

Acute Oncology Knowledge and Skills Guidance

Acute Oncology Education and Training Group

This guidance has been developed by a multidisciplinary group of clinical professionals, and aims to support the delivery of appropriate knowledge and skills to address competency for multidisciplinary healthcare workers who may be involved in the care of adult patients who present with acute oncology problems.

This guidance will be reviewed with stakeholders after a period of 1 year and updated if required.

Version 1: Amended October 4th 2018

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Disclaimer

The information contained in this guidance is a consensus of the development and consultation groups' views. The guidance provided should be used in conjunction with any local policies / procedures / guidelines and should be approved for use according to each organisation's clinical governance process. Care has been taken in the preparation of the information contained in this document. The authors make no representation or guarantee of any kind whatsoever regarding the content or its use or application, and disclaim any responsibility for its use or application in any way.

Introduction

Acute oncology services aim to improve the quality of care provided to the following groups of patients:

- Acutely unwell adult patients who present as an emergency and have a suspected new diagnosis of cancer
- Acutely unwell adult patients who are currently receiving systemic anti-cancer treatment and/or radiotherapy
- Acutely unwell adult patients who have a known cancer diagnosis and may be suffering from acute complications of cancer

National guidance^{1,2} emphasises the importance of providing appropriate training and support to all healthcare workers who may be involved in the care of these patients. Patients will present to primary, community and urgent care workers, and role-specific appropriate education should be available to ensure that they have the skills required to recognise acute oncology presentations and know how to access support and advice. The guidance is not discipline specific, but has been developed to address the level of acute oncology skill and knowledge that is required for each worker to fulfill the requirements of their role in the acute oncology patient pathway.

This guidance has been developed by a multidisciplinary group of clinical professionals, with UK-wide representation in the development and consultation groups. The guidance aims to support the delivery of appropriate education and training to address competency for people working in healthcare who may be involved with patients who present with acute oncology problems.

This competency guidance should sit alongside and complement role-specific competency frameworks, such as the Royal College of Nursing (RCN) / United Kingdom Oncology Nursing Society (UKONS) Career and Education Framework for Cancer Nursing³ and the Skills for Health Career Framework (SHCF).⁴

The guidance consists of:



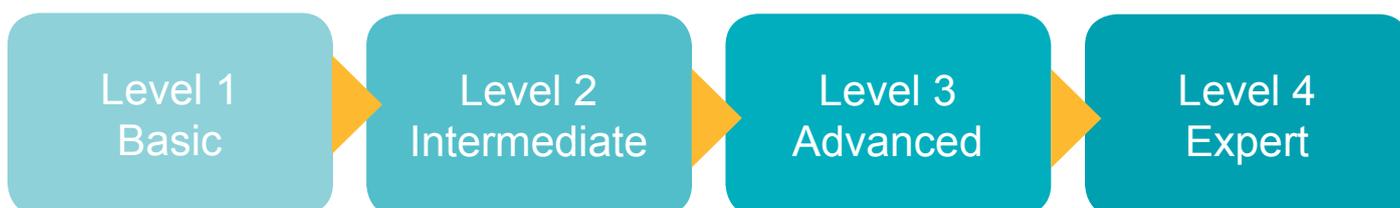
The Skills Framework

This framework is descriptive and details four levels of role-specific skill and expertise for general / non-specialist and specialist healthcare workers involved in the care of people affected by cancer who may be experiencing acute problems related to their cancer or the treatment they are receiving. The provision of care for this vulnerable group of patients is referred to as Acute Oncology.

The Acute Oncology Patient Pathway begins at the first presentation to a healthcare worker for the episode of care. This framework spans Primary, Urgent and Acute Care Providers, and describes the level of knowledge and skill required by the healthcare worker dependent on their role in the patient pathway.

For example, a Community Primary Care Nurse would need to be able to initiate the required emergency management to support the patient and liaise with Acute Oncology Services for further guidance; this equates to Level 1 (Basic).

The four levels are:



The levels above have been mapped against the following guidelines (Table 1, Page 4):

- RCN / UKONS Career and Education Framework for Cancer Nursing 2017³
- Skills for Health Career Framework 2010⁴

Table 1: Skills Reference Map

Acute Oncology Skills Framework	RCN / UKONS Career and Education Framework for Cancer Nursing (2017) ³	Skills for Health Career Framework (SHCF) (2010) ⁴
Level 1 – Basic	Pre-registration nursing programmes Support workers in Health and Social care	Level 1 = indicative title: Cadet Level 2 = indicative title: Support Worker Level 3 = indicative title: Senior Healthcare Worker
Level 2 – Intermediate	General, non-specialist cancer settings / roles	Level 4 = indicative level: Assistant / Associate Practitioner Level 5 = indicative level:
Level 3 – Advanced	Specialist cancer settings / roles	Level 6 = indicative level: Specialist / Senior Practitioner Level 7 = Advanced Practitioner
Level 4 – Expert	Specialist cancer settings / roles	Level 8 = indicative level: Consultant

Instructions for Use

1

Users are expected to work with their supervisor / mentor to agree the level of skill applicable to their individual role and responsibilities

2

The list of competencies defined in this guidance should be cross-referenced with the individual's job description and competency level/s to be achieved and agreed. This process should also be followed for roles that are not listed

3

It is recognised that some individual competency measures in the agreed level may not apply to the individual's role; in this case they can be marked as not applicable once agreed with the line manager / appropriate manager

4

This will provide an individualised set of role-specific competencies agreed by both the individual concerned and their line manager

5

The agreed skill level should be completed, and competency confirmed by an agreed mentor / assessor within your organisation

This process can also be used to compile a development programme for more junior staff joining the workforce. This competency guideline should sit alongside and complement other role-specific competencies.

