





CAREER PATHWAY FOR CRITICAL CARE NURSING





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1.0 INTRODUCTION

This document sets out a career pathway for nurses and nursing assistants working in adult critical care settings across Northern Ireland (NI). While the initial focus of the pathway is on adult critical care, its scope has widened to include paediatric critical care; given the overarching concepts which underpin core competencies and education requirements are transferable across both settings. The specific education requirements for paediatric critical care are still in development and are not included in this pathway at present; once finalised, the pathway will be updated to incorporate them.

Commissioned by the Chief Nursing Officer, the pathway is intended to support career planning that is responsive to population health needs. It does so by outlining the roles, Levels of Practice, and potential progression opportunities for critical care nurses, as identified through local critical care service workforce and workload planning exercises.

The document is structured to provide a clear and comprehensive overview of the career pathway. Firstly, it sets out the purpose, outlining the aims of the pathway and how it is intended to be used. This is followed by a section on frequently asked questions, which addresses common queries and offers practical guidance. The next section presents the role descriptors, providing a summary of each role within the pathway. Finally, the pathway sets out the core competencies and education requirements aligned to the four interconnected pillars of practice: Clinical Practice, Education and Learning, Leadership and Research and Development, as appropriate to the levels of practice.



2.0 PURPOSE OF CAREER PATHWAY FOR CRITICAL CARE NURSING ROLES

This Career Pathway is designed to help clarify and strengthen the recognition and the vital contribution that Critical Care Nurses and Nursing Assistants make to the delivery of high quality, safe, effective, person and family centred care.

The Career Pathway is intended to serve as a guide for:

- Nurses and nursing assistants working in critical care settings
- Employers and managers
- Education providers.

It outlines, expected levels of practice, core competencies across the four pillars of practice, education requirements and job descriptions (where applicable). These enable a standardised approach to the continued development of the roles within Critical Care Nursing for both registered and non-registered nursing roles. The core competencies and defined education will guide the development of individuals to enhance their knowledge, skills and experience in the critical care environment.

The commissioned services will influence the roles adopted in each Health and Social Care Trust (HSCT) to ensure an effective Critical Care Nursing Workforce to meet the demands of the specific service and the respective population.

The individual roles within the career pathway will enable HSCTs to identify the posts needed for their services through effective workforce planning. Each post will be advertised and a selection process utilised, there is no automatic progression through the nursing roles.

¹ The prevalence of core roles within Health and Social Care (HSC) Trust's critical care environments is dependent on the needs of the services and the respective population.

3.0 LEVELS AND PILLARS OF PRACTICE

Each role within the Critical Care
Nursing Career Pathway is aligned
to one of the Levels of Practice
adapted from Skills for Health
(2010), see Figure 1. The Levels of
Practice reflect role development
and progression similar to the
Knowledge and Skills Framework.
It is the underpinning knowledge,
skills and behaviours outlined in the
4 pillars of practice which determine
the level of practice of each role. The
Level of Practice does not equate to
the banding of Agenda for Change,
which is related to remuneration.

For more information about the Levels of Practice and how the Critical Care Nursing Career Pathway aligns to the NI Career Model for Nursing and Midwifery visit https://nursingandmidwiferycareersni.
hscni.net

Figure 1: Levels of Practice

LEVEL	ROLE OVERVIEW				
2	People at level 2 require basic factual knowledge of a field of work. They may carry out clinical, technical, scientific or administrative duties and provide safe, effective, person-centred care under the direction of a registrant				
3	People at level 3 require knowledge of facts, processes and general concepts in a field of work. They may carry out a wider range of duties than the person working at level 2 and will have more responsibility, with supervision by a registrant.				
4	People at level 4 require factual and theoretical knowledge in broad contexts within a field of work. Work is guided by standard operating procedures, protocols or systems of work and they may have responsibility for supervision. BSc (Hons) or MSc to Registered Nurse and Registered Midwife.				
BSc (Hons) or MSc to Registered Nurse and Registered Midwife					
5	People at level 5 will have a comprehensive, factual and theoretical knowledge on registration. They use knowledge to solve problems creatively, make judgements which require analysis and interpretation, and actively contribute to service development, supervision or training.				
6	People at level 6 require a critical understanding of detailed theoretical and practical knowledge, are specialist and/ or have management, education and leadership responsibilities. They demonstrate initiative and creativity in finding solutions with responsibility for team performance and development.				
7	People at level 7 have a critical awareness of knowledge and issues in the field and at the interface between different fields. They are innovative and have a responsibility for developing and changing practice and/or services in a complex and unpredictable environment.				
8	People at level 8 require highly specialised knowledge, some of which is at the forefront of knowledge in a field of work. They are leaders with considerable responsibility, and the ability to research and analyse complex processes. They may lead policy, research, education or service delivery and improvement and have clinical, management or education responsibilities.				
9	People working at level 9 require knowledge at the most advanced frontier of the field of work and at the interface between fields. They will have responsibility for the development and delivery of a service to a population or leading research at the highest level of the organisation.				

All Nursing roles in the Critical Care Nursing Career Pathway are supported by a set of 4 pillars of practice with associated key knowledge, skills, behaviours and education requirements.



Clinical Practice

Knowledge, skills and behaviours needed to provide high quality healthcare that is safe, effective and person centred.



Education and Learning

Knowledge, skills and behaviours needed to enable effective learning in the workplace.



Leadership

Knowledge, skills and behaviours needed to lead and to fulfil management responsibilities.



Research and Development

Knowledge, skills and behaviours needed to use evidence to inform practice and improve services.

The key knowledge, skills, behaviours and education requirements for the core Critical Care Nursing roles reflect the *National Critical Care Competency Framework* developed by the Critical Care National Lead Forum (CC3N n.d.), which is currently under review. This framework is supported by the *National Standards for Adult Critical Care Nurse Education* (CC3N 2023), which underpin Critical Care Nurse learning nationally, to ensure consistency of approach.

It is important that individuals acquire all the knowledge, skills and behaviours appropriate to their specific role and are supported to develop through relevant education and development including preceptorship, supervision and continuous professional development (CPD).

4.0 CRITICAL CARE NURSING ROLES

The nursing and nursing support roles that have been agreed as core to critical care nursing in Northern Ireland are shown below; firstly as a role summary, and secondly with the education requirements.

Level of Practice 2–4		Level of Practice 5	Level of Practice 6	Level of Practice 7	Level of Practice 8	Level of Practice 9
SUPPORT ROLES		CRITICAL CARE STAFF NURSE	CRITICAL CARE SENIOR STAFF NURSE	CRITICAL CARE ENHANCED NURSE	CRITICAL CARE ADVANCED NURSE PRACTITIONER	CRITICAL CARE CONSULTANT NURSE
CRITICAL CARE NURSING ASSISTANT Provides essential support to the critical care team in maintaining a safe and person-centred care environment, under the supervision of registered nurses. Regulated Qualifications Framework (RQF) Development Programme at Level 2. CRITICAL CARE SENIOR NURSING ASSISTANT Contributes to the delivery of safe, person-centred care under the supervision of a registered nurse, supporting individuals with personal care needs and undertaking a limited range of delegated clinical care duties relevant to the service needs. Regulated Qualifications Framework (RQF) Development Programme at Level 3.	Those in support roles can be supported to pursue a career as a Registered Practitioner.	Applies fundamental knowledge, clinical judgment, and critical thinking to deliver nursing care as part of the multidisciplinary team, contributing to clinical discussions and progressing treatment plans as directed. Practices in a highly acute, complex, and unpredictable environment, caring for individuals experiencing life threatening illness or injury.	Leads on the holistic assessment, planning, and evaluation of care for individuals with highly acute, complex and unpredictable care needs, applying proficient clinical reasoning to guide care involving multiple physiological systems.	Provides enhanced clinical oversight across the critical care unit, leading safe, effective, coordinated, and person-centred care while maintaining oversight of emerging risks and guiding responsive clinical decisions. Practises with a high level of autonomy, providing specialist clinical advice through the interpretation of complex information and application of clinical judgment.	Works autonomously at an advanced level of practice and is an expert professional. Applies evidence informed knowledge, skills, and capability to influence, shape, deliver, and lead safe and effective person-centred care in the critical care setting while managing risk, uncertainty and complexity. Recognising acutely ill patients, initiating early treatment, undertaking comprehensive health assessments including differential diagnosis, and will diagnose, prescribe care and treatment.	Practices autonomously as an expert at a highly advanced level of practice in the delivery of high quality, safe, effective, personcentred care. The role combines a significant proportion of direct higher level clinical care with education, research, service development, and evaluation. Practising with multidisciplinary teams across organisational and professional boundaries.
		National Competency Framework for Registered Nurses in Critical Care Nursing Step 1 Competencies Intravenous medicine administration programme	Post-registration academic programme in Critical Care Nursing, or equivalent, to achieve a minimum of 60 credits at Level 6 or 7	Post-registration academic programme in Critical Care Nursing, or equivalent, to achieve a minimum of 60 credits at Level 6 or 7 AND STEP 4 Competencies AND Leadership Programme	Post-registration academic programme in Critical Care Nursing, or equivalent, to achieve a minimum of 60 credits at Level 6 or 7 AND MSc in Advanced Practice AND NMC Independent and supplementary prescribing qualification (V300)	Post-registration academic programme in Critical Care Nursing, or equivalent, to achieve a minimum of 60 credits at Level 6 or 7 AND STEP 4 Competencies AND Leadership Programme AND MSc or equivalent Master's level programme AND May require NMC Independent and supplementary prescribing qualification (V300)
		Registered NMC Part 1	Registered NMC Part 1	Registered NMC Part 1	Registered NMC Part 1	Registered NMC Part 1

The individual roles within the career pathway will enable HSC Trusts to identify the posts needed for their services through effective workforce planning. Each post will be advertised and a selection process utilised, there is no automatic progression through the nursing roles.

