

Nursing Workforce Challenges & Spreading Good Practice

SW Clinical Senate
1st February 2018 Jacquie Phare Deputy
Director Nursing and Quality NHSE
South SW

Current National Nursing Crisis

- The Parliamentary Health Committee Nursing Workforce report (25.1.18).(www.parliament.uk)
- The MPs say there are many causes for the shortfall in nurses including workload, pay, morale and lack of access to continuing professional development(CPD).
- Total nursing vacancies in England 34,260, up 2,400 on the previous quarter.(30 September 2017)

MPs draw up nurse workforce plan to halt exodus...

Commons nursing workforce review highlights pressures stemming from training squeeze.



Commons Health Committee

Nursing Workforce Review

- Health Education England reverses cuts to nurse training budgets and ensures nurses can access CPD, with action to be reviewed in a year.
- Chief nurse Jane Cummings immediately writes to nursing directors to check nurses are able to conduct safe patient handovers without 'routinely staying late', as well as having time for breaks.
- A well-being group is formed, to include nurses from all grades and career stages, to design and monitor improvements to nurses' working conditions.
- The 30% student attrition rate be investigated and the causes addressed by universities and NHS providers. Government should hold them to account.
- A 'plain English guide' explaining the scope of the nursing associate role be developed.

Commons Health Committee

Nursing Workforce Review (2)

- NHS England and Health Education England work on an ethical overseas recruitment programme for the short to medium term.
- Language tests be monitored to ensure foreign recruits' English is at an appropriate level.
- Further assurance is provided on retaining EU staff in the UK post-Brexit.
- A nationally agreed data set is developed to ensure a consistent approach to workforce planning including an agreed figure for the nursing shortfall.
- Assessment of future demand be based on demographic and other factors, rather than solely on cost.

New NMC standards for pre-registration education: Implications for current practitioners and service provider organisations

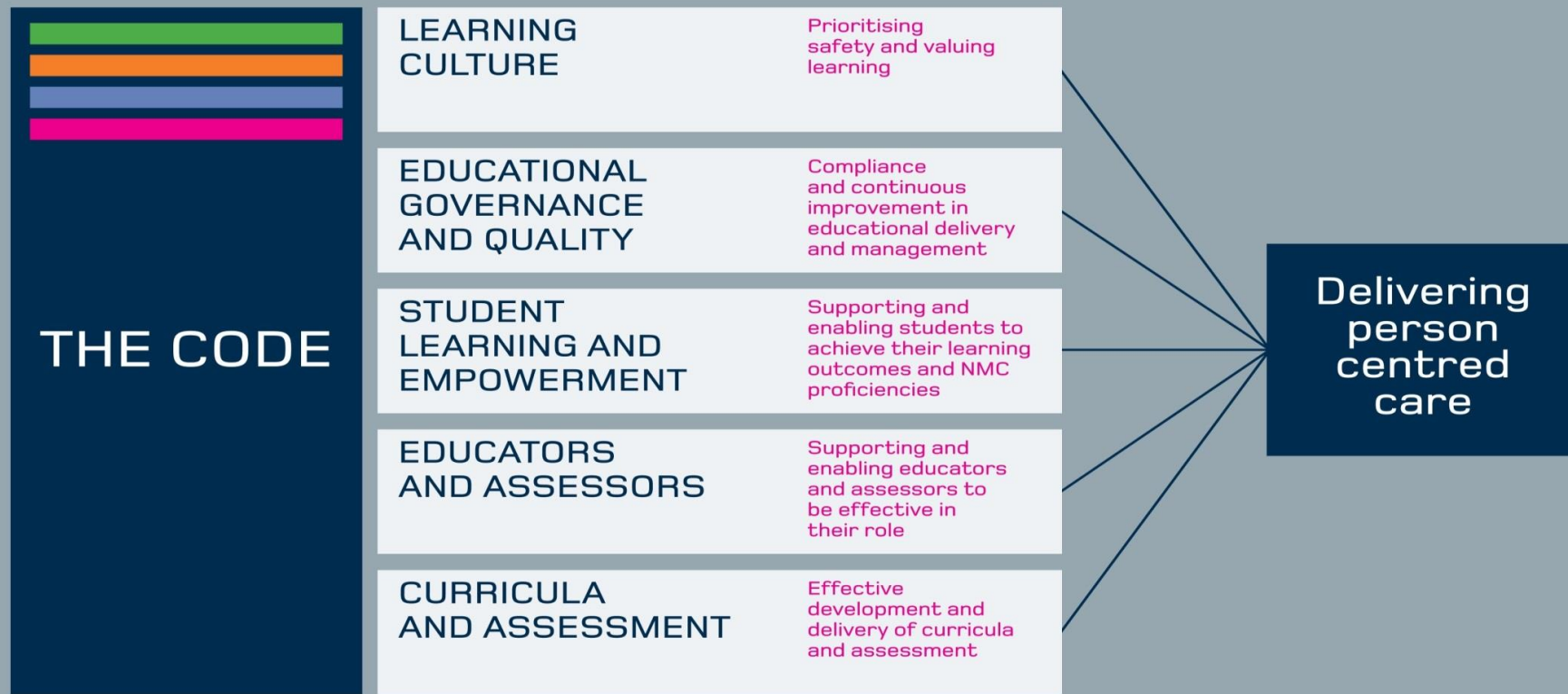
Professor Dame Jill Macleod Clark
Faculty of Health Sciences, University of Southampton
Lead Advisor to the NMC