The following should be determined by each organisation locally:

- Local guidelines for who can assess and sign off the competencies
- The method of completing and recording the Evidence of Completion – whether manually or electronically
- Document retention requirements for the Evidence of Completion, and whether each trainee is required to keep a personal copy of this form
- The method by which Staff Competency Records, Training Registers and Personnel Files should be updated

Level 1 – Basic

Foundation-level knowledge for people working in non-cancer specialist healthcare who may be involved in the care of the following patient groups:

- Acutely unwell adult patients who present as an emergency and have a suspected new diagnosis of cancer
- Acutely unwell adult patients who are currently receiving systemic anti-cancer treatment and/or radiotherapy
- Acutely unwell adult patients who have a known cancer diagnosis and may be suffering from acute complications of cancer

The provision of care for this vulnerable group of patients is referred to as Acute Oncology.

To ensure that:

- There is an understanding of the principles of acute cancer care
- Patients with acute cancer or cancer treatment complications and presentations are recognised
- The importance of urgent intervention to get the best outcomes for patients with acute complications and problems is fully understood
- How and when to contact the local Acute Oncology Service and have an understanding of the service they provide
- Referral and communication with the hospital Acute Oncology Service is completed as appropriate

Competency will be demonstrated by completion of the Level 1 competency portfolio

Applicable to:

- Ambulance patient carers / handlers
 - 111 call handlers
 - 999 call handlers
- Community / Primary Care Nurses, and Healthcare Support Teams
- General Practice Teams
- Hospital and Community Allied Health Professionals
- Students: Nurses / Medical students / Allied Healthcare Professionals
- Non-oncology Clinical Nurse Specialists (e.g. Diabetes Clinical Nurse Specialists)
- All healthcare professionals working in non-oncology specialist areas that accept, assess and/or admit acutely unwell patients
- Diagnostic Radiographers
- Hospital and Community Pharmacists, Pharmacy Technicians and Assistants
- Administrative personnel who have regular patient contact, e.g. medical secretaries

Competency Level 1 – Basic

Covering:

- The skills for the individual working in healthcare settings
- The knowledge and education required, once in post

This document should be used as part of acute oncology training for the induction and awareness of all those involved in the recognition and management of acute oncology patients.

This framework highlights specific knowledge and skills required to manage the patient group and/or service defined; it is not discipline or band specific.

This document is intended to be retained on the personnel or training file of each member of staff as a permanent and personal record of training and development, and will provide accurate, documented evidence of established and ongoing competency.

Prior to assessment – pre-learning:

Demonstrate awareness of local guidance pertaining to Acute Oncology Services and its relevance to your role / practice setting.

May include the following:

- Local hospital Acute Oncology Guidelines
- Patient alert cards and advice line services
- Local Acute Oncology Service information and pathways

List agreed relevant documents to read below:

1. _____
2. _____

Evidence of education and training undertaken to support this assessment; this may include, for example, the organization's Acute Oncology Induction Programme.

List below a minimum of two pieces of evidence:

1. _____
2. _____

A. The Hospital Acute Oncology Service		✓ or x
Demonstrate an understanding of the relevant hospital's Acute Oncology Services and their role within the Acute Care Pathway	<p>Answers should include:</p> <ul style="list-style-type: none"> • Who the acute oncology team are • Appropriate client / patient groups • Accessible acute oncology teams within the region 	
How would you contact the local Acute Oncology Service?	<p>Answers should include:</p> <ul style="list-style-type: none"> • Telephone number • Email address • Bleep/pager number • Where this detail can be found 	
B. The 24/7 Oncology Advice Service		✓ or x
Demonstrate an understanding of the 24/7 Patient Advice Line service	<p>Answers should include:</p> <ul style="list-style-type: none"> • The advice line number • Appropriate client / patient groups, e.g. for patients that have received anti-cancer treatment or radiotherapy • How and when to direct patients to this service 	
Demonstrate knowledge of the 24/7 Consultant Oncologist On-Call Service	<p>Answers should include:</p> <ul style="list-style-type: none"> • How to access this service, e.g. contact pathways and presentations • Appropriate client / patient groups, e.g. for healthcare professionals to access urgent advice regarding patient management • When to contact this service 	
C. Acute Oncology Guidelines and Pathways		✓ or x
Demonstrate knowledge of the relevant hospital's Acute Oncology Guidelines and content	<p>Answers should include:</p> <ul style="list-style-type: none"> • How Acute Oncology Guidelines would be accessed, e.g. the organisation's website / intranet / resource folders • Overview of potential acute oncology problems / presentations • Tools that can be used to assess patient risk, e.g. UKONS Primary Care Risk Assessment Tool and patient-held alert cards 	
Demonstrate knowledge of the Metastatic Spinal Cord Compression Pathway	<p>Answers should include:</p> <ul style="list-style-type: none"> • Awareness of 'Red Flags' and use of patient alert cards • The pathway and process for urgent referral • Awareness of the initial care and management of patients with suspected Metastatic Spinal Cord Compression, e.g. spinal stability and safety 	
Demonstrate knowledge of the Suspected (Neutropenic) Sepsis Care Pathway	<p>Answers should include:</p> <ul style="list-style-type: none"> • Awareness of the sepsis patient risk tools that can be used to assess patient risk e.g. UKONS Primary Care Risk Assessment Tool and patient alert cards • Recognition of significant signs and symptoms that should prompt urgent referral • Urgent care pathway, e.g. 999 	

D. Communication and Documentation		✓ or x
Demonstrate importance of communicating a patient's presentation and/or admission	Answers should include: <ul style="list-style-type: none"> • Recognition of the role of communication in a safe and efficient patient care pathway • A description of the appropriate communication pathway • List who should be contacted if applicable 	
Demonstrate importance of comprehensive documentation and reporting	Answers should include: <ul style="list-style-type: none"> • Recognition of the importance of correct documentation, e.g. legal and professional responsibilities 	

I have completed Level 1 of the Acute Oncology Knowledge and Skills Framework, covering the elements listed, and confirm my assessment of competence:

Member of staff (print name): _____

Member of staff (signature): _____

Organisation: _____

Date: _____

I have assessed the member of staff named above and confirm their competence accordingly:

Assessor (print name): _____

Assessor (signature): _____

Organisation: _____

Date: _____

Comments: _____

Level 2 – Intermediate

Intermediate level knowledge, skills and competency for registered healthcare professionals who provide cancer care as part of their usual roles, and may be involved in the care of any of the following patient groups:

- Acutely unwell adult patients who present as an emergency and have a suspected new diagnosis of cancer
- Acutely unwell adult patients who are currently receiving systemic anti-cancer treatment and/or radiotherapy
- Acutely unwell adult patients who have a known cancer diagnosis and may be suffering from acute complications of cancer

To ensure that:

- There is an understanding of the principles of acute oncology
- Acute oncology patients and presentations are fully recognised
- The importance of urgent intervention to get the best outcomes for patients with acute oncology problems is fully understood
- There is an understanding of the local Acute Oncology Service provided and how and when to contact them
- Required urgent / emergency management is initiated
- Referral and communication with the Acute Oncology Service is completed as appropriate
- Appropriate ongoing management of the patient is ensured

Competency will be demonstrated by completion of the Level 2 competency portfolio

Applicable to:

- Paramedics and Ambulance Clinicians
- General Practitioners
- Acute Care Allied Healthcare Professionals
- Registered healthcare professionals working in areas that accept, assess and/or admit acutely unwell patients
- Oncology / Haematology Site-Specific Clinical Nurse Specialists
- Hospice and Palliative Care Community Teams
- Specialist Palliative Care Teams (or Level 3 if they have a regular, active participatory role in the provision of Acute Oncology Services)
- All Junior Doctors in the hospital
- All Specialist Registrars, Speciality Doctors and Consultants in acute and emergency care areas
- Hospital consultants other than oncologists and haematologists

Competency Level 2 – Intermediate

Covering:

- The skills for the individual practitioner
- The knowledge, skills and competency required, once in post
- The requirements of on-going competency and assessment

This document should be used in conjunction with the appropriate acute oncology training for the induction and awareness of all those involved in the recognition and management of acute oncology patients.

It is expected that practitioners at this level **will possess role-appropriate knowledge and understanding of cancer and its treatment and its application in acute oncology**. This framework highlights specific knowledge, skills and competency required to manage the patient group and/or service defined; it is not discipline or band specific.

This document is intended to be retained on the personnel or training file of each member of staff as a permanent and personal record of training and development and will provide accurate documented evidence of established and ongoing competency.

Prior to assessment – pre-learning:

Demonstrate awareness of national, regional and organisational policies and procedures pertaining to the Acute Oncology Service and its relevance to practice.

May include the following:

- Trust / network / national Acute Oncology Guidelines
- Patient alert cards / local advice line services
- Acute Oncology Service information / protocols

List agreed relevant documents to read below:

1. _____
2. _____

Evidence of education and training undertaken to support this assessment; this may include, for example, the organisation of an acute oncology induction programme.

List below a minimum of two pieces of evidence:

1. _____
2. _____

A. An Understanding of the Role and Provision of the Local Acute Oncology Service		✓ or x
Demonstrate an understanding of the hospital's Acute Oncology Service and its role in the acute care pathway	<p>Answers should include:</p> <ul style="list-style-type: none"> • Who the acute oncology team is and how to contact them • Appropriate client / patient groups • Accessible acute oncology teams within the region 	
B. The 24/7 Oncology Advice Service		✓ or x
Demonstrate an understanding of the 24/7 Patient Advice Line service	<p>Answers should include:</p> <ul style="list-style-type: none"> • The advice line number • Appropriate client / patient groups, e.g. for patients who have received anti-cancer treatment or radiotherapy • How and when to direct patients to this service • Tools that can be used to assess patients' risk, e.g. UKONS Primary Care Risk Assessment Tool and patient-held alert cards 	
Demonstrate understanding of the 24/7 Consultant Oncologist On-Call Service	<p>Answers should include:</p> <ul style="list-style-type: none"> • How to access this service, e.g. the contact pathway • Appropriate client / patient groups, e.g. for healthcare professionals to access urgent advice regarding patient management • When to contact this service 	
C. Acute Oncology Guidelines and Pathways		✓ or x
Demonstrate knowledge of the hospital's Acute Oncology Guidelines and their content	<p>Answers should include:</p> <ul style="list-style-type: none"> • How to access Acute Oncology Guidelines e.g. hospital website / intranet / resource folders 	
Demonstrate knowledge of acute oncology management and pathways for patients presenting with acute oncology emergencies	<p>Answers should include:</p> <ul style="list-style-type: none"> • Recognition of acute oncology patients and presentations • The importance of urgent intervention to ensure the best outcomes for patients with acute oncology problems • Initiate the required urgent / emergency management • Appropriate on-going management of the patient • Discuss the content of the hospital's Acute Oncology Management Guidelines 	
Demonstrate knowledge of patient routes of referral	<p>Answers should include:</p> <ul style="list-style-type: none"> • Discussion of acute oncology patient routes of entry as per local operational policy • Effective referral of patients through different routes of entry to acute oncology services, e.g. case discussion and observation of practice 	