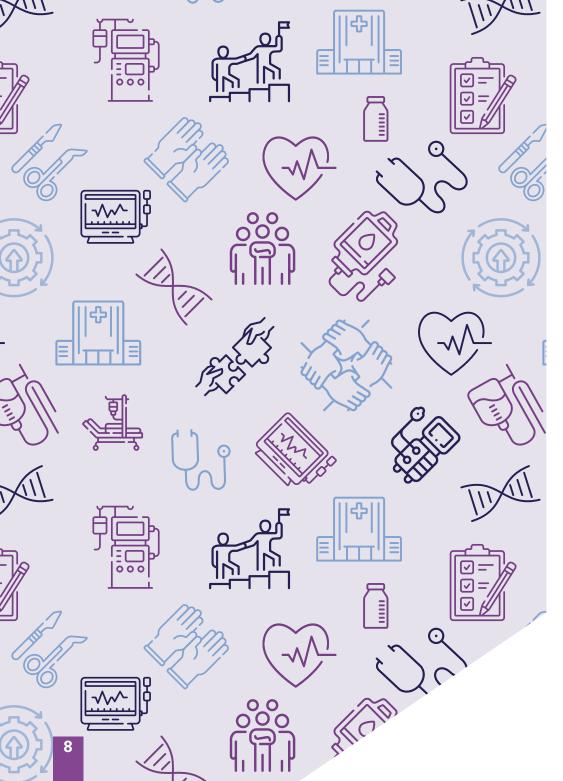


CRITICAL CARE NURSING ASSISTANT ROLE:

LEVEL OF PRACTICE 2

The Critical Care Nursing Assistant supports the delivery of safe, effective and person-centred care under the delegation and supervision of a registered nurse. As a key member of the critical care team, the nursing assistant supports individuals with personal care, including nutrition, hydration, bladder and bowel care, and personal hygiene.

Nursing assistants will be supported to undertake a Regulated Qualifications Framework Level 2 development programme (RQF). In addition, learning opportunities are available through the Clinical Education Centre (CEC) and wider Health and Social Care Trusts (HSCT) organisational development teams, offering access to relevant courses that support ongoing development. These opportunities may also support individuals considering further development within the nursing assistant pathway.





CRITICAL CARE SENIOR NURSING ASSISTANT ROLE:

LEVEL OF PRACTICE 3

The Critical Care Senior Nursing Assistant plays a pivotal role in assisting in the provision of safe, effective and person-centred care under the delegation and supervision of a registered nurse. As a core member of the critical care team, the senior nursing assistant assists individuals with personal care, including nutrition, hydration, bladder and bowel care, and personal hygiene, while also undertaking a limited range of delegated clinical care duties relevant to the critical care service.

Senior nursing assistants will be supported to undertake the Regulated Qualifications Framework (RQF) Level 3 development programme. Learning opportunities are also available through the Clinical Education Centre (CEC) and wider HSCTs organisational development teams, offering access to relevant courses that support ongoing development.

For those interested in further career progression, there may be potential opportunities to pursue a pre-registration nursing programme, such as the Work-Based Pre- Registration Nursing Programme offered by the Open University. Access to such programmes, are subject to the commissioning of places and successful completion of the relevant recruitment and selection processes within individual HSCTs.

CRITICAL CARE STAFF NURSE ROLE:

LEVEL OF PRACTICE 5

The Critical Care Staff Nurse is defined as a registered nurse who applies fundamental knowledge, clinical judgment, and critical thinking to assess, plan, implement and evaluate safe, effective and compassionate person-centred care. They play an essential role within the multi-disciplinary team (MDT), contributing to clinical discussions and progressing treatment plans as directed. Practising in a highly complex, acute and unpredictable environment, they care for individuals experiencing life-threatening illness or injury, and when survival is unattainable, they provide dignified end of life care.

In alignment with the Nursing and Midwifery Council (NMC) Standards of proficiency for Registered Nurses (NMC 2018), the practice of the critical care staff nurse reflects the professional expectations outlined across all seven platforms. This is evident in their contribution to respond to acute deterioration, managing complex interventions to stabilise and optimise patient outcomes, and reducing the risk of complications such as ventilator associated

pneumonia through evidence based practice (Institute for Healthcare Improvement [IHI] no date). Rehabilitation is also recognised as a fundamental aspect of care, with early rehabilitation interventions aimed at preventing long term impairments (CC3N 2017).

Critical care staff nurses also contribute to day to day supervision, providing guidance and support to less experienced colleagues and students, through mentoring and role modelling.

Newly appointed Critical Care Staff Nurses are provided with an induction period tailored to their learning needs and structured around the National Critical Care Competency Framework, typically supported by eight to twelve weeks of clinical supervision, facilitated by a Lead Assessor.

CRITICAL CARE SENIOR STAFF NURSE ROLE:

LEVEL OF PRACTICE 6

The Critical Care Senior Staff Nurse, is a registered nurse who effectively applies proficient knowledge, clinical judgment, and advanced technical skill to deliver safe, effective, high quality and compassionate person-centred care. They care for individuals recovering from life-threatening illness or injury, and when survival is unattainable, support the individual and their family with end of life care, including dignified death and bereavement.

They lead on the holistic assessment, planning, implementation and evaluation of care, for individuals with highly complex, acute and unpredictable needs, applying integrative clinical reasoning to address the complexities of critical illness across all physiological systems. This may include, supporting inter-hospital transfers of critically ill patients. Their scope of practice reflects higher levels of capability aligned with the Step 2 (CC3N 2015) and Step 3 (CC3N 2015) competencies and Higher Education Institution (HEI) critical care course completion.

In addition to delivering direct person-centred care, they demonstrate clinical leadership. They frequently provide day-to-day coordination of care, oversee a group of patients, or assume responsibility for a clinical area in the absence of the Ward Sister/ Charge Nurse. They contribute at a senior level with the multidisciplinary team, utilising their clinical reasoning and expertise to optimise decision making, progress treatment plans for individuals or patient groups, and support the coordination of specialist interventions in complex care situations.

They act as a role model and provide clinical supervision, mentoring and preceptorship to junior colleagues, including registered nurses and nursing assistants. This responsibility includes facilitating learning in practice and assessing clinical competencies. They may also lead or participate in check-ins or debriefs with staff to help support staff members to manage the demands of their role (The Faculty of Intensive Care Medicine [FICM] 2021).

Senior staff nurses also contribute to quality improvement activity, clinical audit or research to improve person-centred care and outcomes.

CRITICAL CARE ENHANCED NURSE ROLE:

LEVEL OF PRACTICE 7

The Critical Care Enhanced Nurse is an expert practitioner who provides enhanced clinical oversight across the critical care unit, leading the safe, effective, coordinated, and person-centred management of care for individuals with highly complex, acute and unpredictable needs. They practise with a high level of autonomy, providing expert clinical advice through the interpretation of complex clinical information and application of clinical judgment, while maintaining oversight of emerging risks and guiding safe, responsive care decisions across the critical care unit.

They provide expert clinical advice and support to the multidisciplinary team, contribute to clinical decision making, coordinate care across the unit, and ensure that care remains responsive to the needs of the individual. Their responsibilities include the leadership and management of staff, ensuring the delivery of the highest standards of care and the promotion of a person-centred culture of continuous learning and development through reflection, supervision, mentorship and appraisal.

They are also responsible for maintaining efficient and responsive service delivery, ensuring equity of access to critical care, delivering the highest standards of care, and optimising resources to meet the demands of the service. Their role includes contributing to audit, research, and quality improvement initiatives to continuously improve person-centred care and outcomes.

Enhanced nurses are proficient in the national Step 4 (CC3N 2018) competencies for critical care practice and demonstrate leadership behaviours aligned with the Collective Leadership Framework for Nursing and Midwifery (DoH 2024).

