

# Context of healthcare education 2017 The future professional

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# Adding context: main drivers for change

#### 2012

Health & Social Care Act

Winterbourne View

Willis Report

Compassion in Practice – 6 'C's

2013

Francis Report

Keogh Mortality Review

Berwick Report

Cavendish Review

Health Education England established

Workforce Plan for England

2014

NICE safe staffing guidance

NHS Five Year Forward View

Come Back to Nursing Campaign (HEE)

2015

Morecombe Bay

Review of Choice in End of Life Care

Shape of Caring Review (HEE)

Comprehensive Spending Review



### **The Five Year Forward View**

Identified a significant and widening gap between current resources and demand on the service in each of the following areas:

- 1. Health and wellbeing
- 2. Care and quality
- 3. Funding and efficiency.

#### The health and wellbeing gap

The majority of illnesses the NHS treats are caused by obesity, smoking or alcohol.

Many of these illnesses, such as heart disease or diabetes, are preventable.

Take national action on obesity, smoking and alcohol.

Give greater local powers to support local health needs.

Develop national programmes to target obesity, smoking and alcohol-related illnesses.

Support NHS staff to stay healthy and be good examples to local communities.



Healthier populations = reduced hospital admissions.

Reduced demand on NHS services.

#### The care and quality gap

People are living longer and need a wider range of health services over a longer period of time.

Care is disjointed across different organisations.



Remove the divide between primary care, community services and hospitals.

Provide more funding for primary care to make sure there are enough GPs to meet demand.

Test new models of delivering care within vanguard sites that will be rolled out to other organisations.

Share innovative ways of working and carry out research to develop new ones.

Make sure NHS staff are fully trained to support the changes.

New ways of working = greater efficiency.

Better ability to meet the evolving demands on NHS services.

#### The funding and efficiency gap

The way the NHS currently delivers care isn't cost-effective.

There will be a gap between patient needs and NHS resources of £30 billion a year by 2020/21.

Reduce demand in NHS services by preventing illness.

Develop more efficient and cost-effective ways of delivering care.

Understand the spending patterns in the NHS and see where changes could be made.

Create a common measure for the good use of NHS resources.



Reduced demand on NHS services = more effective and efficient care for those who need it.

Better use of NHS funds.

A sustainable NHS that continues to be tax-funded, free at the point of use and that is fully equipped to meet the evolving needs of its patients, now and in the future.



### Preparing for the future

#### **NHS Five Year Forward View**







- Next Steps published in March 2017 set out how the NHS will deliver practical improvements and transform the way care is delivered to ease pressure on hospitals. This work is currently supported by:
- Academic Health Science Networks (AHSNs) supporting innovation and improvement
- Vanguard sites trialling new models of care focused on better integrating services e.g. GPs. community nursing, mental health and social care, moving specialist care out of hospitals to the community; linking hospitals together
- Sustainability and Transformation Partnerships (STPs) – NHS organisations and Councils across 44 geographical areas working together to reduce pressures



Includes ambitions to more closely integrate health and social care services, encourage GPs to work together at greater scale, and deliver a wider range of services in the community. Includes ambitions to promote healthy lifestyles, support people to manage their own health, and address wider social factors that influence health.

Includes ambitions to centralise some acute services on fewer sites, reconfigure how specialised services are delivered, and in some cases reduce hospital capacity. Redesigning primary care and community services Strengthening prevention and early intervention

Improving mental health and other services

Includes ambitions to improve care in specific areas (such as mental health) depending on local health needs, workforce and quality issues, and national requirements.

Includes ambitions to develop integrated approaches to commissioning, new contracting models an payment systems focused on care outcomes, and closer NHS and social care collaboration. Developing organisational arrangements to support STPs

Changing the role of

acute and community

hospitals

Developing the enablers

Improving productivity and tackling variations in care

Workforce

What are the key themes in STPs?

> Includes ambitions to reduce variation in clinical practice and deliver efficiencies in non-clinical services such as procurement and estates.