C. Acute Oncology Guidelines and Pathways		✓ or x
Demonstrate understanding of the protocols associated with the Acute Oncology Service	<p>Answers should include:</p> <ul style="list-style-type: none"> The location and content of relevant acute oncology-related protocols / operational policies <p>This should include:</p> <ul style="list-style-type: none"> Accident & emergency (A&E) and Acute Medical Admissions (AMU) Oncology Communication Protocols Acute Oncology Service Assessment/Communication Protocols Acute Oncology Treatment Protocols Fast-Track Referral Protocols (if applicable) 	
Demonstrate knowledge of the metastatic spinal cord compression pathway	<p>Answers should include:</p> <ul style="list-style-type: none"> Awareness of 'Red Flags' and use of patient alert cards The pathway and process for urgent referral Awareness of the initial care and management of patients with suspected metastatic spinal cord compression, e.g. spinal stability and safety Awareness of the hospital's Metastatic Spinal Cord Compression Referral Service 	
Demonstrate knowledge of the suspected (neutropenic) sepsis care pathway	<p>Answers should include:</p> <ul style="list-style-type: none"> Awareness of the patients' risk of sepsis Tools that can be used to assess patient risk e.g. UKONS Risk Assessment Tool and patient alert cards Recognition of significant signs and symptoms that would prompt urgent referral / treatment Initiation of urgent treatment, e.g. presentation to treatment <1 hour Awareness of the urgent admission / referral routes, e.g. A&E / AMU 	
Demonstrate knowledge of the malignancy of unknown origin (MUO) and carcinoma of unknown primary (CUP) pathways	<p>Answers should include:</p> <ul style="list-style-type: none"> Knowledge of the referral pathway for the appropriate investigation of patients who might benefit from treatment for unknown primary cancers (targeted investigations) Fast-track process (if available) for the rapid assessment of MUO or CUP patients, e.g. oncology or specialist palliative care Inter-multidisciplinary team referral to the CUP assessment team / multidisciplinary team / keyworker role 	
Demonstrate knowledge of care and management of central venous access devices (CVADs) if applicable to role	<p>Answers should include:</p> <ul style="list-style-type: none"> Ability to access, clean, flush and replace dressing on a CVAD Awareness of potential complications and their management, e.g. can identify a line that is infected or blocked and explain the action that should be taken 	

C. Acute Oncology Guidelines and Pathways		✓ or x
Demonstrate awareness of audit requirements, whether local or national, for this group of patients	Answers should include: <ul style="list-style-type: none"> Local neutropenic sepsis audit 1-hour door to needle Metastatic spinal cord compression referral and treatment targets 	
D. Communication and Documentation		✓ or x
Demonstrate the importance of communication of a patient's presentation and/or admission	Answers should include: <ul style="list-style-type: none"> Recognition of importance of communication in the safe efficient patient care pathway A description of the appropriate communication pathway List who should be contacted 	
Demonstrate the importance of comprehensive documentation	Answers should include: <ul style="list-style-type: none"> Recognition of the importance of correct documentation, e.g. legal and professional responsibilities 	
Demonstrate knowledge of the Oncology Flagging System (if in use)	Answers should include: <ul style="list-style-type: none"> Purpose of flagging an urgent care need How, when and which patient groups should be flagged and to whom Know how to access the alert message / flag 	

I have completed Level 2 of the Acute Oncology knowledge and skills framework, covering the elements listed, and confirm my assessment of competence:

Member of staff (print name): _____

Member of staff (signature): _____

Organisation: _____

Date: _____

I have assessed the member of staff named above and confirm their competence accordingly:

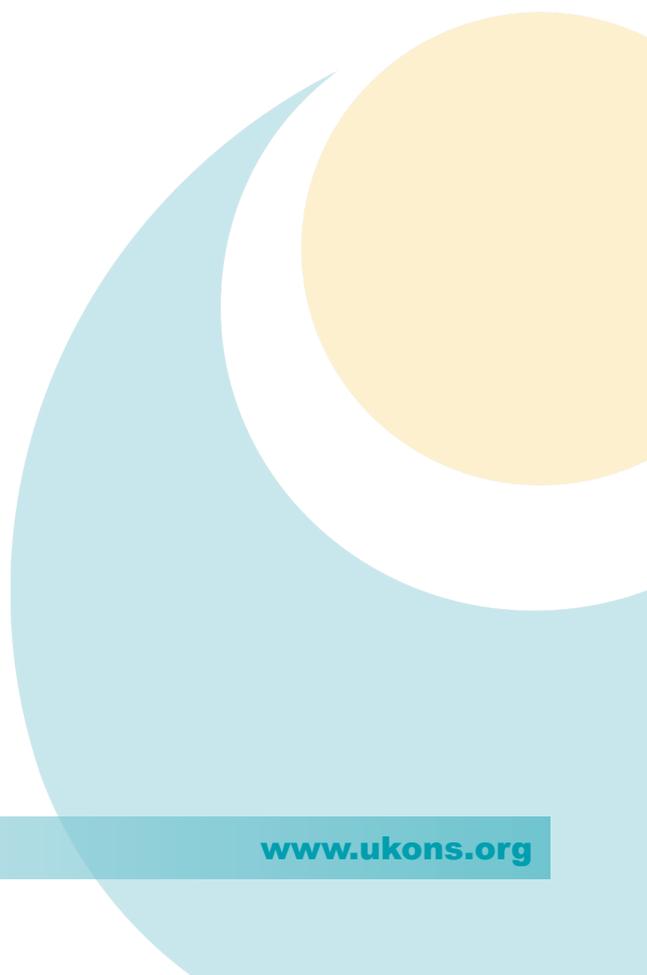
Assessor (print name): _____

Assessor (signature):

Organisation: _____

Date: _____

Comments: _____



Level 3 – Advanced

Advanced level knowledge, skills and competency for registered healthcare professionals who have a regular, active participatory role in the provision of Acute Oncology Services for the following patient groups:

- Acutely unwell adult patients who present as an emergency and have a suspected new diagnosis of cancer
- Acutely unwell adult patients who are currently receiving systemic anti-cancer treatment and/or radiotherapy
- Acutely unwell adult patients who have a known cancer diagnosis and may be suffering from complications of cancer

To ensure that:

- There is a thorough understanding of the principles of acute oncology
- Acute oncology patients and presentations are fully recognised
- There is a comprehensive understanding of the scope of the Acute Oncology Service provided locally and regionally
- Required urgent / emergency management is initiated, and appropriate ongoing management of the patient is continued
- Referral and communication with the hospital's Acute Oncology Service is completed as appropriate
- Advanced clinical skills are utilised to prevent serious complications as early as possible; advanced management decisions can be made and expert advice given as necessary on issues such as escalation and ceiling of care
- The importance of urgent intervention to get the best outcomes for patients with acute oncology problems is fully understood
- There is participation in the development of relevant protocols and pathways
- There is regular involvement in activities to improve service quality such as clinical audits, mortality and morbidity reviews, serious incident reviews and relevant research activity
- Education, training and assessment of competency is provided for training at Levels 1 and 2 of this framework

Competency will be demonstrated by completion of Level 3

Applicable to:

- Acute Oncology Clinical Nurse Specialists
- Acute Oncology Advanced Nurse Practitioners
- All Specialist Registrars in oncology and haematology
- Members of the Specialist Palliative Care Team, if they have a regular, active participatory role in the provision of Acute Oncology Services

Professionals listed above should also complete Level 4 competencies if they are responsible for service development / management

Competency Level 3 – Advanced

Covering:

- The prerequisite skills for the Acute Oncology Service advanced role
- The training and education required, once in post
- The requirements of on-going competency and assessment

This document is intended to be retained on the personnel or training file of each member of staff as a permanent and personal record of training and development, and will provide accurate documented evidence of established and ongoing competency.

