

Transforming Roles in Integrated Adult Nursing Teams

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- People at the centre
- Right care, right person, right place, right time
- Integrated teams working with people
- Staff with the right skills, knowledge and behaviours
- Prevention, supported self-management and informed decision making
- Shifting the balance of care –more care at home or in community setting
- Value for money
- Public engagement/involvement
- Enhancing the use of digital technology



<https://www.nes.scot.nhs.uk>

Transforming
Roles
Publications CNO
Directorate

TRANSFORMING ROLES

Aims

- *Strategic oversight, direction & governance to the development & transformation of nursing roles to meet current and future needs of Scotland's health & care system*
- *Ensure nationally consistent, sustainable & progressive nursing roles & career pathways*

Priorities – Phase 1

- Community nursing teams – adults and children
- Advanced nursing practice
- National approach to postgraduate education and development
- Supporting Health and Social Care Integration at the point of contact

Principles:

- Responding to population need
- Tackling inequalities
- Maximising public health approach
- Prevention & early identification
- Outcomes focused
- Promoting independence
- Relationship based care – ‘good conversations’
- Promoting choice, continuity and control
- Promoting personalised care
- Approaches that encompass health, social care, wellbeing.
- Build on individual and community assets

Programme Phases

1st Phase – Advance Practice (Acute, Children/neonates, Mental Health and community and primary care)

Community Nursing including Health visiting, District Nursing, General Practice, School Nursing

2nd Phase – Widened to include **Advance Practice** for AHPs, Midwives and Healthcare Scientists,