The new draft documents are:

- Future Nurse: Standards of Proficiency for Registered Nurses and Skills and Procedures Annexes
- Education Framework: Standards for Education and Training for all providers of Nursing and Midwifery Education
- Annexe: Requirements for Learning and Assessment for all Nursing and Midwifery Programmes
- Requirements for Pre-Registration Nursing Education Programmes

The NMC Education Framework

Training and education pillars



The Education Framework (2)

Principles of design:

- Focusses on outcomes and is light on process requirements and light on prescription about 'how' to deliver
- Facilitates providers to be innovative and flexible in order to respond to local needs and environment
- Emphasises shared education/practice partner accountability for education delivery

The Education Standards – implications for existing practitioners

A culture shift

- Every registered nurse will need to see themselves as a potential supervisor of students
- Every existing mentor will need to adjust their focus and share their expertise
- Every registered nurse must become familiar with the new standards of proficiency and supervision and assessment standards
- Every registered nurse will need to reflect on any knowledge and skills gaps – (? role of revalidation)
- Every registered nurse will expect to be supported in responding to change and addressing any knowledge and skills gaps

The New NMC Education Standards: timescale

- “Direction of travel” to NMC Council in January 2018. Council to sign off version for publication at end of March 2018
- Assessment events for 2018 adopters education provider partnerships April – July 2018
- All education provider partnerships to adopt new standards by **September 2019**