Includes ambitions to develop IT an digital services, such as electronic health records and health apps, and make changes to the NHS estate, such as disposing of unused assets and developing new facilities. Includes ambitions to improve staff recruitment and retainment, reduce agency costs, and develop new skills and roles such as health coaching and care







### Current challenges







### **UK Apprenticeships:**

UK Government aims to improve skills for the UK workforce and has doubled investment to £2.5bn

- Plan for 3 million new apprenticeship places by 2020
- To fund this, an Apprenticeship Levy came into effect on 6<sup>th</sup> April 2017: it requires all employers in the UK with a pay bill over £3 million/year to give 0.05% of their total pay bill to HM Revenue and Customs
- The NHS levy will amount to around £200m per year
- Levy money is not ring-fenced and must be spent within a set number of months - considerable pressure for employers to recover their contributions
- Independent approval of Apprenticeship Standards and regulation of quality via Institute for Apprenticeships/organisations listed on Register of Apprentice Assessment Organisations (RoAAO).

Apprenticeships



## NHS Apprenticeships – Standards & Quality Principles



Specification of Apprenticeship Standards for England

July 2017

Guidance for training providers and employers



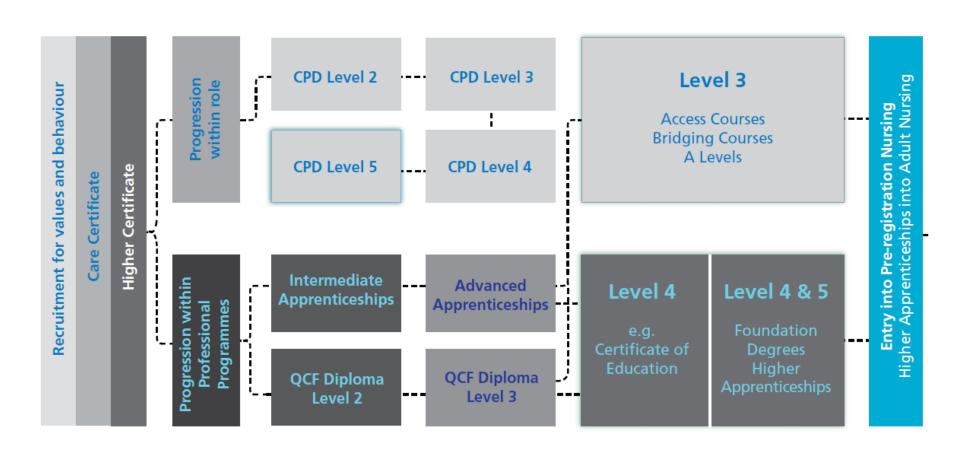
- Document for employers and those leading on apprenticeships in their organisation, identifies
- 21 principles
- 3 main themes:
  - Embedding apprenticeships in the organisation's workforce strategy
  - Securing management commitment
  - Effective learning programmes and processes
- To be considered alongside the Health Education England Quality
   Framework for education and training

https://www.gov.uk/government/collections/health-public-services-and-care-apprenticeships



# **Shape of Caring Review: education and training progression**







### New nursing roles and education arising from the *Shape of Caring* agenda:



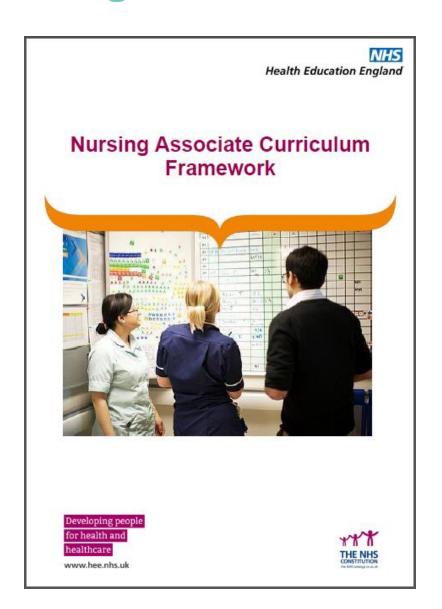
- Nursing Associate role 2000 trainees began programmes at 35 test sites in England this year funded by HEE
  - intention is support for the delivery of nursing care across the Integrated Care sector
  - work under the leadership of Registered Nurses
  - Consultation/review of test pilots Spring 2018
  - Plan to enable NMC registration after 2019
- Nursing Associate Apprenticeship Standard approved in Aug.17 & assessment plan has been submitted
- Registered Nurse Degree Apprenticeship Standards published in Nov.2016
  - End Point Assessment (EPA) published 2017



# Nursing Associate Curriculum 2017 Health Education England

"Trainee nursing associates must experience placements in each of the three health and care settings: hospital; at home; and close-to-home."