This document should be used in conjunction with the appropriate acute oncology education and training for those involved in the advanced assessment and management of acute oncology patients.

This competency guideline is not discipline or band specific; it highlights specific skills that are required to manage the patient group defined. The list of competencies defined in this guideline should be cross-referenced with the individual's job description and an individualised set of role-specific competencies agreed by both the individual concerned and their line manager.

Undertaking this process will facilitate a development programme for more junior staff joining the Acute Oncology Service workforce. The skills and competencies linked to the more strategic and service development role within the Acute Oncology Service may not be relevant to the individual's post. The development group has made an assumption that **staff working at this level would either possess or be working towards an in-depth knowledge of disease-specific guidance and management, and possess advanced communication skills required in this area.**

Prior to assessment – pre-learning:

Demonstrate knowledge of the national, regional and local policies and procedures pertaining to the Acute Oncology Service and its relevance to your practice.

Answers may include:

- National Acute Oncology Specification / National guidelines and pathways
- Trust / Network Acute Oncology Guidelines / Operational policy for the Acute Oncology Service

Evidence of education and training undertaken to support this assessment:

List below a minimum of four pieces of evidence:

1. _____
2. _____
3. _____
4. _____

A. Local and Regional Acute Oncology Service		✓ or x
Demonstrate understanding of the local and regional Acute Oncology Service and its role in the acute care pathway	<p>Answers should include:</p> <ul style="list-style-type: none"> • An overview of the aims and objectives of the Acute Oncology Service • The specific responsibilities and services provided by significant neighbours • List Acute Oncology Service contact points within each significant organisation 	
Demonstrate knowledge of the Network Acute Oncology Group (where applicable)	<p>Answers should include knowing:</p> <ul style="list-style-type: none"> • The group's role • Core membership • Contact points • The frequency of meetings 	
Demonstrate knowledge of and involvement in the hospital /trust Acute Oncology Group	<p>Answers should include knowing:</p> <ul style="list-style-type: none"> • The group's role • Membership • Contact points • Frequency of meetings • The Acute Oncology Group Terms of Reference / Operational Policy 	
B. Important or Urgent Intervention		✓ or x
Demonstrate an understanding of the 24/7 Patient Advice Line / telephone triage service	<p>Answers should include:</p> <ul style="list-style-type: none"> • Understanding the remit of the advice line service • Discuss the protocol / pathway for patient review and referral to acute oncology or other disciplines: GP / primary healthcare team or assessment in hospital • Discuss the benefits of proactive management / identification of potential problems early, with face-to-face assessment as required • Involvement in the audit and review of triage outcomes 	
Demonstrate competence in the delivery of this service, if applicable to role	<p>Answers should include:</p> <ul style="list-style-type: none"> • Competent in the use of the locally agreed triage assessment process • Telephone follow up / support post triage for patients on active anti-cancer treatment or radiotherapy • Full documentation of triage communication and outcomes 	

B. Important or Urgent Intervention		✓ or x
Demonstrate knowledge of assessment and management of oncological emergencies	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Applying clinical assessment skills to inform decision making and the management of patients on each of these emergency pathways • Applying knowledge of systematic assessment and management • Discussion of differential diagnosis following examination, and facilitation of appropriate investigations • Initiation of required urgent / emergency management and appropriate on-going management of the patient • An understanding of the need for urgent intervention to get the best outcomes for patients with acute oncology problems • Efficient communication and documentation to ensure efficient handover 	
C. Acute Oncology Guidelines and Protocols		✓ or x
Demonstrate understanding of the Acute Oncology Referral Guidelines	<p>Answers should include:</p> <ul style="list-style-type: none"> • The location and content of the Acute Oncology Referral Guidelines • Details of referral routes and pathways e.g.: <ul style="list-style-type: none"> • How to refer • Who to refer to • What to refer • When to refer 	
Demonstrate understanding of the protocols associated with the Acute Oncology Service	<p>Answers should include:</p> <ul style="list-style-type: none"> • The location and content of relevant acute oncology-related protocols / operational policies <p>This should include:</p> <ul style="list-style-type: none"> • A&E and Acute Medical Unit (AMU) Admissions Oncology Communication Protocols • Acute Oncology Service Assessment Communication Protocols • Acute Oncology Treatment Protocols • Fast-Track Referral Protocols if applicable 	
Demonstrate knowledge of patient presentation pathways / routes of entry	<p>Answers should include:</p> <ul style="list-style-type: none"> • Discussion of acute oncology patient routes of entry as per local operational policy • Demonstration of effective management of patients through different routes of entry to acute oncology, e.g. A&E / AMU / emergency assessment bay (EAB) / ambulatory care unit (ACU), through case discussion and observation of practice 	
Demonstrate knowledge of the 24/7 Consultant Oncologist On-Call Service	<p>Answers should include:</p> <ul style="list-style-type: none"> • Knowing how to access the acute oncology team and oncology on-call service 24 hours a day • Knowing who are the appropriate client / patient groups for this service, e.g. for healthcare professionals to access urgent advice regarding patient management 	