CRITICAL CARE ADVANCED NURSE PRACTITIONER ROLE¹:

LEVEL OF PRACTICE 8

An advanced practice nurse in critical care is an expert professional with a Master of Science (MSc) in Advanced Practice (Critical Care). Their practice is informed by the standards and recommendations outlined in the Guidelines for the Provision of Intensive Care Services (GPICs) (FICM 2022). The role is centred on delivering highly complex person-centred care that is focused on the needs of individuals, recognising acutely ill patients, initiating early treatment, and supporting patients throughout their critical illness. It is underpinned by the competencies set out in the Faculty of Intensive Care Advanced Critical Care Practitioner Curriculum (FICM 2023).

Advanced Practice Nurses apply their evidence informed knowledge, skills and capability to influence, shape, deliver and lead safe and effective care, while managing risk, uncertainty and complexity (NMC 2025).

They work autonomously within an expanded scope of practice. They undertake comprehensive health assessments, including differential diagnosis and will diagnose, prescribe care and treatment (DoH 2025b). Their scope of practice aligns with the four pillars of advanced practice: Clinical Practice, Education and Learning, Leadership, and Research and Development. Within this framework, they also contribute to the development of the field of critical care at local, regional and national levels.

In addition, they practise as educators, clinical leaders, innovators and contributors to service transformation and improvement, as outlined in the Advanced Nursing Practice Report (DoH 2023).

¹ All Advanced Nurse Practitioner roles should have an associated job plan.

CRITICAL CARE CONSULTANT NURSE ROLE:

LEVEL OF PRACTICE 9

The Critical Care Consultant Nurse is described in NIPEC's Professional Guidance for Consultant Roles document (DoH 2025c) as an autonomous practitioner, practicing at an advanced level in the provision of high quality, safe and effective person-centred care. They integrate direct, higher level clinical expertise together with education and learning, leadership, research, service development and evaluation activities. Practicing across organisational and professional boundaries, they demonstrate leadership behaviours aligned with the Collective Leadership Framework for Nursing and Midwifery (DoH 2024), influencing service and policy development at strategic level to address population health needs. Consultant Nurses maintain strong clinical commitment, provide expert advice to clinical colleagues, and contribute to system development, innovation, and advancement of skills and capability across critical care services at local, regional, and national levels.



5.1 CRITICAL CARE NURSING ASSISTANT ROLE:

LEVEL OF PRACTICE 2

Competencies and Education Requirements

A nursing assistant is someone who undertakes delegated aspects of nursing care that is supervised by a Registered Nurse as laid out in the Deciding to Delegate Decision Support Framework for Nursing and Midwifery (NIPEC 2019).

The nursing assistant, forms an essential part of the critical care team; providing a vital role supporting the registered nurse to deliver high quality, safe, effective, high quality and compassionate person-centred care, as laid out in the Standards for Nursing Assistants (DoH 2018):

Standard 1: Support the delivery of safe, person and family centred and compassionate care to people who use our services.

Standard 2: Communicate openly and honestly to promote the health and wellbeing of people who use our services.

Standard 3: Maintain your knowledge, skills and experience to enable you to do your job properly, in order to improve the quality of care to people who use our services.

Standard 4: Respect and protect at all times the right to confidentiality, privacy and dignity for people who use our services.

They aid individuals with fundamental nursing care in all aspects of activities of daily living, as delegated by registered nursing staff, in for example, nutrition, hydration, bladder and bowel care, and personal hygiene.

The four pillars of competency acquisition, that is; Clinical Practice, Education and Learning, Leadership and Research and Development are detailed below.

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Core Competency Pillar of Clinical Practice

- Maintain the confidentiality of all information, regarding people who use the service at all times
- Respect the dignity, wishes and beliefs of all people who use the service
- Obtain consent from people who use the service for all care and treatment provision
- Assist people who use the service with fundamental nursing care in all aspects of the activities of daily living, as delegated by registered nursing staff, for example, nutrition, hydration, bladder and bowel care, and personal hygiene
- Report and accurately record all activities undertaken, in line with organisational policy
- Encourage people who use the service to actively participate in their own care, when this is appropriate
- Deal courteously with people who use the service, and others with whom they come into contact within the course of their duties
- Communicate effectively with people who use the service and others taking into account their physical and mental state

- Report and record any changes in people who use the service, their condition or behaviour, to relevant registered nursing staff, in line with organisational policy
- Ensure that all information/messages, issues and concerns are passed onto relevant registered nursing staff in an appropriate and timely manner
- Undertake tasks to ensure adequate standards of environmental hygiene and prevent cross infection
- Report any accidents and incidents to relevant registered nursing staff and assist in the investigation of same
- Comply with health and safety policies and statutory regulations, reporting any issues to the appropriate person
- Contribute to effective and economic use of resources and the safe use of all equipment
- Work within own role in emergencies and summon help.

CAREER PATHWAY FOR CRITICAL CARE NURSING

Core Competency Pillar of Clinical Education and Learning

- Engage with the line manager to identify learning and development needs in line with the Trusts Knowledge and Skills Framework and Development Review process
- Undertake the four Steps outlined in the Induction and Development Pathway for Nursing Assistants (DoH 2018), underpinned by the Standards for Nursing Assistants, as follows:

Step 1: Role Induction. To include:

- Principles of person-centred care and Patient and Client Experience Standards (DHSSPS 2009)
- Mandatory training elements; Moving and handling theory, infection prevention and control, waste management, record keeping and basic Life Support, level 1 Quality 2020 Attributes Framework (DoH 2014)
- Fundamental nursing care to support individuals with for example nutrition, hydration, bladder and bowel care, and personal hygiene
- Role within wider team

Step 2: Work-based Induction. To include:

- Orientation to the clinical environment/ workplace
- Awareness and understanding of reporting structures
- Application of learning into practice:
 - Fundamental nursing care to support individuals for example eating, drinking, washing, toileting, pressure area care and communication.

Step 3: Undertake the Regulated Qualifications Framework (RQF) Development Programme at Level 2. As a minimum the following three compulsory units: communication, personal development and safeguarding must be progressed.

Step 4: Ongoing Development.

Keep up to date records of own development review process.

Core Competency Pillar of Leadership

 Report all concerns and complaints to appropriate registered nursing staff in a timely manner

CRITICAL CARE NURSING

- Work within the limits of own competence and responsibility and refer issues beyond these limits to registered nursing staff
- Act responsibly as a team member and seek help if necessary.

Core Competency Pillar of Research and Development

- Comply with HSC Trust policies, procedures, guidelines and protocols.
- Contribute to the delivery of respectful, safe, effective personcentred and compassionate care in order to provide a quality service.
- Fully participate in all work place audits as directed by the registered nurse.

Nursing Assistant Education, Continuous Professional Development

Nursing Assistants working in critical care will be provided with opportunities to access a range of education and development opportunities to support the delivery of safe, effective, high quality care which complement the RQF development programme at Level 2. Nursing Assistants may be considered for further learning in programmes such as:

- Infection Prevention & Control
- Manual Handling
- Pressure Area Care in relation to Personal Care
- Basic Life Support-- Acquiring help immediately
- Safeguarding Adults
- Safeguarding Children
- Record Keeping for Nursing Assistants: Evidencing Person-Centred Care
- Promoting Psychosocial Wellbeing/ Standards for Nursing Assistants i.e.
 - Emotional Wellbeing for Healthcare Staff
 - Person Centred Practice: An Introduction
- End of Life Care- Palliative and End of Life Care- in relation to Personal Care only,
 - Bereavement, Grief and Loss.

To facilitate career progression through the Critical Care Career pathway further learning opportunities may be considered with the agreement and support of the Ward Sister/ Charge Nurse.

5.2 CRITICAL CARE SENIOR NURSING ASSISTANT ROLE:

LEVEL OF PRACTICE 3

Competencies and Education Requirements

A senior nursing assistant is someone who undertakes delegated aspects of nursing care that is supervised by a Registered Nurse as laid out in the Deciding to Delegate Decision Support Framework for Nursing and Midwifery.

They play a pivotal role in assisting in the provision of safe, effective and person-centred care under the delegation and supervision of a registered nurse., as laid out in the Standards for Nursing Assistants:

Standard 1: Support the delivery of safe, person and family centred and compassionate care to people who use our services.

Standard 2: Communicate openly and honestly to promote the health and wellbeing of people who use our services.

Standard 3: Maintain your knowledge, skills and experience to enable you to do your job properly, in order to improve the quality of care to people who use our services.

Standard 4: Respect and protect at all times the right to confidentiality, privacy and dignity for people who use our services.

As a core member of the critical care team, the senior nursing assistant assists individuals with personal care, including nutrition, hydration, bladder and bowel care, and personal hygiene, while also undertaking a limited range of delegated clinical care duties relevant to the critical care service.

The four pillars of competency acquisition, that is; Clinical Practice, Education and Learning, Leadership and Research and Development are detailed below.

