

*The Lipid Management Competency Framework (the “**Competency Framework**”) was adapted from an asset produced for the National Lipid Programme Workforce Support Solution (“**NLPWSS**”) by Soar Beyond Ltd (“**Soar Beyond**”) in collaboration with the AHSN Network. The NLPWSS has been created as part of the collaborative working project (“**CWP**”) between NHS England and Novartis Pharmaceuticals UK Ltd (“**Novartis**”). Novartis has provided funding for the development and deployment of the NLPWSS. Novartis has engaged Soar Beyond to develop and deliver NLPWSS materials and services to recipient healthcare organisations. NHS England are owners of the rights to this document.*

Lipid Management Competency Framework

Foreword

This document lists the competencies for the National Lipids Programme Workforce Support Programme. The competencies have been developed based on the Summary of National Guidance for Lipid Management for Primary and Secondary Prevention of cardiovascular disease (CVD).

Competencies have been mapped to roles within general practice.

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General practitioner (GP)

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the National Health Service (NHS) • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. National Institute for Health and Care Excellence (NICE), European Society of Cardiology (ESC), European Atherosclerosis Society (EAS)) • Can describe what cholesterol is and the associated risks with having high cholesterol • Can describe what total / high-density lipoprotein (HDL) / low-density lipoprotein (LDL) cholesterol and triglycerides are, why they are measured and the target values • Recognises that target values differ between guidelines (NICE, ESC, EAS) • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Can determine whether a patient is suitable for primary prevention or secondary prevention • Able to confidently conduct remote consultations • Able to utilise a patient decision aid when making treatment decisions with the patient • Able to make cardiovascular disease prevention interventions for atrial fibrillation (AF) patients • Able to make cardiovascular disease prevention interventions for hypertension patients
Investigations and risk assessment	<ul style="list-style-type: none"> • Can use clinical system searches to case find patients most at risk • Can order blood tests including lipid profile, renal, thyroid, HbA1c and creatine kinase (CK) • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can take blood • Can interpret lipid profile • Can interpret Hba1c blood tests • Can interpret renal profile • Can interpret liver profile • Knows of and can action what blood test results warrant a referral • Can identify what blood tests are needed in lipid optimisation • Knows when to reorder bloods and at what intervals • Can measure and calculate Body mass index (BMI) • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can describe additional cardiovascular risk factors (e.g. due to underlying medical conditions/treatments) • Can identify red flags and refer appropriately • Knows the secondary causes of hyperlipidaemia and can manage appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Able to provide in-depth assessment and advice on dietary changes • Able to provide in-depth assessment and advice on lifestyle changes • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the multi-disciplinary team (MDT) (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Can describe the place in therapy, mode of action and pharmacokinetics of different oral agents • Knows how to identify and report adverse events for medicines when they arise • Knows when to initiate a statin • Can describe the different intensities of statins and use this to guide appropriate selection • Can identify patients inappropriately prescribed a low intensity statin and titrate/change therapy accordingly • Can prescribe and titrate statins • Able to support patients who have statin hesitancy • Can provide guidance to patients on different oral agents, including, monitoring, side effects and safety netting • Recognises patients with statin intolerance and can follow the statin intolerance algorithm • Can identify and exclude patients with drug interactions/contraindications to statins • Knows when to initiate ezetimibe • Can prescribe ezetimibe

	<ul style="list-style-type: none"> • Knows when to add bempedoic acid to ezetimibe • Can prescribe bempedoic acid • Can identify and exclude patients with drug interactions/contraindications to ezetimibe/bempedoic acid/icosapent ethyl • Can prescribe icosapent ethyl • Knows when to initiate icosapent ethyl • Can identify and exclude patients with drug interactions/contraindications to icosapent ethyl • Can review and optimise lipid therapy according to lipid profile • Can check and support adherence to medications • Knows how to manage and adjust oral medications for special population groups e.g. chronic kidney disease (CKD) • Able to make shared care decision with patient around best treatment options
Pharmacological management: injectable agents	<ul style="list-style-type: none"> • Can assess eligibility for injectable therapies according to NICE technical appraisal (TA) • Knows when to initiate inclisiran • Is able to prescribe inclisiran • Is able to administer a subcutaneous injection • Is able to counsel patients on inclisiran • Can identify and exclude patients with drug interactions/contraindications to inclisiran • Can provide guidance to patients on inclisiran, including side effects and safety netting • Knows when a patient may be suitable for a proprotein convertase subtilisin/kexin type 9 inhibitors (PCSK9i) and can refer appropriately • Can identify and exclude patients with drug interactions/contraindications to a PCSK9i • Knows when a referral to secondary care is required
Severe hyperlipidaemia	<ul style="list-style-type: none"> • Can identify from a lipid profile and patient history when to suspect familial hypercholesterolaemia (FH) • Able to utilise the Simon Broome or Dutch lipid clinic network criteria to identify suspected FH prior to referral • Knows when to refer patients to the lipid clinic for further assessment for FH • Can follow up and optimise treatment for patients with FH