C. Acute Oncology Guidelines and Pathways		✓ or x
Demonstrate an understanding of the role-associated experts and application within Acute Oncology Service	<p>Answers should include knowing the role of the listed experts and when and how to obtain a specialist's opinion:</p> <ul style="list-style-type: none"> • Acute medicine, critical care, surgery • Haematology • Oncology-associated specialists • Specialist palliative care 	
Demonstrate an understanding of the procedure for the review of patients in the emergency departments, AMUs, and other wards	<p>Answers should include knowing how to:</p> <ul style="list-style-type: none"> • Liaise with associated teams to manage patient pathways • Escalate patients with concerning signs / symptoms to an appropriate team member, e.g. oncologist / on-call team for haematology or oncology • Make appropriate interventions and onward referrals for patients whose presentation indicates no more treatment, no more intervention and who maybe entering terminal stage illness, e.g. involvement of the specialist palliative care team • Participate in handover meetings 	
Demonstrate an understanding of the discharge process locally and how this is applicable to acute oncology patients	<p>Answers should include:</p> <ul style="list-style-type: none"> • Discuss the hospital discharge process and how to support appropriate discharge, e.g. follow-up, referrals, criteria for fast-track discharge • Understand the role of clinical teams to discharge patients as appropriate 	
D. Acute Oncology Pathways		✓ or x
Demonstrate knowledge of the metastatic spinal cord compression (MSCC) pathway	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Discussion of the care and management of patients with suspected metastatic spinal cord compression, e.g. spinal stability, urgent imaging / role of steroids • Participation in the clinical assessment of patients with suspected Metastatic Spinal Cord Compression • Discussion of responsibilities and knowledge of who to contact if a patient is admitted with suspected Metastatic Spinal Cord Compression • Discussion of the spinal / orthopaedic role in Metastatic Spinal Cord Compression • Understand the content of guidelines for patients with signs and symptoms of Metastatic Spinal Cord Compression • A working knowledge of the referral pathway for obtaining specialist clinical advice: Spinal / Oncologist / Radiologist and how this service operates for local acute oncology teams 	

D. Acute Oncology Pathways		✓ or x
Demonstrate knowledge of the suspected (neutropenic) sepsis care pathway	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • In-depth knowledge of the sepsis pathway and significant signs and symptoms that would prompt urgent referral and treatment • Application of Sepsis Risk Assessment Tools, e.g. Multinational Association of Supportive Care in Cancer (MASCC) / UKONS 24-hour triage /Sepsis 6 • Initiation and continuation of urgent treatment / enter patient into the pathway, e.g. antibiotics within 1 hour of presentation • Application of non-medical prescriber / patient group directive if available in area of practice • Completion of audit requirements for the neutropenic sepsis pathway in line with local and national requirements and standards 	
Demonstrate knowledge of the malignancy of unknown origin (MUO) and carcinoma of unknown primary (CUP) pathways	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Knowledge of referral pathways for the appropriate investigation of patients who might benefit from treatment for unknown primary cancers (targeted investigations) • Fast-track process (if available) for the rapid assessment of MUO/CUP patients, e.g. oncology or specialist palliative care • Inter-multidisciplinary team referral to the CUP assessment team / multidisciplinary team • Undertake a recognised keyworker role to offer information, support, holistic needs, and initiate referrals to other key services as required, if applicable to role 	
Demonstrate knowledge of care and management of central venous access devices (CVADs)	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Clinical assessment of the individual's ability to access, clean, flush and replace dressing of CVAD, if applicable to role • Explanation of potential complications and their management, e.g. identify a line that is infected or blocked and what action should be taken • Undertake education in the care and management of the CVADs for cancer patients / staff, if applicable to role 	
E. Referral and Communication Protocols		✓ or x
Demonstrate the importance of communication of a patient's presentation and /or admission	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Recognition of the importance of communication in the delivery of safe, efficient patient care pathways • A description of the appropriate communication pathway • List of who should be contacted and methods of communication 	

E. Referral and Communication Protocols		✓ or x
Demonstrate the importance of comprehensive documentation	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Recognition of the importance of correct documentation, e.g. legal and professional responsibilities • Documentation of clinical findings, advice given and action taken in shared patient records • Critique and review of clinical notes as required 	
Demonstrate knowledge of the Oncology Flagging System (if in use)	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Discussion of the oncology flagging system and purpose of flagging an urgent patient episode • How, when and which patient groups are flagged and to whom • Knowledge of how to access and update the alert message / flag, e.g. who to contact 	
F. Service Review and Development		✓ or x
Demonstrate knowledge and participate in the development and review of relevant protocols and pathways	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Involvement in the development and review of acute oncology protocols and pathways at a local, regional and national level • Discussion of the importance of agreed protocols and pathways • Discussion of the local process for development and governance of guidelines and protocols 	
Demonstrate knowledge of and involvement in education and training	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Knowledge of local, regional and national level education and training e.g. in-house, online, e-learning modules that support the development and on-going competency of the Acute Oncology Services practitioner • Participation in the education, training and assessment of competency for training staff at Level 1 and Level 2 of the Competency Skills Framework 	
Demonstrate involvement of audit requirements for this group of patients, whether local or national	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Entering acute oncology data, including outcomes (if applicable to role) • Participation in audit requirements for this group of patients, whether local or national 	

I have completed Level 3 of the Acute Oncology knowledge and skills framework covering the elements listed, and confirm my assessment of competence:

Member of staff (print name): _____

Member of staff (signature):

Organisation: _____

Date: _____

I have assessed the member of staff named above and confirm their competence accordingly:

Assessor (print name): _____

Assessor (signature):

Organisation: _____

Date: _____

Comments: _____

Level 4 – Expert

Expert level knowledge, skills and competency for registered healthcare professionals who have a participatory role in acute oncology services for any of the following patient groups and are responsible for acute oncology service development / management / clinical leadership:

- Acutely unwell adult patients who present as an emergency and have a suspected new diagnosis of cancer
- Acutely unwell adult patients who are currently receiving systemic anti-cancer treatment and/or radiotherapy
- Acutely unwell adult patients who have a known cancer diagnosis and may be suffering from acute complications of cancer