Core Competency Pillar of Clinical Practice

- Maintain the confidentiality of all information, regarding people who use the service at all times
- Respect the dignity, wishes and beliefs of all people who use the service
- Obtain consent from people who use the service for all care and treatment provision
- Assist people who use the service with fundamental nursing care in all aspects of the activities of daily living, as delegated by registered nursing staff, for example, washing, toileting, eating and drinking
- Undertake limited clinical duties as required in the ward/ department, which have been delegated by registered nursing staff
- Report and accurately record all activities undertaken, in line with organisational policy
- Encourage people who use the service to actively participate in their own care when this is appropriate
- Identify if people who use the service are at risk and inform the registered nurse and make a written record
- Deal courteously with people who use the service, and others

- with whom they come into contact within the course of their duties
- Communicate effectively with people who use the service and others taking into account physical and mental state
- Report any changes in people who use the service, condition or behaviour, to relevant registered nursing staff
- Ensure that all information/messages, issues and concerns, are passed onto relevant registered nursing staff in an appropriate and timely manner
- Undertake tasks to ensure adequate standards of environmental hygiene and prevent cross infection
- Report any accidents and incidents to relevant registered nursing staff and assist in the investigation of same
- Comply with health and safety policies and statutory regulations, reporting any issues to the appropriate person
- Contribute to effective and economic use of resources and the safe use of all equipment
- Work within own role in emergencies and summon help.

Core Competency Pillar of Clinical Education and Learning

- Engage with line manager to identify learning and development needs in line with the Trusts Knowledge and Skills Framework and Development Review process.
- Undertake the four Steps outlined in the Induction and Development Pathway for Senior Nursing Assistants, underpinned by the Standards for Nursing Assistants, as follows:

Step 1: Role Induction. To include:

- Principles of person-centred care and Patient and Client Experience Standards (DHSSPS 2009)
- Mandatory training elements; moving and handling theory, infection prevention and control, waste management, record keeping and basic Life Support, level 1 Quality 2020 Attributes Framework
- Fundamental nursing care to support individuals for example with eating, drinking, washing, toileting, pressure area care and communication
- Role within wider team.

Step 2: Work-based Induction. To include:

- Orientation to the clinical environment/ workplace
- Awareness and understanding of reporting structures
- Application of learning into practice:
 - Fundamental nursing care to support individuals for example eating, drinking, washing, toileting, pressure area care and communication
 - Undertake limited clinical duties as required in the ward/ department, which have been delegated by registered nursing staff.

Step 3: Undertake the Regulated Qualifications Framework (RQF) Development Programme at Level 3. As a minimum the following four compulsory units: communication, personal development, safeguarding and maintenance of quality standards in health and the social care environment must be progressed.

Step 4: Ongoing Development.

- Keep up to date records of own development review process
- Participate in the induction and development of others as required.

Core Competency Pillar of Leadership

- Report all concerns and complaints to appropriate registered nursing staff in a timely manner
- Work within the limits of own competence and responsibility and will refer issues beyond these limits to registered nursing staff
- Act responsibly as a team member and seek help if necessary.

Core Competency Pillar of Research and Development

- Comply with HSC Trust policies, procedures, guidelines and protocols
- Contribute to the delivery of respectful, safe, effective personcentred and compassionate care in order to provide a quality service
- Fully participate in all work place audits as directed by the registered nurse.

Senior Nursing Assistant Education Requirements, Continuous Professional Development

Senior nursing assistants working in critical care will be provided with opportunities to access a range of education and development opportunities to support the delivery of safe, effective, high quality

care which complement the RQF development programme at Level 3. Senior nursing assistants may be considered for further learning in programmes such as:

- Infection Prevention & Control-
- Manual Handling
- Pressure Area Care- Pressure Ulcer Prevention and Management Including PURPOSET and the SSKIN Bundle
- Basic Life Support E-Learning
- Safeguarding Adults
- Safeguarding Children
- Record Keeping for Nursing Assistants: Evidencing Person-Centred Care
- Promoting Psychosocial Wellbeing/ Standards for Nursing Assistants i.e.
 - Emotional Wellbeing for Healthcare Staff
 - Person Centred Practice: An Introduction
- End of Life Care- Palliative and End of Life Care- Ethical Issues
 - Bereavement, Grief and Loss

5.3 CRITICAL CARE STAFF NURSE ROLE:

LEVEL OF PRACTICE 5

Competencies and Education Requirements

These competence statements align with the: NMC Standards of Proficiency (2018); the National Competency Framework for Registered Nurses in Adult Critical Care STEP 1 Competencies (Critical Care Networks National Nurse Leads [CC3N] 2015); the Knowledge and Skills Framework's core dimensions (DoH 2004); and underpinned by the professional principles outlined in The Code (NMC 2018).

Critical Care Context

Critical care is central to the running of an acute hospital, providing support to both emergency and elective surgery, and all medical specialities. The focus of the service is to deliver time-critical intervention when it is needed (ICS 2020) for those persons who are, or who are at risk of, becoming seriously ill, including those experiencing failure of one or more organ systems i.e. heart, lungs, kidneys, liver or brain.

These individuals require closer observation and more intensive clinical interventions than can be provided on a standard ward and are classified as requiring either Level 2 or Level 3 care.

Levels of care are outlined in detail, with practical examples, in the Levels of Adult Critical Care document (Intensive Care Society [ICS] 2021). In summary, Level 1 care refers to patients requiring a higher level of monitoring but do not need critical care. Level 2 applies to those needing either two or more basic organ system interventions, single organ support delivered at an advanced level (excluding advanced respiratory support), long term advanced respiratory support, or patients with high levels of nursing dependency that cannot be met in a Level 1 setting. Level 3 care encompasses advanced respiratory support or monitoring/ support for two or more organ systems at an advanced level. It is also includes Level 2 patients who have delirium/ agitation, or those with chronic impairment of at least one organ that restricts daily activities (comorbidity) and who require support for an acute reversible failure of another organ system.

The critical care environment is a constantly changing field of practice with emerging technologies and complex interventions.

Critical Care Staff Nurse Core Competencies

The critical care staff nurse is defined as a registered nurse who effectively applies fundamental knowledge, skill and judgment to deliver safe, effective and compassionate person-centred care to aid recovery from life-threatening illness, or when survival is unattainable to support the individual and their family with a dignified death and bereavement.

The range of skills expected of a staff nurse include:

- Contributing to population health, considering the wider determinants of health to promote health & wellbeing, protect health, prevent ill health and reduce health inequalities.
- Providing holistic approaches to health and wellbeing, including physical, cognitive, social, and psychological care alongside risk management and support for cultural needs within a climate of mutual trust.
- Applying person-centred assessment skills to determine health and care needs using a range of evidence-based tools.

- Integrating the principles of equality, equity, diversity and inclusion in providing care.
- Applying reasonable adjustments where appropriate, such as offering accessible patient information formats and supporting communication needs.
- Assessing, planning, delivering and evaluating safe, effective, high quality, compassionate person-centred care for individuals with complex health and care needs.
- Co-producing care plans with individuals, families and/or carers.
- Developing therapeutic relationships and promoting selfmanagement, independence, rehabilitation and recovery.
- Communicating effectively, influencing and negotiating, and engaging and facilitating individuals and their families and/ or carers.

Critical care services in NI are committed to fostering and developing the staff nurse along their career pathway by supporting them to identify and access Intended Learning Outcomes in optimum learning environments in partnership with senior nurses, multidisciplinary colleagues and practice/ academic education facilitators. To this end, all registrants new to the critical care environment are given a period of induction, tailored to their learning needs, of 8 to 12 weeks² facilitated by a Lead Assessor.

In extenuating circumstances an extension can, be applied for if required.



All competencies referred to within this document are based on the National Critical Care Competency Framework developed by the Critical Care National Lead Forum (CC3N n.d.), which is currently under review. This framework is supported by the National Standards for Adult Critical Care Nurse Education (CC3N 2023), which underpin critical care nurse learning nationally, to ensure consistency of approach. The framework is structured into four distinct areas, known as STEPs, from 1 through to 4. STEP 1 provides foundational knowledge for critical care nursing. STEPs 2 & 3 represent progression to higher order cognitive and psychomotor competence, aligned with the role of a senior critical care nurse and delivered in partnership with Higher Education Institutions (HEI) and HSC Trusts. STEP 4 supports the development of senior leadership capability within the critical care setting, so long as all previous steps are complete.

Step 1 competencies must be achieved before progressing to Steps 2 and 3 higher education programmes.

CC3N recognises that the breadth and depth of knowledge and skill required to meet STEP 1 competencies is considerable.

They have therefore highlighted the specific competencies that must be completed within the first 12 weeks of induction, with the remainder to be completed over the following year.

The four pillars of competency development: Clinical Practice; Education and Learning, Leadership, and Research and Development are all reflected in the Step 1 competencies (CC3N 2015).

Core Competency Pillar Clinical Practice

The Core Competency Pillar of Clinical Practice is outlined in Step 1 of the National Competency Framework (CC3N 2015). It focuses on the application of knowledge, skill and judgment demonstrated by the staff nurse in the following areas:

- Ensuring that the fundamentals of care are delivered effectively, including nutrition, hydration, bladder, bowel care, personal hygiene and skin integrity.
- Maintaining infection control standards and ensuring people are cared for in clean and hygienic conditions (NMC 2018).
- Delivering safe, effective, high quality, compassionate personcentred nursing care, which includes applying the nursing process across the following physiological systems:
 - Respiratory System
 - Cardiovascular System
 - Renal System

- Gastrointestinal System
- Neurological System
- Integumentary System

And the application of core nursing practices in areas such as:

- Medicines Administration,
- End of Life care
- Admission and Discharge
- Intra- and Inter- Hospital Transfer
- Rehabilitation,
- Communication and teamwork,
- Mental capacity and safeguarding
- Leadership.

