Society for Endocrinology COMPETENCY FRAMEWORK FRAMEWORK FOR ADULT ENDOCRINE STA Edition



ACKNOWLEDGEMENTS

SOCIETY FOR ENDOCRINOLOGY COMPETENCY FRAMEWORK FOR ADULT ENDOCRINE NURSING - 3rd Edition

In memory of Veronica (Nikki) Kieffer, whose visionary leadership in pioneering the competency framework for endocrine nurses continues to inspire excellence in patient care and professional growth worldwide.

SOCIETY FOR ENDOCRINOLOGY COMPETENCY FRAMEWORK FOR ADULT ENDOCRINE NURSING - 3rd Edition Working Group













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SANDOZ

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OVERVIEW

BACKGROUND

The Society for Endocrinology (SfE) Competency Framework for Adult Endocrine Nursing (CFAEN) was first published in 2013, addressing the lack of a formal development pathway for adult endocrine nurses in the UK (Kieffer et al., 2013). The publication of the 'Royal College of Nursing (RCN) Competency Framework for Children and Young People's Endocrine Nurse Specialists' in 2008 (RCN, 2013) served as a catalyst and foundation for developing the adult competency framework. The SfE CFAEN, 2nd edition, aimed to fill the gap by providing a structured pathway to develop the necessary 'skills, interventions, and specialist knowledge for nurses working in adult endocrinology' (Kieffer et al., 2015), thereby addressing the demand for highly skilled nurses in endocrine services.

The SfE Nurse Committee advanced the project by assembling an expert panel of endocrine nurses from across the UK to form a dedicated working party. This effort culminated in the first edition of the SfE CFAEN, which comprised of nine competencies (see Appendix 1). Shortly after, a second edition was launched in 2015, incorporating four additional competencies based on feedback from endocrine nurses (Kieffer *et al.*, 2015). The benefits of the SfE CFAEN are outlined as documented in the 2nd edition, see **Table 1**

The 3rd edition of the SFE CFAEN reflects the ongoing evolution of endocrine nursing and marks ten years since the publication of the 2nd edition (Kieffer *et al.*, 2015).

ABOUT THE 3RD EDITION

In recognition of the need for further adaptations to the SfE CFAEN, the SfE Nurse Committee established a Working Group to develop the 3rd edition. This group identified areas for change based on feedback from the SfE endocrine nurse and nursing support worker members, the launch of the SfE Online learning platform for nurses and the rising number of endocrine nurses in the UK. They also considered key reports on Revalidation (NMC, 2019), the Multi-professional Framework for Advanced Clinical Practice (NHS, 2017), and the Getting it Right the First Time (GIRFT) report (Wass & Lansdown, 2021).

The following key priorities for improvement were agreed upon:

- Inclusion of competencies for nursing support workers to support change in workforce
- Alignment of the competencies with the four pillars of Advanced Clinical Practice to aid career progression
- Additional competencies to support clinical practice with examples
- Modification of competency names to fit with current practice
- Provision of an evidence guide
- Template to support documentation of competencies and reflective practice
- Provision of resources linked to each competency

In the UK, there has been a gradual increase in the skill mix of staff working in endocrinology, particularly nursing support workers, with titles and roles as highlighted by the RCN including: health care assistants, health support worker, assistant practitioners, nursing assistants, trainee nursing associates and nursing associates (RCN, 2024). Nursing support workers have various roles within endocrine services, such as endocrine dynamic function testing, patient education, and specific to nursing associates, the administration of endocrine treatments like somatostatin analogues.

The Benner framework for competency (Benner, 1983) is widely utilised in practice (NHS, Health Education England, 2021). The Working Group agreed this remained the best fit for the SfE CFAEN and could be adapted to include competencies for nursing support workers at Novice and Advanced Beginner levels. It was deemed useful to incorporate the

Table 1. Benefits of the SfE Competency Framework for Adult Endocrine Nursing

The benefits of the SfE CFAEN as outlined in the 2nd Edition

Nurses benefit because it helps to:

- Deliver consistently high standards of care
- Identify the level of practice and plan a career in a more structured way
- Pinpoint personal educational and developmental needs
- Realise potential more effectively
- Seize opportunities to influence the direction of nursing (Kieffer *et al.*, 2015, Page 2)

Employers benefit because it provides:

- A model to ensure consistently high standards of care
- Clear insight into the expertise and competence of staff, for example, in the assessment of risk management
 Assistance in organisational planning (Kieffer *et al.*, 2015, Page 3)

Patients and the public benefit because it makes it possible to deliver:

- Consistently high standards of care
- Increased effectiveness of service provision
- Improved access and choice for care provision (Kieffer *et al.*, 2015, Page 3)

It is envisaged that this document will be a useful tool for:

- Supporting job descriptions and pay reviews/negotiations by detailing targets in accordance with local and national guidelines and policies
- Assessing clinical competence at different levels
- Developing personal goals and objectives in performance appraisals for career progression
- Achieving a unified and translational role of endocrine nurses at a European and International level (Kieffer *et al.*, 2015, Page 3)

Benefits of 3rd Edition

- Inclusion of competencies for Nursing Support Workers, e.g. Health Care Assistants and Nurse Associates
- Alignment of the competencies with the four pillars of Advanced Clinical Practice to aid career progression
- Additional competencies to support clinical practice with examples
- Provision of an evidence guide
- Evidence log to support documentation of competencies
- Provision of resources linked to each competency
- Supports revalidation

Agenda for Change (AFC) banding under the competency levels to indicate the expected level of competency to work towards (**Table 2**). Whilst the AFC is meant to ensure parity across banding, this is not the reality, as highlighted in the Endocrine Nurse Survey preliminary results of 2023 (Davies *et al.*, 2023).

The Multi-professional Framework for Advanced Clinical Practice (2017) divides capabilities into four pillars: Clinical Practice, Leadership and Management, Education, and Research (NHS, 2017). In recognition of the importance of career progression, it was essential to embed all four pillars into the SFE CFAEN. It was noted that these pillars often overlap and complement one another. To avoid duplication, the 2nd edition competencies were reviewed and adjusted to ensure they primarily covered clinical practice, with separate competencies introduced to encompass the remaining three pillars of Leadership and Management, Education, and Research.

It was agreed that the Hypogonadism and Hyper/Hypoparathyroidism competencies should be separated to provide a more specific clinical focus. Hypogonadism was divided into Female Hypogonadism and Male Hypogonadism, while Hyper/ Hypoparathyroidism was split into Hyperparathyroidism and Hypoparathyroidism. When considering the need for additional Clinical Practice competencies, the Working Group focused on common areas of nurse-led service provision, patient safety, and emerging clinical roles, with three areas identified. Obesity, which falls under the umbrella of endocrinology, is a service in high demand and endocrine nurses can play a vital role in this multi-disciplinary service. The National Patient Safety Alert on the management of Arginine Vasopressin Deficiency (AVP-D), (NHS England, 2016), formerly known as Diabetes Insipidus, prompted the development of a specific competency for this area, and Hyperprolactinaemia, was prioritised as a commonly managed nurse-led service.

To guide practitioners, some examples were included in the individual clinical competencies. These examples are not exhaustive but aim to steer practitioners towards achieving the defined competencies and demonstrating how they have met them. To reflect standard practice, two competency names were changed as follows: Steroid replacement therapy for disorders of the pituitary and adrenal glands to Adrenal Insufficiency, and Benign Adrenal Tumours to Adrenal Tumours to include both benign and malignant adrenal conditions.

Competencies have been categorised as per Appendix 1. Core competencies include Endocrine Dynamic Function Testing, Adrenal Insufficiency and AVP-D, with the expectation that all nurses working in Endocrinology complete these competencies. The core safety competencies are highlighted and include Adrenal Insufficiency and AVP-D.

Nurse-led services have continued to expand in number and variety of endocrine conditions managed. Preliminary results from the SfE UK Nurse survey highlight Thyroid, Adrenal and Pituitary as the predominant nurse-led services provided in the United Kingdom (Davies *et al.*, 2023), thus, these have been categorised under the Core Nurse-led Service category.

Nurses constitute the fastest growing membership at the SfE, with 170 nurse members reported at the Annual General Meeting in 2023 (SfE, 2023). The surge in Endocrine nurse membership is likely linked to the ongoing evolution of Endocrine nursing practice and the positive impact endocrine nurses have demonstrated in service provision, as highlighted by the GIRFT report (Wass & Lansdown, 2021). However, there are continued challenges with inadequate investment and recognition of endocrine nurses and nursing support workers in supporting endocrine services. The GIRFT review recommended 96 (72.6%) out of 126 organisations, appoint or expand their Endocrine Nurse workforce. In addition, they recommended organisations support endocrine nurses to attend dedicated SfE training events (Wass & Lansdown, 2021). These developments and recommendations highlight the ongoing importance of a structured competency framework where the novice can navigate their way to expert. This requires support from management and financial investment, which is challenging in the current economic climate.

USING THE COMPETENCY FRAMEWORK IN PRACTICE

The SfE CFAEN is a well-recognised tool, utilised in the UK and adopted internationally, with translations in multiple languages. It enables the practitioner to identify their current level of practice and learning and development needs for career progression. It has been utilised to guide objectives at appraisals, support promotion, evidence skills at interview and revalidation (UK-specific). There are variations in endocrine nursing

Table 2. Competency level mapped against Agenda for Change banding

AFC Band	Role
3 to 4	Nursing Support Workers
4 to 5	Nursing Associate to Endocrine Staff Nurse
5 to 6	Endocrine Staff Nurse to Endocrine Specialist Nurse
6 to 7	Endocrine Specialist Nurse
7 to 8	Endocrine Specialist Nurse - Advanced Nurse Practitioner - Nurse Consultant
	3 to 4 4 to 5 5 to 6 6 to 7

and nursing support worker roles in the UK, therefore the practitioner needs to identify competencies relevant to their role.

The SfE CFAEN, 2nd edition, outlined the expectation for practitioners to achieve competence within six months of starting the process with the aim to achieve expert status within 5 years (Kieffer *et al.*, 2015) however this is with the caveat that progression from novice to expert would depend on a number of variables, such as, skillset, performance, individual objectives and other variables, such

as career breaks, working patterns, support from management and funding.

EVIDENCING LEVEL OF COMPETENCY

As an accountable practitioner it is important to know your limitations and identify knowledge and skills you need to develop, escalating learning needs and seeking support where appropriate.

The SfE CFAEN 3rd edition provides examples within each competency to guide practitioners. The examples are not exhaustive and are aimed

Continuing Professional Development	Utilise the NMC Continuing Professional Development log template
Contribution to service delivery	Policy groups, reviewing guidelines and standards, participating in audit, governance, strategic planning, peer review, development/updating of patient information, quality improvement
Courses/conferences	Certificate of attendance, evaluation of learning, presenting summary of learning points to your team, Chairing or facilitating sessions, liaison with Pharma, peers and PSGs
Direct observation	Practical skills, e.g. phlebotomy, cannulation, administration of medication, objective structured clinical examination
Education	Successful completion of MSc modules such as advanced practice, nurse prescribing and Oxford Brookes Masters-level module in Endocrine Nursing, actively participating in the development of educational resources
Evaluation and feedback	From patients, health care professionals, clinical supervisor, 360 performance feedback tool
Patient Support Groups (PSGs)	Attend PSG meetings, run/participate in PSG local group, trustee
Presentation	Discussing results at MDT, case study, review of patient journey, poster or oral presentation
Professional roles (nursing/endocrinology)	Working Groups, NICE, SfE committees, PSGs
Public/social media engagement	Highlight endocrine nursing related activities such as nurse-led services, endocrine nurse presentations or join sessions, endocrine nurse engagement with local educational activities.
Publication	Abstract, article, poster, guidelines, policy
Reflective practice	Account, discussion and practice-based feedback, utilise Nursing and Midwifery Council (NMC) reflective accounts form to document
Research	Audits, nurse-led research, involvement in commercial or in-house research, evidence based/literature reviews, journal club, endocrine networks
Skills document	Certificate for successful completion of phlebotomy and cannulation with practice-based sign-off
Supervision	Formal, Informal
Teaching (patients, health care, professionals/public)	Planning, delivering and evaluating effectiveness
Training	Ionising Radiation (Medical Exposure) Regulations (IR(ME)R), counselling, new clinical role/skill, simulation

Table 3. Examples of how to evidence competence in practice

at supporting practitioners in completing the defined competency and demonstrating how they have met them.

The evidence log (Appendix 2) provides a source document for tracking progress from Novice through to Expert. For example, how a competency was achieved with relevant evidence/attachments, review and sign off with a supervisor. Ideally, a digital evidence log is recommended. This is available via the SfE Online Learning Platform, which has the digital version of the SfE CFAEN, 3rd edition and has examples of completed competencies from novice to expert.