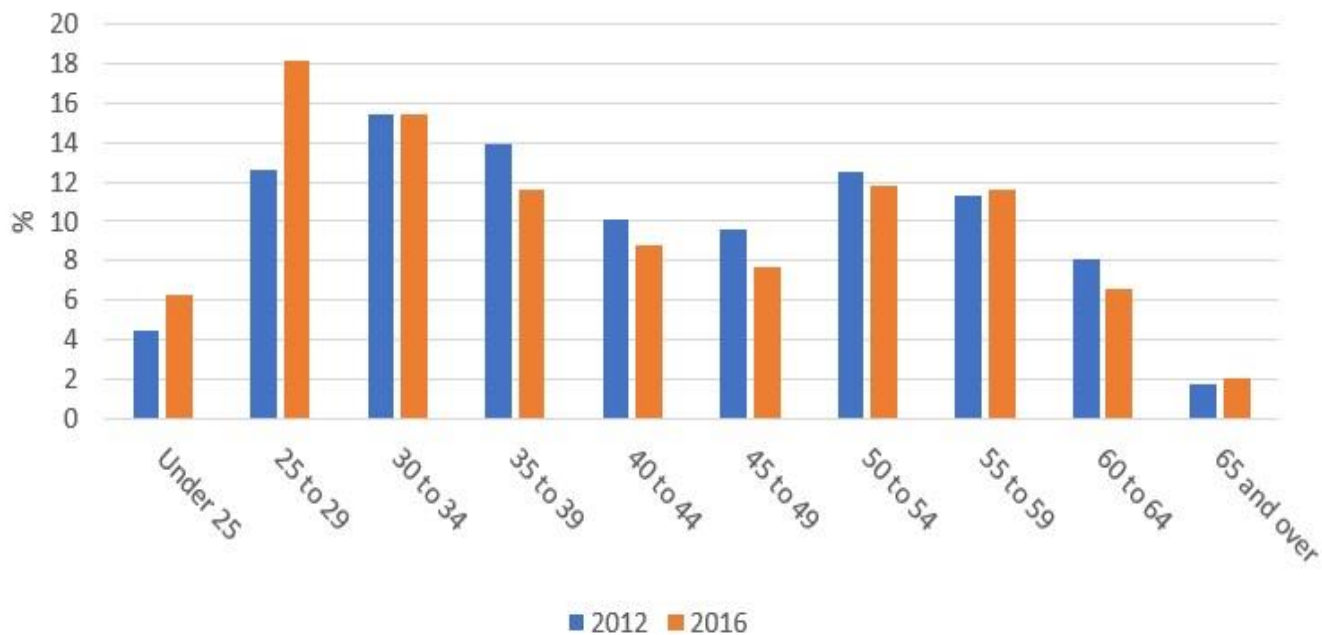
Current SW Nursing & Midwifery Vacancies

- 8,111 WTE posts advertised 10.16- 9.17
- A mean of 676 advertised per month (10.16-9.17)
- 1769 WTE posts advertised yielding 3 applications per post. (1.4.17-30.06.17)
- 320 appointments (1.4.17-30.06.17)



Nurses Leaving the NHS

Proportion of nurses leaving the NHS by age



Workforce Challenges

- **Workforce affordability** - controlling nursing workforce costs, including national agency cap.
- **Workforce supply** – volume, skills and flexibility with a lack of specialist nurses,
- **Recruitment & retention** – some employers and geographies struggle to recruit and retain nursing staff.
- **An ageing workforce** – a large number of nurses that are 50 years and above
- **Portfolio Careers** – younger nurses leaving the NHS

Workforce Challenges

- **Brexit** –implications of Brexit and attrition from EU nationals in future poses a significant risk across nursing roles.
- **NMC registration of EU and Non EU Nurses** – protracted recruitment pathway
- **Non-Medical Commissioning Reform** – Higher Education Institutions now responsible for the volume of non-medical workforce graduates, for summer 2017 supply not increasing as expected
- **Job market** – local markets where other key employers drive employment.
- **Silo workforce** - moving professions to an integrated workforce.

New Workforce Model

- The new workforce model will see multidisciplinary and multi agency teams working together for the benefit of a group of patients with similar health and care needs
- Teams will be built around common patient needs and activities
- Teams will include voluntary sector and expert patient input, promoting self management as well as patient and carer involvement in planning care
- Health promotion and care planning to keep people well will be core activities for all staff, irrespective of where they work
- New roles will be required, and new ways of working for existing staff, supported by training, development and ongoing support
- Rotational posts across the system needed shift from rhetoric to reality.

