion strategies</p>

G3 Health promotion

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Demonstrates an awareness of the health screening needs of people with HIV and ensures patients are aware of the need and rationale for health screening</p>	<p>Develops strategies to meet the health screening needs of individuals and/or groups according to local need and defined role</p>	<p>Develops strategies to meet the health screening needs across a service or clinical network</p>
	<p>Demonstrates an awareness of the sexual health and reproductive needs of people with HIV and understands the individual's right to sexual and reproductive fulfilment and the relevant guidelines</p>	<p>Demonstrates an understanding of complexity of issues relating to the sexual health needs of people living with HIV (a*) and is able to articulate them to the rest of the MDT as appropriate</p>	<p>Develops, implements and monitors pathways, protocols and referral routes that allow access to the assessment and management of patients presenting with sexual health issues both locally and across a clinical network. To include service user representation, if appropriate</p>
	<p>Presents a non-judgemental attitude to issues around sex and patients' sexual and reproductive health</p>	<p>Demonstrates an understanding of the national and local policies and guidelines related to the management of sexually transmitted infections and the sexual health needs of HIV-positive adults</p>	<p>Ensures the incorporation of sexual health issues into the routine provision of HIV nursing services</p>
		<p>Proactively discusses sexual health with patients and encourages regular health checks/screening as part of their self management</p>	
		<p>Undertakes sexual health risk assessment as part of routine assessment of patients with HIV</p>	
Prevention and risk reduction support	<p>Assists in the assessment and treatment of the sexual health needs of patients living with HIV</p>	<p>Describes treatment options for sexually transmitted infections in HIV according to national protocols and guidelines</p>	
	<p>Undertakes nursing assessment in relation to maintaining a healthy lifestyle</p>	<p>Using identified health promotion techniques, enables patients to make informed healthy lifestyle choices relating to their sexual health and well-being (e.g. [22–24])</p>	<p>Works with key services and workers to provide appropriate risk reduction services across statutory and non-statutory services</p>
	<p>Demonstrates awareness of issues around disclosure of HIV status to sexual partners, post-exposure prophylaxis and the potential criminalisation of transmission</p>	<p>Undertakes detailed health-related risk assessment</p>	<p>Develops care pathways with other multidisciplinary teams to ensure that partner notification, issues of criminalisation and post exposure prophylaxis are managed across a service or HIV clinical network</p>
	<p>Utilises effective communication skills for the delivery of risk reduction messages and change behaviour patterns</p>	<p>Develops care plan and discusses self management and makes onward referrals based on the assessment</p>	
	<p>Refers individuals to appropriate healthcare workers for specific health promotion interventions and risk management</p>	<p>Discusses issues around disclosure of HIV status to sexual partners, post-exposure prophylaxis and the potential criminalisation of HIV transmission</p>	
	<p>Identifies psychosocial factors that may affect the ability of individuals to adopt/maintain a healthy lifestyle and reports findings to care team for further management and onward referral</p>	<p>Discusses individual attitudes, beliefs, motivations and perceptions towards behavioural changes to improve health</p>	
		<p>Uses recognised, evidence-based strategies for facilitating such discussions as appropriate and incorporates into care plan</p>	

G3 Health promotion

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Enables people to learn and develop skills with educational information</p> <p>Demonstrates an understanding of the communication, negotiation, assertiveness skills and coping strategies required for individuals to self-manage a long-term condition</p>		
Skills building	<p>Demonstrates an awareness of local referral pathways for individuals needing skills building support (e.g. [22,23,24,25])</p>	<p>Integrates individual behavioural, physical, social and environmental risk-modifying factors into health promotion activities</p> <p>Engages in one-to-one and group skills building training and uses evidence-based methods for encouraging behavioural change</p>	<p>Designs, implements and evaluates skills building programmes for chronic disease management across a service or clinical network</p>

*a) may include: cultural and belief issues; confidentiality; routine screening; women's and men's health issues; preconception advice; health promotion.

References

22. Living Well offers a wide range of health related services aimed at providing people with the skills they need to get the most out of life. www.livingwellcic.com (for London boroughs only).
23. www.myhiv.org.uk – online advice on self managing HIV.
24. www.aidsmap.com – Sharing information on HIV.
25. Clutterbuck *et al.* UK National Guidelines on Safer Sex Advice Clinical effectiveness Group BASHH and BHIVA July 2012.

G4 Working in partnerships including clinical networks and multidisciplinary working

Health Care Assistant Competencies

- Demonstrates an awareness of the local HIV specialists, and understands role of the MDT and their role within it.
- Acts as an advocate for the patient as required.
- Identifies own role as supporting the assessment of patients presenting as unwell or with deterioration in their condition.
- Demonstrates an awareness of common co-infections and co-morbidities and healthy lifestyle choices.
- Is aware of Post Exposure Prophylaxis provision and where to access this.

Nurse Competencies

For all nurses looking after HIV patients irrespective of where they are clinically based.