Core Competency Pillar for Education and Learning

The second Core Competency Pillar relates to Education and Learning. While this underpins the broader competency framework, particular emphasis is placed on the following expectations for the staff nurse:

- Take responsibility for their own continuous professional development (CPD), ensuring competence is maintained and meets NMC revalidation requirements;
- Engage in a range of learning activities and reflective supervision to enhance practice and care delivery;

- Participate in appraisal processes and contribute to a Personal Development Plan (PDP) to support ongoing professional development;
- Contribute to the development and use of learning materials in a variety of formats for persons, families/ carers, and students;
- Support students and colleagues as part of the wider team, fostering a healthful learning environment that is supportive, inclusive and engaging (McCormack and McCance 2017);
- Learn from shared incident reporting to support the delivery of safe, effective person-centred care;
- Participate in and contribute to professional forums and meetings;
- Act as a supervisor/ assessor for students and staff, in line with the Future Nurse: Standards of proficiency for Registered Nurses and Part 2: Standards for Student Supervision and Assessment (NMC 2018).

Core Competency Pillar Leadership

The last Core Competency Pillar, Leadership, is embedded within the Step 1 Competency Framework (CC3N 2015) and includes the following core expectations for the staff nurse role:

- Demonstrating integrity, HSC values, and self-awareness in daily practice;
- Promoting and upholding standards for safe, effective, high quality and compassionate person-centred care and continuous improvement;
- Encouraging a positive and effective team environment through role modelling and collaboration;
- Offering emotional reassurance and support to colleagues.

Core Competency Pillar Research and Development

The next Core Competency Pillar, Research and Development, is identified as a distinct domain within the Step 1 competency framework (CC3N 2015). It highlights the expectation that staff nurses apply clinical practice activity with an approach that supports benchmarking and continuously improving evidenced based quality standards.

Key sources of quality standards include:

- Care Bundles (Faculty of Intensive Care Medicine [FICM] 2022)
- National Institute for Health and Care Excellence (NICE)
- Faculty of Intensive Care Medicine (FICM)
- Intensive Care Society Guidance (ICS)
- Paediatric Critical Care Society (PCCs)
- Critical Care National Network Nurse Leads Forum (CC3N)
- British Association of Critical Care Nurses (BACCN)
- Royal College of Nursing (RCN)
- National Patient Safety Agency (NPSA)

Critical Care Staff Nurse Education Requirements

To practise as a critical care staff nurse, individuals must be a Registered Nurse with the NMC.

Staff nurses new to critical care will undertake a local and corporate induction programme, as appropriate. If they have previously worked in another area of practice or service within the organisation, the corporate induction may not be required.

In addition, new staff will have the opportunity to complete a preceptorship programme (as per the NI Preceptorship Framework, DoH 2022), alongside the National Competency Framework for Registered Nurses in Adult Critical Care Step 1 Competencies (CC3N 2015).

In NI, completion of Step 1 competencies is supported through 'In-House Teaching Activities' and aligns with the Quality Assurance Framework (NIPEC 2013). Staff will also complete a Learning Contract with their Lead Assessor and Ward Sister/ Charge Nurse, to agree objectives and approach to achieve learning outcomes.

To further support the achievement of Step 1 competencies, staff are provided with a range of educational programmes including:

- Intravenous medicine administration
- Central Venous Access Devices
- Arterial Blood Gas Sampling and Analysis
- Basic Blood Investigations
- Electrocardiogram (ECG) Interpretation
- Airvo training

- Tracheostomy and Laryngectomy
- Deteriorating Adult Assessment Intervention
- Immediate Life Support
- Lung Sounds
- Pressure Ulcer Prevention and management including SKIN Bundle
- Wound Care
- Infection prevention and control training
- Blood Culture Collection
- Quality 2020 Attributes Framework and progressing to Level 2
- Delirium awareness
- Breaking bad news.

5.4 CRITICAL CARE SENIOR STAFF NURSE ROLE:

LEVEL OF PRACTICE 6

Competencies and Education Requirements

These competence statements align with the: NMC Standards of Proficiency (2018); the National Competency Framework for Registered Nurses in Adult Critical Care STEP 2 & 3 Competencies (CC3N 2015); the Knowledge and Skills Framework's core dimensions (DoH 2004); and underpinned by the professional principles outlined in The Code (NMC 2018).

Critical Care Senior Staff Nurse Core Competencies

The Critical Care Senior Staff Nurse, is a registered nurse who effectively applies proficient knowledge, clinical judgment, and advanced technical skill to deliver safe, effective and compassionate person-centred care. They care for individuals recovering from life-threatening illness or injury, and when survival is unattainable, support the individual and their family with end of life care, including dignified death and bereavement.

They lead on the holistic assessment, planning, implementation and evaluation of care, for individuals with highly acute, complex and unpredictable needs, applying integrative clinical reasoning to address the complexities of critical illness across all physiological systems. This may include, supporting inter-hospital transfers of critically ill patients. Their scope of practice reflects higher levels of capability aligned with the Step 2 (CC3n 2015) and Step 3 (CC3N 2015) competencies and the requirements of the Higher Education Institution (HEI) critical care course.

In addition to delivering direct person-centred care, they demonstrate clinical leadership. They frequently provide day-to-day coordination of care, oversee a group of patients, or assume responsibility for a clinical area in the absence of the Ward/Charge Nurse. They contribute at a senior level with the multidisciplinary, utilising their clinical reasoning and expertise to optimise decision making, progress treatment plans for individuals or patient groups, and support the coordination of specialist interventions in complex care situations.



They act as a role model and provide clinical supervision, mentoring and preceptorship to junior colleagues, including registered nurses and nursing assistants. This responsibility includes facilitating learning in practice and assessing clinical competencies.

They may also lead or participate in check-ins or debriefs with staff to help support staff members to manage the demands of their role (FICM 2021). Senior staff nurses also contribute to quality improvement activity, clinical audit or research to improve personcentred care and outcomes.

Core Competency Pillar Clinical Practice

The Core Competency Pillar of Clinical Practice is outlined in Step 2 and Step 3 of the National Competency Framework (CC3N 2015). It focuses on the application of skills, knowledge and behaviours, values and technical abilities that underpin safe, effective, high quality and compassionate nursing care.

Senior staff nurses will demonstrate competence across the same physiological systems and core nursing practices already outlined for staff nurses at level of practice 5, albeit at the higher level of practice expected that is level of practice 6.

In addition, particular emphasis is placed on increased capability in areas of complexity such as: delirium care, spinal care, pain relief, palliative care, continuous renal replacement therapy (CRRT) and temperature targeted management.

The broader scope and higher level of practice reflects the senior staff nurse's developed clinical capability and their added contribution to collaborative teamwork.

Core Competency Pillar Education and Learning

The second Core Competency Pillar is in relation to Education and Learning and although broadly underpins the entire competency framework particular reference has been made in regard to:

- Act as a role model and reflective practitioner
- Actively pursue opportunities and engage with challenges that support personal learning and development
- Motivating and encouraging new starters to develop competence
- Change behaviour in the light of feedback and reflection
- Provide support and guidance to more junior team members
- Assisting with the competency development of new starters:
 - Act as a Lead Assessor for STEP 1 competencies.
- Facilitate learning and review the practice of others

Share attained knowledge and skills

CRITICAL CARE NURSING

- Feedback to mentors, assessors and appraisers in relation to matters relating to the practice of others
- Act as a mentor, preceptor, practice supervisor, assessor to nursing students (NMC 2018), nursing staff and multidisciplinary learners, as appropriate, to foster an optimal learning environment
- Undertake appraisals and support the development of a PDP for staff nurses and nursing assistants.

Core Competency Pillar Leadership

The Core Competency Pillar for Leadership is expanded beyond the scope of the STEP 1 framework and is outlined in STEPs 2 and 3 of the National Competency Framework (CC3N 2015). While this builds upon the Step 1 competencies, particular emphasis is placed on the following expectations for the senior staff nurse:

- Act as a role model, leader and change agent within the team in line with NIPEC's Collective Leadership Framework for Nursing and Midwifery (2024)
- Provide day to day coordination of care, oversee a group of patients, or assume responsibility for a clinical area in the absence of the Ward Sister/ Charge Nurse

- Develop self-awareness and insight into own strengths and limitations
- Effectively manage own time and priorities
- Promote collaborative team working by valuing contributions, seeking views, and providing feedback
- Influences quality care by identifying potential risks, responding to incidents and contributing to a culture of safety (NHS England 2023)
- Participates and contributes to quality improvement aligned with the Attributes Framework for Health and Social Care (DoH 2014)
- Support the development of guidelines and policies for critical care practice
- Fosters information and resource sharing
- Promote the effective and efficient use of resources
- Apply the Deciding to Delegate: A Decision Support Framework for Nursing and Midwifery (NIPEC 2019) when delegating tasks within the team
- Promote and participate in the Link Nurse Framework Supporting Nurses in HSC Trusts (NIPEC 2021), recognising the role of link nurses.