To ensure that:

- There is an in-depth understanding of the principles of acute oncology
- Acute oncology patients and presentations are fully recognised
- The importance of urgent intervention to get the best outcomes for patients with acute oncology problems is fully understood
- Required urgent / emergency management is initiated and appropriate ongoing management of the patient is continued
- Referral and communication with the hospital Acute Oncology Service is completed as appropriate
- Robust clinical leadership is provided to coordinate and supervise the appropriate ongoing management of the patient and advanced clinical skills are utilised to prevent or detect serious complications as early as possible, to make advanced management decisions; expert advice is given as necessary on issues such as treatment escalation and ceiling of care
- Robust clinical leadership is provided in the development of relevant protocols and pathways
- Robust clinical leadership is provided for service quality improvement activities such as clinical audits, mortality and morbidity reviews, serious incident reviews, and relevant research activity
- Education, training and assessment of competency is provided for training at all levels of this framework

Competency will be demonstrated by completion of the Level 3 and 4 competency portfolios

Applicable to:

- Acute Oncology Nurse Consultants
- Acute Oncology Advanced Nurse Practitioners
- Acute Oncology Speciality Doctors
- Oncology Consultants
- Haematology Consultants
- Palliative Care Consultants, if they have a regular, active participatory role in the development, leadership and provision of Acute Oncology Services

Competency Level 4 – Expert

Covering:

- The prerequisite skills for the Acute Oncology Service expert role
- The training and education required once in post
- The requirements of ongoing competency and assessment

This document is intended to be retained on the personnel or training file of each member of staff as a permanent and personal record of training and development and will provide accurate documented evidence of established and ongoing competency.

This document should be used in conjunction with the appropriate Acute Oncology Service training for the induction and awareness of all those involved in the advanced assessment and management of acute oncology patients.

All staff entering this level should have completed Level 3 competencies or provide evidence of existing prior competence.

Acute Oncology Service – Expert

This competency focuses on the skills and expertise for development, implementation and delivery of the organisation's Acute Oncology Service.

The post holder will:

- Play a key role in developing the service and monitoring its impact using agreed key metrics and outcome measures
- Be a key member of the Acute Oncology Team and play a key role in the delivery of the service
- Provide early specialist input for oncology patients, enabling safe and high-quality care of acute oncology patients, including prompt management and early discharge
- Carry out urgent reviews of patients with complications of cancer and make rapid referrals back to the specialist oncology and/or palliative care teams, e.g. the appropriate investigation of patients who might benefit from treatment for metastatic spinal cord compression
- Ensure the appropriate investigation of patients who might benefit from treatment for unknown primary cancers, and ensure appropriate targeted investigations for and rapid triage of patients to specialist oncology or palliative care
- Give advice and implement patient care in an area that requires specific clinical knowledge, skills, and experience
- Work alongside other clinical colleagues in oncology, palliative care, emergency, acute medicine, radiology, and pathology departments to ensure the quality of care of patients is maximised. This will include the development of clinical guidelines and education programmes

Utilising the competencies

The list of competencies defined in this portfolio should be cross-referenced with the individual's job description and an individualised set of role-specific competencies agreed.

Undertaking this process will facilitate a development programme for staff progression within the Acute Oncology Service workforce. The skills and competencies linked to the more strategic and service development role within the Acute Oncology Service may not be relevant to the individual's post.

Prior to assessment – pre-learning

Demonstrate knowledge of the national, regional and local policies and procedures pertaining to the Acute Oncology Service and its relevance to your practice:

Answers may include:

- National acute oncology specification
- Trust / Network Acute Oncology Guidelines
- Operational policy for the Acute Oncology Service
- National guidelines and pathways

Evidence of education and training undertaken to support this assessment:

List below a minimum of four pieces of evidence:

1. _____
2. _____
3. _____
4. _____

A. Local and Regional Acute Oncology Service		✓ or x
Demonstrate understanding of the local and regional Acute Oncology Service	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Extensive knowledge and understanding of the configuration of the Acute Oncology Service locally and regionally and the specific responsibilities and services provided by significant neighbours 	
Demonstrate understanding of The Network Acute Oncology Expert Advisory Group	<p>Answers should include:</p> <ul style="list-style-type: none"> • Demonstration of the individual's role as a member of the local and regional network group • Provision of evidence of participation in the development of network guidelines and policies • Evidence of involvement in network-wide audits • How you ensure the interests of patients and local organisation are fully considered at network level 	
Demonstrate knowledge of and involvement with the Acute Oncology Team	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Promotion of the Acute Oncology Team within the hospital; its role and responsibilities • Discussion of the individual's role as a member of this team 	
B. Acute Oncology Guidelines and Protocols		✓ or x
Demonstrate detailed understanding of and involvement in the Acute Oncology Referral Guidelines	<p>Answers / evidence should include an in-depth knowledge of the acute oncology referral guidelines, including:</p> <ul style="list-style-type: none"> • Referral to the Acute Oncology Service from a 24-hour triage / advices line service • Referral to the Acute Oncology Service from admission portals, e.g. A&E, AMU • Referral from the Acute Oncology Service to a specialist oncology team such as a radiotherapy or site-specific service • Fast-track Clinic Referral Protocols for use in admissions portals, by members of acute oncology teams • Explain how the use of referral protocols and guidance can impact on the early, appropriate assessment and management of patients thereby supporting early intervention, appropriate discharge, ambulatory care and possible admission avoidance 	
Demonstrate knowledge of the principles of the Acute Oncology Service	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Involvement and review of acute oncology patient routes of entry, as defined and agreed per operational policy • Effective management of patients through different routes of entry • Agree the 24/7 assessment process, including follow up • Engagement with experts and their specialist areas, e.g. acute medicine, surgery, haematology and oncology, including the on-call rota • Access to the acute oncology team experts available 24 hours a day • Regular review and compliance with national quality measures and outcomes 	