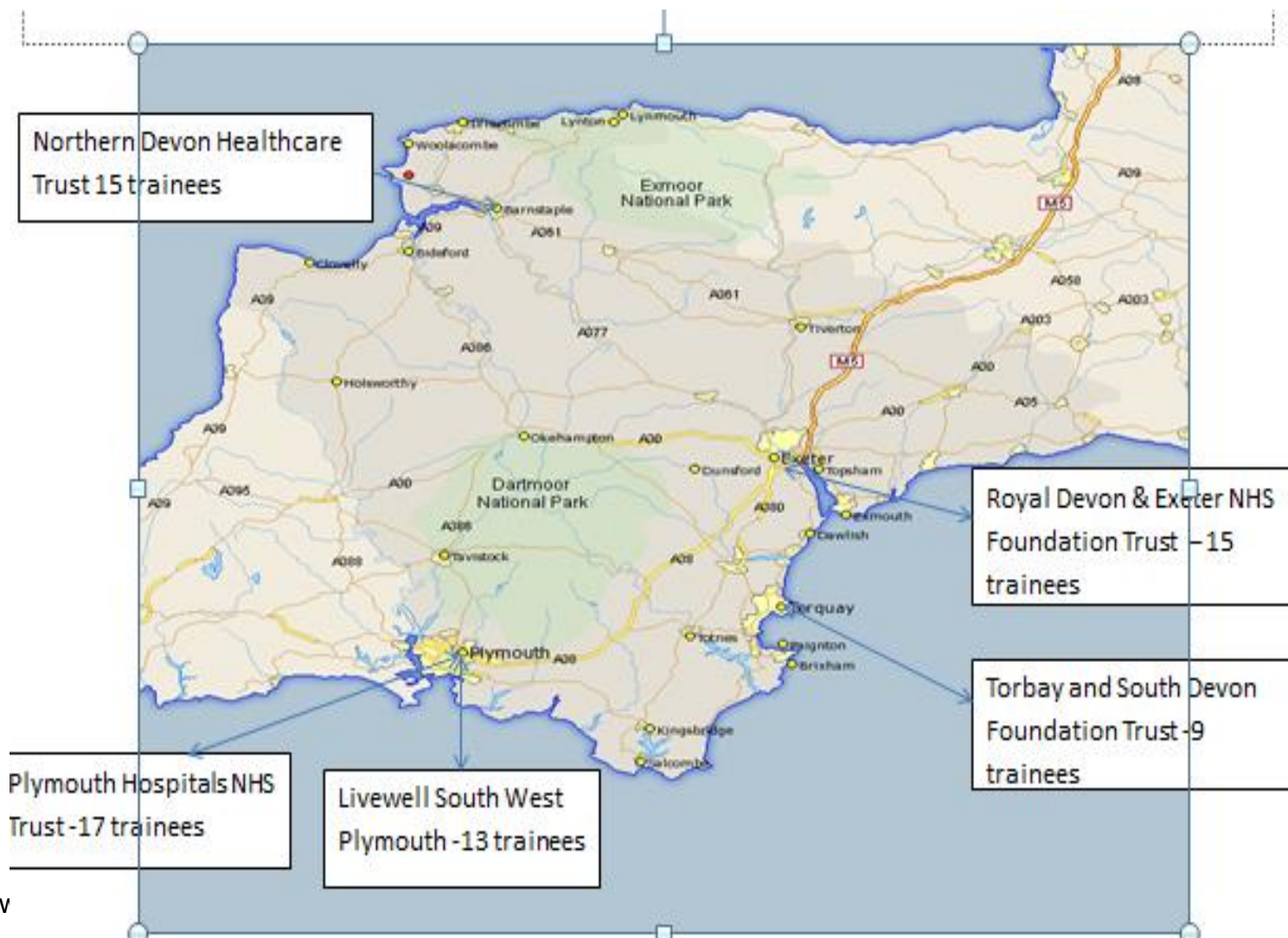
SW Nursing Workforce Initiatives

- Nursing Associate Pilot
- Nursing Apprenticeships
- Post Graduate Education & Nurse Leadership Programmes
- Return to Practice.

