



Nurses in Allergy

Allergy Nurse Competency Document

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Guidelines for using the document

The purpose of this clinical assessment document is to provide a framework for practitioners to transfer their theoretical knowledge into practical skills. This document will assess an individual's knowledge and competency to perform skills essential to the role of an allergy nurse. The core competences for an allergy nurse should be assessed before working through the other competences.

- Assessment must only be carried out for competences which have been observed.
- Practitioners should document self assessment prior to assessment by their assessor.
- The purpose of the formative assessments is to allow the practitioner time to develop the skill under the supervision of an assessor. There are only three slots for assessment but this is not intended to limit the assessment opportunities. Practitioners must continue to be supervised and re-assessed until they are considered competent.
- If the practitioner does not achieve the minimum standard at a formative stage, the assessor must make written comments and give guidance on the comments sheets.
- If a practitioner is unable to achieve the minimum standard then the assessor may wish to consider further training.
- For the formative and summative assessments, Pr refers to the practitioner and A to the assessor.

Guidance Notes for the Competency Framework

1.	Opt-in or Opt-out	There are some competences marked with a * these are mandatory for all staff and must be completed. All other competences are for your manager to decide which are appropriate for your clinical area and which competences you should be developing; their signature in this box will activate a competence for each individual. An assessor can also use this box to exempt staff from some core competences that are inappropriate for the clinical workplace or the staff member.
2.	Competence	This is a description of the skill or knowledge that you are required to attain.
3.	Dimension Level	This refers to the KSF dimension level that is expected for this competence. Please refer to section on Dimension indicators.
4.	Minimum Standard	This is the standard at which a competence must be performed by all nurses required to have this competence. Benner (1984) competency framework will be used for assessment guidance.
5.	Expected Standard	This will be completed by your manager as your clinical workplace or your position may require you to achieve a higher than minimum level of competence in some areas of practice.
6.	Formative Assessment	These assessments are a developmental tool. They allow the practitioner to be assessed at any point in their development, the aim being for the assessor to guide the practitioner and identify where there is a need for further practice or acquisition of knowledge. As many or as few formative assessments can be performed.
7.	Summative Assessment	This is where the practitioner is expected to meet the required standard for the competence.
8.	Drug and administration	There are some competences which relate to drugs and administration. These are marked with a D and can be found at the bottom of the domains for each competency.

Department of Health (2004) Knowledge and Skills Framework

Benner Assessment Criteria

Standard	Criteria
Expert (E)	Experts are able to focus on a relevant part of a situation without conscious consideration. They will use their intuition, based on vast experience, to follow a course of action which they ‘know’ is appropriate. An expert practitioner develops a feel for situations and a vision of possibilities. Not all members of the multi-professional teams are capable of reaching this level - it could be assisted by techniques such as critical incident analysis.
Proficient (P)	Proficient practitioners use their expertise to critically analyse and evaluate situations as a whole. They are able to identify the more important elements of a situation and make decisions based on a broad perspective.
Competent (C)	Competent practitioners are consciously aware of long-term effects of their actions. They are able to plan the most satisfactory outcome of a situation, and take the appropriate action to achieve the planned aims. This requires conscious, abstract, analytical contemplation of the situation.
Advanced Beginner (AB)	Advanced beginners demonstrate a degree of flexibility in their performance and interpret the rules to meet the needs of the situation, maintaining throughout the safety of the patient, colleagues, others and self. They are able to relate to the current situation, based on prior learning.
Novice (N)	Novices have no experience of the situation they find themselves in, and they operate by closely following rules laid down by others. They perform a series of tasks without understanding, or referring to, the context within which they are operating.

Benner P (1984) “From Novice to Expert” Menlo-Park: Addison Wesley Publishing Company

Core Competences for an Allergy Nurse (all mandatory for all staff)

These competences form the foundation of knowledge of the care of a patient with allergic disease and should be completed by all before completing additional competences.

