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Report to the Clinical Governance Committee

Wednesday 12th February 2014

PRACTICE AND PROFESSIONAL DEVELOPMENT UNIT

1. INTRODUCTION

1.1 This report provides an outline of the key activities undertaken by the Practice and Professional Development Unit (PPDU) during the period 1st April 2012 – 31st March 2013.

1.2 The activities are aimed at meeting the continuing practice and professional development needs of staff within NHS Fife, which supports NHS Fife’s Clinical Governance agenda.

1.3 The PPDU provides an infrastructure for implementing policy into practice, developing practice and supporting staff within NHS Fife. This enables staff to develop their practice, enhancing their professional development. The focus for these activities is to develop staff who deliver safe, effective and evidence based patient care, which continues to support the NHS Scotland Quality Ambitions.

1.4 Our aim is to adopt an inclusive approach to our work by working in partnership with key stakeholders such as NHS Education Scotland, Higher Education Institutions, across Health Board areas, and with the involvement of members of the wider multi-disciplinary team in order to develop education and training programmes relevant to multi-disciplinary practice and the needs of individuals and groups of staff.

2. THE PRACTICE AND PROFESSIONAL DEVELOPMENT PROGRAMME

2.1 The practice and professional development educational programme is offered to staff from across NHS Fife, and where appropriate, also extends to staff employed within General Practice, and the independent sector.

2.2 Registered nurses continue to represent the majority of staff attending the programmes offered.

2.3 There is increasing participation by the AHPs with ongoing interest in Leadership development, measurement of physiological signs and venepuncture; and Non Medical Prescribing.

2.4 There continues to be an increasing demand for Health Care Support Worker sessions, specifically in relation to the increasing acuity of patients in Community Hospital and Hospital at Home provision, ranging from SVQ 2 & 3 qualification attainment to the provision of practical clinical skills training.

2.4 2012 – 13 has seen a significant increase in demand from Independent Care Homes with interest in a full range of training activities including Tissue Viability / Wound Management and Clinical Skills training.

2.5 Clinical Skills provision represents the largest proportion of our focus across Fife (Figure 1), with significant support also invested in Nursing and Midwifery Induction.
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and the facilitation of Scottish Vocational Qualifications, access to Further and Higher Education Institution (HEI) provision, development of policies, procedures and guidance to support clinical practice; and National programmes and work streams including:

- Leading Better Care
- Releasing Time to Care
- Scottish Patient Safety Programme
- Caring Behaviours Assurance System (CBAS)
- Revitalising Care
- Nursing and Midwifery Workload and Workforce Planning
- Improving care for Older People and People with Dementia

Figure 1

<table>
<thead>
<tr>
<th>Training Programmes</th>
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<tbody>
<tr>
<td>Registered Practitioners</td>
</tr>
<tr>
<td>- Venepuncture</td>
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<tr>
<td>- Cannulation</td>
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<tr>
<td>- Acute Illness Management</td>
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<td>- Volumetric Infusion Device training</td>
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<td>- Anaphylaxis</td>
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<tr>
<td>- Promoting Safe and Effective Immunisation</td>
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<tr>
<td>Health care Support Workers (HCSW) / Nursing Auxiliaries (N/A)</td>
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<tr>
<td>- Professional Issues</td>
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<tr>
<td>- Venepuncture</td>
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<tr>
<td>- Blood Glucose Monitoring</td>
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<tr>
<td>- Vital Signs</td>
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<tr>
<td>Joint sessions with Registered Practitioners, HCSW &amp; N/A</td>
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<tr>
<td>- Tissue Viability / Pressure Ulcer Prevention</td>
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<tr>
<td>- Medical Gas training</td>
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<tr>
<td>- Ear Care</td>
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<tr>
<td>Fife-wide sessions</td>
</tr>
<tr>
<td>- Management of Central Venous Catheters</td>
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<tr>
<td>- McKinley T34 Infusion Pump</td>
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<tr>
<td>- Preparation and Administration of medication by Infusion</td>
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<tr>
<td>Practitioner Support and Service Development</td>
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<tr>
<td>- Hospital at Home</td>
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<tr>
<td>- Non-medical Prescribing</td>
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<tr>
<td>- Effective Practitioner</td>
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2.6 There is ongoing analysis of attendance and evaluation of provision with consideration of these outcomes and the impact on patient care and the current and future delivery of patient care.

3. LEADERSHIP
3.1 The PPDU through two dedicated leadership facilitators continues to deliver three clinical leadership programmes for staff:

Figure 2

- The twelve month RCN Clinical Leadership Programme – designed to assist healthcare professionals and their teams to develop person-centred and evidence based strategies within the context of their day to day practice, organisational climate and policy agenda;
- Inspired to Lead - a three month programme for staff working at a more junior level;
- Support Workers’ Leadership Awareness Programme.