	LEVEL 2	LEVEL 3	LEVEL 4
(a) Multidisciplinary team (MDT) working and integrated health and social care at departmental and network levels	Contributes to multidisciplinary working	Coordinates joint social and healthcare working	Promotes and develops integrated social and healthcare working across boundaries
	Understands concept of working across a managed service network and has awareness of the relevant specialist policy documents [26]	Develops key working relationships across network with peers and key network personnel	Identifies nursing referral pathways across network for all aspects of HIV care provision
	Understands role of the MDT and own role within it	Coordinates MDT working and facilitates MDTs and case conferences	Leads and participates in the cultural changes required for joint working of health and social care
	Understands link between health and social care and the need to promote integrated care	Attends network or subgroup meetings to participate in identifying nursing pathways across sectors	Designs systems for patient access to HIV network to include service user groups where possible
	Identifies key HIV specialist personnel across network in relation to own area of work	Ensures discharge plans are based on patient need	Assists in the development of joint working arrangements for health and social care with links into voluntary agencies
	Contacts appropriate HIV specialist personnel for advice and information about clinical issues	Monitors referral pathways in practice and liaises directly with network leaders when care pathways are not seamless	Works with nursing leaders across network, the CRG for HIV and the National Commissioning Board to refine provision of shared services
	Ensures patient access to the relevant members of the MDT	Identifies those patients with increased needs who would benefit from joint care coordination and refers patients appropriately to the MDT and across services within the network. Monitors effectiveness and identifies gaps	Contributes to the development of a local multi-agency planning group to evaluate joint working, e.g. CCGs and individual General Practitioners [28]
	Aware of the national standards on integrated health and social care in HIV (e.g. [27, 29])	Takes a lead in information sharing and when to refer concerns further, e.g. in safeguarding vulnerable adults	Develops consistent nursing policies and standards across the network, including infection control and puts systems in place to audit and monitor these

G4 Working in partnerships including clinical networks and multidisciplinary working

	LEVEL 2	LEVEL 3	LEVEL 4
(b) Confidentiality	<p>Utilises referral pathways for inpatient and outpatient care in line with local care pathways</p> <p>Participates in MDT meetings and discussions of patient care</p> <p>Acts as an advocate for the patient as required</p> <p>Understands the issues around confidentiality affecting people with HIV and is able to apply this to practice across a number of clinical settings</p> <p>Recognises the impact of HIV stigma on the patient living with HIV</p> <p>Identifies when patient disclosure of HIV diagnosis can be difficult and engages the MDT to assist patients with disclosure issues</p> <p>Recognises difficulty in disclosing HIV diagnosis after death and acts as a patient advocate when this arises</p>	<p>Actively promotes appropriate practice with regard to confidentiality</p> <p>Proactively supports patients where stigma has an impact on their health and well-being</p> <p>Assists patients with disclosure of diagnosis where required and refer onto other appropriate services, e.g. counselling/mental health /psychological therapies [26]</p> <p>Ensures that the patient's wishes on disclosure of diagnosis after death are known to the MDT and that the patient's wishes are respected where possible</p>	<p>Participates in network steering group at a senior nursing level and informs sector-wide commissioning of nursing and other clinical services</p> <p>Establishes systems and guidelines to appropriately protect confidentiality across HIV services</p> <p>Works with the MDT across statutory and non-statutory services to tackle stigma and discrimination across the service network</p> <p>Works with the wider MDT to develop robust systems to protect patients confidentiality indefinitely</p>

References

26. British Psychological Society, British HIV Association & Medical Foundation for AIDS & Sexual Health (2011) Standards for psychological support for adults living with HIV. See: www.medfash.org
27. National Health Service Act 2006: Elizabeth 11. Chapter 41. London, The Stationary Office. See also: www.medfash.org.uk
28. HIV in Primary Care – www.medfash.org.uk
29. British HIV Association Standards of care for people living with HIV in 2013. See: www.bhiva.org/standards-of-care-2013.aspx

S1 HIV Outpatients

	LEVEL 2	LEVEL 3	LEVEL 4
Triage and minor illness support and management	<p>Contributes to the triage and assessment of patients presenting as unwell</p> <p>Understands own role within the assessment and triage of patients presenting as unwell</p> <p>Identifies signs and symptoms of HIV or medication-related conditions and understands the triage priority system</p> <p>Conducts a nursing assessment and reports findings to the appropriate senior team member in a timely fashion</p> <p>Is able to discuss the well-being, needs and wishes of the patient and potential treatment options</p> <p>Maintains appropriate monitoring of patients and reports significant changes</p>	<p>Triages and assesses minor illness and delivers treatment plans according to local policy</p> <p>Understands own role within the overall assessment of unwell patients through telephone triage or person-to-person assessment</p> <p>Assesses the urgency of the presenting problems including medical emergencies: HIV or medication related, and refers appropriately</p> <p>Evaluates and records assessment findings as per protocol</p>	<p>Establishes systems for the triage and assessment of minor illness where there are complex health needs and autonomously develops and evaluates treatment plans</p> <p>Develops and implements systems and pathways for nurse-led assessment and management of patients presenting with minor illness</p> <p>Demonstrates advanced knowledge of, and advises on, the complex issues of HIV triage</p> <p>Carries out a comprehensive physical assessment of unwell patients in line with evidence-based practice, protocols, policies and legislation,</p> <p>Orders relevant investigations; interprets results and monitors individuals during the assessment</p> <p>Makes a differential diagnosis and explains outcomes to the patient</p> <p>Monitors and evaluates the implementation of treatment plans and makes appropriate changes</p>

	LEVEL 2	LEVEL 3	LEVEL 4
Management and support of clinically stable patients on or off therapy	<p>Contributes to the management of clinically stable patients</p> <p>Describes own role in the management of clinically stable patients</p> <p>Understands the definition of stable patient</p> <p>Advise patients of access to the nurse-led clinics where appropriate</p> <p>Is aware of the required routine blood test and investigations for stable patients</p>	<p>Manages and supports own caseload of clinically stable patients</p> <p>Understands own role in the provision of stable patient clinics and when to refer to other members of the MDT</p> <p>Identifies and implements essential aspects of managing stable patients, such as adherence, toxicity management, social, psychological and sexual health</p> <p>Interprets and explains HIV surrogate markers and routine test results to the patient</p>	<p>Establishes systems for the nurse-led management of clinically stable patients and manages and supports own caseload of stable HIV patients with other complex health needs</p> <p>Develops and audits pathways incorporating nurse-led stable patient clinics</p> <p>Manages and prescribes for own caseload of stable patients</p> <p>Demonstrates skills in relation to physical examination, including history taking, investigation ordering and interpretation</p>