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	KNOWLEDGE AND UNDERSTANDING You will need to know and understand:											
*	Common allergic conditions and their presentation, including risks and causes of anaphylaxis	C										
*	Symptoms and features of anaphylaxis/acute allergic reaction	C										
*	How to recognise and manage an acute allergic reaction	C										
*	Common influences of an individual's environment on allergy	C										
*	The impact of allergy on morbidity and mortality	C										
*	Resuscitation techniques and guidelines, including the Trust resuscitation policy	C										
*	Information on local and national patient support organisations	C										
*	Reliable evidence based and unbiased information and educational resources about allergy	C										
*D	How to administer injectable adrenaline	C										

Core Competences for an Allergy Nurse												
Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	PERFORMANCE CRITERIA You must be able to do the following:											
*	Explain the signs and management of an allergic reaction.	C										
*	Provide a safe environment for patients with resuscitation equipment readily available, fit for purpose and checked regularly as per Trust policy	C										
*	Mandatory Basic Life Support training maintained, up to date.	C										
*	How to measure and record physiological parameters; pulse, respiratory rate, oxygen saturations, capillary refill and blood pressure and recognises changes in normal limits	C										
*	Undertake and explain the use of the range of validated tests and investigations to perform during and after anaphylaxis	C										
*D	Correctly administer treatment according to the severity of the reaction, including; <ul style="list-style-type: none"> • antihistamine and adrenaline in an emergency setting according to age/weight • oxygen nebulised beta 2 agonist 	C										

Skin Prick Testing

This competency is about developing the knowledge and skill required to safely and effectively perform skin prick testing (SPT).

	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	KNOWLEDGE AND UNDERSTANDING In addition to the core competences for an allergy nurse, you will need to know and understand:											
*	Has an understanding of the indications for performing the Skin Prick Test (SPT)	C	C									
*	Has knowledge of anatomy, physiology and immunology of SPT and the allergic response	C	C									
*	Demonstrates knowledge of infection control issues surrounding administration and precautions that should be taken	C	C									
*	Demonstrates knowledge of the rationale for interpreting the skin prick test results.	C	C									
*	Demonstrates awareness of which allergens can be used	C	C									
*	Discusses possible reasons for a repeat test	C	C									
*	Discusses time frame for appropriate reading	C	C									
*	Discusses components of accurate reading	C	C									
*	Discusses barriers to accurate reading	C	C									
*	Discusses unit of measurement	C	C									

*	Demonstrates knowledge and appropriate application of the two control substances and is able to explain rationale for this	C	C											
*	Is able to explain which order each substance will be applied	C	C											
*D	Demonstrates knowledge of contra-indications surrounding procedure and discusses potential alternatives to SPT	C	C											

Skin Prick Testing												
Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment			
PERFORMANCE CRITERIA In addition to the core competences for an allergy nurse, you must be able to do the following:			PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date	
* Prepares lancet appropriately for Skin Prick Test	C	C										
* Selects appropriate test site and is able to provide a rationale for this	C	C										
* Ensures that skin is clean and free of inflammation such as eczema/dermatitis and demonstrates an appropriate response if inflammation is present	C	C										
* Marks the skin to indicate where each allergen will be placed ensuring that 2.5 cm between each marker	C	C										
* Demonstrates good dexterity and application of allergen on the skin where previously marked.	C	C										
* Provides supportive advice regarding post SPT, such as the test site may be itchy, avoid scratching and is aware of supportive measures such as application of a cold compress or administration of antihistamines	C	C										

*	After all the allergens have been placed on the forearm, able to demonstrate a flawless technique using the sterile lancet to introduce the allergen into the surface layer of the skin taking into consideration infection control issues and need to avoid contamination of allergens	C	C									
*	Demonstrates a flawless technique to blot dry the allergen	C	C									
*	Accurately measures and records the size of wheal and flare after the correct amount of time has lapsed	C	C									
*	Able to document clearly and legibly within the patients notes, time of test, verbal consent obtained and any factors which may influence the results	C	C									
*D	Assembles and discusses the use of all equipment and medication, which are required for safe administration of the test, appropriate allergens needed for administration & equipment required for accurate reading of the test.	C	C									