3.2 These programmes aim to equip healthcare workers (Nurses and AHPs) with the necessary knowledge and skills to become proactive change agents thus ensuring that the transformation and quality of care and services the public demands are realised.

3.3 During the last year healthcare workers have successfully completed one of the three programmes currently available. The Allied Health Professionals (AHP) have fully supported leadership in all of the programmes.

3.4 The aim of the shorter programmes is to raise participants’ awareness of the contribution of effective clinical leadership to high quality patient care and to provide participants with some practical tools to use in their day-to-day work to improve their personal effectiveness.

3.5 These programmes contribute to the range of courses provided throughout NHS Fife complimenting the provision from Organisational Development & Learning, including access to National Programmes e.g. Facing the Future and the national Midwifery Leadership Programme to meet Organisation’s need, providing a range and breadth of access to all professional disciplines and other staff groups.

4. PRACTICE EDUCATION FACILITATORS

4.1 The Practice Education Facilitator (PEF) posts have been successfully established for 8 years. The PEFs continue to work in close partnership with NHS Education Scotland (NES) and Higher Education Institutions (HEIs). The provision of six whole time equivalent posts has diversified to incorporate full time and part time PEFs, working across both primary and secondary care settings. From May 2010 a three year seconded post of a Care Home Education Facilitator (CHEF) was established to cover care home settings across Fife, the funding for this post provided by NHS Education for Scotland has been extended until March 2015.

4.2 The PEF/CHEF’s along with the Allied Health Practice Education lead directly influence the educational journey of students and in partnership with mentors and educational colleagues their preparation for practice.

4.3 The key PEF priorities for the year ahead remain:

- To support the preparation and ongoing professional development of the nursing and midwifery mentor workforce within NHS Fife;
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- To continue to work closely with Higher Education Institutions and other professions to support Inter-professional Learning;
- To continue to support and embed educational initiatives and contribute to the evaluation of practice learning.

5. LEADING BETTER CARE and RELEASING TIME TO CARE

5.1 Within NHS Fife LBC and the Productive Ward Releasing Time to Care programmes are managed through the one steering group with a NHS Fife wide remit. A review of the role and remit of the group has taken place to support and facilitate the decision making process for both programmes. Within the Operational Division a local group has been set up to discuss the progress and monitoring of these programmes and to provide further support SCN/SCM’s and T/L’s to achieve the aims of LBC.

5.2 It has been agreed that the LBC development programme for SCN/SCM’s and T/L’s should be extended to include band 6 Charge Nurses/Charge Midwives and T/Ls in line with the recommendations within the Education and Development Framework. The next 3 day development programme is due to take place in April 2012 and will be open to the band 6’s to attend and will include staff from the Community Health Partnerships and the Operational Division.

5.3 Leading Better Care (LBC) is the national programme which includes the review of the role of the Senior Charge Nurse and the implementation of the Clinical Quality Indicators (CQIs). LBC is integral to the Quality Strategy and is complementary to other significant work streams including the Scottish Patient Safety Programme (SPSP), Better Together, Better Health Care, Curam and the Nursing and Midwifery Workload and Workforce Planning project.

5.4 The aims of LBC state that by March 2013 all SCN/SCM’s and TL’s will be required to demonstrate they are working within the context of the four LBC components and the three quality ambitions. Nationally an impact resource tool to support the SCN/SCM and TLs to achieve these aims has been developed and piloted within NHS Fife. This provides a ‘dashboard’ view to illustrate the achievement of the associated competencies.

5.5 Releasing Time to Care (RTC) is a modular based programme which enables ward teams to review the way they carry out key activities, remove waste and ultimately increase the time available to deliver direct patient care.

5.6 Within Fife there is a comprehensive programme with two facilitators from PPDU working with staff to enable improved patient care and better patient experiences across healthcare services.

5.7 The main benefits from the programme so far have been:

- Wards more efficient, less cluttered and more organised
- Reduction of repeated documentation
- Reduction in stock levels
- Improving patient experience by using a patient experience questionnaire allowing staff to act quickly on appropriate issues
- Empowering staff to undertake quality improvements in the clinical area
- Linking the output from the RTC programme with other work streams such as the Scottish Patient Safety Programme
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- Staff learning on how to manage change successfully

The implementation and progress of RTC has been monitored nationally by the collection of quantitative data and through case studies which are published on the Leading Better Care Website.

http://www.evidenceintopractice.scot.nhs.uk/leading-better-care/case-studies.aspx

7. CANCER AND PALLIATIVE CARE

7.1 A comprehensive cancer and palliative care education and training programme continues to be offered to staff by the Macmillan Cancer and Palliative Care team of educators based within PPDU.

7.2 The educational and training sessions provided by the Cancer and Palliative Care Educational Team offers health and social care workers in Fife an opportunity to gain evidence based knowledge and skills within the realms of cancer and palliative care. They aim to empower, enable and support staff to become autonomous, competent and confident practitioners who will influence clinical practice and improve patient care. Programmes are structured to include short updates and full day courses.

