**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**RESTORE2TM Competency Statement**

|  |  |  |  |
| --- | --- | --- | --- |
| **RESTORE2** TM  **Competency Framework** | | | |
| **Competency Criteria**  **The participant will be able to:** | **Assessment method** | **Comments** | **Competence achieved (Assessor) Sign and Date** |
| **1. Demonstrate knowledge and skill in the use of the RESTORE2TM and NEWS2 observation tools** |  |  |  |
| 1a. Understand the normal presentation of their residents and the significant of treatment escalation plans / DNACPR orders (all staff), including knowledge of underlying conditions, individual risk factors (registered professionals) | Discussion |  |  |
| 1b. Identify possible early soft signs of deterioration in residents and understand the responsibility to escalate concerns accordingly (all staff) | Discussion and observation |  |  |
| 1c. Be aware of when it is appropriate to complete a set of vital signs and when it is appropriate to immediately escalate to the emergency services (all staff) | Discussion |  |  |

The participant can demonstrate clinical knowledge (registered professionals) and skill (all staff) in the use of RESTORE2TM, incorporating soft signs, NEWS2 and SBARD without direct supervision. Assessment of practice must be by a Registered Health Care Professional.

|  |  |  |  |
| --- | --- | --- | --- |
| 1d. Demonstrate ability to accurately perform a full set of vital signs (breathing rate, oxygen saturations, blood pressure, heart rate, ACVPU, temperature) (all staff)  (see vital signs competency) | Observation |  |  |
| 1e. Accurately document individual scores on the RESTORE2TM tool and add them up to get the correct total score (all staff) | Observation |  |  |
| 1f. Identify the immediate actions to be taken in response to the total NEWS2 in relation to what is normal for the resident using the RESTORE2TM, including the frequency of next observations (all staff) | Observation and discussion |  |  |
| 1g. Identify an appropriate plan for on-going management of the deteriorating resident (registered professionals) | Observation and discussion |  |  |
| **2. Demonstrate knowledge and skill in the use of the SBARD escalation tool** |  |  |  |
| 2a.Demonstrate when to use the SBARD tool (all staff) | Discussion |  |  |
| 2b. Explain the 5 stages of SBARD and what information should be communicated for each stage (all staff) | Discussion |  |  |
| 2c. Demonstrate accurate documentation of SBARD on the RESTORE2TM tool (all staff) | Observation |  |  |

**Date NEWS 2 e-learning or Health Education England Deterioration / Sepsis modules** **completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Physical Assessment Competency Completed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I can confirm that the above named individual has completed the NEWS 2 e-learning or Health Education England Sepsis modules and has retained evidence of completion.

Assessor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Status \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_

I can confirm that the above named individual has completed a physical assessment competency document and is able to perform clinical observations to a satisfactory standard without supervision.

Assessor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Status \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_

I can confirm that the above named individual has completed the RESTORE2TM competency document and can verify that he/she is able to use RESTORE2TM safely and appropriately.

Assessor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Status \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_