Practice nurse

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Can describe what total/HDL/LDL cholesterol and triglycerides are, why they are measured and the target values • Recognises that target values differ between guidelines (NICE, ESC, EAS) • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Can determine whether a patient is suitable for primary prevention or secondary prevention • Able to confidently conduct remote consultations • Able to utilise a patient decision aid when making treatment decisions with the patient • Able to make cardiovascular disease prevention interventions for AF patients • Able to make cardiovascular disease prevention interventions for hypertension patients
Investigations and risk assessment	<ul style="list-style-type: none"> • Can use clinical system searches to case find patients most at risk • Can order blood tests including lipid profile, renal, thyroid, HbA1c and CK • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can take blood • Can interpret lipid profile • Can interpret Hba1c blood tests • Can interpret renal profile • Can interpret liver profile • Knows of and can action what blood test results warrant a referral • Can identify what blood tests are needed in lipid optimisation • Knows when to reorder bloods and at what intervals • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can describe additional cardiovascular risk factors (e.g. due to underlying medical conditions/treatments) • Can identify red flags and refer appropriately • Knows the secondary causes of hyperlipidaemia and can manage appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Able to provide in-depth assessment and advice on dietary changes • Able to provide in-depth assessment and advice on lifestyle changes • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Can describe the place in therapy, mode of action and pharmacokinetics of different oral agents • Knows how to identify and report adverse events for medicines when they arise • Knows when to initiate a statin • Can describe the different intensities of statins and use this to guide appropriate selection • Can identify patients inappropriately prescribed a low intensity statin and titrate/change therapy accordingly • Can prescribe and titrate statins • Able to support patients who have statin hesitancy • Can provide guidance to patients on different oral agents, including, monitoring, side effects and safety netting • Recognises patients with statin intolerance and can follow the statin intolerance algorithm • Can identify and exclude patients with drug interactions/contraindications to statins • Knows when to initiate ezetimibe • Can prescribe ezetimibe • Knows when to add bempedoic acid to ezetimibe • Can prescribe bempedoic acid • Can identify and exclude patients with drug interactions/contraindications to ezetimibe/bempedoic acid/icosapent ethyl

	<ul style="list-style-type: none"> • Can prescribe icosapent ethyl • Knows when to initiate icosapent ethyl • Can identify and exclude patients with drug interactions/contraindications to icosapent ethyl • Can review and optimise lipid therapy according to lipid profile • Can check and support adherence to medications • Knows how to manage and adjust oral medications for special population groups e.g. Chronic kidney disease • Able to make shared care decision with patient around best treatment options
Pharmacological management: injectable agents	<ul style="list-style-type: none"> • Can assess eligibility for injectable therapies according to NICE TAs • Knows when to initiate inclisiran • Is able to prescribe inclisiran • Is able to administer a subcutaneous injection • Is able to counsel patients on inclisiran • Can identify and exclude patients with drug interactions/contraindications to inclisiran • Can provide guidance to patients on inclisiran, including side effects and safety netting • Knows when a patient may be suitable for a PCSK9i and can refer appropriately • Can identify and exclude patients with drug interactions/contraindications to a PCSK9i • Knows when a referral to secondary care is required
Severe hyperlipidaemia	<ul style="list-style-type: none"> • Can identify from a lipid profile and patient history when to suspect familial hypercholesterolaemia (FH) • Able to utilise the Simon Broome or Dutch lipid clinic network criteria to identify suspected FH prior to referral • Knows when to refer patients to the lipid clinic for further assessment for FH • Can follow up and optimise treatment for patients with FH