Reflective practice is an important component of nursing practice and was one of the highlighted priorities for the 3rd edition. The NMC provides templates to support reflective practice and evidence gathering as part of revalidation and can be sourced online via the NMC, e.g. reflective accounts form and continuing professional development log template (NMC, 2021).

Please see Appendix 3 for links to relevant organisations, Patient Support Groups (PSGs), gold standard textbooks and guidance. The SfE CFAEN has an online interactive learning platform provides more detailed resources that are regularly updated. **Table 3** provides examples of how you can evidence your competency.

The SfE CFAEN has an online interactive learning platform that provides a channel for communication and sharing relevant documents related to endocrine nursing and nursing support workers, such as job plans and job descriptions. They also provide updates on events via the SfE, relevant professional bodies, PSGs, Pharmaceutical Industry and signpost to resources, e.g. nurseled clinic templates, disease specific quality of life questionnaires, educational videos. In the future they will be utilised to link to "How do I" documents, for example, Reproductive endocrinology and fertility, Pituitary lesions, Turner syndrome, Immunotherapy and Associated endocrinopathies. Access to the SfE HUB is available to SfE members and the Online Learning Platform is exclusively available to nurse and nursing support worker members.

IN SUMMARY

The 3rd edition of the SFE CFAEN has been updated to provide additional guidance and support to endocrine nurses and nursing support workers, as they progress in their dedicated roles.

It provides a structured pathway for career development under the recognised auspices of advanced clinical practice.

The SfE Online Learning Platform offers practitioners opportunities for mentorship, networking and access to the SfE CFAEN, and a digital record of practice. This cost-effective model is globally accessible to SfE nurse and nursing support worker members.

Future iterations of the SfE CFAEN are planned to be exclusively online, enabling more efficient and timely updates to competencies, resources and the addition of new competencies to meet evolving practice needs.

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PILLAR		t/Nursing Associate/ t Nurse	Registered Nurse		
	Novice (Band 3–4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Endocrine Dynamic Function Tests (EDFTs) CLINICAL PRACTICE CATEGORY Core Clinical	 Understand Endocrine Dynamic Function Tests (EDFTs) can be used to diagnose, assess treatment response and ongoing management of endocrine disorders Aware of the common EDFTs undertaken Perform and monitor observations as per local guidelines/protocols Awareness of potential drug reactions or complications that can arise during EDFTs, e.g. Anaphylaxis, deterioration in observations Support the clinical team by assisting and performing EDFTs as per local guidelines/protocols, e.g. intravenous cannulation, phlebotomy Aware of indications for urgent review of patients undergoing EDFTs, e.g. hypoglycaemia during ITT Escalate to a senior member of the team when a patient reports a concern, e.g. suspected drug reaction, feeling unwell 	 Demonstrate and apply knowledge of EDFTs Understand the reason for the EDFT being undertaken, e.g. diagnosis, assessment, and management of the relevant endocrine condition Demonstrate the ability to recognise improvement or deterioration in the patient undergoing EDFTs, e.g. vasovagal Follow local guidelines/ protocols related to EDFTs, e.g. implied consent for cannulation, observations, safety parameters for undertaking the test Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. contraindication to undertaking EDFTs Able to clearly and confidently explain the importance of lifestyle changes and provide appropriate information, e.g. weight loss, blood pressure, smoking cessation 	 Knowledge and understanding of the anatomy, physiology and normal functioning of the endocrine system Knowledge and understanding of common EDFTs Knowledge and understanding of normal and abnormal biochemical ranges for Endocrine Dynamic Function Testing As appropriate, provide patients with key knowledge and skills to safely and competently follow required instructions pre, during and post EDFTs, e.g. medication adjustment. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impact of EDFTs and signpost patients/ carers, to wellbeing support and escalate as needed Knowledge of pharmacological preparations used in EDFTs, e.g. tetracosactide, glucagon 	 Understand the causes of the endocrine condition being investigated and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of the endocrine condition being investigated during clinical assessment, e.g. acromegaly and acral enlargement, prognathism Safely and competently carries out/supervises complex EDFTs with supervision from a senior member of the clinic team as required Demonstrates an understanding of the factors affecting the reliability of EDFTs, e.g. drug interference Requests EDFTs as part of a clinical treatment plan with supervision as required by a senior member of the clinical team Commence, adjust, or discontinue pharmacological preparations in advance of EDFTs according to local guidelines or within agreed non-medical prescribing competency, e.g. medication review prior to EDFTs for suspected hyperaldosteronism 	 Arranges appropriate EDFTs and pre-test investigations following in-depth health assessment and clinical examination, e.g. electrocardiogram (ECG) as indicated prior to insulin tolerance test (ITT) Prescribes pharmacological preparations as indicated for EDFTs, e.g. pre-test medication adjustment, actrapid for ITT Support and supervise the endocrine testing team in the undertaking and reporting of EDFTs Interpret and action EDFT results Comprehensive knowledge of endocrine guidelines/ policy related to EDFTs and to implement these in practice alongside the current evidence base, e.g. National Insitute for Health and Care Excellence (NICE) and Society for Endocrinology (SfE) Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Endocrine Dynamic Function Tests (EDFTs) CLINICAL PRACTICE CATEGORY Core Clinical		 Able to signpost patients/ carers to information on endocrine conditions and EDFTs, with the relevant online resources, leaflets and Patient Support Groups (PSGs) Escalates clinical concerns to the appropriate clinician 	 Aware of risk factors and key safety points in EDFTs, e.g. cardiovascular screening, detection of other hormone excess/deficiencies, contraindications to proceeding with EDFTs Discusses the need for further investigations with the Multi-Disciplinary Team (MDT) as required Awareness and utilisation of national guidance relating to EDFTs, e.g. National Institute for Health and Care Excellence (NICE) and Society for Endocrinology (SfE) 	 Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDT's discussing complex patients and their management As indicated, report and communicate EDFT results to patient, GP and referring clinician and arrange appropriate follow-up as needed, e.g. treatment initiation, steroid education Triage EDFT referrals as agreed by local protocols and escalate to a senior member of the clinical team as required. Provide clinical advice to non-endocrine teams regarding EDFTs, e.g. referral criteria 	

PILLAR		Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3–4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)	
CLINICAL COMPONENT Adrenal Insufficiency CLINICAL PRACTICE CATEGORY Core Clinical Core Safety Core Nurse-led Service	 Understand the meaning of Adrenal Insufficiency and the purpose of steroid replacement therapy Aware of the standard tests used in the diagnosis, assessment and ongoing management of Adrenal Insufficiency Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. IV cannulation and blood sampling during endocrine dynamic function tests Aware of indications for urgent review of patients who raise a concern, e.g. signs and symptoms of adrenal crisis (low blood pressure, confusion) Escalate to a senior member of the team when a patient reports illness or concern 	 As Novice and Demonstrate and apply knowledge of the hypothalamic, pituitary, adrenal (HPA) axis in relation to Adrenal Insufficiency, e.g. primary, secondary, tertiary Adrenal Insufficiency Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Adrenal Insufficiency Demonstrate the ability to recognise improvement or deterioration of the patient with Adrenal Insufficiency, e.g. blood pressure, biochemistry, fatigue Follow local guidelines/ protocols related to Adrenal Insufficiency Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. signs and symptoms of adrenal crisis Able to explain the importance of lifestyle changes clearly and confidently, in the management of Adrenal Insufficiency and provide appropriate information 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of the HPA axis Knowledge and understanding of disorders related to Adrenal Insufficiency, e.g. hypopituitarism, Addison's disease, immunotherapy induced endocrinopathies Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Adrenal Insufficiency, e.g. short synacthen test, biochemical monitoring As appropriate provide patients with key knowledge and skills to safely and competently self-manage Adrenal Insufficiency and associated treatment, e.g. steroid sick day rules, assessing ability of patient/ carer to prepare and self-administer steroid medication such as Solu- cortef injection. Refer patient to a senior member of the clinical team for further advice and education as required 	 As Competent and Understand causes of Adrenal Insufficiency and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of Adrenal Insufficiency and adrenal crisis during clinical assessment Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Adrenal Insufficiency, e.g. address any learning needs Assess patients' knowledge and skills to competently and safely self-manage Adrenal Insufficiency and associated treatment, e.g. adrenal crisis or risk of Adrenal Insufficiency following pituitary/adrenal surgery and/or radiotherapy 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify Adrenal Insufficiency and associated comorbidities Arranges appropriate investigations in the assessment of Adrenal Insufficiency Initiates, prescribes, evaluates, and modifies treatments for Adrenal Insufficiency Manage complex cases of Adrenal Insufficiency, e.g. pregnancy, multiple comorbidities, polypharmacy and adrenal suppression Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of Adrenal Insufficiency guidelines/policy related to Adrenal Insufficiency, and to implement these in practice alongside the current evidence base, e.g. NICE, Royal College of Physicians (RCP), SfE 	

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Adrenal Insufficiency CLINICAL PRACTICE CATEGORY Core Clinical Core Safety Core Nurse-led Service		 Able to signpost patients/ carers to information on Adrenal Insufficiency and related comorbidities, with the relevant online resources, leaflets and PSGs 	 Understand the emotional and psychological impacts of Adrenal Insufficiency. Signpost patient/carer to wellbeing support and escalate as needed Knowledge of pharmacological preparations available to diagnose and treat Adrenal Insufficiency, e.g. tetracosactide and glucocorticoids Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in Adrenal Insufficiency Aware of risk factors and key safety points in the management of Adrenal Insufficiency, e.g. non- adherence, osteoporosis, over treatment with glucocorticoids Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, RCP, SfE 	 Understand and explain the implications of Adrenal Insufficiency and steroid replacement on fertility and pregnancy, e.g. steroid requirements during pregnancy and labour Commence, adjust or discontinue pharmacological preparations for Adrenal Insufficiency, according to local guidelines or, within agreed non-medical prescribing competency, e.g. managing glucocorticoid withdrawal to prevent Adrenal Insufficiency (e.g. as per NICE guidance) Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated, e.g. genetic counselling for Congential Adrenal Hyperplasia (CAH) Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Metabolic Bone, Genetics 	Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Arginine Vasopressin Deficiency (AVP-D) - formally Diabetes Insipidus CLINICAL PRACTICE CATEGORY Core Clinical Core Safety Core Nurse-led Service	 Understand the meaning of Arginine Vasopressin Deficiency (AVP-D) and the purpose of replacement therapy Aware of the standard tests used in the diagnosis, assessment and ongoing management of AVP-D Perform and monitor observations as per local guidelines/protocols, e.g.accurate fluid balance charting Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. IV cannulation and blood sampling during endocrine dynamic function tests Aware of indications for urgent review of patients who raise a concern, e.g. increase in urine frequency, nocturia, nausea, confusion, cramps, thirst Escalate to a senior member of the clinical team when a patient reports an illness or concern 	 As Novice and Demonstrate and apply knowledge of AVP-D and treatment Understand the reason for the investigations undertaken in the diagnosis, assessment and management of AVP-D Demonstrate the ability to recognise improvement or deterioration of the patient with AVP-D, e.g. hypernatremia: dry mouth/ lips, headaches, cramps Follow local guidelines/ protocols related to AVP-D Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g.increased/decreased urinary output Able to explain the importance of lifestyle changes clearly and confidently, in the management of AVP-D and provide appropriate information, e.g. toilet access card Able to signpost patients/ carers to information on AVP-D with the relevant online resources, leaflets and PSGs 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of AVP-D Knowledge and understanding of disorders related to AVP-D, e.g. polyuria, polydipsia Knowledge and understanding of the investigations required to diagnose and assess ongoing management of AVP-D Understand the difference between AVP-D and AVP Resistance (AVP-R) in terms of diagnosis and management As appropriate, provide patients with the key knowledge and skills to competently and safely self- manage AVP-D, e.g.sick day rules when unwell. Refer to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impacts of AVP-D. Signpost patient/ carer to wellbeing support and escalate as needed 	 As Competent and Understand causes of AVP-D and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of AVP-D during clinical assessment, e.g. post transsphenoidal surgery Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of AVP-D, e.g. sick day rules Assess patients knowledge and skills to competently and safely self-manage AVP-D and desmopressin, e.g.break through dosing Understand and explain the implications of AVP-D and treatment on fertility and pregnancy Commence, adjust, or discontinue desmopressin according to local guidelines or within agreed non-medical prescribing competency 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify causes of AVP-D and associated comorbidities Arranges appropriate investigations in the assessment and management of AVP-D, e.g. biochemistry Initiates, prescribes, evaluates, and modifies treatments for AVP-D Manage complex cases of AVP-D, e.g. surgery, pregnancy, multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy related to AVP-D and to implement these in practice alongside current evidence base, e.g. SfE Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach

PILLAR	Health Care Assistant/Nursing Associate/ Registered Nurse Student Nurse Registered Nurse				
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Arginine Vasopressin Deficiency (AVP-D) - formally Diabetes Insipidus CLINICAL PRACTICE CATEGORY Core Clinical Core Safety Core Nurse-led Service			 Knowledge of pharmacological preparations available to diagnose and treat AVP-D Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in AVP-D, e.g. desmopressin Aware of risk factors and key safety points in the management of AVP-D, e.g. over and under replacement Discusses the need for further investigations with the MDT as required Awareness and utilisation of national/international guidance, e.g. SfE 	 Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Counselling 	

PILLAR		Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)	
CLINICAL COMPONENT Hypo/ Hyperthyroidism CLINICAL PRACTICE CATEGORY Core Nurse-led Service	 Understand the meaning of Hypo/Hyperthyroidism and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of Hypo/ Hyperthyroidism Perform and monitor observations as per local guidelines/protocols, e.g. weight, heart rate, blood pressure Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. phlebotomy Aware of indications for urgent review of patients who raise a concern, e.g. drug related adverse side effect or exacerbation of thyroid condition Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of the hypothalamic, pituitary, thyroid axis Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Hypo/ Hyperthyroidism Demonstrate the ability to recognise improvement or deterioration of the patient with Hypo/Hyperthyroidism, e.g. weight, heart rate Follow local guidelines/ protocols related to Hypo/ Hyperthyroidism Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. suspected serious adverse drug reaction, pregnancy Able to explain the importance of lifestyle changes clearly and confidently, in the management of Hypo/ Hyperthyroidism and provide appropriate information 	 As Advanced Beginner and Knowledge and understanding of anatomy, physiology and pathophysiology of Hypo/ Hyperthyroidism Knowledge and understanding of disorders related to Hypo/ Hyperthyroidism, e.g. thyroid eye disease (TED), atrial fibrillation, low mood Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Hypo/ Hyperthyroidism, e.g. thyroid function tests, thyroid antibodies As appropriate, provide patients with key knowledge and skills to safely and competently self- manage Hypo/Hyperthyroidism and associated treatment, e.g. identifying signs and symptoms of TED, importance of adherence and reporting serious adverse effects associated with anti- thyroid drugs. Refer patient to a senior member of the clinical team for further advice and education as required 	 As Competent and Understand causes of Hypo/Hyperthyroidism and can explain differential diagnosis and potential treatment options, e.g. levothyroxine, anti-thyroid drugs, radioiodine and surgery Recognises signs and symptoms of Hypo/ Hyperthyroidism/TED during clinical assessment Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Aware of potential issues with assay interference/ drug interactions when interpreting thyroid blood test results, e.g. biotin, absorption issues Support and empower patients to self-manage appropriate aspects of Hypo/Hyperthyroidism, e.g. smoking cessation, diet, exercise 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify Hypo/Hyperthyroidism and associated comorbidities, e.g. goitre, bruit, nodules Arranges appropriate investigations in the assessment and management of Hypothyroidism, e.g. thyroid antibodies, technetium uptake scan, thyroid ultrasound Initiates, prescribes, evaluate and modifies treatments for Hypo/Hyperthyroidism and TED Manage complex cases of Hypo/Hyperthyroidism, e.g. pregnancy, multiple comorbidities, polypharmacy persistent thyrotoxicosis, Moderate to severe TED, drug induced Hypo/ Hyperthyroidism Provide counselling and support for patient/carer and escalate to the specialist team as required 	

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PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL Hypo/ Hyperthyroidism CLINICAL PRACTICE CATEGORY Core Nurse-led Service		 Able to signpost patients/ carers to information on Hypo/Hyperthyroidism and related comorbidities, with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Understand the emotional and psychological impacts of Hypo/Hyperthyroidism. Signpost patient/carer to wellbeing support and escalate as needed Knowledge of pharmaceutical preparations available to treat Hypo/ Hyperthyroidism and TED Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in Hypo/ Hyperthyroidism and TED, e.g. serious adverse effects related to anti-thyroid drugs Aware of risk factors and key safety points in the management of Hypo/Hyperthyroidism, e.g. pregnancy, heart disease, osteoporosis, agranulocytosis, liver toxicity, TED Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, SfE, Thyroid Eye Disease Amsterdam Declaration Implementation Group UK (TEAMeD), RCP 	 Assess patients' knowledge and skills to competently and safely self-manage Hypo/Hyperthyroidism and associated treatment, e.g. adherence to medication, reporting signs/symptoms of TED and serious adverse drug effects Understand and explain the implications of Hypo/ Hyperthyroidism on fertility and pregnancy Commence, adjust, or discontinue pharmacological preparations for Hypo/ Hyperthyroidism and TED according to local guidelines or within agreed non-medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Ophthalmology, Nuclear Medicine 	 Comprehensive knowledge of guidelines/policy related to Hypo/Hyperthyroidism and to implement these alongside the current evidence base, e.g. NICE, TEAMed, SfE, RCP Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Adrenal Tumours (benign and malignant) CLINICAL PRACTICE CATEGORY Core Nurse-led Service	 Understand the meaning of Adrenal Tumours and the purpose of adrenal work-up/ management Aware of the standard tests used in the diagnosis, assessment and ongoing management of Adrenal Tumours Perform and monitor observations as per local guidelines/protocols, e.g. Lying and Standing B/P Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. 24-hour urine collection and late-night salivary sample collection Aware of indications for urgent review of patients who raise a concern, e.g. new onset of symptoms related to possible hormone excess Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of endocrine anatomy and physiology in the context of Adrenal Tumours and treatment(s) Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Adrenal Tumours Demonstrate the ability to recognise improvement or deterioration of the patient with functional Adrenal Tumours, e.g. hypertension, tachycardia in phaeochromocytoma Follow local guidelines/ protocols related to Adrenal Tumours Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. symptoms related to hormone excess, such as hypertension Able to explain the importance of lifestyle changes clearly and confidently, in the management of functional Adrenal Tumours and provide appropriate information, e.g. smoking cessation, exercise 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of adrenal glands and Adrenal Tumours Knowledge and understanding of disorders related to Adrenal Tumours, e.g. Cushing's, hyperaldosteronism, phaeochromocytoma Knowledge and understanding of the investigations required to diagnose, characterise and assess ongoing management of Adrenal Tumours As appropriate, provide patients with key knowledge and skills to competently and safely self-manage associated treatment of functional Adrenal Tumours, e.g. alpha blockade for phaeochromocytoma or anti-hypertensives/ potassium supplements in hyperaldosteronism. Refer patient to a senior member of the clinical team for advice and education as required Understand the emotional and psychological impacts of the diagnosis of an Adrenal Tumour, e.g. set timely expectations to patients undergoing serial investigations for Adrenal Tumours. Signpost patient/ carer to wellbeing support and escalate as needed 	 As Competent and Understand causes of Adrenal Tumours and can explain the differential diagnosis and potential treatment options Recognise signs and symptoms of hormone excess related to Adrenal Tumours during clinical assessment, e.g. cushingoid features Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision, as required, by a senior member of the clinical teatm, e.g. drug/ food related interference in biochemical assessment, for example, liquorice in hyperaldosteronism Support and empower patients to self-manage appropriate aspects of Adrenal Tumour management, e.g. blood pressure monitoring Assess patient's knowledge and skills to competently and safely self- manage Adrenal Tumour management and associated treatment, e.g. reporting adverse effects of alpha blockade, reporting signs and symptoms of adrenal insufficiency 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify causes of Adrenal Tumours and associated comorbidities, e.g. Multiple Endocrine Neoplasia, Von Hippel Lindau Arranges appropriate investigations in the assessment and management of Adrenal Tumours, e.g. biochemical, genetic, interventional radiology, radiological and nuclear medicine Initiates, prescribes, evaluates, and modifies treatments for functional Adrenal Tumours Manage complex cases of functioning Adrenal Tumours, e.g. blood pressure optimisation in phaeochromocytoma, severe hypokalaemia and resistant/ refractory hypertension in hyperaldosteronism patients, multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required

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PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3–4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL Hypopituitarism CLINICAL PRACTICE CATEGORY Core Nurse-led Service	 Understand the meaning of Hypopituitarism and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of Hypopituitarism Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. phlebotomy Aware of indications for urgent review of patients with Hypopituitarism, e.g. symptoms of adrenal crisis, medication problems Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of the hypothalamic, pituitary axis and its hormones Understand the reason for the tests undertaken in the diagnosis, assessment and management of Hypopituitarism Demonstrate the ability to recognise improvement or deterioration in the patient with Hypopituitarism, e.g. signs of treatment response Follow local guidelines/ protocols related to Hypopituitarism Recognise the need for urgent clinical review and escalate to senior member of the clinical team, e.g. signs and symptoms of adrenal crisis Able to explain the importance of lifestyle changes clearly and confidently, in the management of Hypopituitarism and provide appropriate information 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of the hypothalamic, pituitary axis Knowledge and understanding of pituitary disorders related to Hypopituitarism, e.g. growth hormone deficiency (GHD) Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Hypopituitarism, e.g. endocrine dynamic function tests As appropriate, provide patients with key knowledge and skills to safely and competently self- manage Hypopituitarism and associated treatment, e.g. self-injection of growth hormone (GH) and reporting side effects. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impacts of Hypopituitarism. Signpost patient/carer to wellbeing support and escalate as needed 	 As Competent and Understand causes of Hypopituitarism and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of Hypopituitarism during clinical assessment Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Hypopituitarism, e.g. administration of medications, reporting adverse drug effects to the clinical team Assess patients' knowledge and skills to competently and safely self-manage Hypopituitarism and associated treatment, e.g. steroid sick day rules Understand and explain the implications of Hypopituitarism and hormone replacement therapy on fertility and pregnancy 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify causes of Hypopituitarism Arranges appropriate investigations in the assessment and management of Hypopituitarism, e.g. endocrine dynamic function tests, pituitary imaging Initiates, prescribes, evaluates, and modifies treatments for Hypopituitarism Manage complex cases of Hypopituitarism, e.g. pregnancy, multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy related to Hypopituitarism and to implement these in practice alongside the current evidence, e.g. NICE, RCP, SfE

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL Hypopituitarism CLINICAL PRACTICE CATEGORY Core Nurse-led Service		 Able to signpost patients/ carers to information on Hypopituitarism and related diagnosis with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Knowledge of pharmacological preparations available to diagnose and treat Hypopituitarism, e.g. treatment such as glucocorticoids, levothyroxine Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in the treatment of Hypopituitarism Aware of risk factors and key safety points in the management of Hypopituitarism, e.g. osteoporosis Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, RCP, SfE 	 Commence, adjust, or discontinue hormone replacement therapy according to local guidelines or within agreed non-medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. weight management 	 Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
PILLAR CLINICAL COMPONENT Acromegaly CLINICAL PRACTICE CATEGORY Core Nurse-led Service	Studer Novice	Advanced Beginner (Band 4–5) As Novice and Demonstrate and apply knowledge of Acromegaly and treatment, e.g. medication, surgery, radiotherapy Understand the reason for the investigations undertaken in the diagnosis, assessment, and management of Acromegaly Demonstrate the ability to recognise improvement or deterioration of the patient with Acromegaly, e.g. sweating, joint pain, snoring, hypertension Follow local guidelines/ protocols related to Acromegaly Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. uncontrolled hypertension, high blood glucose/Hbalc	 (Band 5-6) As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of Acromegaly Knowledge and understanding of disorders related to Acromegaly, e.g. diabetes, hypertension, sleep apnoea, polyps, carpel tunnel syndrome Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Acromegaly, e.g. oral glucose tolerance test As appropriate, provide patients with key knowledge and skills to safely and competently self- manage Acromegaly and associated treatment, e.g. self-injection of somatostatin analogues (SSA) and reporting side effects. Refer patient to a 	 Proficient (Band 6-7) As Competent and Understand the cause of Acromegaly and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of Acromegaly during clinical assessment, e.g. acral enlargement, prognathism Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Acromegaly, e.g. reporting adverse drug effects to the clinical team Assess patients' knowledge and skills to competently and safely self-manage 	 (Band 7-8) As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify Acromegaly and associated comorbidities Arranges appropriate investigations in the assessment and management of Acromegaly e.g. biochemical, radiologica sleep oximetry Initiates, prescribes, evaluates, and modifies treatments for Acromegaly Manage complex cases of Acromegaly, e.g. pregnancy, multiple comorbidities, polypharmacy and uncontrolled Acromegaly Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy related
		 Able to explain the importance of lifestyle changes clearly and confidently, in the management of Acromegaly and provide appropriate information 		1 5	