- **Enable an individual to manage an allergic reaction, including use of self-injected Adrenaline**

This competency is about developing the knowledge and skill the individual requires to administer self-injected adrenaline safely and appropriately in the event of a sudden and severe allergic reaction. Training to use an injector should be given soon after an emergency episode. Practice with a trainer device is essential.

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	KNOWLEDGE AND UNDERSTANDING In addition to the core competences for an allergy nurse, you will need to know and understand:											
*	The symptoms and features of acute severe allergic reactions and their risks	C										
*	Resuscitation techniques and guidelines	C										
*	Age appropriate facilitation and learning approaches.	C										
*	Reasons why individuals may not carry or use injectors	C										
* D	The therapeutic use of medications used in the management of anaphylaxis, including; actions, side effects and contraindications	C										
* D	The appropriate storage of injectable adrenaline and awareness of expiry dates	C										
* D	How to manage an acute allergic reaction, including administration of adrenaline	C										

Enable an individual to manage an allergic reaction, including use of self-injected Adrenaline

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	PERFORMANCE CRITERIA In addition to the core competences for an allergy nurse, you must be able to do the following:											
*	Communicate with the individual and carers in a way that is appropriate for their age and situation and fully involves them in discussing how to manage their risk	C										
*	Ensure the individual and carers can identify the warning signs of anaphylaxis and can recognise accurately the indications for using injectable adrenaline	C										
*	Emphasise the need to summon emergency help (999) after adrenaline is given and ensure the individual knows to remain in a lying position, with legs slightly elevated or sitting if the respiratory system is affected (children especially)	C										
*	Emphasise the importance of having the auto-injector available at all times	C										
*	Make the learning as interactive and dynamic as possible, with plenty of opportunity for questions and practice.	C										
*	Give the individual and carers time to become accustomed to the injector's action through practice with a trainer device	C										
*	Provide the individual with a written treatment plan that includes the instructions	C										

	you have given											
*	Recognise any signs that indicate the individual and carers may not follow their management plan. Promote concordance with the management plan.	C										
*	Make accurate records of the training you have provided	C										
* D	Ensure by observation that the individual and carers use the technique with the device specified by the manufacturer's current guidelines	C										
* D	Inform the individual on what they need to do in the event of accidental injection <ul style="list-style-type: none"> run site, if possible, under a warm tap to encourage blood flow to the area seek medical attention 	C										
* D	Give information on how to store injectors, checking their expiry dates and how to get replacements	C										
* D	Give the individual information on patient support organisations and further information regarding the adrenaline auto-injector device	C										

Respiratory function testing

This competency is about measuring the respiratory function of an individual in an allergy clinic. This may include use of a spirometer and exhaled nitric oxide machine. The assessor should assess knowledge around respiratory function testing and performance in the particular machine used in the clinic.

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	KNOWLEDGE AND UNDERSTANDING In addition to the core competences for an allergy nurse, you will need to know and understand the following:											
*	Signs of an exacerbation of asthma	C										
*	The links between asthma and allergy and importance of adequate asthma control	C										
*	Technique for correct respiratory function testing including; position and length of blow and minimal age for effective use	C										
*	Factors which may affect respiratory function, including how asthma and allergy may affect respiratory function and psychosocial factors, such as age and poor understanding	C										
*	An understanding of what respiratory functions are being measured and the normal parameters	C										
* D	An understanding of the action of a beta 2 agonist and how this is demonstrated in lung function testing	C										