Clinical pharmacist

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Can describe what total/HDL/LDL cholesterol and triglycerides are, why they are measured and the target values • Recognises that target values differ between guidelines (NICE, ESC, EAS) • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Can determine whether a patient is suitable for primary prevention or secondary prevention • Able to confidently conduct remote consultations • Able to utilise a patient decision aid when making treatment decisions with the patient • Able to make cardiovascular disease prevention interventions for AF patients • Able to make cardiovascular disease prevention interventions for hypertension patients
Investigations and risk assessment	<ul style="list-style-type: none"> • Can use clinical system searches to case find patients most at risk • Can order blood tests including lipid profile, renal, thyroid, HbA1c and CK • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can interpret lipid profile • Can interpret Hba1c blood tests • Can interpret renal profile • Can interpret liver profile • Knows of and can action what blood test results warrant a referral • Can identify what blood tests are needed in lipid optimisation • Knows when to reorder bloods and at what intervals • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can describe additional cardiovascular risk factors (e.g. due to underlying medical conditions/treatments) • Can identify red flags and refer appropriately • Knows the secondary causes of hyperlipidaemia and can manage appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Able to provide in-depth assessment and advice on dietary changes • Able to provide in-depth assessment and advice on lifestyle changes • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Can describe the place in therapy, mode of action and pharmacokinetics of different oral agents • Knows how to identify and report adverse events for medicines when they arise • Knows when to initiate a statin • Can describe the different intensities of statins and use this to guide appropriate selection • Can identify patients inappropriately prescribed a low intensity statin and titrate/change therapy accordingly • Can prescribe and titrate statins • Able to support patients who have statin hesitancy • Can provide guidance to patients on different oral agents, including, monitoring, side effects and safety netting • Recognises patients with statin intolerance and can follow the statin intolerance algorithm • Can identify and exclude patients with drug interactions/contraindications to statins • Knows when to initiate ezetimibe • Can prescribe ezetimibe • Knows when to add bempedoic acid to ezetimibe • Can prescribe bempedoic acid • Can identify and exclude patients with drug interactions/contraindications to ezetimibe/bempedoic acid/icosapent ethyl • Can prescribe icosapent ethyl

	<ul style="list-style-type: none"> • Knows when to initiate icosapent ethyl • Can identify and exclude patients with drug interactions/contraindications to icosapent ethyl • Can review and optimise lipid therapy according to lipid profile • Can check and support adherence to medications • Knows how to manage and adjust oral medications for special population groups e.g. Chronic kidney disease • Able to make shared care decision with patient around best treatment options
Pharmacological management: injectable agents	<ul style="list-style-type: none"> • Can assess eligibility for injectable therapies according to NICE TAs • Knows when to initiate inclisiran • Is able to prescribe inclisiran • Is able to administer a subcutaneous injection • Is able to counsel patients on inclisiran • Can identify and exclude patients with drug interactions/contraindications to inclisiran • Can provide guidance to patients on inclisiran, including side effects and safety netting • Knows when a patient may be suitable for a PCSK9i and can refer appropriately • Can identify and exclude patients with drug interactions/contraindications to a PCSK9i • Knows when a referral to secondary care is required
Severe hyperlipidaemia	<ul style="list-style-type: none"> • Can identify from a lipid profile and patient history when to suspect familial hypercholesterolaemia (FH) • Able to utilise the Simon Broome or Dutch lipid clinic network criteria to identify suspected FH prior to referral • Knows when to refer patients to the lipid clinic for further assessment for FH • Can follow up and optimise treatment for patients with FH

Physician associate

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Can describe what total/HDL/LDL cholesterol and triglycerides are, why they are measured and the target values • Recognises that target values differ between guidelines (NICE, ESC, EAS) • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Can determine whether a patient is suitable for primary prevention or secondary prevention • Able to confidently conduct remote consultations • Able to utilise a patient decision aid when making treatment decisions with the patient • Able to make cardiovascular disease prevention interventions for AF patients • Able to make cardiovascular disease prevention interventions for hypertension patients
Investigations and risk assessment	<ul style="list-style-type: none"> • Can use clinical system searches to case find patients most at risk • Can order blood tests including lipid profile, renal, thyroid, HbA1c and CK • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can interpret lipid profile • Can interpret Hba1c blood tests • Can interpret renal profile • Can take blood • Can interpret liver profile • Knows of and can action what blood test results warrant a referral • Can identify what blood tests are needed in lipid optimisation • Knows when to reorder bloods and at what intervals • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can describe additional cardiovascular risk factors (e.g. due to underlying medical conditions/treatments) • Can identify red flags and refer appropriately • Knows the secondary causes of hyperlipidaemia and can manage appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Able to provide in-depth assessment and advice on dietary changes • Able to provide in-depth assessment and advice on lifestyle changes • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Can describe the place in therapy, mode of action and pharmacokinetics of different oral agents • Knows how to identify and report adverse events for medicines when they arise • Knows when to initiate a statin • Can describe the different intensities of statins and use this to guide appropriate selection • Can identify patients inappropriately prescribed a low intensity statin and titrate/change therapy accordingly • Able to support patients who have statin hesitancy • Can provide guidance to patients on different oral agents, including, monitoring, side effects and safety netting • Recognises patients with statin intolerance and can follow the statin intolerance algorithm • Can identify and exclude patients with drug interactions/contraindications to statins • Knows when to initiate ezetimibe • Knows when to add bempedoic acid to ezetimibe • Can identify and exclude patients with drug interactions/contraindications to ezetimibe/bempedoic acid/icosapent ethyl • Knows when to initiate icosapent ethyl • Can identify and exclude patients with drug interactions/contraindications to icosapent ethyl • Can review and optimise lipid therapy according to lipid profile