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Acromegaly CLINICAL PRACTICE CATEGORY Core Nurse-led Service		 Able to signpost patients/ carers to information on Acromegaly and related comorbidities, with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Knowledge of pharmacological preparations available to diagnose and treat Acromegaly, e.g. dopamine agonists, SSA, pegvisomant Identify non-adherence and explain the potential side effects, risks, and benefits of pharmacological preparations used in Acromegaly Aware of risk factors and key safety points in the management of Acromegaly, e.g. cardiovascular screening, detection of other hormone excess/deficiencies Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance 	 Commence, adjust, or discontinue pharmacological preparations for Acromegaly, e.g. SSA, according to local guidelines or within agreed non-medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Sleep clinic, Gastroenterology, Cardiology 	 Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR		nt/Nursing Associate/ nt Nurse	Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Cushing's: includes Cushing's Syndrome, Cushing's Disease, Cyclical Cushing's and Adrenocortical Cancer CLINICAL PRACTICE CATEGORY Core Nurse-led Service	 Understand the meaning of Cushing's and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of Cushing's Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. metyrapone day curve Aware of indications for urgent review of patients who raise a concern, e.g. psychological symptoms Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of Cushing's and treatment, e.g. medication, surgery, radiotherapy Understand the reason for the investigations undertaken in the diagnosis, assessment, and management of Cushing's Demonstrate the ability to recognise improvement or deterioration of the patient with Cushing's, e.g. muscle strength, blood glucose control Follow local guidelines/ protocols related to Cushing's Recognise the need for urgent clinical review and escalate to senior members of the clinical team, e.g. signs and symptoms of infection, shortness of breath, oedematous Able to explain the importance of lifestyle changes clearly and confidently, in the management of Cushing's and provide appropriate information 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of Cushing's Knowledge and understanding of disorders related to Cushing's, e.g. diabetes mellitus, hypertension, heart failure Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Cushing's, e.g. 24hr urinary free cortisol As appropriate, provide patients with key knowledge and skills to competently and safely self-manage Cushing's and associated treatment, e.g. prophylactic anticoagulation, metyrapone and its complications. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impacts of Cushing's. Signpost patient/ carer to wellbeing support and escalate as needed 	 As Competent and Understand causes of Cushing's and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of Cushing's during clinical assessment, e.g. purple striae, muscle weakness, round face, thin, frail skin, bruising Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Cushing's, e.g. recognising signs and symptoms of adrenal crisis and taking appropriate action Assess patients' knowledge and skills to competently and safely self-manage Cushing's and associated treatment, e.g. prophylactic anticoagulation, metyrapone and associated complications 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify the causes of Cushing's and associated comorbidities Arranges appropriate investigations in the assessment and management of Cushing's, e.g. Magnetic Resonance Imaging (MRI), Inferior Petrosal Sinus Sampling (IPSS) Initiates, prescribes, evaluates, and modifies treatments for Cushing's, e.g. metyrapone, pasireotide Manage complex cases of Cushing's, e.g. multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy, related to Cushing's, and to implement these in practice alongside the current evidence base, e.g. NICE, SfE, Endocrine Society

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Cushing's: includes Cushing's Syndrome, Cushing's Disease, Cyclical Cushing's and Adrenocortical Cancer CLINICAL PRACTICE CATEGORY Core Nurse-led Service		 Able to signpost patients/ carers to information on Cushing's with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Knowledge of pharmacological preparations available to diagnose and treat Cushing's, e.g. overnight dexamethasone suppression test Identify non-adherence and explain the potential side effects, risks, and benefits of pharmacological preparations, e.g. metyrapone, anticoagulants Aware of risk factors and key safety points in the management of Cushing's, e.g. thrombosis, adrenal crisis, glycaemic control, hypertension Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, SfE, Endocrine Society 	 Understand and explain the implications of Cushing's and treatment on fertility and pregnancy Commence, adjust or discontinue pharmacological treatment according to local guidelines or within agreed non-medical prescribing competency, e.g. hydrocortisone Recognise condition-specific psychological issues and provide support to patient/ carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Psychology, Tertiary Centre, Cardiology 	 Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Growth Hormone Deficiency (GHD) (covers transition and adults) CLINICAL PRACTICE CATEGORY Core Nurse-led Service	 Understand the meaning of Growth Hormone Deficiency (GHD) and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of GHD Perform and monitor observations as per local guidelines/protocols, e.g. body composition Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. phlebotomy, endocrine dynamic function tests Aware of the indications for urgent review of patients who raise a concern, e.g. adverse side effect of GH replacement therapy Escalate to a senior member of the clinical team when patients report a concern 	 As Novice and Demonstrate and apply knowledge of the hypothalamic, pituitary axis in relation to GH Understand the reason for the investigations undertaken in the diagnosis, assessment and management of GHD Demonstrate the ability to recognise improvement or deterioration of the patient with GHD, e.g. mood, body composition Follow local guidelines/ protocols related to GHD Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. new cancer diagnosis or pregnancy, whilst on GH replacement Able to explain the importance of lifestyle changes clearly and confidently, in the management of GHD and provide appropriate information Able to signpost patients/ carers to information on GHD and related comorbidities, with the relevant online resources, leaflets and PSGs 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of the hypothalamic, pituitary axis in relation to GH Knowledge and understanding of disorders related to GHD, e.g. reduced quality of life Knowledge and understanding of the investigations required to diagnose and assess ongoing management of GHD, e.g. reassessment of GHD in young adults, Adult GHD Assessment, Quality of Life As appropriate, provide patients with key knowledge and skills to safely and competently self- manage GHD and associated treatment, e.g. self-injection of GH, reporting side effects. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impacts of GHD. Signpost patient/carer to wellbeing support and escalate as needed 	 As Competent and Understand the causes of GHD and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of GHD during clinical assessment, e.g. reduced quality of life Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of GHD, e.g. GH device choices, reporting adverse drug effects Assess patients' knowledge and skills to competently and safely self-manage GHD associated treatment, e.g. self-injection of GH Understand and explain the implications of GHD and GH replacement therapy on fertility and pregnancy, e.g. rationale for GH therapy discontinuation in pregnancy 	 As Proficient and Performs an in-depth healt assessment and clinical examination to diagnose ar identify GHD and associate comorbidities Arranges appropriate investigations in the assessment and management of GHD, e.g. Dual Energy X-ray Absorptiometry (DEXA), pituitary imaging Initiates, prescribes, evaluates, and modifies treatments for GHD Manage complex cases of GHD, e.g. multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialit team as required Comprehensive knowledge of guidelines/policy related to GHD, and to implement these in practice alongside the current evidence base

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Growth Hormone Deficiency (GHD) (covers transition and adults) CLINICAL PRACTICE CATEGORY Core Nurse-led Service		 Escalates clinical concerns to the appropriate clinician Able to sign post patients/ carers to information on GHD and related co-morbidities, with the relevant online resources, leaflets and PSGs 	 Knowledge of pharmacological preparations available to diagnose and treat GHD, e.g. macimorelin and GH preparations Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in GHD Aware of risk factors and key safety points in the management of GHD, e.g. contraindications to GH replacement therapy, pregnancy Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, SfE 	 Commence, adjust or discontinue pharmacological preparations for GHD, e.g. according to local guidelines or, within agreed non-medical prescribing competency Recognises condition- specific emotional and psychological issues and provide support to patient/ carer as indicated Actively takes part in MDTs discussing complex patients and their management Knowledge and understanding of commissioning process for GH therapy and Homecare services in local area 	 Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Hyper- prolactinaemia (incorporates Prolactinoma under the auspices of hyper- prolactinaemia) CLINICAL PRACTICE CATEGORY Core Nurse-led Service	 Understand the meaning of Hyperprolactinaemia and the purpose of treatment, e.g. dopamine agonist therapy Aware of the standard tests used in the diagnosis, assessment and management of Hyperprolactinaemia Perform and monitor observations as per local guidelines/protocols Support the clinical team by undertaking tests or procedures as per local guidelines/protocols, e.g. cannulated prolactin Aware of indications for urgent review of patients with Hyperprolactinaemia, e.g. changes to field of vision Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of Hyperprolactinaemia and treatment options, e.g. dopamine agonists, surgery, radiotherapy Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Hyperprolactinaemia Demonstrate the ability to recognise improvement or deterioration in the patient with Hyperprolactinaemia, e.g. reduction in headaches, galactorrhoea Follow local guidelines/ protocols related to Hyperprolactinaemia Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. onset of new worsening headache, visual field defect Able to explain the importance of lifestyle changes clearly and confidently, in the management of Hyperprolactinaemia and provide appropriate information 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of the hypothalamus and pituitary gland in relation to prolactin Knowledge and understanding of disorders related to Hyperprolactinaemia, e.g. hypogonadism, bone loss Understand the difference between Hyperprolactinaemia and Prolactinoma in terms of diagnosis and management Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Hyperprolactinaemia As appropriate, provide patients with key knowledge and skills to competently and safely self-manage Hyperprolactinaemia, e.g. risk of impulse control disorder with dopamine agonist therapy. Refer patient to a senior member of the clinical team for further advice and education as required 	 As Competent and Understand causes of Hyperprolactinaemia and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of Hyperprolactinaemia during clinical assessment, e.g. galactorrhoea, visual field defect Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Hyperprolactinaemia, e.g. reporting adverse drug effects to the clinical team Asses patients' knowledge and skills to competently and safely manage Hyperprolactinaemia and associated treatment Understand and explain the implications of Hyperprolactinaemia and dopamine agonist therapy on fertility and pregnancy 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify causes of Hyperprolactinaemia and associated comorbidities, e.g. hypogonadism Arranges appropriate biochemical and radiological investigations in the assessment and management of Hyperprolactinaemia Initiates, prescribes, evaluates, and modifies treatments for Hyperprolactinaemia Manage complex cases of Hyperprolactinaemia, e.g. pregnancy, multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy related to Hyperprolactinaemia and to implement these in practice alongside the current evidence base, e.g. NICE, SFE, Endocrine Society

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Hyper- prolactinaemia (incorporates Prolactinoma under the auspices of hyper- prolactinaemia) CLINICAL PRACTICE CATEGORY Core Nurse-led Service		 Able to signpost patients/ carers to information on Hyperprolactinaemia and related diagnosis with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Understand the emotional and psychological impacts of Hyperprolactinaemia, e.g. fertility. Signpost patient/ carer to wellbeing support and escalate as needed Knowledge of pharmacological preparations available to diagnose and treat Hyperprolactinaemia Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations, e.g. dopamine agonist therapy Aware of risk factors and key safety points in the management of Hyperprolactinaemia, e.g. drug related side effects Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, SfE, Endocrine Society 	 Commence, adjust, or discontinue dopamine agonist therapy according to local guidelines or within agreed non-medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Ophthalmology for visual field assessment 	 Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4–5)	Competent (Band 5-6)	Proficient (Band 6–7)	Expert (Band 7-8)
CLINICAL Female Hypogonadism CLINICAL PRACTICE CATEGORY Core Nurse-led Service	 Understand the meaning of Female Hypogonadism and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of Female Hypogonadism Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. phlebotomy Aware of indications for urgent review of patients who raise a concern, e.g. experiencing side effects of the medication Escalate to a senior member of the clinical team when a patient reports a concern, e.g. abnormal blood test result 	 As Novice and Demonstrate and apply knowledge of Female Hypogonadism and treatment, e.g. oestradiol and progesterone replacement Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Female Hypogonadism Demonstrate the ability to recognise improvement or deterioration of the patient with Female Hypogonadism, e.g. vaginal dryness, sexual dysfunction, low mood Follow local guidelines/ protocols related to Female Hypogonadism Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. unusual vaginal bleeding Able to explain the importance of lifestyle changes clearly and confidently, in the management of Female Hypogonadism and provide appropriate information, e.g. weight management, exercise 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of Female Hypogonadism Knowledge and understanding of disorders related to Female Hypogonadism, e.g. infertility, hypopituitarism Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Female Hypogonadism As appropriate, provide patients with key knowledge and skills to safely and competently self- manage Female Hypogonadism and associated treatment, e.g. application of gel, patch or pessary and reporting side effects. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impact of Female Hypogonadism. Signpost patients/carer to wellbeing support and escalate as needed 	 As Competent and Understand causes of Female Hypogonadism and can explain differential diagnosis and potential treatment options, e.g. menopause, central hypogonadism (CH), Turner or Kallmann syndrome Recognise signs and symptoms of Female Hypogonadism during clinical assessment, e.g. low mood, lack of growth and sexual characteristics, infertility Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Female Hypogonadism, e.g. optimisation of lifestyle factors, reporting adverse drug effects to the clinical team 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify Female Hypogonadism and associated comorbidities Arranges appropriate investigations in the assessment of Female Hypogonadism, e.g. biochemistry, DEXA scan, ultrasound scan Initiates, prescribes, evaluates, and modifies treatments for Female Hypogonadism, e.g. oestradiol, progesterone, testosterone and fertility treatment Manage complex cases of Female Hypogonadism, e.g. seeking fertility treatment Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy related to Female Hypogonadism, and to implement these in practice alongside the current evidence base