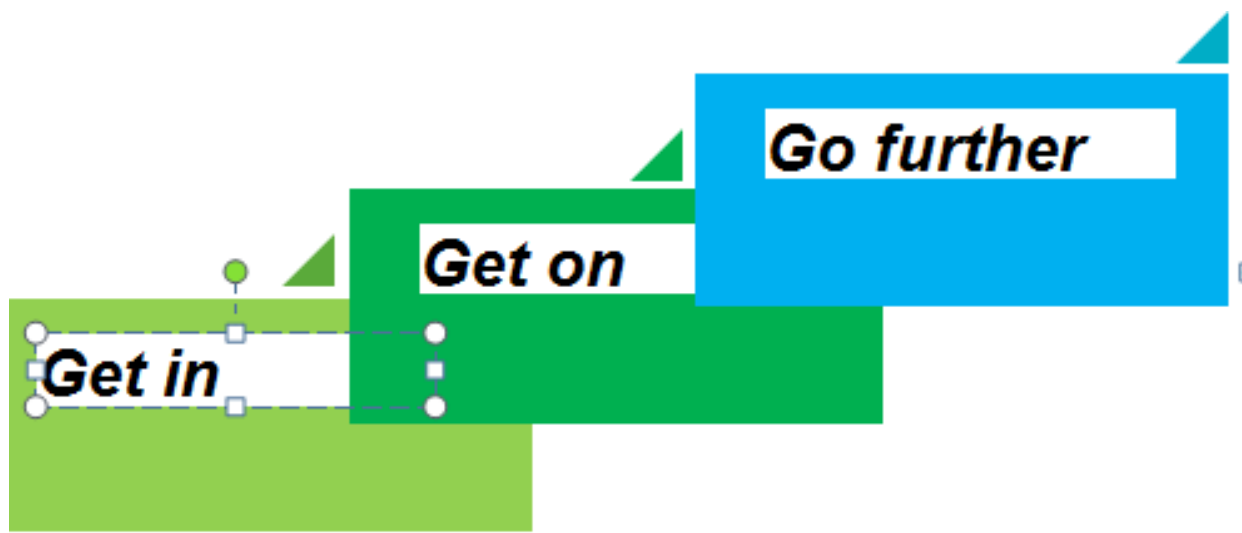
HEE Vision For Nursing Associate

- *The nursing associate role will bridge the gap between health and care support workers (that have a care certificate) and a graduate registered nurse. RN retains responsibility as **primary assessor planner and evaluator of care.***