	<ul style="list-style-type: none"> • Can check and support adherence to medications • Knows how to manage and adjust oral medications for special population groups e.g. Chronic kidney disease
Pharmacological management: injectable agents	<ul style="list-style-type: none"> • Can assess eligibility for injectable therapies according to NICE TAs • Knows when to initiate inclisiran • Is able to administer a subcutaneous injection • Is able to counsel patients on inclisiran • Can identify and exclude patients with drug interactions/contraindications to inclisiran • Can provide guidance to patients on inclisiran, including side effects and safety netting • Knows when a patient may be suitable for a PCSK9i and can refer appropriately • Can identify and exclude patients with drug interactions/contraindications to a PCSK9i • Knows when a referral to secondary care is required
Severe hyperlipidaemia	<ul style="list-style-type: none"> • Can identify from a lipid profile and patient history when to suspect familial hypercholesterolaemia (FH) • Able to utilise the Simon Broome or Dutch lipid clinic network criteria to identify suspected FH prior to referral • Knows when to refer patients to the lipid clinic for further assessment for FH • Can follow up and optimise treatment for patients with FH

Pharmacy technician

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Can describe what total/HDL/LDL cholesterol and triglycerides are, why they are measured and the target values • Recognises that target values differ between guidelines (NICE, ESC, EAS) • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Can determine whether a patient is suitable for primary prevention or secondary prevention • Able to confidently conduct remote consultations • Able to utilise a patient decision aid when making treatment decisions with the patient
Investigations and risk assessment	<ul style="list-style-type: none"> • Can use clinical system searches to case find patients most at risk • Can order blood tests including lipid profile, renal, thyroid, HbA1c and CK • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can interpret lipid profile • Can interpret Hba1c blood tests • Can interpret renal profile • Can interpret liver profile • Knows of and can action what blood test results warrant a referral • Can identify what blood tests are needed in lipid optimisation • Knows when to reorder bloods and at what intervals • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can identify red flags and refer appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Able to provide in-depth assessment and advice on dietary changes • Able to provide in-depth assessment and advice on lifestyle changes • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Knows how to identify and report adverse events for medicines when they arise • Knows when to initiate a statin • Able to support patients who have statin hesitancy • Can provide guidance to patients on different oral agents, including, monitoring, side effects and safety netting • Recognises patients with statin intolerance and can follow the statin intolerance algorithm • Can identify and exclude patients with drug interactions/contraindications to statins • Knows when to initiate ezetimibe • Knows when to add bempedoic acid to ezetimibe • Knows when to initiate icosapent ethyl • Can identify and exclude patients with drug interactions/contraindications to icosapent ethyl • Can review and optimise lipid therapy according to lipid profile • Can check and support adherence to medications • Knows how to manage and adjust oral medications for special population groups e.g. Chronic kidney disease

Pharmacological management: injectable agents	<ul style="list-style-type: none"> • Can assess eligibility for injectable therapies according to NICE TAs • Knows when to initiate inclisiran • Is able to administer a subcutaneous injection • Is able to counsel patients on inclisiran • Can identify and exclude patients with drug interactions/contraindications to inclisiran • Can provide guidance to patients on inclisiran, including side effects and safety netting • Knows when a patient may be suitable for a PCSK9i and can refer appropriately • Can identify and exclude patients with drug interactions/contraindications to a PCSK9i • Knows when a referral to secondary care is required
Severe hyperlipidaemia	<ul style="list-style-type: none"> • Can identify from a lipid profile and patient history when to suspect familial hypercholesterolaemia (FH) • Able to utilise the Simon Broome or Dutch lipid clinic network criteria to identify suspected FH prior to referral

Health care assistant (HCA)