PILLAR		stant/Nursing Associate/ udent Nurse	pharmacologicaland skills to competentlycommunication skills inpreparations available toand safely self-managesharing complex informationtreat Female Hypogonadism,Female Hypogonadism andand supporting people ine.g. gels, patch, spray, oral,associated treatment, e.g.making decisions, promotingvaginal pessarysafe application of hormonea person-centred approach			
	Novice (Band 3–4)	Advanced Beginner (Band 4-5)			_	
CLINICAL Female Hypogonadism CLINICAL PRACTICE CATEGORY Core Nurse-led Service		 Able to signpost patients/ carers to information on Female Hypogonadism and related comorbidities with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 preparations available to treat Female Hypogonadism, e.g. gels, patch, spray, oral, vaginal pessary Identify non-adherence 	and skills to competently and safely self-manage Female Hypogonadism and associated treatment, e.g. safe application of hormone replacement gel, pessary,	communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach	

PILLAR		nt/Nursing Associate/ nt Nurse		Registered Nurse	
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7–8)
Clinical component Male Hypogonadism CLINICAL PRACTICE CATEGORY Core Nurse-led Service	 Understand the meaning of Male Hypogonadism and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of Male Hypogonadism Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. phlebotomy Aware of indications for urgent review of patients who raise a concern, e.g. experiencing side effects of the medication Escalate to a senior member of the clinical team when a patient reports concern, e.g. abnormal blood test result 	 As Novice and Demonstrate and apply knowledge of Male Hypogonadism and treatment, e.g. testosterone replacement Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Male Hypogonadism Demonstrate the ability to recognise improvement or deterioration of the patient with Male Hypogonadism, e.g. erectile function, libido Follow local guidelines/ protocols related to Male Hypogonadism Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. polycythaemia Able to explain the importance of lifestyle changes clearly and confidently, in the management of Male Hypogonadism and provide appropriate information 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of Male Hypogonadism Knowledge and understanding of disorders related to Male Hypogonadism, e.g. prolactinoma, hypopituitarism Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Male Hypogonadism As appropriate, provide patients with key knowledge and skills to safely and competently self- manage Male Hypogonadism and associated treatment, e.g. application of testosterone gel and reporting side effects. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impact of Male Hypogonadism. Signpost patients/carer to wellbeing support and escalate as needed 	 As Competent and Understand causes of Male Hypogonadism and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of Male Hypogonadism during clinical assessment, e.g. low mood, decrease in secondary sexual characteristics Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Male Hypogonadism, e.g. reporting adverse drug effects to the clinical team Assess patients' knowledge and skills to competently and safely self-manage Male Hypogonadism and associated treatment, e.g. safe application of testosterone gel Understand and explain the implications of Male Hypogonadism on fertility 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify Male Hypogonadism and associated comorbidities Arranges appropriate investigations in the assessment of Male Hypogonadism, e.g. biochemistry, DEXA scan Initiates, prescribes, evaluates, and modifies treatments for Male Hypogonadism, e.g. testosterone and fertility treatment Manage complex cases of Male Hypogonadism, e.g. fertility treatment Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy related to Male Hypogonadism, and to implement these in practice alongside the current evidence base

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
Clinical component Male Hypogonadism CLINICAL PRACTICE CATEGORY Core Nurse-led Service		 Able to signpost patients/ carers to information on Male Hypogonadism and related comorbidities with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Knowledge of pharmacological preparations available to treat Male Hypogonadism, e.g. gels, injections Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in Male Hypogonadism Aware of risk factors and key safety points in the management of Male Hypogonadism, e.g. over treatment with testosterone Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. SfE 	 Commence, adjust, or discontinue pharmacological preparations for Male Hypogonadism, e.g. testosterone undecanoate, according to local guidelines or, within agreed non- medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Urology, Genetics, Haematology 	 Demonstrate advanced communication skills in sharing complex information and, supporting people in making decisions, promoting a person-centred approach to care

PILLAR		nt/Nursing Associate/ nt Nurse		Registered Nurse	
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL COMPONENT Hyper- parathyroidism CLINICAL PRACTICE CATEGORY Clinical	 Understand the meaning of Hyperparathyroidism and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of Hyperparathyroidism, e.g. albumin adjusted serum calcium Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. phlebotomy Aware of indications for urgent review of patients who raise a concern, e.g. drug reaction Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of Hyperparathyroidism and treatments, e.g. surgery, medication Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Hyperparathyroidism Demonstrate the ability to recognise improvement or deterioration of the patient with Hyperparathyroidism, e.g. normalisation of albumin adjusted serum calcium, hyper/hypocalcaemia Follow local guidelines/ protocols related to Hyperparathyroidism Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. elevated albumin adjusted serum calcium Able to explain the importance of lifestyle changes clearly and confidently, in the management of Hyperparathyroidism and provide appropriate information, e.g. exercise, diet, hydration 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of Hyperparathyroidism Knowledge and understanding of disorders related to Hyperparathyroidism, e.g. osteoporosis, nephrocalcinoisis, renal calculi Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Hyperparathyroidism As appropriate, provide patients with key knowledge and skills to competently and safely self-manage Hyperparathyroidism and associated treatment, e.g. knowledge of adverse effects related to cinacalcet and escalating to clinical team if these occur. Refer patient to a senior member of the clinical team for further advice and education as required 	 As Competent and Understand causes of Hyperparathyroidism and can explain differential diagnosis and potential treatment options, e.g. vitamin D deficiency Recognise signs and symptoms of Hyperparathyroidism during clinical assessment, e.g. polyuria, polydipsia, constipation, lethargy Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Hyperparathyroidism, e.g. recognition of signs and symptoms of hypocalcaemia following treatment with surgery or cinacalcet and when to escalate for urgent clinical review Assess patient's knowledge and skills to competently and safely self-manage Hyperparathyroidism and associated treatment, e.g. Hypocalcaemia post parathyroidectomy 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify causes of Hyperparathyroidism and associated comorbidities, e.g. osteoporosis, parathyroid adenoma/cancer Arranges appropriate investigations in the assessment and management of Hyperparathyroidism, e.g. biochemistry, radiological and nuclear medicine imaging Initiates, prescribes, evaluates, and modifies treatments for Hyperparathyroidism, e.g. bisphosphonates in those with an increased fracture risk Manage complex cases of Hyperparathyroidism, e.g. persisting Hyperparathyroidism post- parathyroid surgery, pregnancy, multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required

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PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL Pyper- parathyroidism CLINICAL PRACTICE CATEGORY Clinical		 Able to signpost patients/ carers to information on Hyperparathyroidism and related comorbidities with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Understand the emotional and psychological impacts of Hyperparathyroidism. Signpost patient/carer to wellbeing support and escalate as needed Knowledge of pharmacological preparations available to treat Hyperparathyroidism, e.g. cinacalcet Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in Hyperparathyroidism, e.g. zoledronate, denosumab Aware of risk factors and key safety points in the management of Hyperparathyroidism, e.g. osteoporosis, renal impairment, renal calculi Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE 	 Understand and explain the implications of Hyperparathyroidism and treatment on fertility and pregnancy Commence, adjust, or discontinue cinacalcet, e.g. according to local guidelines or within agreed non-medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Endocrine Surgeon, Urologist 	 Comprehensive knowledge of guidelines/policy, related to Hyperparathyroidism, 'and to implement these in practice alongside the current evidence base, e.g. NICE, National Osteoporosis Guideline Group (NOGG) Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR		Health Care Assistant/Nursing Associate/ Registered Nurse Student Nurse			
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Hypo- parathyroidism CLINICAL PRACTICE CATEGORY Clinical	 Understand the meaning of Hypoparathyroidism and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of Hypoparathyroidism, e.g. albumin adjusted serum calcium, parathyroid hormone (PTH), vitamin D, renal profile and periodic urine calcium excretion Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. phlebotomy Aware of indications for urgent review of patients who raise a concern, e.g. symptoms of hypocalcaemia, such as tingling, numbness, cramps Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of Hypoparathyroidism and treatments, e.g. activated vitamin D analogues, calcium supplements, vitamin D supplements, thiazide diuretics Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Hypoparathyroidism Demonstrate the ability to recognise improvement or deterioration of the patient with Hypoparathyroidism, e.g. normalisation of albumin adjusted serum calcium, hypercalcaemia Follow local guidelines/ protocols related to Hypoparathyroidism Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. low albumin adjusted serum calcium 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of Hypoparathyroidism Knowledge and understanding of disorders related to Hypoparathyroidism, e.g. osteoporosis, kidney disease, basal ganglia calcification Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Hypoparathyroidism As appropriate, provide patients with key knowledge and skills to competently and safely self-manage Hypoparathyroidism and associated treatment, e.g. recognising signs and symptoms of a low calcium and action to take. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impacts of Hypoparathyroidism. Signpost patient/carer to wellbeing support and escalate as needed 	 As Competent and Understand causes of Hypoparathyroidism and can explain differential diagnosis and potential treatment options, e.g. genetic, post-surgical, pseudo Hypoparathyroidism Recognise signs and symptoms of Hypoparathyroidism during clinical assessment, e.g. paraesthesia, brain fog, tetany, depression Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Hypoparathyroidism, e.g. taking additional calcium supplements when symptomatic and when to escalate for urgent clinical review 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify causes of Hypoparathyroidism and associated comorbidities, e.g. hyperphosphataemia, hypomagnesaemia, renal stones Arranges appropriate investigations in the assessment and management of Hypoparathyroidism, e.g. biochemistry and imaging Initiates, prescribes, evaluates, and modifies treatments for Hypoparathyroidism Manage complex cases of Hypoparathyroidism, e.g. pregnancy, multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialis team as required Comprehensive knowledge of guidelines/policy, related to Hypoparathyroidism, 'and to implement these in practice alongside the current evidence base, e.g. SFE, NICE

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PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7–8)
CLINICAL Hypo- parathyroidism CLINICAL PRACTICE CATEGORY Clinical		 Able to explain the importance of lifestyle changes clearly and confidently, in the management of Hypoparathyroidism and provide appropriate information Able to signpost patients/ carers to information on Hypoparathyroidism and related comorbidities with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Knowledge of pharmacological preparations available to treat Hypoparathyroidism, e.g. activated vitamin D analogues, PTH analogues Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in Hypoparathyroidism, e.g. importance of adherence to avoid hospital admission due to low calcium Aware of risk factors and key safety points in the management of Hypoparathyroidism, e.g. adherence and timely review should there be an exacerbation of signs and symptoms of hypocalcaemia Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. SfE, NICE 	 Assess patient's knowledge and skills to competently and safely self-manage Hypoparathyroidism and associated treatment, e.g. knowledge of signs and symptoms of hyper and hypocalcaemia and action to take if these occur Understand and explain the implications of Hypoparathyroidism and treatment on fertility and pregnancy Commence, adjust, or discontinue treatment, e.g. hypercalciuria, according to local guidelines or within agreed non-medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDT's discussing complex patients and their management Appropriate referral to other specialities, e.g. Renal Team 	 Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR		Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6–7)	Expert (Band 7-8)	
CLINICAL Obesity CLINICAL PRACTICE CATEGORY Clinical	 Understand the meaning of Obesity and the purpose of treatment/management Aware of the standard tests used in the diagnosis, assessment and ongoing management of Obesity Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. height, weight, body mass index (BMI) Aware of indications for urgent review of patients who raise a concern, e.g. hyperglycaemia, medication intolerance Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of Obesity and its treatment, e.g. lifestyle intervention, pharmacological treatment, bariatric surgery Understand the reason for the investigations undertaken in the diagnosis, assessment and management of Obesity Demonstrate the ability to recognise improvement or deterioration in the patient with Obesity, e.g. weight trajectory following intervention, hypoglycaemia post bariatric surgery Follow local guidelines/ protocols related to Obesity Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. hypoglycaemia/hypotension post bariatric surgery Able to explain the importance of lifestyle changes clearly and confidently, in the management of Obesity and provide appropriate information 	 As Advanced Beginner and Knowledge and understanding of the pathophysiology of Obesity Knowledge and understanding of disorders related to Obesity, e.g. obstructive sleep apnoea, type 2 diabetes, hypertension Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Obesity As appropriate, provide patients with key knowledge and skills, to competently and safely self-manage Obesity and associated treatment, e.g. pharmacological preparations, weight loss. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impacts of Obesity. Signpost patient/ carer to wellbeing support and escalate as needed Knowledge of pharmacological preparations available to treat Obesity, e.g. glucagon- like peptide-1 receptor agonist (GLP-1RAs), orlistat 	 As Competent and Understand causes of Obesity and can explain differential diagnosis, e.g. Cushing's, hypothyroidism and potential treatment options Recognise signs and symptoms of Obesity during clinical assessment, e.g. breathlessness, snoring, fatigue Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required from a senior member of the clinical team, e.g. pharmacotherapy monitoring Support and empower patients to self-manage appropriate aspects of Obesity, e.g. lifestyle changes, weight management, nutrition Assess patients' knowledge and skills to competently and safely self-manage Obesity and associated treatment, e.g. GLP-1RAs and associated weight loss 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify causes of Obesity and associated comorbidities Arranges appropriate investigations in the assessment and management of Obesity, e.g. biochemical, radiological, sleep oximetry Initiates, prescribes, evaluates, and modifies treatments for Obesity Manage complex cases of Obesity, e.g. multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of the guidelines/policy related to Obesity, and to implement these in practice alongside the current evidence base, e.g. NICE, EASO, SFE 	