Core Competency Pillar Research and Development

The next Core Competency Pillar, namely Research and Development, builds upon the expectations outlined in the critical care staff nurse role and Step 1 competencies. At the senior staff nurse level, this pillar is further developed and reflects the advanced scope set out in Steps 2 and 3 of the National Competency Framework (CC3N 2015). It focuses on the application of expanded theoretical knowledge and the ability to critically appraise and apply evidence alongside professional judgment. Particular emphasis is placed on the following competencies:

- Demonstrating competent practice based on evidence based practice, experiential learning and established standards
- Participating in problem solving through critical analysis and evaluation of more complex clinical situations
- Applying knowledge and understanding of relevant policies, procedures and guidelines to support safe, effective care
- Integrating research findings and experiential learning into decision making and continuous quality improvement
- Analysing complex situations and contribute to solutions through reflection, interpretation and evaluation

 Participating in benchmarking and audit activities, including those outlined by the Regulation and Quality Improvement Authority (RQIA) for augmented care settings.

Professional organisations referenced under the staff nurse role guide practice at this level, with increased emphasis placed on the application and critique of evidence to support person-centred care delivery and outcomes.

Critical Care Senior Nurse Education Requirements

Key stakeholders across all HSCTs have agreed that a prerequisite for the Critical Care Senior Nurse role is the successful completion of a postgraduate qualification in Critical Care, aligned with the National Standards for Adult Critical Care Nurse Education (CC3N 2023).

In addition, senior staff nurses will be supported with their continuous professional development (CPD), relevant to the role. This may include:

- Advanced Life Support [United Kingdom Resuscitation Council]
- STEP 4 competencies of the National Critical Care Competency Framework
- Leadership programme to develop leadership skills

5.5 CRITICAL CARE ENHANCED NURSE ROLE:

LEVEL OF PRACTICE 7

Competencies and Education Requirements

These competence statements align with the: NMC Standards of Proficiency (2018); the National Competency Framework for Registered Nurses in Adult Critical Care STEP 4 Competencies (CC3N 2018), the Knowledge and Skills Framework's core dimensions (DoH 2004); and underpinned by the professional principles outlined in The Code (NMC 2018).

The Critical Care Enhanced Nurse is an expert practitioner who provides enhanced clinical oversight across the critical care unit, leading the safe, effective, coordinated, and person-centred management of care for individuals with highly complex, acute and unpredictable needs. They practise with a high level of autonomy, providing expert clinical advice through the interpretation of complex clinical information and application of clinical judgment, while maintaining oversight of emerging risks and guiding safe, responsive care decisions across the critical care unit.

They provide expert clinical advice and support to the multidisciplinary team, contribute to clinical decision making, coordinate care across the unit, and ensure that care remains responsive to the needs of the individual. Their responsibilities include the leadership and management of staff, ensuring the delivery of the highest standards of care and the promotion of a person-centred culture of continuous learning and development through reflection, supervision, mentorship and appraisal.

They are also responsible for maintaining efficient and responsive service delivery, ensuring equity of access to critical care, delivering the highest standards of care, and optimising resources to meet the demands of the service. Their role includes contributing to audit, research, and quality improvement initiatives to continuously improve person-centred care and outcomes.

The scope of clinical practice is recognised to have progressed beyond that of a critical care senior nurse and is demonstrated under the four pillars of competency derivation, that is; Clinical Practice, Education and Learning, Leadership, Research and Development.

Core Competency Pillar Clinical Practice

Key stakeholders of this career pathway in NI have confirmed that the expectations and competencies for the Critical Care Enhanced Nurse role are reflective of those outlined in STEP 4 competencies of the National Critical Care Competency Framework (CC3N 2018), and aligned to the NIPEC Role Framework for Specialist Nursing Roles (DoH 2025a), currently under review.

Particular emphasis at this level is placed on the following aspects for delivery of safe, and effective person-centred care (Public Health Agency [PHA] and NIPEC 2023):

- Lead quality improvement initiatives in line with the Quality 2020 Key Principles for Learning and Development, to enhance person-centred outcomes and promote a positive experience for people who use services (PHA 2014)
- Apply critical analysis and appraisal of the evidence base to inform clinical practice and person-centred outcomes
- Anticipate, recognise and manage complex clinical issues proactively to support safe, responsive and effective care
- Undertake early recognition and targeted intervention in response to patient presentation, aiming to reduce deterioration or escalation of care

- Demonstrate advanced clinical assessment skills to inform complex decision making and deliver safe, effective, high quality, compassionate person-centred care
- Plan, coordinate, and evaluate person-centred care for a group of patients, while supporting and guiding colleagues in care delivery
- Contribute to effective patient flow management, including timely admission and discharge processes, repatriation, and escalation pathways
- Respond in a prompt, transparent and person-centred manner to complaints regarding care or services
- Manage untoward incidents, with a safe and effective personcentred approach
- Coordinate and contribute to a major / mass casualty incident response in collaboration with the multidisciplinary team, in line with protocols
- Recognise own limitations and proactively seek advice and/ or support, identifying the appropriate individuals or teams to approach
- Demonstrate resilience and readiness to adapt in response to change.

Enhanced nurses will demonstrate competence across the same physiological systems and core nursing practices as outlined for the senior staff nurse role, with the added complexity and autonomy expected at Level 7.

Core Competency Pillar Education and Learning

The second Core Competency Pillar is in relation to Education and Learning and is outlined in the STEP 4 National Competency Framework in line with the Role Framework for Specialist Nurse Roles (DoH 2025a). In addition, the STEP 4 competencies of the National Critical Care Competency Framework (CC3N 2018) include:

- Drives a culture of continuous professional development (CPD) and learning across the service, acting as a role model and facilitator of learning
- Supports a culture of learning, assessment and development of the team alongside the Clinical Educator and key stakeholders including:
 - Appraisal facilitation in line with individual needs, organisational objectives and service plans
 - Identify and manage performance issues constructively, ensuring they are addressed promptly, sensitively, professionally and acted upon

- Provides effective mentorship/ coaching and supports clinical supervision and the use of reflective practice
- Supports training programmes
- In relation to staff allocation to be cognisant of:
 - Competency/ development of the nurse
 - Level of supervision and/or support required
 - Availability of additional support (i.e. Clinical Educator)
 - People who use service , staff capabilities and associated workload
 - Associated workload (i.e. mentoring) and consider suitability of allocation to meet the person's needs and learner's needs
- In collaboration with the Clinical Educator, and key stakeholders highlight any training and support for medical devices, as required.

Core Competency Pillar Leadership

The core competencies of leadership for enhanced nurses are outlined in the STEP 4 National Competency Framework in line with the Role Framework for Specialist Nurse Roles (DoH 2025a). In addition, key stakeholders in NI have emphasised the following competencies under this pillar:

Demonstrate compassionate leadership in alignment with NIPEC's Collective Leadership Framework for Nursing and Midwifery (DoH 2024)

- Demonstrate high challenge and support in regard to:
 - Evidence based standards;
 - Performance management;
- Collaborate with key stakeholders to ensure effective structures, processes and systems are in place in relation to clinical governance
- Liaison with the multidisciplinary team, clinical specialists, and professional nursing team, including clinical educators.

Core Competency Pillar Research and Development

The last Core Competency Pillar, namely Research and Development, builds upon the expectations outlined for the senior staff nurse role and the Step 2 and 3 National Competency Framework (CC3N 2015). At this level, enhanced nurses are expected to demonstrate competence for research and development as outlined in the STEP 4 National Competency Framework in line with the Role Framework for Specialist Nurse Roles (DoH 2025a).

Particular emphasis is placed on the following competencies:

- Promoting and embedding evidence-based practice through critical evaluation, audit, and critical reflection to support improved patient experience and outcomes
- Leading or contributing to quality improvement initiatives using recognised methodologies and supporting colleagues through change
- Creating and supporting an environment that fosters continuous quality improvement, informed by clinical research activity and governance processes.

Critical Care Enhanced Nurse Education Requirements

The education requirements for the Critical Care Enhanced Nurse role include those identified for the Critical Care Senior Staff Nurse role. In addition, the Critical Care Enhanced Nurse Role are required to demonstrate proficiency in the STEP 4 competencies of the National Critical Care Competency Framework (CC3N 2018) and have successfully completed a Leadership Programme.

5.6 CRITICAL CARE ADVANCED NURSE PRACTITIONER ROLE³:

LEVEL OF PRACTICE 8

Competencies and Education Requirements

Advanced Nurse Practitioner Core Competencies

These competence statements align with the: NMC Standards of Proficiency (2018); the Faculty of Intensive Care Curriculum (FICM 2023), the Knowledge and Skills Framework's core dimensions (DoH 2004); and underpinned by the professional principles outlined in The Code (NMC 2018).