Physician Associate Role

Clinical Specialist Nurses/Nurse Practitioners

The development of 3 Regional academies for Advance Practice

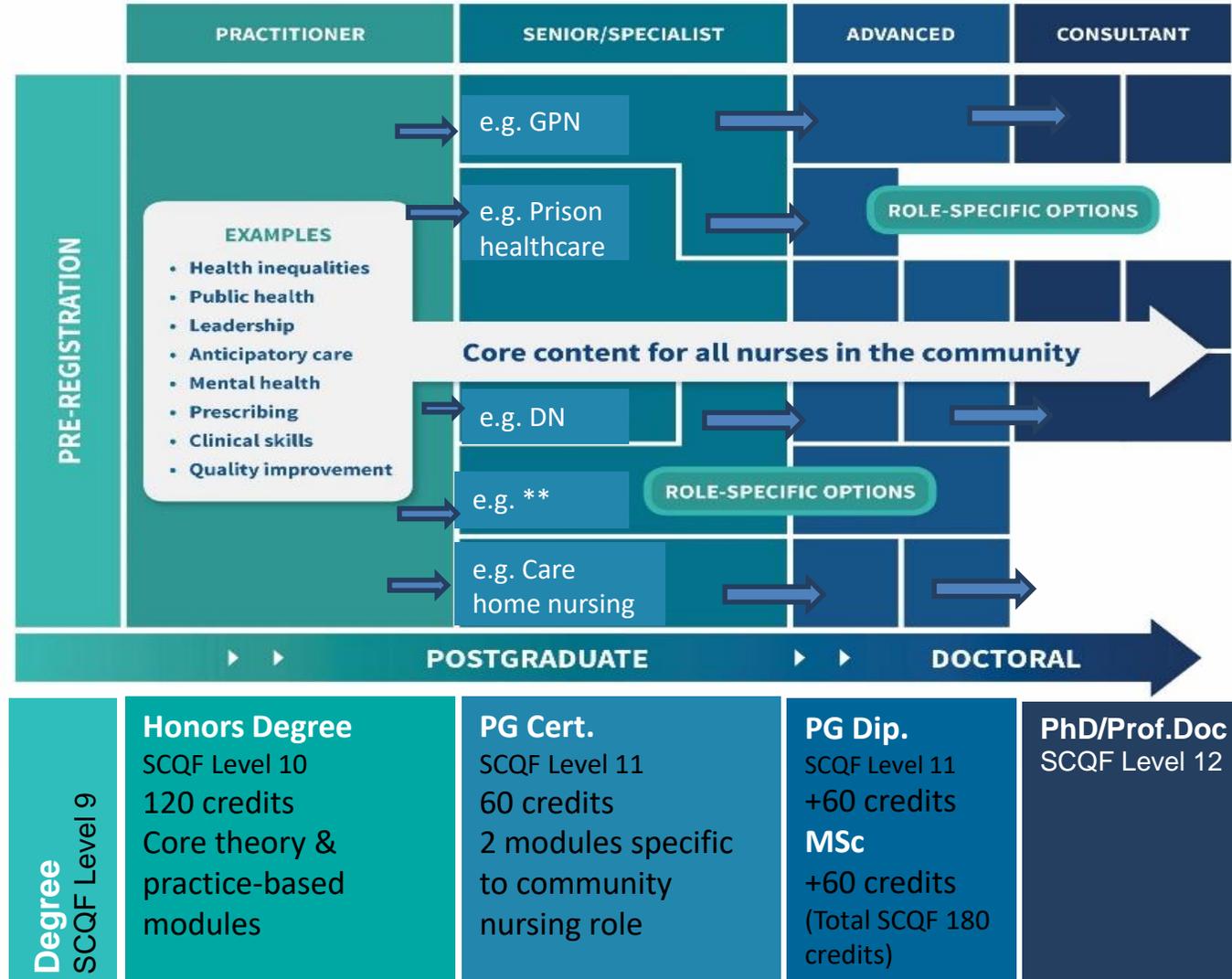
3rd phase

Registered Nursing care homes

Prison Health Nursing

NES Education and Career Pathway

Integrated education pathway for district nursing, general practice nursing, care home nursing and other nurses within the adult integrated community nursing team



** Other pathways could include community mental health, community children's and community learning disabilities nurses

Advance Nurse Practitioners

Definition/Education/level of practice

An Advance Nurse Practitioner is an experienced and highly educated Registered Nurse who manages the complete care for their patients.

Four pillars of practice define the role and function of the ANP.

- Clinical Practice
 - Leadership
 - Facilitation of learning
 - Evidence, Research and Development
- Education Level – Postgraduate Diploma/Masters
- Level 7 Practice

Core Competencies

- Comprehensive History taking
- Comprehensive Clinical Assessment – physical, mental and social
- Differential Diagnosis – based on synthesis of clinical findings
- Investigations - freedom and authority to request diagnostics tests/investigations based on differential diagnosis and interpret and analyse previously requested tests working collaboratively with other Health care professionals
- Treatment – Formulates an action plan for treatment
- Independent prescriber – also implements non-pharmacological interventions/therapies, dependent on the situation and technical requirements of care
- ANP – must be able to initially and independently manage a broad range of presenting conditions.

ANP – 2nd Phase Focus

- Core competencies for Acute, Primary Care, Mental Health and Paediatric/Neonates.
- Metrics
- Non-clinical time
- Supervision
- Role/function of Advance Practice Academies

Senior Practitioner Roles

- Level 6 Practice
- Min – Hons level or Post Graduate certificate/Diploma
- Skills and competencies include Advance clinical assessment skills and prescribing
- Roles include – GPN's (senior practitioner roles), District Nurses, Clinical Nurse Specialists, Nurse Practitioners in specialty areas e.g. minor injuries, emergency medicine, coronary care practitioner etc

General Practice Nursing

Core areas of the General Practice Nursing Role

- Public health including primary, secondary prevention and health inequalities.
- Care and support planning including anticipatory care
- Assessment of illness and injury
- Long term conditions management
- Complexity and frailty within integrated community teams
- Mental health and well-being
- Nursing across the life cycle

Level of Practice	Job Title	Definitions	Level of Learning
2-4	Health Care Support Workers	Work across individual healthcare disciplines under the direction and professional accountability of registered practitioners.	Level 6 / 7
5	General Practice Nurse	Responsible for delivery of general practice nursing services, within the professional competence of the post holder, to the whole practice population.	Level 9 or 11
6	Senior General Practice Nurse	Have a higher degree of clinical decision making, autonomy and responsibility than general practice nurses in the clinical environment.	Level 11
7	Lead General Practice Nurse	Have advanced skills in long term condition management. Involved in the delivery and planning of safe and effective nursing care to the whole practice population. Leads and manages a nursing team working closely with the practice manager and GPs to deliver practice priorities.	Level 11
7	Advanced Nurse Practitioner	The Chief Nursing Officer's Transforming programme has set out a nationally consistent approach to advanced nursing practice. ANPs are competent to work at advanced level as part of multidisciplinary teams across all clinical settings, dependent on their area of expertise. They are clinical leaders with the freedom and authority to act and accept responsibility and accountability for those actions. The role is characterised by high-level autonomous decision-making, including assessing, diagnosing and treating (including prescribing for) patients with complex multidimensional problems. https://www.gov.scot/Publications/2017/12/3061/1	Level 11
8	Consultant Nurse	Consultant nurses work at a very high level of clinical expertise and have responsibility for contributing to national, as well as local, developments in their recognised area of expertise. The role is structured around four key themes clinical/professional leadership, expert practice, policy and service development, research and evaluation; and education and professional development.	Level 11/12