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PILLAR	LLAR Health Care Assistant/Nursing Associate/ Student Nurse			Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)	
CLINICAL COMPONENT Obesity CLINICAL PRACTICE CATEGORY Clinical		 Able to signpost patients/ carers to information on Obesity and related comorbidities with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in Obesity Aware of risk factors and key safety points in the management of Obesity, e.g. hypertension, diabetes mellitus, post-operative nutritional status Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, European Association for the Study of Obesity (EASO), SfE 	 Understand and explain the implications of Obesity and treatment on fertility and pregnancy, e.g. infertility in polycystic ovary syndrome (PCOS), weight loss Commence, adjust, or discontinue pharmacological treatment (e.g. diabetes medication, oral antihypertensives and laxatives) according to local guidelines or within agreed non-medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Sleep studies, Hepatology, Diabetes, Bariatric surgery 	 Demonstrates advanced communication skills, in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care, e.g. using behaviour change and motivational interviewing techniques 	

PILLAR		t/Nursing Associate/ it Nurse	Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL Osteoporosis CLINICAL PRACTICE CATEGORY Clinical	 Understand the meaning of Osteoporosis and the purpose of treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of Osteoporosis Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. height, lab tests for bone, vitamin D, urea and electrolytes Aware of indications for urgent review of patients who raise a concern, e.g. pain in thigh, groin or hip Escalate to a senior member of the clinical team when a patient reports a concern 	 As Novice and Demonstrate and apply knowledge of Osteoporosis and treatment, e.g. bisphosphonates, monoclonal antibodies Understand the reason for the investigations undertaken in the diagnosis, assessment, and management of Osteoporosis, e.g. bone turn over markers Demonstrate the ability to recognise improvement or deterioration of the patient with Osteoporosis, e.g. decrease in height Follow local guidelines/ protocols related to Osteoporosis Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. back pain and muscle spasms, vertebral fracture Able to explain the importance of lifestyle changes clearly and confidently, in the management of Osteoporosis and provide appropriate information, e.g. adequate intake of calcium, vitamin D, weight bearing exercise, smoking cessation 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of Osteoporosis Knowledge and understanding of disorders related to Osteoporosis, e.g. hyperparathyroidism, male hypogonadism, coeliac disease Knowledge and understanding of the investigations required to diagnose and assess ongoing management of Osteoporosis, e.g. Fracture Risk Assessmnet Tool (FRAX) As appropriate, provide patients with the key knowledge and skills to competently and safely self-manage Osteoporosis and associated treatment, e.g. how to take oral bisphosphonates. Refer patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impacts of Osteoporosis. Signpost patient/carer to wellbeing support and escalate as needed 	 As Competent and Understand causes of Osteoporosis and can explain differential diagnosis and potential treatment options, e.g. primary and secondary prevention Recognise signs and symptoms of Osteoporosis during clinical assessment, e.g. loss of height, kyphosis Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of Osteoporosis, e.g. reporting adverse drug effects, self- injection Assess patients' knowledge and skills to competently and safely self-manage Osteoporosis and associated treatment, e.g. self- administration of injectable treatment Understand and explain the implications of Osteoporosis and treatment on fertility and pregnancy 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify causes of Osteoporosis and associated comorbidities, e.g. hypogonadism, anorexia, glucocorticoids Arranges appropriate investigations in the assessment and management of Osteoporosis, e.g. DEXA scan, bone turnover markers Initiates, prescribes, evaluates, and modifies treatments for Osteoporosis, e.g. intolerant of bisphosphonate, secondary prevention, drug holiday Manage complex cases of Osteoporosis, e.g. history of chronic kidney disease, malabsorption, polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy related to Osteoporosis and to implement these in practice alongside the current evidence base, e.g. NOGG, NICE

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Osteoporosis CLINICAL PRACTICE CATEGORY Clinical		 Able to signpost patients/ carers to information on Osteoporosis and related comorbidities with the relevant online resources, leaflets and PSGs Escalates clinical concerns to the appropriate clinician 	 Knowledge of pharmacological preparations available to diagnose and treat Osteoporosis, e.g. teriparatide, bisphosphonates, monoclonal antibody Identify non-adherence and explain the potential side effects, risks, and benefits of pharmacological preparations, e.g. new fracture, osteonecrosis of the jaw, osteonecrosis of the auditory canal, flushing Aware of risk factors and key safety points in the management of Osteoporosis, e.g. suitability of treatment: Barrett's oesophagus, renal impairment, unable to sit up, bone metastases Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, NOGG 	 Commence, adjust or discontinue pharmacological treatment according to local guidelines or within agreed non-medical prescribing competency, e.g. end of treatment with osteoanabolic and commencement of antiresorptive Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Radiology, Fracture liaison, Falls prevention 	 Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR		nt/Nursing Associate/ nt Nurse	Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL Polycystic Ovary Syndrome (PCOS) CLINICAL PRACTICE CATEGORY Clinical	 Understand the meaning of Polycystic Ovary Syndrome (PCOS) and treatment Aware of the standard tests used in the diagnosis, assessment and ongoing management of PCOS Perform and monitor observations as per local guidelines/protocols Support the clinical team by assisting and performing tests or procedures as per local guidelines/protocols, e.g. lipid profile, oral glucose tolerance test Aware of indications for urgent review of patients who raise a concern, e.g. anxiety and depression Escalate to a senior member of the clinical team when a patient reports a concern 	 Demonstrate and apply knowledge of PCOS and treatments, e.g. lifestyle intervention, pharmacological treatment Understand the reason for the investigations undertaken in the diagnosis, assessment and management of PCOS Demonstrate the ability to recognise improvement or deterioration of the patient with PCOS, e.g. reduction in hirsutism, increasing HbA1c Follow local guidelines/ protocols related to PCOS Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. hypertension, pharmacological side effects Able to explain the importance of lifestyle changes clearly and confidently, in the management of PCOS and provide appropriate information Able to signpost patients/ carers to information on PCOS and related comorbidities with the relevant online resources, leaflets and PSGs 	 Knowledge and understanding of the anatomy, physiology and pathophysiology of the PCOS Knowledge and understanding of disorders related to PCOS, e.g. amenorrhea, hirsutism, type 2 diabetes mellitus, sleep apnoea Knowledge and understanding of the investigations required to diagnose and assess ongoing management of PCOS, e.g. biochemical markers of hyperandrogenism As appropriate, provide patients with key knowledge and skills to competently and safely self-manage PCOS and associated treatment, e.g. lifestyle changes to decrease cardiovascular risk factors. Refer the patient to a senior member of the clinical team for further advice and education as required Understand the emotional and psychological impacts of PCOS. Signpost patient/ carer to wellbeing support and escalate as needed Knowledge of pharmacological preparations available to diagnose and treat PCOS 	 Understand causes of PCOS and can explain differential diagnosis and potential treatment options Recognise signs and symptoms of PCOS during clinical assessment, e.g. hirsutism, acne, infrequent or no menstruation, weight gain Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team Support and empower patients to self-manage appropriate aspects of PCOS, e.g. weight loss to reduce risk of type 2 diabetes mellitus or cardiovascular disease Assess patients' knowledge and skills to competently and safely self-manage PCOS and associated treatment, e.g. lifestyle changes to improve metabolic and cardiovascular risk outcomes Understand and explain the implications of PCOS and treatment/lifestyle changes on fertility and pregnancy, e.g. high risk status for adverse outcomes during pregnancy 	 Performs an in-depth health assessment and clinical examination to diagnose and identify causes of PCOS and associated comorbidities Arranges appropriate investigations in the assessment and management of PCOS, e.g. anti-Müllerian hormone levels as an alternative to ultrasound in adults Initiates, prescribes, evaluates, and modifies treatments for PCOS Manage complex cases of PCOS, e.g. pregnancy, multiple comorbidities and polypharmacy Provide counselling and support for patient/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy related to PCOS, and to implement these in practice alongside the current evidence base, e.g. NICE, SfE Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Polycystic Ovary Syndrome (PCOS) CLINICAL PRACTICE CATEGORY Clinical		Escalates clinical concerns to the appropriate clinician	 Identify non-adherence and explain the potential side effects, risks and benefits of pharmacological preparations used in PCOS Aware of risk factors and key safety points in the management of PCOS, e.g. amenorrhoea and endometrial thickening Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE, SfE 	 Commence, adjust, or discontinue pharmacological preparations for PCOS according to local guidelines or within agreed non-medical prescribing competency Recognise condition-specific emotional and psychological issues and provide support to patient/carer as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Gynaecology, Cardiology 	

PILLAR		nt/Nursing Associate/ nt Nurse	Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Transition (where available, use alongside the disease specific adult endocrine competency) CLINICAL PRACTICE CATEGORY Clinical	 Understand the rationale of the Transition pathway from paediatric to adult services Perform and monitor observations as per local guidelines/protocols, e.g. height, weight using an appropriate growth chart Support the clinical team by undertaking tests or procedures as per local guidelines/protocols, e.g. phlebotomy Aware of indications for urgent review when a concern is raised by a young person or young person's carers, e.g. access to medication Escalate to a senior member of the clinical team when a young person/carer reports a concern 	 As Novice and Demonstrate and apply knowledge of the Transition service and pathways, e.g. GHD Understand the reason for the tests undertaken in the diagnosis, assessment, and management of the endocrine condition, e.g. thyroid disease Demonstrate the ability to recognise improvement or deterioration in the young person with an endocrine condition, e.g. adrenal insufficiency Follow local guidelines/ protocols related to the diagnosed endocrine condition Recognise the need for urgent clinical review and escalate to a senior member of the clinical team, e.g. recurrent adrenal crisis Able to explain the importance of lifestyle changes clearly and confidently and provide appropriate information 	 As Advanced Beginner and Knowledge and understanding of the anatomy, physiology and pathophysiology of the endocrine system Knowledge and understanding of the changing needs of the young person with an endocrine condition, e.g. congenital adrenal hyperplasia Knowledge and understanding of the investigations required to assess ongoing management of paediatric endocrine conditions transitioning into adult care, e.g. reassessment of GHD As appropriate, provide the young person's/carers with key knowledge and skills to competently and safely manage the diagnosed endocrine condition and associated treatment, for example, self-injection of GH, steroid sick day rules. Refer to a senior member of the clinical team for further advice and education as required 	 As Competent and Understand causes of endocrine conditions and how these can change through adolescence. Can explain differential diagnosis and potential treatment options for endocrine conditions, e.g. hyperthyroidism Recognise signs and symptoms of endocrine conditions during clinical assessment Understand how the stages of pubertal development can affect the preparation for endocrine tests and interpretation of results, e.g. priming hormone replacement prior to ITT Arranges appropriate monitoring, investigations and interpretation of results, using these to develop a clinical treatment plan with supervision as required by a senior member of the clinical team, e.g. Turner syndrome Support and empower the young person/carer manage appropriate aspects of the diagnosed endocrine condition, e.g. GHD and self- injection of GH 	 As Proficient and Performs an in-depth health assessment and clinical examination to diagnose and identify the cause of the endocrine condition and associated comorbidities Arranges appropriate investigations in the assessment and management of the diagnosed endocrine condition, e.g. biochemistry and radiology in the assessment of hyperprolactinaemia Initiates, prescribes, evaluates, and modifies treatments for the diagnosed endocrine condition Manage complex endocrine conditions, e.g. nonadherence, multiple comorbidities and/or polypharmacy Provide counselling and support for the young person/carer and escalate to the specialist team as required Comprehensive knowledge of guidelines/policy, related to Transition/diagnosed endocrine condition and to implement these in practice, alongside the current evidence base, e.g. NICE, SfE