The critical care advanced practitioner nurse (ANP) role is aligned to the Role Framework for Advanced Nurse Practitioners (DoH 2025b), which sets out the scope, core competencies and educational requirements of advanced nursing practice. At this level, level of practice 8, ANPs practice autonomously at an advanced level to deliver safe, effective and compassionate person-centred care.

This includes supporting recovery from life-threatening illness, or when survival is unattainable, providing care to the individual and their family with a dignified death and bereavement. They undertake comprehensive health assessments, including differential diagnosis and will diagnose, prescribe care and treatment (DoH 2025b). ANPs apply their evidence informed knowledge, skills and capability to influence, shape, deliver and lead safe and effective care, while managing risk, uncertainty and complexity (NMC 2025).

The role is centred on delivering highly complex person-centred care that is focused on the needs of individuals, recognising acutely ill patients, initiating early treatment, and supporting patients throughout their critical illness. Their practice is informed by the standards set out in GPICs (FICM 2022), and underpinned by the competencies detailed in the Faculty of Intensive Care Curriculum (FICM 2023).

³ All Advanced Nurse Practitioner roles should have an associated job plan.



The generic Advanced Nursing Practice role is founded on four core competencies. Direct Clinical Practice is the first core competency of Advanced Nursing Practice and is supported by the three additional competencies: Education and Learning, Leadership, and Research and Development. In addition, they practise as educators, clinical leaders, innovators and contributors to service transformation and improvement, as outlined in the Advanced Nursing Practice Report (DoH 2023).

Only those who meet the role requirements and are employed as an Advanced Practice Nurse, may use this title.

Critical Care Advanced Practitioner Nurse Education Requirements

The core education requirements for the ANP role in NI are stipulated in the Role Framework (DoH 2025b). Advanced Nurse Practitioners must have successfully completed a MSc in Advanced Practice in Critical Care and must meet GPICs standards (FICM 2022) stipulating the attainment of the FICM curriculum (FICM to enable application to the FICM Advanced Critical Care Practitioner [ACCP] Faculty).

Students undertaking the MSc Advanced Practice in Critical Care programme will have an Educational Supervisor [ES] who will support them throughout their training period and assist in monitoring and defining the trainee's educational requirements. In addition, for each clinical attachment the trainee will have a Clinical Supervisor [CS] responsible for monitoring and guiding their progress in each clinical area. The ES will provide an end of placement assessment.

In order to be eligible to apply for the MSc Advanced Practice Critical Care programme, applicants must be on the NMC register, have a Post Graduate qualification in Critical Care, meeting the National Standards for Adult Critical Care Nurse Education (V3) (CC3N 2023), a degree or equivalent and demonstrate evidence of appropriate continuing professional development.

The Advanced Nurse Practitioner should be supported through annual appraisal and supervision to continue to develop skills in their role.

5.7 CRITICAL CARE CONSULTANT NURSE ROLE:

LEVEL OF PRACTICE 9

Competencies and Education Requirements

These competence statements align with the: NMC Standards of Proficiency (2018); the Role Framework for Consultant Nurse roles (DoH 2025c), the Knowledge and Skills Framework's core dimensions (DoH 2004); and underpinned by the professional principles outlined in The Code (NMC 2018).

Critical Care Consultant Nurse Core Competencies

The Critical Care Consultant Nurse is described in the Role Framework for Consultant Nurse Roles document (DoH 2025c) as an autonomous practitioner, practicing as an expert at a highly advanced level in the provision of high quality, safe and effective person-centred care. They integrate direct, higher level clinical expertise together with education and learning, leadership, research, service development and evaluation activities. Practising across organisational and professional boundaries, they demonstrate leadership behaviours aligned with the Collective Leadership

Framework for Nursing and Midwifery (DoH 2024), influencing service and policy development at strategic level to address population health needs. Consultant Nurses maintain a strong clinical commitment, provide highly specialist expert advice to clinical colleagues, and contribute to system development, innovation, and advancement of skills and capability across critical care services at local, regional, and national levels.

While the consultant nurse role aligns to the Role Framework for Consultant Nurses (DoH 2025c), the working group also reviewed wider United Kingdom (UK) guidance, including that produced by NHS Health Education England (2020 and 2023). In this context, consideration has been given to complementary elements that may further inform the role and its associated competencies. These are outlined below:

In relation to clinical practice:

- Share decision-making with people who use service and partners in every situation
- Help establish peer reviews and evaluations of safety, quality and health outcomes, from pathway to systems level
- Lead the ongoing development of care and service pathways, standards, policies, guidelines, procedures, service improvement and practice accreditation
- Collaborate with professional bodies, clinical networks, commissioners, regional and national level, third sectors, charities and other partners.

In regard to education and learning:

- Contributes with learning and development across the system to improve the experience of people who use the service
- Optimises the workplace as a resource for active learning, development and improvement, to support quality learning cultures and placements

- Motivate and coach or mentor individuals and teams to develop capacity and capability across the health and social care at regional and national levels
- Collaborate with higher education organisations to support professional curriculums, regionally and nationally.

With respect to Leadership:

- Forms networks that encourage joint working within and across organisations and sectors
- Use effective ways of meeting service needs through strategic engagement, measurement indicators, improvement approaches, and evaluation of services and care
- Lead strategic development, improvement, inquiry and innovation across specific workstreams that informs and responds to system objectives
- Actively involves key stakeholders in creating a shared vision which is in line with population health across health and social care.



In relation to research and development:

- Demonstrates how research can be combined with learning and practice to achieve evidence based practice and improve personcentred outcomes
- Contributes to expansion of knowledge through comprehensive research, innovation and inquiry
 - Develops and establishes a combined approach to practice, service and quality, focusing on improvement, development, research, academic inquiry and innovation across the service and system
 - Leads and contributes to regional, national and international forums for development of guidelines, standards, policies and strategies.

Critical Care Consultant Nurse Education Requirements

In order to be eligible to apply for a Critical Care Consultant Nurse role, practitioners must be on the NMC register, have a Master's degree or equivalent, a Post Graduate qualification in Critical Care which meets the National Standards for Adult Critical Care Nurse Education (CC3N 2023), STEP 4 competency proficiency, and a leadership programme may require a NMC recordable Independent and Supplementary prescribing qualification (NMC V300).

The Critical Care Consultant Nurse role demands a portfolio of career long learning, experience and formal education, up to or beyond master's degree level; research experience and a record of scholarship and publication.

6.0 ADDITIONAL SUPPORTING EVIDENCE AND SOURCE DOCUMENTS

In addition to the references already listed in the document the following documents informed the development of this pathway.

- Health Services Executive and Digital Health and Care Northern Ireland. (2022). All-Ireland Digital Health Capability Framework for Health and Social Care. Available at <u>Publications – DHCNI</u> [Accessed 1 May 2025]
- Department of Health. 2022 . *Northern Ireland Preceptorship Framework for Nursing and Midwifery.* Belfast: NIPEC.
- Department of Health. 2022. *Northern Ireland Reflective Supervision Framework*. Belfast: NIPEC.

- Department of Health. 2022. *Reflective Supervision Regional Safeguarding Supervision Policy and Standards for Nurses and Midwives*. Belfast: Public Health Agency.
- Regulation and Quality Improvement Authority. 2014. Guidance and procedural paper for Regulation and Quality Improvement Authority [RQIA] Inspections in Augmented Care Areas; Regional Healthcare Hygiene and Cleanliness Audit Tool, Regional Critical Care Infection Prevention and Control Audit Tool and Regional Infection Prevention and Control Clinical Practices Audit Tool For Augmented Care Areas. Belfast: RQIA
- Nursing and Midwifery Council. (2017). Enabling Professionalism in nursing and midwifery practice. London: NMC



How does the critical care nursing career pathway connect to the Chief

Nursing Officer's (CNO) vision?

The CNO's vision for NI is to build strong foundations that maximise the potential of nurses and midwives in a safe, inclusive and healthful culture; creating the conditions for them to confidently deliver high quality, evidence-based care that meets population health needs (Department of Health [DoH] 2023).



To achieve this the CNO has identified four initial priorities: Career Pathways, Workforce and Workload Planning, a Quality Excellence Framework, and Education and Training. The Critical Care Nursing Career Pathway connects to this vision by providing an agile and responsive career pathway, aligned to levels of practice, to promote a highly skilled workforce to enhance person-centred care and population outcomes to meet population health needs.

How is population health need determined for critical care services?

When considering population health need in the context of critical care, it is helpful to first refer to the infographic above, which places population health at the centre of any service plan. Before exploring how need is assessed, it is also to establish a shared understanding of what critical care is. The Intensive Care Society (ICS) defines critical care as being central to the running of an acute hospital and provides time-critical, specialised care to patients with or at risk of life-threatening organ failure (ICS 2023).