Devon Nursing Associate Pilot Programme

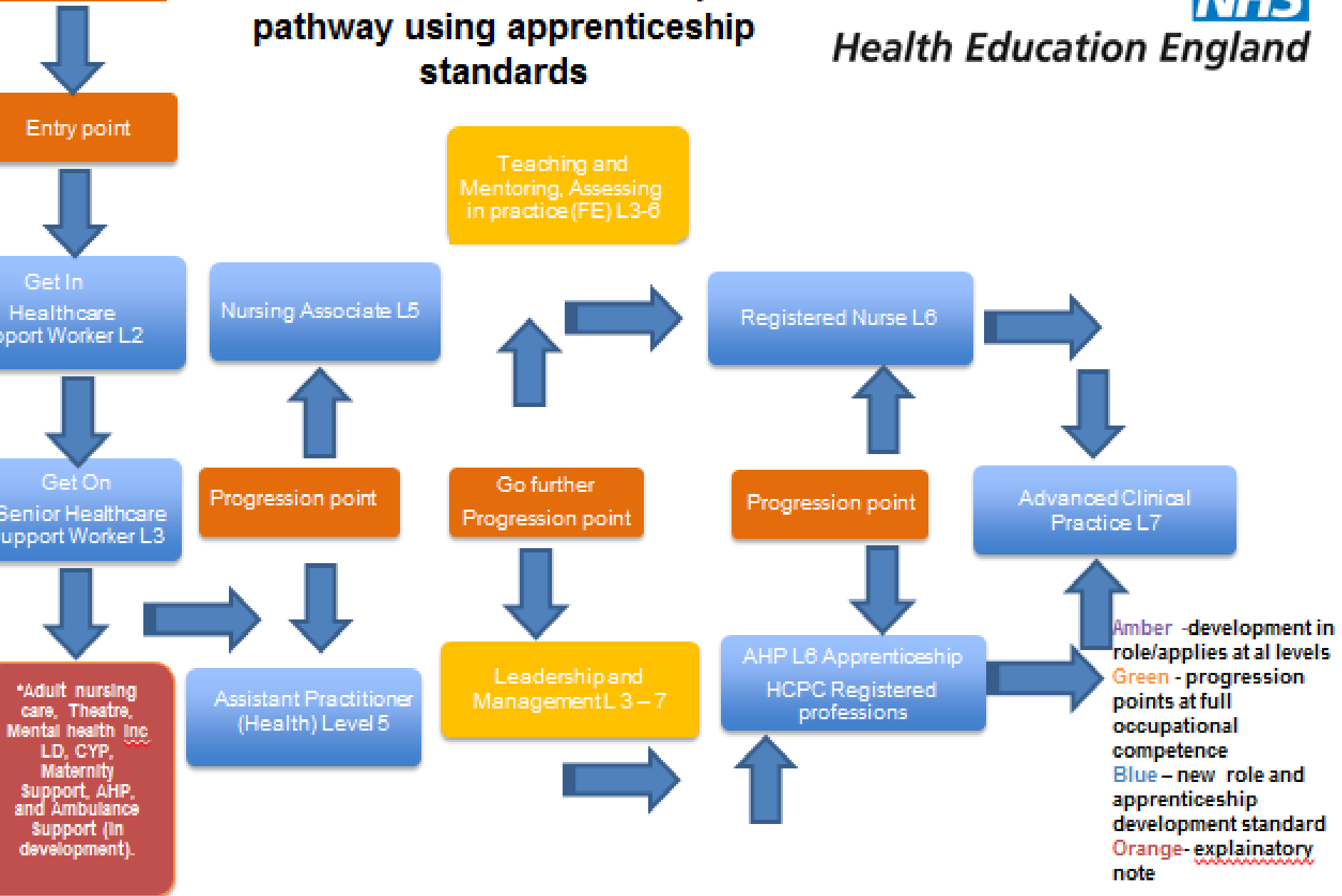


Talent for Care – Apprenticeships



Get ready – WEX etc

Potential Clinical Role development pathway using apprenticeship standards



Registered Nurse Career Pathway

Registered Nurse

Undergraduate degree NMC registration (L6 RN apprenticeship)

Preceptorship

Post graduate practice aligned to best practice guidelines in specialism.

Role progression

Post graduate practice in contextual setting using clinical competency guidance and best practice for speciality: developmental practice guidance aligned to ACP competence framework.

Progression onto ACP L7 apprenticeship with Master's degree aligned to ACP framework definitions.

May include – for example:

Clinical Nurse Practitioner, Emergency Nurse Practitioner, Advanced Nurse Practitioner, Nurse Endoscopist, Advanced Critical Care Practitioner (Adult and Neonatal and Paediatric), Community Advanced Nurse Practitioner.

Post Graduate Education & Development

- NHS Leadership Academy – SW Aspirant DoN Programme.
- Apprenticeships - Leadership and management.
- Sponsored PhD and Research opportunities.
- Developing Non Medical consultant roles (Mental Health)

SW Return to Practice Programmes.

- Employer led model enables funded programme access across care settings- Care homes , acute , community , general practice.
- 90 places per year offered via UWE and Plymouth University.
- Widens access for all areas and good retention and transition to employment.

Turning the Tide



Questions