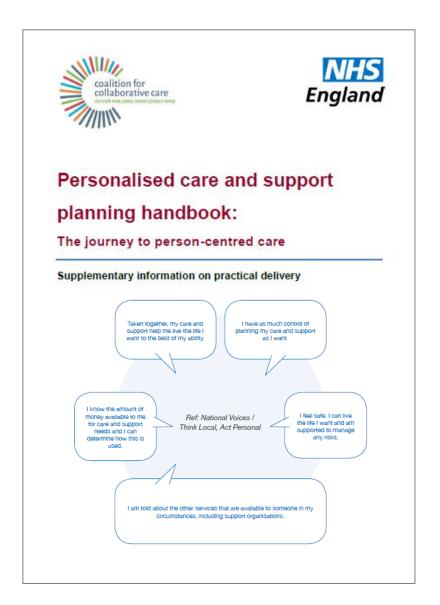
Framework includes situational examples to explain key differences between the role and level of a Nursing Associate in relation to a Registered Nurse and Care Assistant.





### **EDUCATION: NHS England, HEE, Skills for Health & Skills for Care**

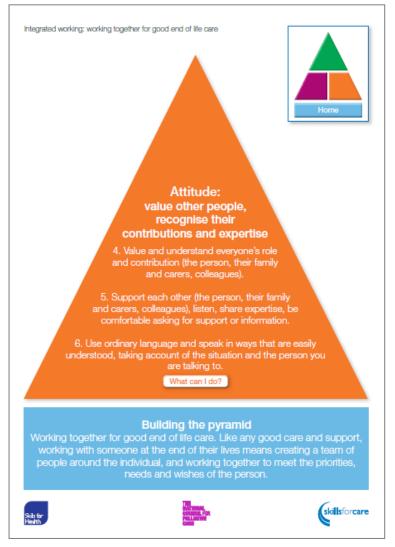






# Interprofessional education and integrated care e.g. end of life care







### Apprenticeships in nursing: progress so far

Registered Nurse (all 4 NMC fields of practice) (Level 6: Degree) Nursing
Associate
(to become
NMC
Registered
(Level 5:
Diploma/
Foundation
Degree)

Advanced
Clinical
Practitioner
(Level 7:
Masters'
Degree)

Community and Public Health Nursing (e.g. Health Visitor, GP Nurse)

Nurse Specialist (e.g. Emergency Care, Oncology)

Standard approved for delivery (May 2017) Standard not ready: approved Aug.17 for trailblazers/ EPA plan submitted

Approved for development

**Being Explored** 

Pre Expression of Interest

After 'Standard Approved' → 'Assessment Plan Developed' → 'Approved for Delivery'

Trailblazer Groups express/register their interest to develop apprenticeship standards and consist of:

lead employers from around the UK alongside education providers



### Apprenticeships are tightly controlled:

- Combine practical on the job training with study
- Apprentices must be employed for a minimum of 30 hours/week
- Employer pays tuition fees and salary for apprenticeship
- Levy can be drawn down by employers to pay for <u>tuition only</u> and price decided between employer and education provider (education funding bands set a maximum – currently up to £27,000 for some higher apprenticeships)
- Apprenticeship requires a standard 'end point assessment' (independent)
- Universities to work with employers to deliver degree apprenticeships

Apprenticeship	Academic Level	Equivalent to:
Intermediate	2	5 GCSE passes at grades A* to C
Advanced	3	2 A level passes
Higher	4,5,6 and 7 (e.g. Nursing associate – level 5)	Foundation Degree and above
Degree	6 and 7 (e.g. RN Degree level 6)	Bachelor's or Master's Degree

For more information see:

https://ww w.gov.uk/a pprentices hips-quide



### **Nursing Associate apprenticeship**

- Nursing Associate apprentice must meet 15 standards set out in the Care Certificate prior to taking their End Point Assessment.
- The Nursing Associate will deliver high quality person-centred care across health and social care settings. They will work within all aspects of the nursing process, taking account of the perspectives and pathways of individuals, their families and/or carers providing holistic and person-centred care supporting the registered nurse in the assessment, planning, delivery and evaluation of care.