S1 HIV Outpatients

	LEVEL 2	LEVEL 3	LEVEL 4
	Understands the needs of patients living with a long term condition and the National Service Framework for Long-term Conditions [12–14]	Uses supervision effectively in managing own caseload of stable/well patients	<p>Able to interpret investigations for stable patients with complex health needs and act on them appropriately</p> <p>Provides advice and supervision to junior staff looking after stable patients and use supervision appropriately for own clinical caseload</p>

	LEVEL 2	LEVEL 3	LEVEL 4
Support and management of patients with co-morbidities and co-infection	<p>Contributes to the support and management of patients with co-infection</p> <p>Understands own role in managing these patients and the relevant policies and protocols</p> <p>Is able to advise patients about common co-infections and co-morbidities and healthy lifestyle choices</p> <p>Understands and can advise on the treatment options</p>	<p>Supports and manages patients with co-infection and co-morbidities according to local policy</p> <p>Understands screening and monitoring for these conditions and interprets relevant investigations</p> <p>Advises and supervises the patient on the self-administration, side-effects and risks associated with treatment of these conditions</p>	<p>Establishes systems for the management of patients with co-infection/co-morbidities where complex health needs exist</p> <p>Maintains an in-depth understanding of the complexities of these conditions</p> <p>Develops pathways and procedures for the implementation of nurse-led management of these conditions</p> <p>Develops education on these conditions for the nursing and MD team</p> <p>Demonstrates expert practitioner skills in the management and support of HIV patients with these conditions including assessment, diagnosis, management, use of antiretroviral therapies and non-medical prescribing</p>

	LEVEL 2	LEVEL 3	LEVEL 4
Support and management of people taking post-exposure prophylaxis (PEP) for HIV [30,31]	<p>Contributes to the support and management of patients accessing PEP</p> <p>Understands local provision for these treatments and can describe pathway according to local/network policy</p> <p>Is aware of national policies and guidelines on access and support</p> <p>Understands own role in the support and management of people accessing these treatments</p>	<p>Supports and manages patients accessing PEP according to local guidelines and policies</p> <p>Understands the national policies on provision for this treatment and access in the UK</p> <p>Undertakes a risk assessment</p> <p>Discusses the risks and possible side-effects associated with treatment and provides clinical or/and psychological support as necessary</p>	<p>Establishes systems for the nurse-led management of patients accessing PEP and supports and manages patients where complex health needs apply</p> <p>Develops pathways for nurse-led management of PEP provision</p> <p>Provides expert support for the management of this service especially when complex health issues apply</p>

S1 HIV Outpatients

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Outlines what blood tests need to be taken and when</p> <hr/> <p>Is aware of how staff and patients can access PEP on a 24-hour basis across local and networked services</p>	<p>Provides continuing support and management, including the provision of medications to manage side-effects</p>	<p>Develops PGDs and/or supports non-medical prescribing for the nurse led support</p> <hr/> <p>Establishes and/or clarifies pathways across departments, organisations and local community services ensuring provision for 24-hour access</p> <hr/> <p>Provides and supports education in relation to this topic across stakeholders and patient groups</p>

References

- 12,13,14. See references in G1 on assessment for Coinfection and Opportunistic Infections
30. Benn *et al.* UK Guideline for the use of post exposure prophylaxis for HIV following sexual exposure 2011. *IJSA* 2011, **22**, 695–708.
31. Fidler *et al.* Position statement on the use of antiretroviral therapy to reduce HIV transmission January 2013. The British HIV Association (BHIVA) and the Expert Advisory Group on AIDS (EAGA). See: www.bhiva.org

S2 HIV Inpatients

	LEVEL 2	LEVEL 3	LEVEL 4
The management of patients with HIV-related conditions in the inpatient setting [32,33]	Contributes to the management of patients with HIV-related conditions in the inpatient setting	Manages the care of patients with HIV-related conditions in the inpatient setting	Manages and oversees the care of patients with HIV-related conditions in the inpatient setting
	Understands own role in relation to the management of inpatients with HIV-related conditions	Supports and assists the patient to understand the nature of their condition and its impact on health and well-being	Ensures there is appropriate education and mentoring in the principles of managing inpatients with HIV-related conditions
	Demonstrates a knowledge and understanding of the main HIV-related conditions and the relevant local policies and protocols for treatment and management in the inpatient setting	Supports and involves patients in the planning of their care	Contributes to the development of guidelines and competencies for the nurse management of HIV-related conditions
	Assists in the management of the critically ill patient	Under supervision, provides one-to-one care of the critically ill patient	Supports and supervises junior staff including medical staff to manage the critically ill patient
	Is aware of the potential rapidity of deterioration of patients with an HIV-related condition	Plans the appropriate level of assessment and observation, in conjunction with the medical team, to ensure early detection of any changes	Supports staff in assessing acutely sick patients
	Understands and undertakes the observations required for early detection of changes and reports any deterioration promptly to the appropriate members of the care team	Interprets clinical findings and reports to appropriate team members	
	Explains to the patient the purpose of regular assessment of their condition and encourages self-reporting		
	Is aware of the potential needs of a patient receiving an HIV-positive diagnosis as an inpatient	Ensures adequate social, psychological and spiritual support for patients facing acute illness and/or a new HIV-positive diagnosis	Leads on the development of a multidisciplinary approach to the management and support of the newly diagnosed HIV patients admitted with an acute HIV-related condition
	Is aware of the potential impact for patients in the transition from chronic HIV infection to an acute illness		
	Is aware of the conditions, signs and symptoms that require source or protective isolation	Assesses the need for isolation on all admissions as per local protocol	Develops cross-working with infection control on the management of HIV-related conditions
			Ensures the policies for isolation are understood and implemented by staff, patients and visitor
	Is aware of the potential risks to well-being in those who require isolation	Assesses and mitigates the risk of caring for patients in isolation	
		Provides practical and psychological support for the patient to self-manage the experience of isolation	
	Is aware of the potential effect of repeat admissions on a patient's well-being	Manages the potential effects of repeat admissions on the patient's well-being and ensures continuity of care	Develops systems of care delivery to ensure continuity of care for patients on subsequent admissions, e.g. primary/team nursing, caseload management