Respiratory function testing												
Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	PERFORMANCE CRITERIA In addition to the core competences for an allergy nurse, you must be able to do the following:											
*	Perform respiratory function testing using the spirometer and exhaled nitric oxide machines currently used in the clinic in accordance with manufacturers guidelines, take into consideration infection control measures	C										
*	Instruct and modify technique demonstration according to age and understanding to ensure correct data on lung function analysis is displayed	C										
*	Recognise triggers and test reversibility of lung function appropriately	C										
*	Interpret the analysis of the results of the respiratory function tests, feedback findings to other professionals and escalate any concerns	C										

Carry out an Oral food or drug Challenge

This standard is about conducting challenge tests (also called provocation tests). They are used to exclude allergy or to confirm it when other ways of diagnosing allergy do not give complete certainty. It may also be used to confirm that an allergy has resolved. Undertaking a challenge test to either food or drugs can potentially lead to life-threatening or fatal reactions and must always be conducted by personnel fully trained in allergy within a specialist allergy service. Users of this standard must ensure that practice reflects up to date information and policies.

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
Ward Manager	KNOWLEDGE AND UNDERSTANDING											
	In addition to the core competences for an allergy nurse, you will need to know and understand:											
	The principles of valid informed consent, and how to obtain consent from individuals	C										
	The rationale for conducting challenge tests on an individual	C										
	How to balance the risks against benefits of undertaking a challenge procedure.	C										

	<p>Protocols and guidelines for challenge testing including;</p> <ul style="list-style-type: none"> • correct dosing • management of reactions to challenge tests • how to interpret challenge test results 	C										
	<p>Aftercare following challenge test including;</p> <ul style="list-style-type: none"> • the rationale and method of the reintroduction of substance to an individual following a negative challenge test • strict avoidance of the allergen following a positive challenge test 	C										
	Safe food handling practice	C										
D	<p>Contraindications of performing a challenge, including;</p> <ul style="list-style-type: none"> • recent use of antihistamine • poorly controlled asthma • intercurrent illness • recent exposure to allergen 	C										

Carry out an Oral Food Challenge												
Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	PERFORMANCE CRITERIA In addition to the core competences for an allergy nurse, you must be able to do the following:											
	Ensure that you have a thorough knowledge of the individual's history and confirm the specifics of the test, including; <ul style="list-style-type: none"> • Skin Prick Test and Specific IgE results, as appropriate • Correct allergen in the correct form is being challenged 	C										
	Ensure that the challenge is being carried out for appropriate reasons and that there are no contra-indications	C										
	Ensure the challenge procedure is performed in a safe appropriate environment, with emergency medication and equipment available	C										
	Give full verbal and written information about the challenge test, including; <ul style="list-style-type: none"> • what the challenge entails • the risks of having a challenge • reintroduction following a negative challenge, ensuring the individual and family are willing to incorporate the allergen into the diet 	C										
	Gain written valid informed consent from	C										

	either the individual or, informed consent from the carer who has parental responsibility and assent from the child.												
	Allow the individual time and opportunity to ask questions at all times during the challenge procedure and be accessible to the individual throughout the course of the procedure	C											
	Assess the individual prior to commencing the challenge, including baseline observations and presence of eczema, to ensure they are well enough for the challenge to proceed.	C											
	Conduct the challenge test according to protocol and guidelines Ensure supervision of the individual throughout the challenge and document observations	C											
	Ensure safe food handling and storage to minimise the risk of contamination	C											
	Ensure that the individual remains under supervision for the recommended period after the challenge has been completed or stopped according to guidelines	C											
	Ensure the individual is well enough to be discharged home	C											
	Provide contact details to enable the individual to report any delayed reactions or concerns	C											
	Provide written and verbal advice on discharge as appropriate; <ul style="list-style-type: none"> If challenge positive continued avoidance of the allergen If challenge negative reintroduction 	C											

	of the substance • management of an allergic reaction											
	Provide the individual and family with written outcome of the challenge test	c										
	Provide the written outcome of the challenge test to the referring clinician, General Practitioner and all relevant healthcare professionals	c										
	Ensure accurate documentation is maintained throughout challenge, including correspondence pre and post challenge	c										
	Update medical records with allergic status	c										
D	In the case of drug allergy, determine the risks and benefits and whether alternative treatment options are available before deciding whether to perform a challenge	c										
D	Stop the challenge at any stage that a positive reaction occurs and administer emergency medication, inform senior clinician supervising challenges	c										