C. Acute Oncology Patient Pathways		✓ or x
Demonstrate detailed knowledge of the assessment and management of oncological emergencies	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Detailed clinical assessment for the management of acute oncology patient emergency pathways • Discussion of differential diagnosis following examination, and knowledge of appropriate investigations 	
Demonstrate knowledge and involvement in the malignancy of unknown origin (MUO) and carcinoma of unknown primary (CUP) pathways	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Detailed knowledge and skill of the appropriate investigation and management of patients who might benefit from treatment for unknown primary cancers (targeted investigations and rapid triage of patients into specialist oncology or palliative care) • Discussion of local and national guidelines and evidence of implementation in clinical practice • Participation in service audits and dissemination of results 	
D. Service Leadership, Management, Review and Development		✓ or x
Provide evidence of acute oncology leadership and its impact on service	<p>Answers should include evidence of active clinical leadership to set up, develop and maintain a high-quality Acute Oncology Service . This may include:</p> <ul style="list-style-type: none"> • Provision of clinical and professional support to acute oncology team members • Advocacy for the Acute Oncology Service — being the voice of the service at relevant local, regional and national meetings • Regular audit of patient / staff experience • Regular audit of outcomes • Update of appropriate guidelines and pathways 	
Demonstrate involvement in the audit process and provide evidence of any impact on the service	<p>Answers should include evidence of how regular data analysis, evaluation and presentation have impacted on the service; this may include the following:</p> <ul style="list-style-type: none"> • Advice line activity • Time to acute oncology assessment • Antibiotic door-to-needle time • Admission avoidance • Length of stay • Clinical incidents / adverse events • Deaths within 30 days of receiving treatment • Complaints • Patient and staff satisfaction • Presentation of audit findings to relevant governance groups 	

D. Service Leadership, Management, Review and Development		✓ or x
Demonstrate involvement in service review and development	<p>Answers should include evidence of how:</p> <ul style="list-style-type: none"> • Service provision is maintained • Staffing levels are reviewed and maintained • The service is robust, safe and effective / efficient • Workload requirements are reviewed and any areas of need or concern are highlighted • Timely management of acute oncology patients is provided within 24 hours (where permitted), e.g. 7-day working 	
Demonstrate involvement in service quality improvement activities / research activity	<p>Answers should include evidence of how:</p> <ul style="list-style-type: none"> • Acute Oncology Services have been benchmarked and monitored against compliance with nationally agreed quality indicators • Non-compliance has been highlighted locally and what improvement / action plan has been agreed 	
Demonstrate involvement in the development and implementation of key operational pathways, policies, guidelines and protocols	<p>Answers should include evidence of involvement in the development and implementation of the following:</p> <ul style="list-style-type: none"> • Acute Oncology Operational Policy • Acute Oncology Initial Management Guidelines, including care of suspected neutropenic sepsis Admission and Assessment Pathway • Suspected metastatic spinal cord compression referral and review pathway • Implementation of an MUO/CUP protocol / pathway 	
Demonstrate involvement in staff development and appraisal	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Involvement in the review and appraisal process to support staff development and identification of training needs • Participation in the mentorship and assessment of competency for staff training at Level 3 of the knowledge and skills framework 	
Acute oncology education	<p>Answers should include evidence of:</p> <ul style="list-style-type: none"> • Leading the development and delivery of a wide range of acute oncology educational activities and ensuring staff participation 	
Evidence of clinical leadership	<p>Answers should include:</p> <ul style="list-style-type: none"> • Evidence of the coordination and supervision of the ongoing management of patients with acute oncology emergencies to prevent, reduce or detect serious complications as early as possible • Your role in advanced decision making to support escalation and or ceiling of care 	

I have completed Level 4 of the Acute Oncology knowledge and skills framework, covering the elements listed, and confirm my assessment of competence:

Member of staff (print name): _____

Member of staff (signature):

Organisation: _____

Date: _____

I have assessed the member of staff named above and confirm their competence accordingly:

Assessor (print name): _____

Assessor (signature):

Organisation: _____

Date: _____

Comments: _____

Abbreviations

ACU	Ambulatory care unit
A&E	Accident & Emergency
AMU	Acute medical unit
CUP	Carcinoma of unknown primary
CVAD	Central venous access devices
EAB	Emergency assessment bay
MASCC	Multinational Association of Supportive Care in Cancer
MSCC	Metastatic spinal cord compression
MUO	Malignancy of unknown origin
NMP	Non-medical prescriber
PGD	Patient group directive
UKONS	United Kingdom Oncology Nursing Society
RCN	Royal College of Nursing
SHCF	Skills for Health Career Framework

References

1. Department of Health. (2009) Chemotherapy Services in England: Ensuring Quality and Safety. A report from the National Chemotherapy Advisory Group. http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_104501.pdf (last accessed 11.01.2018).
2. Wales Cancer Network (2016) National Standards for Acute Oncology Services. http://www.walescanet.wales.nhs.uk/searchresults/?q=acute+oncology+standards&site=orgid*1113&requiredfields=DC%252Elanguage%3Aeng&orgid=1113 (last accessed 11.01.2018).
3. Royal College of Nursing. Career and education framework for nursing (2017). Available at: <https://www.rcn.org.uk/professional-development/publications/pub-005718> (last accessed 02.05.2018).
4. Skills for Health (2010) Key elements of the Career Framework [Online]. Available at http://www.skillsforhealth.org.uk/index.php?option=com_mtree&task=att_download&link_id=163&cf_id=24 (last accessed 08/05/2018).

Acknowledgements

Adapted with permission from the following original source: The Anglia Cancer Network Competencies Framework for the Acute Oncology Service (AOS) Clinical Nurse Specialist Role.

Resources links

Multi-disciplinary healthcare workers will identify key learning resources that may be used to provide training and support achievement of the education competency. If you have training resources that can be shared and utilised by others, then please contact UKONS Acute Oncology Members Interest Group Leads via the UKONS website.

The group aim to compile a list of resources this will be housed on a recognised site, ensuring learning tools are accessible and regularly updated. This resource list will remain separate from the knowledge, skills and competency guideline as the resources will continue to develop and evolve.

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