S2 HIV Inpatients

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Understands the discharge process, policies, guidelines and assessment tools to aid discharge planning, including case conferences and home visits</p> <p>Is aware of the rehabilitation and support services, statutory and voluntary, available to patients on discharge from hospital</p> <p>Documents and reports to the MDT any changes that may affect discharge plans</p> <p>Assists the patient to articulate their needs on discharge</p> <p>Understands the rationale for the change from acute intervention to palliation as directed by the care team in partnership with the patient and/or significant others</p> <p>Is aware of advanced directives and their role in HIV care</p>	<p>Ensures discharge planning commences on admission, setting an expected date of discharge in conjunction with the medical team</p> <p>Assesses plans and evaluates in partnership with the patient, their significant others and the MDT, as appropriate, a comprehensive discharge package</p> <p>Assesses the safety issues prior to discharge of the chronically ill/disabled patient</p> <p>Supports patients within the case conference acting as their advocate as required</p> <p>Supports a patient in the transition from acute to palliative care</p> <p>Discusses end-of-life decisions with patients and their significant others</p>	<p>Develops MDT structures to ensure collaboration between primary, acute and rehabilitation care to plan safe discharge</p>

	LEVEL 2	LEVEL 3	LEVEL 4
The management of symptoms in inpatients with HIV, HIV-related conditions and on ART	<p>Contributes to the management of HIV-related symptoms</p> <p>Understands the principles of symptom control</p> <p>Is aware of the main symptoms, which may affect those in the end stages of life or those taking ART</p> <p>Assists in the assessment, reporting, management and evaluation of symptoms and effectiveness of treatment using evidence-based assessment tools</p> <p>Supports and encourages the patient to describe and report symptoms and self-record</p>	<p>Supports the management of HIV-related symptoms</p> <p>Understands the aetiology, manifestation, management and treatment of the main symptoms in HIV disease</p> <p>Assesses, plans and evaluates symptom management in partnership with the patient and refers appropriately</p> <p>Supports patients' psychological well-being during the period of treatment induction for symptom control</p>	<p>Manages patients experiencing HIV-related symptoms</p> <p>Develops education to assist nurses to develop the planning, assessment and evaluation skills in symptom control</p> <p>Collaborates with the MDT to develop and/or evaluate tools and protocols for the management of symptoms</p> <p>Develops symptom control information tailored to the needs of the patient</p> <p>Maintains an in-depth knowledge of developments in symptom control</p>

S2 HIV Inpatients

	LEVEL 2	LEVEL 3	LEVEL 4
The management of inpatients with HIV-related problems in the context of their significant others	Contributes to the care and support of patients and their significant others	Manages and supports the care of patients and their significant others	Manages and supports complex issues in the care of patients and their significant others
	Understands the impact of stigma in HIV on the issue of confidentiality		Ensures there are policies and procedures in place to protect confidentiality in all areas of activity in the ward environment
	Assesses and records the patient's social network, level of disclosure and potential or actual issues regarding the nominated next of kin and informs the MDT	Supports patients in making informed decisions regarding disclosure and refers appropriately	Manages complex issues related to disclosure and/or problems within the patient's social network
		Supports the patient's significant others to understand patient choice and acts as advocate to ensure that the patient's wishes are upheld	
	Assists significant others to understand confidentiality	Provides appropriate support and information for patients' significant others	Ensures the team understands the potential risks for patients in the context of their significant others, e.g. Safeguarding Adults at Risk of Abuse [34,35]
	Is aware of patient choice and its implications for the role of the care team or significant others in provision of care		Develops structures to enable support of significant others
	Understands their role as an advocate		
	Understands their role in reporting any adult safeguarding issues		

References

32. Standard 5 British HIV Association Standards of care for people living with HIV in 2013. See: www.bhiva.org/standards-of-care-2013.aspx
33. Nelson *et al.* British HIV Association and British Infection Association guidelines for the treatment of opportunistic infection in HIV-seropositive individuals 2011, *HIV Med* (2011), 12 (Suppl. 2), 1–5.
34. No Secrets: guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adult from abuse. Department of Health and Home Office, March 2000. See: www.gov.uk/government/publications/no-secrets-guidance-on-protecting-vulnerable-adults-in-care
35. Statement of Government Policy on Adult Safeguarding Report, Department of Health, May 2011. See: www.gov.uk/government/publications/adult-safeguarding-statement-of-government-policy