Provide immunotherapy

This standard is about providing immunotherapy - desensitisation therapy – as treatment to reduce the individual’s response to a specific allergen. In the United Kingdom, immunotherapy is used as a treatment option in selected individuals with a proven immunoglobulin E (IgE) mediated allergy where avoidance in daily life is not possible. It must be carried out in specialist centres by a team trained in current immunotherapy practice. Due to the risk of a severe allergy reaction, subcutaneous immunotherapy should only be performed in a centre with full resuscitation facilities. The process requires the individual’s full knowledge and commitment for it to be effective.

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment			
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date	
	KNOWLEDGE AND UNDERSTANDING In addition to the core competences for an allergy nurse, you will need to know and understand:												
	The evidence for efficacy of immunotherapy, including current international guidelines (ARIA)	C											
	Up to date knowledge on recent developments and procedures in immunotherapy	C											
	A critical understanding of the criteria for suitability of an individual for Immunotherapy and understanding of choice of different routes of administration	C											
	A critical understanding of how to balance the risks against benefits of undertaking immunotherapy	C											
	Local guidelines and protocols regarding immunotherapy, including the dose adjustment in the event of an allergic reaction	C											
	The principles of valid consent, and how to	C											

	obtain valid consent from individuals											
D	The pharmacology of immunotherapy, including different modalities and indications and contraindications for use	C										

Provide immunotherapy												
Opt in or Opt out	2. Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	PERFORMANCE CRITERIA In addition to the core competences for an allergy nurse, you must be able to do the following:											
	Confirm the individual's diagnosis, their suitability and that their condition warrants immunotherapy	C										
	Identify the relevant allergen, the route of immunotherapy and the immunotherapy preparation	C										
	Give clear, full verbal and written information to the individual about the treatment and process and its risks, what they can expect from it, assess their commitment to the programme and gain their valid written consent	C										
	Give the individual time and opportunity to ask questions at all times during the therapy period and be accessible to the patient throughout the course of their treatment	C										
	Check that there are no contra-indications against immunotherapy and that the individual has no infection, no other illness nor large, local or systemic reactions to the previous dose	C										
	Ensure the individual's safety at all times in	C										

	selecting and checking the next dose of the immunotherapy prior to administration											
	Ensure accurate documentation of administration of Specific Immunotherapy, including any adverse reactions and patient's observations	C										
	Be able to recognise the signs of an allergic reaction and treat appropriately, as per the core competences for an allergy nurse (pages 5 & 6)	C										
	In the case of SCIT be competent to administer a sub-cutaneous injection Maintain safe storage of subcutaneous immunotherapy according to manufacturer's advice	C										
	In the case of Sub-Lingual Immunotherapy (SLIT) provide patient and family with written and verbal advice regarding ongoing administration of SLIT at home	C										
	Provide individual and family with contact details of the service for ongoing support	C										

Enable staff in educational environments to support the management of an individual's allergy

This standard is about educating staff in school and pre-school establishments and working in partnership with them to ensure the safety and management of an individual with allergy in their care. It provides an important opportunity for continuity of care in close collaboration with, for example, school nurses and community child health physicians. This can help to promote social inclusion and reduce abuse.