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Can determine whether a patient is suitable for primary prevention or secondary prevention • Able to confidently conduct remote consultations
Investigations and risk assessment	<ul style="list-style-type: none"> • Can use clinical system searches to case find patients most at risk • Can order blood tests including lipid profile, renal, thyroid, HbA1c and CK • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can take blood • Can identify what blood tests are needed in lipid optimisation • Knows when to reorder bloods and at what intervals • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can identify red flags and refer appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Knows how to identify and report adverse events for medicines when they arise • Can check and support adherence to medications
Pharmacological management: injectable agents	<ul style="list-style-type: none"> • Is able to administer a subcutaneous injection • Is able to counsel patients on inclisiran • Can provide guidance to patients on inclisiran, including side effects and safety netting

Nurse associate

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Can describe what total/HDL/LDL cholesterol and triglycerides are, why they are measured and the target values • Recognises that target values differ between guidelines (NICE, ESC, EAS) • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Able to confidently conduct remote consultations
Investigations and risk assessment	<ul style="list-style-type: none"> • Can use clinical system searches to case find patients most at risk • Can order blood tests including lipid profile, renal, thyroid, HbA1c and CK • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can take blood • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can identify red flags and refer appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Knows how to identify and report adverse events for medicines when they arise • Can check and support adherence to medications

Dietician

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Can determine whether a patient is suitable for primary prevention or secondary prevention • Able to confidently conduct remote consultations
Investigations and risk assessment	<ul style="list-style-type: none"> • Can order blood tests including lipid profile, renal, thyroid, HbA1c and CK • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can interpret lipid profile • Can interpret Hba1c blood tests • Can interpret renal profile • Can interpret liver profile • Knows of and can action what blood test results warrant a referral • Can identify what blood tests are needed in lipid optimisation • Knows when to reorder bloods and at what intervals • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can identify red flags and refer appropriately • Knows the secondary causes of hyperlipidaemia and can manage appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Able to provide in-depth assessment and advice on dietary changes • Able to provide in-depth assessment and advice on lifestyle changes • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Knows how to identify and report adverse events for medicines when they arise • Can check and support adherence to medications
Severe hyperlipidaemia	<ul style="list-style-type: none"> • Can identify from a lipid profile and patient history when to suspect familial hypercholesterolaemia (FH)

Social prescriber

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Able to confidently conduct remote consultations
Investigations and risk assessment	<ul style="list-style-type: none"> • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can identify red flags and refer appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Knows how to identify and report adverse events for medicines when they arise • Can check and support adherence to medications

Care co-ordinator

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Able to confidently conduct remote consultations
Investigations and risk assessment	<ul style="list-style-type: none"> • Can use clinical system searches to case find patients most at risk
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Knows how to identify and report adverse events for medicines when they arise • Can check and support adherence to medications

Health and wellbeing coach

Topic	Competencies
Background knowledge	<ul style="list-style-type: none"> • Can describe the symptoms of cardiovascular disease • Can identify the modifiable and non-modifiable risk factors for cardiovascular disease • Knows the current national drivers and guidelines for lipid management in the NHS • Knows where to find the NHS lipid management pathway and other relevant guidance (e.g. NICE, ESC, EAS) • Can describe what cholesterol is and the associated risks with having high cholesterol • Understands the importance of lifestyle modification for reducing risk of cardiovascular events • Able to confidently conduct remote consultations
Investigations and risk assessment	<ul style="list-style-type: none"> • Can take blood pressure • Can interpret blood pressure results and action appropriately • Can measure and calculate BMI • Can interpret BMI readings • Knows when to use QRISK and when it is not appropriate • Can calculate QRISK • Can interpret QRISK and action appropriately • Can identify red flags and refer appropriately
Non-pharmacological management and lifestyle modification	<ul style="list-style-type: none"> • Able to provide brief interventions/signpost patients to resources on cardioprotective diets • Able to provide brief interventions/signpost patients to resources on exercise • Able to provide brief interventions/signpost patients to resource on smoking cessation • Able to provide brief interventions/signpost patients to resources on reducing alcohol consumption • Able to provide brief interventions/signpost obese patients to resources on weight management • Able to provide in-depth assessment and advice on dietary changes • Able to provide in-depth assessment and advice on lifestyle changes • Can confidently use health coaching skills/motivational strategies to drive patient self management • Can identify wider needs and signpost patients to other members of the MDT (e.g. social prescribers, H&W coaches)
Pharmacological management: oral agents	<ul style="list-style-type: none"> • Knows how to identify and report adverse events for medicines when they arise • Can check and support adherence to medications