S3 Clinical Trials

	LEVEL 3	LEVEL 4
(a) Reporting and management of clinical trial investigations	<p>Plans, undertakes, evaluates and reports biomedical investigations and/or interventions</p> <p>Checks and confirms appropriate kits are available to undertake study visits. Ensures all tests are carried out in accordance with the protocol</p> <p>Identifies any missing tests not undertaken in accordance with the protocol and reports on an abnormality</p> <p>Has an understanding of the protocol and department requirements to manage treatment-related toxicities</p> <p>Identifies when tests need repeating in accordance with the protocol</p> <p>Plans a patient's follow-up in accordance with protocol and treatment guidelines. Individualises patient follow-up to ensure appropriate management</p> <p>Collates and interprets the results and reports them to the doctor stating actions to be taken in accordance with the protocol</p> <p>Evaluates and reports >grade 4 toxicities as per protocol and implements serious adverse event (SAEs) reporting in accordance with guidelines</p>	<p>Plans, undertakes, evaluates and reports complex/unusual biomedical investigations and/or interventions</p> <p>Evaluates the effectiveness of tools to ensure that clinical trial investigations are reported in line with the study protocol</p> <p>Ensure study team aware of reporting requirements.</p> <p>Reviews policies and procedures in line with departmental and study requirements</p>
(b) Taking and processing of clinical trial samples and other investigations	<p>Follows the specific protocol requirements regarding the timing, sequence and processing of samples</p> <p>Undertakes and delivers training to ensure all staff members are aware of guidelines</p> <p>Documents all results in accordance with protocol and in line with sponsor-specific requirements</p> <p>Ensures equipment used is calibrated and monitored in accordance with local and sponsor requirements</p>	<p>Designs standard operating procedures to ensure samples are taken and processed in accordance with protocol and laboratory manuals</p> <p>Undertakes health and safety and risk assessment on laboratory area to ensure all staff are trained and safe to handle and process of samples</p> <p>Designs and evaluates training programmes in clinical trial guidelines</p> <p>Evaluates the outcomes of individual procedures and investigations/interventions as a whole to determine the success of the approaches adopted and any further action required</p> <p>Designs and evaluates quality control systems to monitor the collection, processing and storage of samples</p>

	LEVEL 3	LEVEL 4
(c) Information collection and data analysis	<p>Gathers, analyses, interprets and presents extensive and/or complex data and information</p> <p>Demonstrates an understanding of the importance of accurate data collection in relation to Good Clinical Practice (GCP) guidelines [36]</p> <p>Uses appropriate tools and techniques to collect data</p> <p>Understands the principles of the Data Protection Act [37] and complies with International Conference on Harmonisation (ICH) and GCP in the archiving and storage for study-related documentation [39]</p>	<p>Plans, develops and evaluates methods and processes for gathering, analysing, interpreting and presenting data and information</p> <p>Demonstrates a comprehensive understanding of the data collection process and the consequences on practice</p> <p>Identifies areas of concern in regard to misconduct and fraud and acts appropriately within GCP guidelines and the Research Governance framework [38]</p>

S3 Clinical Trials

	LEVEL 3	LEVEL 4
	<p>Identifies and understands what constitutes a source document</p> <p>Collects data accurately and systematically in a patient's notes in accordance with the protocol</p> <p>Identifies different types of data, data collection processes and verification issues during studies.</p> <p>Identifies appropriate tools to assist in the identifying of patients for clinical trials</p> <p>Demonstrates an understanding of the importance of auditing within clinical trials</p>	<p>Applies quality assurance methods to ensure data integrity</p> <p>Designs and maintains databases to capture activity data</p> <p>Designs training programmes to train and support staff in relation to audits and inspections</p>

	LEVEL 3	LEVEL 4
(d) Development and innovations	<p>Coordinates and contributes to the planning and implementation of the conduct of clinical trials</p> <p>Has a full knowledge of study set-up-related documentation</p> <p>Demonstrates effective management of the coordination of a programme of studies</p> <p>Identifies key resources that are required in order to conduct a study</p> <p>Maintains databases of study activity</p> <p>Takes appropriate action in the event of: protocol deviation, SAEs, participant withdrawal</p> <p>Demonstrates an understanding of the process to obtain research ethics approval</p> <p>Fully understands the regulatory aspects of clinical research</p> <p>Demonstrates an understanding of the elements of informed consent</p> <p>Assess the patient's suitability to enter a clinical trial in liaison with the research team</p>	<p>Plans, implements, monitors and reviews the allocation and management of clinical trials</p> <p>Designs tools for the assessment of resource requirements and implications of all clinical research projects</p> <p>Advise, supervises and manages others in the coordination of studies</p> <p>Leads in the implementation of the national, European and ICH guidelines for the management of research studies</p> <p>Undertakes feasibility assessments in accordance with sponsor requirements</p> <p>Produces detailed costings and resource utilisation information</p> <p>Implements the documentation for research ethics approval</p> <p>Reviews and implements the regulatory approval documents and required R&D approvals</p> <p>Designs and evaluates training packages and audit tools for all elements of informed consent</p>

References

36. See: Good Clinical Practice at the Medicines and Healthcare products Regulatory Agency (MHRA) website: www.mhra.gov.uk/
In particular, see: Directive 2001/20/EC of the European Parliament and of the Council of 4 April 2001 and also: EU Directive 2005/28/EC.
37. Data Protection Act 1998: Elizabeth II. Chapter 29. London, The Stationery Office. See also: www.opsi.gov.uk/
38. Department of Health. Research Governance Framework for Health and Social Care. 2nd edn. London, Department of Health, 2005.
See website for minor updates from 2010 'www.dh.gov.uk'
39. International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use. ICH Harmonised Tripartite Guideline: Guideline for Good Clinical Practice EG6(R1). See: www.ich.org/ and also: www.instituteofclinicalresearch.org/

S4 Paediatric

For all nurses providing care to patients within an HIV paediatric setting or looking after HIV-positive children