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	KNOWLEDGE AND UNDERSTANDING In addition to the core competences for an allergy nurse, you will need to know and understand:											
	The substances and situations an individual may encounter in educational establishments	C										
	Strategies which can be employed to reduce the risk of exposure to allergens	C										
	Anaphylaxis resuscitation techniques and guidelines, including accessing paramedic support and a stepped treatment within the individual management plan	C										
	Reliable information and educational resources about allergy	C										
	Social dynamics in educational establishments	C										
	An awareness of staff anxiety, management of this anxiety and how to empower staff to safely include the child in all aspects of school life	C										

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	PERFORMANCE CRITERIA In addition to the core competences for an allergy nurse, you must be able to do the following:											
	Facilitate a formal training session with the school	C										
	Adopt and maintain a positive and proactive approach to support the social inclusion of children with allergic disease in the everyday life of the establishment	C										
	Encourage opportunities for staff to approach and access healthcare workers and support groups to enhance their understanding and knowledge about allergy and how to identify an allergic reaction	C										
	Actively encourage an individualised management plan in place and is regularly updated for every child with allergic disease	C										
	Ensure that all relevant staff know what individual children are allergic to	C										
	Inform the staff of the storage conditions required for the emergency medication	C										
	Support staff in assessing the risks of: <ul style="list-style-type: none"> • exposure to allergens • abusive or unfair treatment because of allergy 	C										
	Work in partnership with staff to ensure that all appropriate avoidance measures	C										

	are taken											
	Inform staff how to recognise a mild, moderate and severe or life threatening allergic reaction and the actions they need to take to manage such reactions. Ensure all relevant staff know which drugs are provided in the rescue medication/emergency kit	C										
	Provide the school with a written treatment plan that identifies what a child is allergic to and the management of an allergic reaction	C										
	Give relevant staff information on patient support groups and other accessible sources of information	C										
	Ensure effective communication that encourages good practice between staff, the allergic individual, their carers and peers	C										
	Develop liaison with the community paediatric team to put in place systems to train school staff	C										

Confirm or exclude allergy for an individual referred from primary care (out patient consultation)

This standard is about confirming or ruling out an allergic cause for an individual's condition when they have been referred to general allergy services. It involves obtaining full and in-depth allergy history, which is essential to interpret these tests. This standard involves expert investigation and evaluation of the individual's whole allergy profile and includes the assessment of the range and extent of allergic disease affecting the individual.

Following the assessment of an individual's symptoms, the performance of relevant tests may yield information that an allergy practitioner can use to confirm the provisional clinical diagnosis. This is not straightforward and requires knowledge of allergic disorders, causative allergens and the predictive value of tests. The difficulty is that tests are often positive in patients who are not clinically allergic to that allergen. An allergy history is therefore essential to interpret these tests, and it is occasionally necessary to initiate further tests to confirm the diagnosis, such as a provocation challenge.

This standard encompasses a comprehensive discussion concerning the nature and degree of risk of exposure to allergens and consequences that may follow for an individual. Allergen avoidance is a serious and complex step to take. It involves negotiating an agreed strategy of allergen avoidance and what to do should allergen contact occur. It depends on a clear understanding of the evidence base underlying recommendations on allergen avoidance and is carried out after a clear diagnosis has been made. In the process of doing this, psychological support and information are identified to meet immediate needs.

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	KNOWLEDGE AND UNDERSTANDING You will need to know and understand:											
	The of use and availability of diagnostic tests	C										
	The importance of an accurate allergy focused history	C										
	How to interpret validated diagnostic allergy tests	C										
	The predictive values for diagnostic allergy tests	C										

	Acute severe allergic conditions, their development and risks	C										
	Assessment of risks for complex, interacting allergies and exposure to allergens and when to refer an individual to an appropriate clinician	C										
	Conditions that can coexist in allergy and the way in which they affect or are affected by allergy	C										
	Current guidelines on allergy diagnosis and management	C										
	Recent developments in the diagnosis and management of allergic conditions	C										
	Use and availability of diagnostic tests	C										
	How to distinguish allergy symptoms from other conditions with a similar presentation	C										
	Evidence based decision making based on current guidelines on disease diagnosis and management	C										
	Risk assessment for allergic conditions in typical and unusual settings	C										
	Current findings and evidence on cross reactivity of substances	C										
	The evidence base and guidelines on allergen avoidance	C										
	Understand the importance of proper diagnosis and the risks of self-diagnosis and treatment of allergy by non-validated practitioners	C										
D	Current prescribing and treatment guidelines for allergic conditions with co-morbidities	C										
D	Pharmacological management of allergic disease	C										