#### **Domains for Nursing Associate**

- 1. Professional values and parameters of practice
- 2. Person-centred approaches to care
- 3. Delivering nursing care
- 4. Communication and interpersonal skills
- 5. Team-working and leadership
- 6. Duty of care, candour, equality & diversity
- 7. Supporting learning and assessment in practice
- 8. Research development & innovation

Skills and knowledge descriptions are currently based on the Nursing Associate Curriculum Framework (HEE 2017)



### **CQC** Care Certificate

### CARE CERTIFICATE





This is to certify that
is awarded the Care Certificate based on the standards set by Health Education England, Skills for Care and Skills for Health
Date of award:
Awarding employer:
Signature: Job Role/Title:



### **RN Degree Apprenticeship Standard**

- The apprentice must meet the 15 standards in CQC Care Certificate.
- Currently aligned to NMC (2015)
   Standards for Competence for Registered Nurses.
- Person-centred focus with an emphasis on multi-disciplinary, interprofessional and multi-agency working
- Different areas of nursing work –
  home, community, hospital, social
  care, public health
- Minimum level 2 numeracy and literacy skills as assessed by NMC Approved Education Institution (AEI)
- Typical duration 48 months

### **Core Domains for Registered Nurse**

Leadership, management and teamworking

Professional values

Nursing practice and decision-making

Communication and interpersonal skills

Option specific domains for 1) Adult, 2) Children, 3) Learning Disability and 4) Mental Health

#### Essential skills clusters

- i) care, compassion and communication
- ii) organisational aspects of care
- iii) Infection prevention and control
- iv) Nutrition and fluid management
- v) Medicines management



Registered Nurse	e Degree Apprenticeship	<ul> <li>End Point Asse</li> </ul>	essment (EPA)

Assessment method	Area assessed	Assessed by	Grading
Reflective essay – open book, under controlled and timed conditions up to max. 2 hours	<ol> <li>Leadership,         management and team         working</li> <li>Professional Values</li> <li>Nursing Practice and         decision making</li> <li>Communication and         interpersonal skills</li> </ol>	Independent assessment organisation	Fail (0-39%) Pass (40-55%) Merit (56-69%) Distinction (70%+)

The reflective essay must demonstrate the apprentice's knowledge, skills and understanding across the core competences of the Standard. The reflective essay must also demonstrate values and behaviours being applied to nursing practice

Professional discussion with independent assessor – 60 minutes  Discussion focused on context-based scenario to assess the apprentice's skills, knowledge and behaviours in regard to the four components listed in the chosen option.	Independent assessment organisation	Fail (0-39%) Pass (40-55%) Merit (56-69%) Distinction (70%+)
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### The Nursing Career Pathway:





#### **New NMC Curriculum**

### Leading Change, Adding Value



Increase in people with both physical and mental ill health challenges

Health and care landscape changing rapidly

More complex care needs

Nurses working across a range of settings

Nurses and midwives need to be fit for the future

More integrated care delivery and multidisciplinary team working

24/7 care

More acute care delivered in non-hospital settings

Maximising the potential of technology

Nurses taking on additional responsibilities Preventing ill health and promoting self care



### Imagine... a 2019 nursing team?

I'm a Band 5 RN, degree level qualified in 2016, completed mentorship in 2017, now supervising 1 Nursing Associate Apprentice, 1 full-time BSc Student Nurse and 1 new RN Degree Level Apprentice

I'm a full-time
BSc(Hons) final
year Student Nurse
(accumulating 3
years of student
loan debt)

I'm a Nurse
Consultant in
Emergency Care,
personally
funding a parttime PhD at
University with
contributions from
my employer

I'm a Band 3 Health Care Assistant who has just been accepted to start my Nursing Associate Apprenticeship, hoping to become a RN one day

I'm an experienced Band 6 RN, qualified with a Diploma in 2007 with some level 6 CPD in Emergency Care (no debt to pay off) and just starting a part-time M Level Advanced Nurse Practitioner Apprenticeship





NURSES ARE AWESOME









Any questions?