	LEVEL 2	LEVEL 3	LEVEL 4
Testing children and young people for HIV	<p>Plans, develops and implements approaches to promote health and well-being and prevent adverse effects on health and well-being</p> <p>Demonstrates awareness of the mechanisms of transmission of HIV to a child or young person</p> <p>Demonstrates an understanding of maintaining optimal health in a child with HIV</p> <p>Demonstrates an awareness of the main issues to be addressed when a child needs to be tested for HIV</p>	<p>Plans, develops and implements programmes to promote health and well-being and prevent adverse effects on health and well-being</p> <p>Demonstrates in-depth knowledge on the route of transmission of HIV to a child or young person</p> <p>Demonstrates an in-depth knowledge of promoting optimal health in a child with HIV</p> <p>Demonstrates appropriate counselling skills when undertaking pre- and post-HIV test discussions, including giving positive and negative HIV test results, with parents and young people</p>	<p>Promotes health and well-being and prevents adverse effects on health and well-being by contributing to the development, implementation and evaluation of related policies</p> <p>Develops guidelines for testing children and young people</p> <p>Ensures care pathways are in place for referral of children to be tested for HIV across the clinical network</p>
Disclosure of diagnosis to child or young person	<p>Demonstrates an awareness of the complex issues of disclosure of diagnosis to children</p> <p>Demonstrates awareness of children's understanding of illness at different developmental stages</p>	<p>Supports carers and children throughout the process of disclosing the diagnosis of HIV to a child or young person</p> <p>Undertakes individual work with the child or young person in understanding their illness; demonstrating in-depth knowledge of child development and the child's understanding of illness at different developmental stages</p>	<p>Develops care pathways and resources around disclosure of diagnosis to children for carers, children and professionals</p> <p>Contributes to or undertakes research into children's understanding of their illness or parents' views around disclosure</p>
Growth and development	<p>Demonstrates an awareness of the normal growth patterns and range of developmental progress of children and young people</p>	<p>Identifies problems in growth and development of a child or young person and makes appropriate referrals</p>	
Health education	<p>Demonstrates an awareness of the health needs of children and families with HIV</p> <p>Provides basic information to families regarding maintaining optimal health</p> <p>Demonstrates an awareness of the sexual health needs of adolescents with HIV</p>	<p>Demonstrates an in-depth knowledge of the signs and symptoms of a child with HIV becoming unwell</p> <p>Demonstrates an in-depth knowledge of HIV, pathophysiology, transmission and treatment in children</p> <p>Educates carers and young people about their condition, how to manage it, the signs of illness and when to seek advice</p> <p>Provides sexual health information and advice to adolescents with HIV and makes appropriate referrals</p>	<p>Develops health promotion strategies across a clinical network</p> <p>Establishes referral routes for access to sexual health and family planning services</p>

S4 Paediatric

	LEVEL 2	LEVEL 3	LEVEL 4
		Demonstrates an awareness of the young person's sexual health needs. Refers the young person to adult MDT for support around sexual health issues when necessary. Has an awareness of HIV and Young Persons Network (HYPNet) [40]	Develops appropriate adolescent transition services across the network, recognising the need for services for vertically infected young people

	LEVEL 2	LEVEL 3	LEVEL 4
MDT working and integrated health and social care	<p>Contributes to assessing the health and well-being needs of an HIV-positive child/young person and planning how to meet those needs</p> <p>Demonstrates an understanding of an MDT, who it involves and how to work within it</p> <p>Demonstrates an awareness of signs of neurological delay and HIV encephalopathy in children</p> <p>Understands HIV in adults, also considers carer's needs</p>	<p>Assesses health and well-being needs of an HIV-positive child/young person and develops, monitors and reviews plans of care to meet specific needs</p> <p>Ensures the MDT is involved in assessing the child's neurological development</p> <p>Recognises a deviation from normal childhood development and can work within the MDT to ensure the child's needs are met</p> <p>Demonstrates an understanding of the carer's health needs, encouraging the carer to access appropriate healthcare and can refer the carer to adult services wherever necessary</p> <p>Utilises links with Lead Centre in Children's HIV National Network (CHINN) Shared Care Network, referring to PENTA guidelines with treatment queries and also CHIVA policies [41]</p>	<p>Assesses complex health and well-being needs of HIV-positive children and young people. Develops, monitors and reviews plans of care to meet those needs</p> <p>Develops policies and protocols as part of the MDT so that patients are assessed on a regular basis and thus ensuring their developmental needs are met</p> <p>Recognises neurological delay in children as a direct result of HIV, confidently liaises with the family in relation to the effects of the delay on the child's prognosis and acts as advocate for the family on behalf of the MDT</p> <p>Demonstrates an in-depth knowledge of HIV treatments in general and so can discuss fully carer's own treatment options etc. Can offer initial consultations when carers themselves have not accessed their own healthcare, then refers on to adult services</p> <p>Has an ongoing relationship with Lead Centre (if not based in one) demonstrates the knowledge and skills to develop policies for Children's HIV Association (CHIVA) [42]</p> <p>Has the ability autonomously to recognise whether the child's well-being needs are being met and has the knowledge and skills to recognise what the MDT can offer as well as outside agencies</p>
Physical	<p>Demonstrates an awareness of the UK vaccination policy</p>	<p>Plans the assessment of the child's health and well-being needs and prepares for it to take place</p> <p>Ensures the child's vaccination history is accurate and all relevant vaccinations have been administered</p>	<p>Autonomously advises parents and colleagues on vaccinating children with HIV. Has in-depth knowledge of UK vaccination policy and can advise parents and colleagues on vaccinating children with HIV</p>