Society for Endocrinology COMPETENCY FRAMEWORK FOR ADULT ENDOCRINE NURSING: 3rd Edition

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PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
CLINICAL COMPONENT Transition (where available, use alongside the disease specific adult endocrine competency) CLINICAL PRACTICE CATEGORY Clinical		 Able to signpost young person's/carers to information on diagnosed endocrine condition and Transition to adult care with the relevant online resources, leaflets, and PSGs Escalates clinical concerns to the appropriate clinician 	 Understand how individuals physical and psychological development can influence aspects of endocrine care, e.g. adherence Understand the emotional and psychological impacts of different endocrine conditions. Signpost young person's/carers to wellbeing support and escalate as needed Knowledge of pharmacological preparations available to diagnose and treat endocrine conditions during Transition, e.g. ITT/GH replacement Identify non-adherence and explain the potential side effects, risks and benefits of replacement therapy Aware of risk factors and key safety points in the management of endocrine conditions, e.g. AVP-D Discusses the need for further investigations with the MDT as required Awareness and utilisation of national guidance, e.g. NICE 	 Assess young person's/ carers knowledge and skills to competently and safely manage the diagnosed endocrine condition and associated treatment, e.g. adrenal insufficiency and steroid replacement therapy Understand and explain the implications of the diagnosed endocrine condition and treatment on fertility and pregnancy as appropriate Commence, adjust, or discontinue treatment according to local guidelines or within agreed non-medical prescribing competency, e.g. when endocrine testing confirms a normal GH response and GH can be discontinued Recognise condition-specific emotional and psychological issues and provide support to young person's/carers as indicated Actively takes part in MDTs discussing complex patients and their management Appropriate referral to other specialities, e.g. Psychology, Genetics 	Demonstrates advanced communication skills in sharing complex information and supporting people in making decisions, promoting a person-centred approach to care

PILLAR		t/Nursing Associate/ It Nurse	Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7–8)
EDUCATION COMPONENT Utilise alongside Health Education England (HEE) multi-professional framework for advanced clinical practice in England and the SfE CFAEN Leadership and Management Competency	 Use the SfE CFAEN and reflective practice to 1) support career progression and 2) to identify training and development needs at appraisal whilst demonstrating where competencies have been met Alongside designated supervisor, identifies opportunities for developing knowledge and skills in endocrinology, e.g. local training sessions, online webinars, self-directed learning via SfE resource HUB, PSGs Complete a yearly professional development plan with designated supervisor. Agree career path and relevant training and courses to ensure appropriate qualifications and practice are in place to support career progression, e.g. Care Certificate, Royal College of Nursing (RCN) Nursing Support Worker resources, First Steps Completion of training to support endocrinology role, e.g. ECG, venepuncture and cannulation, completion of novice level competency in endocrine dynamic function testing 	 As Novice and Identifies opportunities for developing knowledge and skills in endocrinology, e.g. SfE Endocrine Nurse Update, local training sessions, online webinars, self-directed learning Complete a yearly professional development plan with designated supervisor. Agree career path and relevant training and courses to ensure appropriate qualifications and agreements with employer are in place to support career progression, e.g. planning to train as a registered nurse Undertake learning in practice with assessment, utilising the SfE CFAEN, e.g. adrenal insufficiency, endocrine dynamic function testing Deliver health promotion and education to patients/carers, e.g. steroid education, whilst being aware of potential barriers to understanding, e.g. language barriers, cognitive impairment Provide support to nursing support workers training in endocrine dynamic function testing, e.g. visual fields 	 As Advanced Beginner and Seeks opportunities for developing knowledge and skills in endocrinology, e.g. SfE Endocrine Nurse Update, British Endocrine Society (BES) meetings, online webinars, guidelines and policy Complete a yearly professional development plan and career appraisal portfolio based on service/ patient needs and personal objectives, working towards advanced clinical practice Develop career path and identify relevant training/ courses required to work towards advanced clinical practice, e.g. Oxford Brookes Masters module or other endocrine-based Master of Science (MSc) module, advanced assessment, non- medical prescribing Utilise reflective practice to demonstrate learning through critical appraisal and clinical supervision Deliver health promotion and education, e.g. teaching patients self-injection of endocrine treatments 	 As Competent and Continue to develop advanced practice in endocrinology, e.g. apply to be a member of an SfE Committee or PSG Trustee. Apply for the SfE Leadership and Development Awards Programme or take part in SfE peer review Participate in academic meetings as a participant, chair or presenter. Identify specific learning needs to further knowledge and skills and disseminate learning to the wider team Ensure professional development plan and career appraisal portfolio covers all auspices of advanced practice Continue to utilise the SfE CFAEN in yearly appraisal. Review career path and relevant training and courses required to achieve advanced clinical practice, e.g. MSc in Advanced Practice, research portfolio, evidencing leadership and management, advanced assessment skills and non-medical prescribing Deliver health promotion and education, underpinned by an in-depth knowledge of health literacy and patient centred care 	 As Proficient and MSc level qualification, e.g. MSc in advanced clinical practice Completion of a HEE accredited Advanced Practice programme Critically appraise learning needs and incorporate these into a personal development plan that aligns with the four pillars of advanced clinical practice and SfE CFAEN, e.g. doctoral studies Utilise critical reflection and self-directed learning to enhance advanced clinical practice Utilise peer review processes as a mechanism to highlight practice and development needs for self and team, e.g. SfE peer review, Model Health System, Getting it right the first time Actively support and participate in organisational teaching and learning, encouraging team member involvement, e.g. clinical cases, grand rounds, journal clubs, interdisciplinary teaching, National Patient Safety Alerts

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
EDUCATION COMPONENT Utilise alongside Health Education England (HEE) multi-professional framework for advanced clinical practice in England and the SFE CFAEN Leadership and Management Competency	 Deliver basic health promotion and education with patients/carers, e.g. smoking cessation, healthy eating 		 Provide supervision to nursing support workers training in endocrinology, e.g. provide training on undertaking endocrine dynamic function tests 	 Provides teaching and support to patients and health care professionals locally and nationally Provides training, support and mentorship to endocrine nursing support workers and nurses Active involvement with endocrine affiliated PSGs, sharing expertise and collaborating with the wider community, e.g. becoming a trustee, attendance and participation at PSG meetings, collaboration on patient resources 	 Maintain an active professional/academic presence, e.g. publication of abstracts, research, articles, oral presentations and as a representative on professional committee or PSG Leads and/or is actively involved in developing and delivering national and international education training events, conferences and curricula Liaises with local University in formulating curricula for undergraduate and postgraduate nursing courses, offering guidance and teaching Liaises with Practice Educator teams in the hospital regarding ward- based teaching

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse		
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7-8)
LEADERSHIP AND	• Communicates effectively with patients/carers and staff	As Novice and	As Advanced Beginner and	As Competent and	As Proficient and
MANAGEMENT COMPONENT Utilise alongside Health Education England (HEE) multi-professional framework for advanced clinical practice in England and the SfE CFAEN Education Competency	 Demonstrate core numeracy, literacy, technological and digital skills, e.g. documenting within care plans Undertake roles and responsibilities that support the endocrine service, e.g. ordering equipment, management of clinical areas, ensuring adequate stock Support nursing support workers who are new to the role/clinical area, e.g. orientate, signpost to relevant information, such as clinic processes Understand and implement relevant policies and guidance in practice, e.g. phlebotomy and cannulation policy, endocrine dynamic function test protocols Able to explain and role model, employer and professional bodies values and behaviours Undertake reflective practice with a designated supervisor, incorporating feedback from patients/carers and staff to shape learning and development needs 	 Active involvement in team meetings, e.g. reflective practice, education, shared learning and service updates Understand and apply policies/guidance/protocols in practice Able to understand and appraise evidence and incorporate this into practice Participates in service development at a local level Demonstrate ability to provide appropriate information to patients/ carers, e.g. Understand the remit of the PSGs and can guide patients/ carers and other health care professionals to the appropriate resource Provide supervision and mentorship to nursing support workers, acting as a role model whilst providing constructive feedback and supporting reflective practice 	 Continually evaluate evidence-based practice and apply appropriately Demonstrates a person centred approach to service delivery and development Acts as a role model for junior staff starting in endocrinology Provide supervision and mentorship for nursing support workers new to endocrinology as required, e.g. endocrine dynamic function tests Evaluate nursing support workers practice, e.g. appraisal, as appropriate, review and sign off competencies Manage disruptions to endocrine service, e.g. travel, service failures Undertake relevant training in management and leadership to support progression 	 Active contribution in developing and updating guidelines, policies, standard operating procedures, relating to area of practice, incorporating national/ international guidance as appropriate Identify financial burdens, inefficiencies and gaps in service, undertaking a robust service evaluation to inform service improvements/ redesign, e.g. introduction of nurse-led services, virtual clinic Designs, implements and evaluates clinical care pathways, utilising evidence based on local and national guidelines, e.g. NICE, SfE Contributes to Patient and Public Involvement and Engagement (PPIE) projects/ initiatives to develop and improve patient services Liaison with relevant PSGs, sharing expertise and collaborating with the wider community Actively engage in peer review, in the capacity of the reviewer or personal/ 	 Develops and applies advanced clinical practice through leadership and consultancy Assesses cost implications and effectiveness of treatment pathways, including understanding of commissioning processes Lead in co-production of service evaluations and improvements Provide consultancy at local and national level by utilising clinical expertise to inform clinical and professional practice to enhance quality, reduce inequality and adopt best practice, e.g. SFE committees, Endocrine Networks, NICE guidance Evaluate practice in regards to effectiveness, quality, patient experience, functionality, safety and outcomes by utilising multiple methods of assessment, e.g. Model Health System, Getting it right the first time, 360 review, patient feedback

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse			Registered Nurse	
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5–6)	Proficient (Band 6-7)	Expert (Band 7–8)
LEADERSHIP AND MANAGEMENT COMPONENT Utilise alongside Health Education England (HEE) multi-professional framework for advanced clinical practice in England and the SfE CFAEN Education Competency	 Establishes a personal development plan with support from a designated supervisor, utilising the SfE CFAEN Escalate any potential risks to Senior Team, e.g. equipment shortages that could impact on patient care Understand clinical governance processes for example, reporting incidents and risk assessments Identify and highlight potential for service improvement 			 Manage and lead endocrine nursing team utilising the SfE CFAEN to support appraisal and career development Provide supervision and mentorship to endocrine nurses and nursing support workers, acting as a role model whilst providing constructive feedback and supporting reflective practice 	 Demonstrate exemplary, leadership through role modelling, reflecting organisational values, behaviours, e.g. building effective, productive professional and working relationships with staff and peers, which enhance productivity, creativity, improve morale and instil confidence

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse		Registered Nurse			
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)	
RESEARCH COMPONENT This competency is based on the Multi-professional practice- based research capabilities framework and Health Education England (HEE) multi-professional framework for advanced clinical practice in England	 (Band 3-4) As applicable, complete induction for endocrine research role/projects under the supervision of a designated supervisor Complete the research training requirements to ensure compliance with local, national and international standards, e.g. Good Clinical Practice (GCP) module, National Institute for Health and Care Research (NIHR) Provide support to the endocrine research team as outlined in job description, e.g. audit, administration, data collection and entry Demonstrate knowledge of endocrine study protocols Demonstrate core numeracy, literacy, technological and digital skills, e.g. administration, data collection, communication Develop awareness of research resources and how they can be accessed Understand differences between audit, service evaluation, quality improvement and research 	 (Band 4–5) As Advanced Beginner and Demonstrates knowledge and understanding of research principles Understand endocrine study protocols and apply to practice Develop appraisal skills to review published evidence and extract learning points to inform and support clinical practice Incorporate audit, service evaluation, quality improvement and research in practice as appropriate Participate in MDT research projects as appropriate, e.g. evaluation, data collection, recruitment Understand the local and national research ethics and governance processes 	 As Advanced Beginner and Supports and participates in research-based activity to enhance evidence-based practice Evaluates own practice through audit and service evaluation projects/initiatives Identify evidence gaps and help to develop practice-based questions that will inform clinical practice In partnership with senior members of the research/ clinical team, help in scope and developing audit, research and quality improvement projects Active involvement in research projects, e.g. contributing to data collection, data analysis, co- authorship of manuscripts/ abstracts Understanding of strategic vision for research within the multi-professional setting Aware of ethical implications of research activities and conforms to good clinical practice principles and clinical governance, e.g. 	 As Competent and Demonstrates knowledge and understanding of endocrine clinical trials and referral process for potential participants Promotes opportunities for people who access the services, to be involved in the whole research process within local and national settings, e.g. Patient Public Involvement and Engagement (PPIE) Evaluates practice through audit and research guided by a needs-assessment research question, literature appraisal and a methodologically robust study design Demonstrates competence in basic research methodology, data collection approaches and dissemination of research findings Undertakes independent small-scale research projects or audit/service evaluations and disseminates findings, e.g. conference presentations and peer- reviewed publications Contributes to the 	 As Proficient and Creates an environment that is research-focused, engaging and leading others across the organisation to adopt a culture of research, underpinning service development and improvement Leads audit and research activities in clinical area Raises awareness about the scope of opportunities for nurses in research, e.g. doctoral studies Supervises junior staff to undertake audit, service evaluation, quality improvement and research activities Actively build research capabilities and capacities Ability to align audit and research to public needs and national standards, e.g. PPIE Identifies the need for further research to strengthen evidence for best practice Designs, implements and regularly evaluates individualised clinical care 	
	 they can be accessed Understand differences between audit, service evaluation, quality 		 multi-professional setting Aware of ethical implications of research activities and conforms to good clinical practice principles and 	or audit/service evaluations and disseminates findings, e.g. conference presentations and peer- reviewed publications	research to strengthen evidence for best practiceDesigns, implements and regularly evaluates	