Opt in or Opt out	Competence	Minimum Standard	Expected Standard	Formative Assessment						Summative Assessment		
				PR	A	Initial & Date	PR	A	Initial & Date	PR	A	Initial & Date
	PERFORMANCE CRITERIA In addition to the core competences for an allergy nurse, you must be able to do the following:											
	Find out from a detailed allergy history the nature, frequency, onset, pattern and severity of the individual's symptoms and other illnesses they may have	C										
	Listen carefully to the individual's concerns, observations and views	C										
	Find out what the individual, carer or other practitioners may have done to alleviate the symptoms and the effectiveness of those measures	C										
	Determine whether the individual is exposed to known or potential triggers	C										
	Assess the probability that the individual's symptoms are due to exposure to the corresponding allergens in the light of the individual's history and the results of the skin-prick and blood test results for allergy	C										
	Find out how allergy affects the individual and their quality of life	C										
	Identify the extent to which lifestyle, emotions, occupation and/or stress may play a part in the individual's symptoms	C										
	Consider the results of all relevant skin-prick and blood tests performed, and/or arrange such tests	C										

	Form a diagnosis consistent with current best practice guidelines, based on clinical history and tests performed	C										
	Explain, if allergy is confirmed, how allergy is causing the individual's symptoms and/or delineate any other factors that may also contribute to symptoms	C										
	Assess risks associated with the allergy and its treatment and give advice or ensure the individual receives advice on these	C										
	Refer the individual to other members of the multidisciplinary team or others who can provide on-going help, advice or support	C										
	Refer the individual within the service for additional intervention, such as a food or drug challenge or immunotherapy where it is indicated	C										
	Consult colleagues, expert or research sources in cases that are unusual, uncommonly complex or difficult to resolve	C										
	Give the individual verbal and written information about their allergy. Assess, through discussion, the individual's concerns and worries and provide reassurance, age-appropriate information and support. Give the individual the opportunity to ask questions and contact details, enabling them to contact you if they have further concerns	C										

	Help the individual understand the consequences of allergen exposure in terms of how much allergen they were exposed to, severity of symptoms, risk, effect on other conditions and the actions they will need to take	c										
	Describe the methods and benefits of avoiding the allergen and optimally managing other conditions, informed by the evidence of the effects of allergen avoidance	c										
	Agree steps the individual can take to minimise exposure and optimise treatment where environmental allergens are impossible to avoid completely	c										
	Inform the individual about any related or cross reacting substances that need to be avoided based on a critical reading of current findings and evidence	c										
	Liaise with the individual's community network to ensure support for the individual in avoidance and management	c										
	Offer information on how to access and use reliable information and support to increase the individual's awareness and understanding of allergy	c										
	Asses via a diet history whether small quantities of a known food allergen are being tolerated or whether the individual is still experiencing allergic reaction to the allergen and the likelihood of allergy resolution	c										
	Where resolution is suggested by tests,	c										

	consider a food challenge test to be carried out in hospital to determine persistence or resolution of allergy											
	If test results are negative, determine from history whether they might represent false-negative results and repeat the tests	C										
	Explain to the individual what the results mean for their condition and for them personally.	C										

Acknowledgements

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The NHS Knowledge Skills framework and the development review process 2004
www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4105476.pdf

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www.tools.skillsforhealth.org.uk/

Guy's & St Thomas' NHS Foundation Trust Nursing and Midwifery Standards and Practice Committee

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