S4 Paediatric

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Participates in discussions with the child regarding what care they will receive</p> <p>Demonstrates a basic level of knowledge of paediatric HIV relevant to the clinical area</p> <p>Demonstrates an understanding of clinical observations necessary to assess a child's physical well-being and takes and records observations, recognising any deviations from the norm</p> <p>Participates in caring for the immunosuppressed child and administering ART</p> <p>Develops an understanding of immunosuppression and how it affects the body</p>	<p>Ensures the child has an age-appropriate understanding of the care that will be given and advocates on behalf of the family if they are not appropriately informed</p> <p>Demonstrates a thorough knowledge of paediatric HIV</p> <p>Demonstrates a thorough knowledge of baseline investigations required according to local guidelines and/or CHIVA guidelines</p> <p>Advocates for the child who is immunosuppressed and promotes ART according to PENTA guidelines</p> <p>Recognises symptoms of immunosuppression in infants, children and adolescents and acts as an initial point of contact if the child is unwell or the parents need advice</p> <p>Ensures that the child's involvement in decision-making and consent is dependent on their developmental stage and age; understands the importance of working in partnership with the child and carers. Ensures the clinical areas for child assessment are age appropriate and child friendly</p> <p>Demonstrates a family-centred approach and has a knowledge of carer's ART history to ensure optimal care for the child</p> <p>Visits families at home and provides insight into the child's and family's home environment</p> <p>Provides extensive information on support agencies for children and their carers and can refer a family to relevant voluntary organisations and other agencies for support</p> <p>Assesses the child and their carer when ART is failing and works in partnership with the family to understand individual challenges around adherence</p>	<p>Demonstrates expert knowledge of paediatric HIV and utilises that knowledge to set up teaching packages for carers and professionals</p> <p>Assesses and evaluates on an ongoing basis which baseline investigations are needed and implements when required (as part of the MDT)</p> <p>Interprets results and plans for how severely the child may be affected by immunosuppression. Ensures family has direct access to the clinical area during this time</p> <p>Has the developed skill set to discuss different drug combinations with carers who may have concerns about their child commencing specific medications</p> <p>Autonomously makes recommendations on behalf of the family after a home visit</p> <p>Works in an advisory capacity when requested to by voluntary organisations to assist in recognising and providing the best support possible to families</p> <p>Utilises nurse-led services to maintain regular follow-up and support for the family. Understands resistance patterns and ongoing ART combinations that can be used in children</p>
Social	<p>Demonstrates an awareness of support agencies and refers to senior nursing colleagues for advice</p>		

S4 Paediatric

	LEVEL 2	LEVEL 3	LEVEL 4
MDT working and integrated health and social care	<p>Contributes to protecting HIV-positive children/young people who are at risk</p> <p>Demonstrates an awareness of voluntary organisations that offer specific support to families living with HIV</p>	<p>Implements aspects of a protection plan and reviews its effectiveness</p> <p>Puts plans in place to ensure that children and carers are supported in the community by appropriate members of the MDT and/or voluntary organisations</p> <p>Assesses the family's need for support services in the community at the time of presentation and reviews on a regular basis. Encourages families to link in with voluntary organisations to gain support where necessary</p>	<p>Develops and leads on the implementation of an overall protection plan</p>
Social	<p>Recognises the difficulties families face when caring for a child who has long-term developmental delay and refers on to senior colleagues when support is not in place</p> <p>Ensures the carer's health needs are met if the child/young person is hospitalised for any reason</p>	<p>Through care planning with the family offers support to child/young person and carer where the child has neurological developmental delay, physical and/or mental, as a result of HIV</p> <p>Enables the child/young person to discuss drug/alcohol abuse in a safe, confidential setting, puts plans in place to regularly review substance abuse with the child/young person</p> <p>Respects the confidentiality of the children/young people and their family according to the NMC professional code of conduct [11]</p> <p>Demonstrates an understanding of the carer's health status, works with the family to put care plans into place when the carer requires hospitalisation or is unable to care for the child/young person for any reason</p> <p>Advocates for the child/young person in situations where the carer will not access health services, either for themselves or for the child/young person</p>	

S4 Paediatric

	LEVEL 2	LEVEL 3	LEVEL 4
Working within MDTs	<p>Undertakes care activities to meet the health and well-being needs of children/young people with HIV</p> <p>Participates in working with the paediatric HIV MDT. Demonstrates an understanding of the need for coordination between the MDT caring for children and families with HIV</p> <p>Understands the concept of CHINN for the management of paediatric and perinatal HIV</p> <p>Participates in discharge planning and makes appropriate referrals</p>	<p>Plans, delivers and evaluates care to meet health and well-being needs of children/young people with HIV</p> <p>Facilitates MDT meetings. Coordinates the MDT providing care to families with HIV to provide effective communication and liaison</p> <p>Coordinates the smooth running of HIV family clinics for the care of children with HIV and their HIV-positive parents</p> <p>Participates in CHINN meetings</p> <p>Facilitates and coordinates the discharge planning for children with HIV</p> <p>Participates in case conferences and network meetings</p>	<p>Plans, delivers and evaluates care to address the complex health and well-being needs of children/young people with HIV</p> <p>Participates in working with the wider MDT including adult HIV team, social services, voluntary sector and primary care to ensure coordinated care for the children and their families</p> <p>Runs nurse-led clinics for children with HIV or the follow-up of babies born to women with HIV, in line with local protocols</p> <p>Leads in identifying nursing referral pathways within own CHINN</p> <p>Leads in identifying pathways of care across CHINN for paediatric and perinatal care management</p> <p>Participates in or coordinates network steering groups and facilitates service reviews across network</p> <p>Gives specialist paediatric and perinatal HIV advice to other workers locally and nationally</p>

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Contributes to planning, delivery and monitoring of ART</p> <p>Demonstrates an awareness of ART, e.g. how it works, the different classes of drugs and indicators that ART is failing</p> <p>Demonstrates awareness of formulations and preparations of the various ARTs and their correct administration including timing and food restriction for children and young people</p> <p>Demonstrates an awareness of the PENTA guidelines for starting children on ART</p> <p>Facilitates the correct administration of ART in specialist and non-specialist settings</p>	<p>Plans, delivers and evaluates antiretroviral interventions</p> <p>Demonstrates in-depth and up-to-date knowledge of ART in children</p> <p>Demonstrates awareness of pharmacokinetics and metabolism of ART in infants, children and young people. Demonstrates good knowledge of side-effects and drug interactions</p> <p>Demonstrates an in-depth knowledge of the PENTA guidelines for starting children on ART</p> <p>Demonstrates an in-depth knowledge of the variety of techniques for administering medications to children depending on the age, developmental stage and preference of the child</p>	<p>Establishes systems to plan, deliver and evaluate ART where there are complex issues and/or serious illness</p> <p>Demonstrates expertise in managing the care of children and young people on ART</p> <p>Develops integrated care pathways for starting or switching children on ART for network</p>