PILLAR	Health Care Assistant/Nursing Associate/ Student Nurse			Registered Nurse	
	Novice (Band 3-4)	Advanced Beginner (Band 4-5)	Competent (Band 5-6)	Proficient (Band 6-7)	Expert (Band 7-8)
RESEARCH COMPONENT This competency is based on the Multi-professional practice- based research capabilities framework and Health Education England (HEE) multi-professional framework for advanced clinical practice in England	 Understand the requirements for confidentiality and accountability in research practice 			 Recognise the value of active membership to appropriate research groups, e.g. Endocrine Networks, Data registries Champion the role of health research to improve services with PPIE Supports junior staff to undertake audit and research 	 Evaluates own practice and participates in MDT service and team evaluation Disseminates audit, service evaluation, quality improvement and research outcomes locally, nationally and internationally Facilitate collaborative clinical and research links at local, national and international level Contribute and lead the development and evaluation of PPIE Ensuring equitable participation of wider communities with inclusive representation of workforce in research, and in the codesign and co-production of research and quality improvement initiatives Lead high-impact research projects and funding applications, e.g. NIHR Participates in senior level research-related committees or boards, organisations or Working Groups Develops national research profile

APPENDIX 1 Evolution of the SFE CFAEN

Clinical Practice Competency Category	3rd Edition	2nd Edition	1st Edition
Core Clinical	Endocrine Dynamic Function Testing	Endocrine Dynamic Function Testing	Endocrine Dynamic Function Testing
Core Clinical Core Nurse-led Service Core Safety	Adrenal Insufficiency	Steroid replacement therapy for disorders of the pituitary and adrenal glands	Steroid replacement therapy for disorders of the pituitary and adrenal glands
Core Clinical Core Nurse-led Service Core Safety	Arginine Vasopressin Deficiency	-	-
Core Nurse-led Service	Hypo/Hyperthyroidism	Thyroid Disease	Thyroid Disease
Core Nurse-led Service	Adrenal Tumours*	Benign Adrenal Tumours	-
Core Nurse-led Service	Hypopituitarism	Hypopituitarism	Hypopituitarism
Core Nurse-led Service	Acromegaly	Acromegaly	Acromegaly
Core Nurse-led Service	Cushing's Syndrome ⁺	Cushing's Syndrome	Cushing's Syndrome
Core Nurse-led Service	Growth Hormone Deficiency‡	Growth Hormone Deficiency	Growth Hormone Deficiency
Core Nurse-led Service	Hyperprolactinaemia#	-	-
Core Nurse-led Service	Female Hypogonadism	Hypogonadism	Hypogonadism
Core Nurse-led Service	Male Hypogonadism	Hypogonadism	Hypogonadism
Clinical	Hyperparathyroidism	Hyper/ Hypoparathyroidism	-
Clinical	Hypoparathyroidism	Hyper/ Hypoparathyroidism	-
Clinical	Obesity	-	-
Clinical	Osteoporosis	Osteoporosis	-
Clinical	Polycystic Ovary Syndrome	Polycystic Ovary Syndrome	-
Clinical	Transition	Transition	-
Competency	3rd Edition	2nd Edition	1st Edition
Advanced Practice Pillar	Education	-	-
Advanced Practice Pillar	Leadership and Management	-	-
Advanced Practice Pillar	Research	-	-

*Benign and malignant

⁺Includes Cushing's Syndrome, Cushing's Disease, Cyclical Cushing's, Adrenocortical Cancer

‡Transition to adult

#Includes prolactinoma and hyperprolactinaemia

APPENDIX 2 Evidence logs

Novice Level	54 🚺
Advanced Beginner Level	55 🔼
Competent Level	56 🔽
Proficient Level	57 🔽
Expert Level	58 🔽

		Novice Level/Competency		
Competency	Evidence	Attachments/References	Practitioner (sign)	Supervisor (sign)

	A	dvanced Beginner Level/Compete	ency	
Competency	Evidence	Attachments/References	Practitioner (sign)	Supervisor (sign)

		Competent Level/Competency		
Competency	Evidence	Attachments/References	Practitioner (sign)	Supervisor (sign)

Society for Endocrinology COMPETENCY FRAMEWORK FOR ADULT ENDOCRINE NURSING: 3rd Edition

	Proficient Level/Competency		
Evidence	Attachments/References	Practitioner (sign)	Supervisor (sign)
	Evidence		Evidence Attachments/References Practitioner

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		Expert Level/Competency		
Competency	Evidence	Attachments/References	Practitioner (sign)	Supervisor (sign)

Society for Endocrinology COMPETENCY FRAMEWORK FOR ADULT ENDOCRINE NURSING: 3rd Edition

APPENDIX 3 Resources

PROFESSIONAL ENDOCRINE ORGANISATIONS

Society for Endocrinology (SfE) https://www.endocrinology.org

British Association of Endocrine and Thyroid Surgeons (BAETS) https://baets.org.uk

British Society for Paediatric Endocrinology and Diabetes (BSPED) https://www.bsped.org.uk

The European Society of Endocrinology (ESE)

https://www.ese-hormones.org

European Society For Paediatric Endocrinology (ESPE) https://www.eurospe.org

Federation of International Nurses in Endocrinology (FINE) https://finenurses.org

Endocrinology - Getting It Right First Time - GIRFT https://gettingitrightfirsttime.co.uk/medical_specialties/endocrinology

International Society of Endocrinology (ISE) https://www.isendo.org

UK and Ireland Neuroendocrine Tumour Society (UKINETS) https://www.ukinets.org

OTHER PROFESSIONAL ORGANISATIONS General Medical Council (GMC) https://www.amc-uk.org

National Institute for Health and Care Excellence (NICE) https://www.nice.org.uk

National Institute for Health Research (NIHR) https://www.nihr.ac.uk

NHS England: The Centre for Advancing Practice https://advanced-practice.hee.nhs.uk

NHS England: Multi-professional Practice-based Research Capabilities Framework

https://advanced-practice.hee.nhs.uk/our-work/research/multi-professional-practice-based-research-capabilities-framework

Nursing and Midwifery Council (NMC)

https://www.nmc.org.uk

Royal College of Nursing (RCN) https://www.rcn.org.uk

Royal College of Physicians (RCP) https://www.rcp.ac.uk

Royal Pharmaceutical Society (RPS) https://www.rpharms.com

ADDITIONAL RESOURCES

British National Formulary (BNF) | NICE

https://bnf.nice.org.uk

Electronic Medicines Compendium (EMC)

https://www.medicines.org.uk/emc#gref

Endotext https://www.endotext.org

Ionising Radiation (Medical Exposure) Regulations [IR(ME)R]

https://www.cqc.org.uk/guidance-providers/ionising-radiation/ionising-radiation-medical-exposure-regulations-irmer/irmer-information-and-reports

TEXT BOOKS

Llahana, S.V., Follin, C., Yedinak, C. & Grossman, A. (2019). *Advanced practice in endocrinology nursing*. Cham, Switzerland: Springer.

Owen, K., Turner, H. & Wass, J. (2022). *Oxford Handbook of Endocrinology and Diabetes*, 4th edition. Oxford, Oxford University Press.

SFE AFFILIATED PSGs

Adrenocortical Cancer Support and Information – ACC Support UK https://accsupport.org.uk

Addison's Disease Self Help Group (ADSHG)

https://www.addisonsdisease.org.uk

Alex, The Leukodystrophy Charity https://alextlc.org

Association for Multiple Endocrine Neoplasia Disorders (AMEND) https://www.amend.org.uk

The British Thyroid Foundation (BTF) https://www.btf-thyroid.org

Brittle Bone Society (BBS) https://www.brittlebone.org

CAH Support Group

https://www.livingwithcah.com

Child Growth Foundation

https://childgrowthfoundation.org

DSD Families https://www.dsdfamilies.org

Haemochromatosis UK https://www.haemochromatosis.org.uk

Klinefelters Syndrome Association UK (KSA) https://www.ksa-uk.net

Neuroendocrine Cancer UK https://www.neuroendocrinecancer.org.uk

Parathyroid UK https://parathyroiduk.org

Pituitary Foundation https://www.pituitary.org.uk

Prader-Willi Syndrome Association (PWSA) UK https://www.pwsa.co.uk

Thyroid Eye Disease Charitable Trust (TEDct) https://tedct.org.uk

Turner Syndrome Support Society https://tss.org.uk

Verity PCOS UK - The UK PCOS Charity

https://www.verity-pcos.org.uk

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SFE CFAEN, 3RD Edition

Louise Breen, Lisa Shepherd, Anne Marland, Phillip Yeoh, Kate Davies and Dr Sofia Llahana

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Louise Breen (LB), Lisa Shepherd (LS) and Anne Marland (AM).

The Editorial Team refined the clinical competency template to provide examples of competence in practice, reflect changes to workforce and to align with advanced practice.

Draft competencies were circulated to the SfE CFAEN, 3rd Edition, Working Group for review and comment before being finalised.`

3rd Edition	Updated by	Affiliation	Edited by
Endocrine Dynamic Function Testing	Emily Falconer	Maidstone and Tunbridge Wells NHS Trust, UK	LB, LS, AM
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Arginine Vasopressin Deficiency*	Lisa Shepherd	University Hospitals Birmingham, Birmingham, UK University of Birmingham, Birmingham, UK	LB, LS, AM
Hypo/Hyperthyroidism	Louise Breen Lisa Shepherd	Guy's and St Thomas' NHS Foundation Trust, London, UK University Hospitals Birmingham, Birmingham, UK University of Birmingham, Birmingham, UK	LB/LS, AM
Adrenal Tumours	August Palma	Cambridge University Hospitals NHS Foundation Trust, Cambridge, UK	LB, LS
Hypopituitarism	Phillip Yeoh	The London Clinic, London, UK King's College London, London, UK	LB, LS, AM
Acromegaly	Helen Loo Fionnuala Bonfield	Oxford University Hospitals NHS Foundation Trust, UK	LB, LS, AM
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Obesity*	Gill Hurst Dr Claudia Coelho	Cambridge University Hospitals NHS Foundation Trust, Cambridge, UK Guy's and St Thomas' NHS Foundation Trust	LB, LS, AM
Osteoporosis	Lisa Shepherd	University Hospitals Birmingham, Birmingham, UK University of Birmingham, Birmingham, UK	LB, LS, AM
Polycystic Ovary Syndrome	Lucy Owusu-Darkwah	The London Clinic, London, UK	LB, LS, AM
Transition	Kate Davies Lisa Shepherd	London South Bank University, London, UK Queen Mary University of London, London, UK Barts Health NHS Trust, London, UK University College London Hospitals NHS Foundation Trust, London, UK University Hospitals Birmingham, Birmingham, UK University of Birmingham, Birmingham, UK	LB, LS
Education*	Louise Breen Kate Davies Lisa Shepherd	Guy's and St Thomas' NHS Foundation Trust, London, UK London South Bank University, London, UK Queen Mary University of London, London, UK Barts Health NHS Trust, London, UK University College London Hospitals NHS Foundation Trust, London, UK University Hospitals Birmingham, Birmingham, UK University of Birmingham, Birmingham, UK	LB, LS, AM
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