8. DEMENTIA TRAINING

8.1 This work continues to focus on the implementation of the dementia strategy, specifically the 10 key actions and standards of care for Patients with Dementia across the Acute Care Services, linking with a wide range of partners and supporting agencies.

8.2 This provision also links with the national work stream Improving care for Older People including delirium and facilitation of Dementia practice improvement – ‘Getting to Me’, dementia signage, internet resources, environmental audits and development.

8.2 Adult with incapacity training is offered Fife wide for all staff to increase awareness and understanding of the Adults with incapacity legislation.

9. CHP RESUSCITATION

9.1 Resuscitation services provide a training programme, advice and guidance to staff within all CHPs and where appropriate the independent sector. Linking with the Operational Division resuscitation colleagues to ensure advice, guidance and programmes are in line with national and local guidelines.

The Acute services Division Resuscitation Officers are not managed within PPDU

9.2 Each community site has developed an appropriate response system to ensure that a member of staff trained in Immediate Life Support (ILS) is dispatched to the incident to manage the patient until the arrival of medical assistance or the ambulance service.

9.3 CHP Training figures

<table>
<thead>
<tr>
<th>Course</th>
<th>2011-2012</th>
<th>2012-2013</th>
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<tbody>
<tr>
<td>Adult Basic Life Support</td>
<td>1903</td>
<td>1387</td>
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<table>
<thead>
<tr>
<th>Course</th>
<th>2011-2012</th>
<th>2012-2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paediatric Basic Life Support</td>
<td>418</td>
<td>197</td>
</tr>
<tr>
<td>Immediate Life Support</td>
<td>137</td>
<td>159</td>
</tr>
<tr>
<td>Internal Resuscitation Instructors</td>
<td>8</td>
<td>16</td>
</tr>
<tr>
<td>Learn pro e-learning Adult Basic life support Module 1</td>
<td>0</td>
<td>481</td>
</tr>
</tbody>
</table>

10. DEGREE AND MASTERS PROGRAMME

10.1 The opportunity to apply for support to undertake Degree and Masters programmes within NHS Fife continues to be supported through Continuing Education budgets held within individual Operational units.

10.2 Course fees, backfill (dependent upon qualification sought) and study leave is provided for a wide range of successful applicants as appropriate. This includes support for staff undertaking community nursing Specialist Practitioner Qualifications, degree completion and part / full Masters programmes.

11. SCOTTISH GOVERNMENT NURSING AND MIDWIFERY ONE YEAR JOB GUARANTEE (OYJG) SCHEME: INTERNSHIPS

11.1 NHS Education for Scotland (NES) continues to act as the host for the scheme (recruitment and selection), holding a register of applicants and liaising with the SGHD regarding vacancies. They recognise that the current financial context has presented very real challenges for newly-registered nursing and midwifery staff in identifying job opportunities and it has equally limited the type of opportunities which have previously been offered under the OYJG scheme.

11.4 NHS Fife has agreed to support this initiative to host Internships. The positions offer a maximum of a one year, fixed-term, part-time (22.5hrs), Band 5 rotational employment opportunity in clinical practice linked to completion of Flying Start NHS®.

11.5 Part funded by the SGHD, through NES, Interns are employed 'in addition to' the NHS Boards' funded establishments.

11.6 Within NHS Fife there are Intern opportunities within Midwifery and the Adult, Child and Mental Health nursing fields (there have to date been no requests for SGHD or NES to offer Learning Disability Internships within NHS Fife).

11.7 PPDU supports these and other staff through access to the National support and development programmes including Flying Start NHS® and Effective Practitioner.

12 Additionality Funding

12.1 NHSScotland has recently been supported by funding provided to our Higher Education Institutions to support additional learning and development opportunities for our staff which would not normally be accessible or supported. This has provided the potential to access courses from any HEI and our staff have benefited from access to funded modules in addition to those supported by internal NHS Fife funding e.g.

- 6 staff are being supported to complete full 3 year Masters programmes with the University of Dundee
- Napier University provided ‘Obtaining Consent’ training on-site for Endoscopy staff
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- Staff have commenced Clinical Examination Modules from Stirling University and the University of Dundee
- Abertay University created a bespoke programme to prepare staff and support Hospital at Home developments
- A broad range of miscellaneous modules have been accessed with focus on Dementia Care, Tissue Viability, Mental Health and Midwifery Supervision.

13. CONCLUSION

13.1 This report gives an overview of the work of PPDU across NHS Fife demonstrating our commitment to enhancing patient focused care provision and service development through a targeted approach to the facilitation of local education and skills programmes and accessing Further and higher Education opportunities.

13.2 Members of the Clinical Governance Committee are asked to:

- note the contents of this report

CHARLIE SINCLAIR
Associate Director of Nursing Operational Division

KATRINA DEAS
Clinical Practice Development Officer

January 2014