S4 Paediatric

	LEVEL 2	LEVEL 3	LEVEL 4
	<p>Participates in assessment of readiness to start ART and the planning and preparation of the child and family for treatment.</p> <p>Anticipates obstacles to good adherence and identifies culturally appropriate interventions to facilitate adherence</p> <p>Demonstrates awareness of the main side-effects or toxicities of ART and is able to assist in monitoring children and young people</p> <p>Demonstrates an awareness of drug interactions with ART and how to access information on drug interactions</p>	<p>Assesses the child's and family's readiness to start ART. Formulates a plan of what preparations and interventions need to take place prior to starting therapy.</p> <p>Anticipates obstacles to good adherence and identifies culturally appropriate interventions to facilitate adherence</p> <p>Interprets blood test results for treatment outcomes, toxicities, side-effects and therapeutic drug monitoring</p> <p>Demonstrates a good awareness of the potential drug interactions of ART with other drugs and can access information</p> <p>Provides accurate and up-to-date information on ART to carers and age and developmentally appropriate information for the child or young person</p> <p>Demonstrates an extensive knowledge of the factors that may influence adherence to therapy. Regularly assesses and reviews adherence</p> <p>Demonstrates an in-depth understanding of the mechanisms for developing resistance to ART and its implications</p> <p>Participates in the multidisciplinary decision-making discussions around starting a child on ART</p> <p>Advises other nurses and healthcare professionals on the management of ART in children and young people</p>	<p>Reviews children on ART independently, seeking advice or making referrals when problems are identified</p> <p>Able to run nurse-led clinics for monitoring children on HIV treatment and management of adherence, pill swallowing, etc</p> <p>Demonstrates awareness of when children may need to change ART and initiates changes in therapy</p> <p>Coordinates MDT drug meetings and training to ensure good clinical governance in management of ART in children</p> <p>Develops tools and information resources for carers, children and professionals on HIV and ART in children</p>

References

40. HIV in Young Persons Network (HYPNet); see: www.networks.nhs.uk
41. Sharland M, Blanche S, Castelli J *et al.*; PENTA Steering Committee. PENTA guidelines for the use of antiretroviral therapy 2004. *HIV Med*, 2004, 5 (Suppl 2), 61–86. See also: www.ctu.mrc.uk/penta
42. Children's HIV Association (CHIVA); see: www.chiva.org.uk/

Glossary and further resources

Glossary

ART	Antiretroviral therapy
BHIVA	British HIV Association
CHIVA	Children's HIV Association
MDT	Multidisciplinary team
PEP	Post-exposure prophylaxis
PGD	Patient group directions
STI	Sexually transmitted infection
SAE	Serious adverse event

Further resources

BASHH	British Association for Sexual Health and HIV (www.bashh.org/)
HIV i-Base	A treatment activist group, HIV-positive led and committed to providing timely HIV treatment information to HIV-positive people and healthcare professionals (www.i-base.info/)
NAM	A community-based organisation that delivers HIV information across the world to HIV-positive people and healthcare professionals (www.aidsmap.com/)

Acknowledgements

Review group

Jane Bruton	<i>Clinical Nurse Lead HIV, Chelsea and Westminster Hospital NHS Foundation Trust, London</i>
Anna Bamford	<i>Clinical Services Manager – HIV, Sussex Community NHS Trust</i>
Juliet Bennett	<i>Independent Specialist Nurse – HIV and Treatment Adherence</i>
Shaun Watson	<i>Clinical Nurse Specialist for HIV, Chelsea and Westminster Hospital NHS Foundation Trust, London</i>

Invited authors

We would like to acknowledge and thank the invited authors for their considerable work in developing the specialist competencies.

Paediatric competencies

Sheila Donaghy	<i>Paediatric HIV Nurse Consultant, St George's Hospital, London</i>
Christina Hanley	<i>Paediatric HIV Nurse Specialist, St Mary's Hospital, London</i>

Outpatient competencies

Nathaniel Ault	<i>HIV Nurse Consultant, Barts and The London NHS Trust</i>
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Clinical trial competencies

Nicky Perry	<i>Research Coordinator, Brighton and Sussex University Hospitals NHS Trust</i>
Sheila Morris	<i>Research Coordinator, Western General Hospital, Edinburgh</i>

Other contributors

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Roy Brazington	Liz Breadner	Christina Casley	Enrique Castro-Sánchez	Sheila Donaghy	
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Sue Pennant	Nicky Perry	Colin Roberts	Deirdre Sheedy	Zoë Sheppard	Celia Skinner
Guido Tapia	Linda J Tucker	Joyce Vost	Shaun Watson	Brian West	Chris Whitehead

NHIVNA Secretariat

Mediscript Ltd · 1 Mountview Court · 310 Friern Barnet Lane · London N20 0LD
Telephone: +44 (0)20 8446 8898 | Facsimile: +44 (0)20 8446 9194 | Email: nhivna@nhivna.org



National HIV Nurses Association

NHVNA aims to provide an academic and educational forum
for the dissemination of original nursing research in the field of HIV/AIDS.

We also aim to address the communication and support-needs of nurses working in this area.

We hope that these activities will assist in the promotion of good practice in the care of people with HIV.

support - research - education
support - needs - education