Population health need refers to the specific health and service requirements of a defined population, identified by combining data, outcomes, the wider determinants of health and inequality, and clinical insight (Public Health Agency [PHA] 2022). There will be a range of recognised datasets from which the information needed to identify population health need can be sourced these include: internal health and social care information systems, the Northern Ireland Statistics and Research Agency (NISRA 2025) and the Health Inequalities Annual Report (DoH 2024).

Specific to adult critical care, the Intensive Care National Audit and Research Centre (ICNARC) provide quality indicator results for units across England, Wales and NI based on comparisons between critical care units with similar admission profiles (ICNARC 2019). The admission profiles take into consideration the following: whether the unit has a specialist profile; number of admissions; proportion of surgical admissions; proportion of admissions under particular specialities and proportion of Level 3 bed days provided.

From a regional perspective, a high-level summary of the profile of the critical care population, including demographics and admission characteristics from 2023-2024 is provided (ICNARC 2024), in comparison with national Case Mix Programme (CMP) data. This represents the first full reporting year following the Covid pandemic (see Table 1).

Table 1. Regional Critical Care Population Profile Compared with National Case Mix Programme Data, 1 April 2023 to 31 March 2024

Characteristic	Regional Data 2023-2024	National Case Mix Programme (CMP) data 2023-2024
Total admissions	3,811	
Mean Age (years)	57.9	60.5
Index of Multiple Deprivation (IMD) quintile	Least deprived 14.6% Most deprived 25.7%	Least deprived 16.9% Most deprived 22.7%
Emergency department or not in hospital- unplanned admission (%)	38.9%	26.4%
Non- surgical admissions (%)	69.9	53.1
Emergency/ urgent surgical admissions (%)	21.6	18.0
Elective/ scheduled surgical admissions (%)	8.5	28.9
Days at level 3 care (% of all patient days)	52.2	46.3

In addition to ICNARC data, specialist critical care units such as Cardiac Surgical Intensive Care (CSICU) and Paediatric Intensive Care (PICU) also contribute to national benchmarking sources. The National Institute for Cardiovascular Outcomes Research (NICOR) provides data through its National Cardiac Audit Programme Annual Report; in 2024, NI's CSICU recorded 813 admissions (NICOR 2024). Similarly, PICU benchmarks through the Paediatric Intensive Care Audit Network (PICANet) with their State of the Nation Report in 2023; NI's PICU recorded 425 admissions (PICANet 2023).

As part of service planning, each unit analyses and benchmarks its own population health data in sufficient detail to provide a profile of their population health need, clinical activity and person-centred outcomes. This includes wider demographics, activity, levels of care, length of stay, admission groups, organ support and treatment/interventions.

How does Workforce/ Workload Planning help to determine roles and staffing in critical care?

To answer this question, it is helpful to first understand what Workforce Planning is. It is also useful to refer back to the Shaping our Future infographic, which illustrates its position as one of the CNO's top four priorities. Workforce Planning is defined in the Regional HSC Workforce Planning Framework as 'ensuring a workforce of the right size, with the right skills, organised in the right way, delivering services to provide the best possible care for patients and clients' (DoH 2015).

The framework sets out the Skills for Health Six Steps Methodology to Integrated Workforce Planning (2008) and its underlying principles as the primary model for workforce planning across Health and Social Care (HSC) in NI.

Once population health needs are identified, services can define the most appropriate service model to deliver population health outcomes and safe, effective and high-quality person-centred care (McCormack and McCance 2017). This in turn, enables the development of a workforce profile that will deliver the service model, taking into consideration the skills needed by the workforce and the types and numbers of staff required. Reliable and valid workforce tools such as the Common Staffing Method (Health Improvement Scotland (HIS) 2024) provide the data necessary to inform workforce and workload planning estimates. This method combines a triangulated approach utilising; evidence based workforce tool's, professional judgment tool's, measures of quality indicators and patient experience, local context, risk assessment and clinical engagement. Measures of quality indicators and patient experience will be informed by NIPEC Quality Excellence Framework (NIPEC 2025), which is another of the CNO's key priorities as indicated in the Shaping our Future infographic above.

All of this information forms the basis for assessing the size, composition and skill set of the team required to safely and efficiently deliver the critical care service.

How does workforce planning inform education and training for the critical care nursing career pathway?

This planning process sits within the NI Career Model for Nursing and Midwifery and is designed to support career development for nursing and midwifery roles. It describes how careers can be supported, standards of performance expectations, and details the knowledge, skills and behaviours necessary for the individual roles.

It is supplemented with a Learning and Development Framework to guide individual nurses, midwives and healthcare support workers to access training and development in respect of the knowledge, skills and behaviours needed along their career journey.

The Model supports workforce planning and design and guides educators in the development and delivery of relevant training and development approaches.

As another one of the CNO's key priorities, this focus on education and training seeks to optimise the contribution of nurses and midwives as laid out in the Nursing and Midwifery Task Group report (DoH 2020). In doing so, it ensures that the development of staff within the critical care nursing career pathway is responsive to service needs, workforce plans, and population health priorities.

How is the critical care nursing career pathway adapted for critical care service's?

The workforce plan provides the foundation for determining the roles, skills and staffing levels required within the critical care service, based on population health needs and the service model.

Hence, this directly informs the local application of the critical care nursing career pathway.

Whilst the career pathway provides a regional framework to promote consistency, its application will be guided by the local service model. Therefore, it is important to note that **not all roles or levels of practice will be required in every unit.**

How does the critical care nursing career pathway support nurses to deliver person-centred care in critical care settings?

McCormack (2024) ascertains that person-centred care cannot be fully realised without developing and sustaining person-centred cultures. This requires a focus on the personhood of staff and their wellbeing as

In this context, the career pathway by outlining, the level of practice, the minimum competencies and education requirements required for each role which are aligned to the workforce plan, acts as an important mechanism to enable person-centred cultures.

well as the individuals they care for.

person-centred cultures.

McCormack & McCo

How can the critical care nursing career pathway be used in practice?

The critical care nursing career pathway is a Clinical Career Pathway specific to critical care nursing. It outlines the critical care core competencies and education requirements, aligned to the required level of practice, within critical care and is designed to build on NIPEC's existing core Role Frameworks, including those for Nursing/Senior Nursing Assistants (DoH 2025 a), Registered Nurses (DoH 2025d), Specialist Nurses (NIPEC 2018), Advanced Practitioners (DoH 2025 b) and Consultant Nurses (DoH 2025 c).

While the purpose of this document is to focus on the clinical career pathway, it is important to recognise that this is one of three overarching career pathways identified by the CNO in her vision to develop and optimise the contribution of the nursing and midwifery workforce to meet population health needs. The other two pathways are the Education and Research Pathway, and the Operational Management Pathway. This widening of approach to career pathways provides nurses with the opportunity to explore and transition between different career options and to enhance professional development to meet population health needs.



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For each role described in the critical care career pathway, the required competencies have been structured around the four interconnected pillars of practice expected within that role i.e. Clinical Practice, Education and Learning, Leadership, and Research and Development. The weighting attributed across each pillar is proportionate to the expectations within the role to meet population health needs.

See Section 3.0 for more information about the levels and pillars of practice.

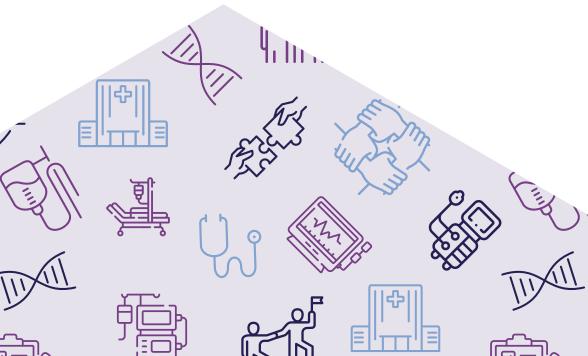


Who can use the critical care nursing Career Pathway?

The career pathway defines and describes the core competencies and education requirements for each nursing role, along with the associated level of practice, to support the delivery of high- quality critical care services. It is a resource which can be used by a range of stakeholders across the system, including nurses, managers, educators, and providers in the following ways:

- Supports the nurse, and nursing team by enabling effective learning and development throughout their careers, promoting practice within healthful and person-centred cultures.
- **Ensures consistent and equitable of access** to safe, effective and high quality critical care services that meet population health needs, through ongoing investment in the development of the nursing workforce.
- Supports managers and team leaders to understand the requirements of each role and to enable nurses and wider team to develop within their posts, with access to the necessary resources and support.
- Supports educators and those facilitating learning, whether in education provider settings or practice environments, by informing programme design, structured assessment, and development planning, using standardised tools by the National Critical Care Network (Critical Care National Lead Forum, CC3N 2018) and NIPEC.

Supports providers by clearly outlining the competencies
required to deliver the critical care service. When used in
conjunction with workforce planning, the pathway provides
assurance that staffing is sufficient, suitably qualified,
competent, skilled and experienced to meet care and treatment
needs safely and effectively.



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