Summary of Key Recommendations

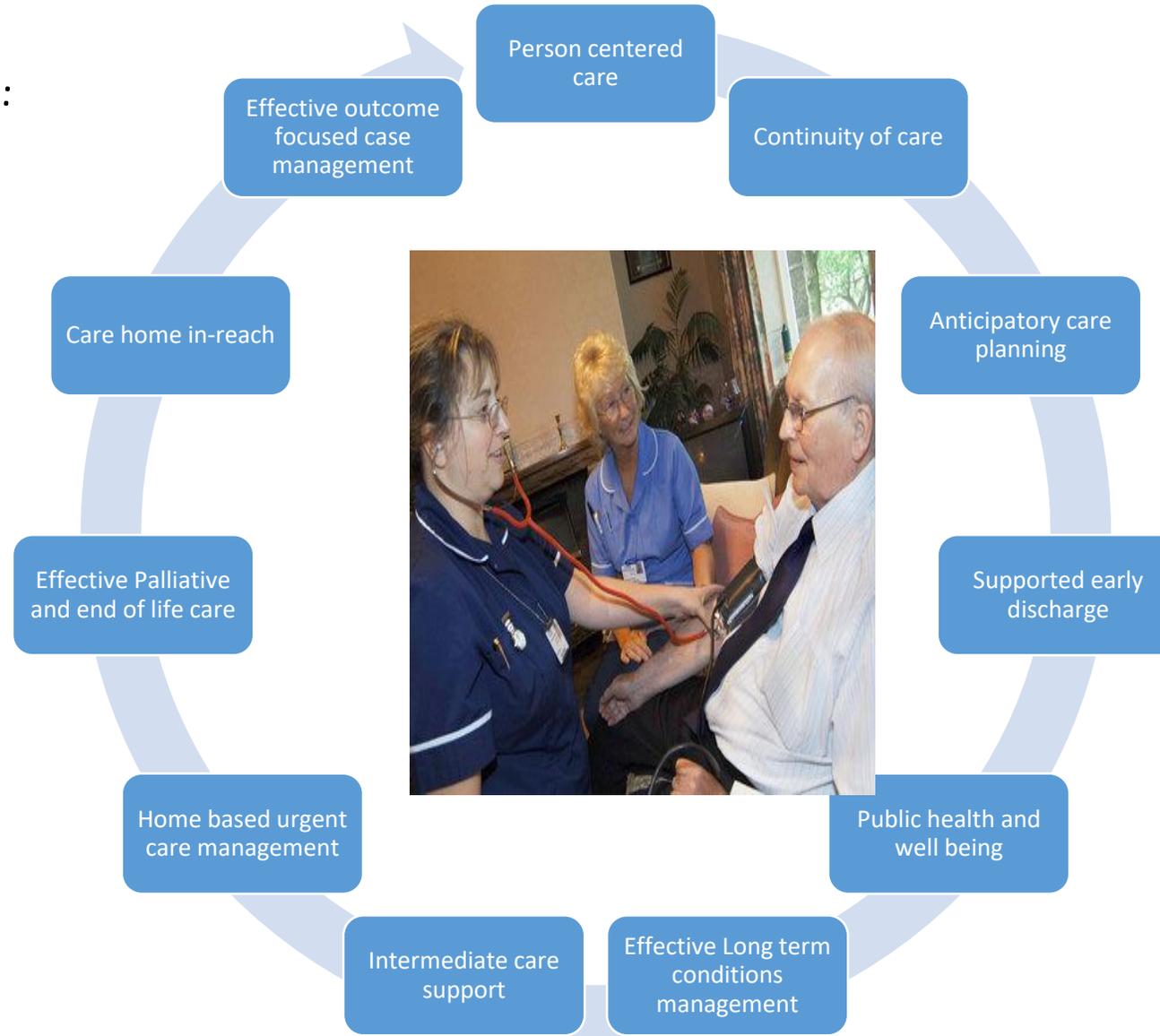
- Nurses working in general practice must be embedded into existing nursing governance structures, with clear lines of responsibility and accountability leading through the professional nursing line, up to the Executive Nurse Director. This responsibility may be delegated as appropriate.
- For those established practitioners within general practice and NHS Boards, it is recommended that their role is mapped to the refocused role descriptions and levels of practice with local arrangements agreed to meet any gaps in competence and capability.
- It is recommended that the impact of the refocused role of nurses working in general practice is aligned to the Excellence in Care programme. This will ensure consistency of measurement and quality across the nursing workforce within the primary care setting.

Refocused District Nursing Role

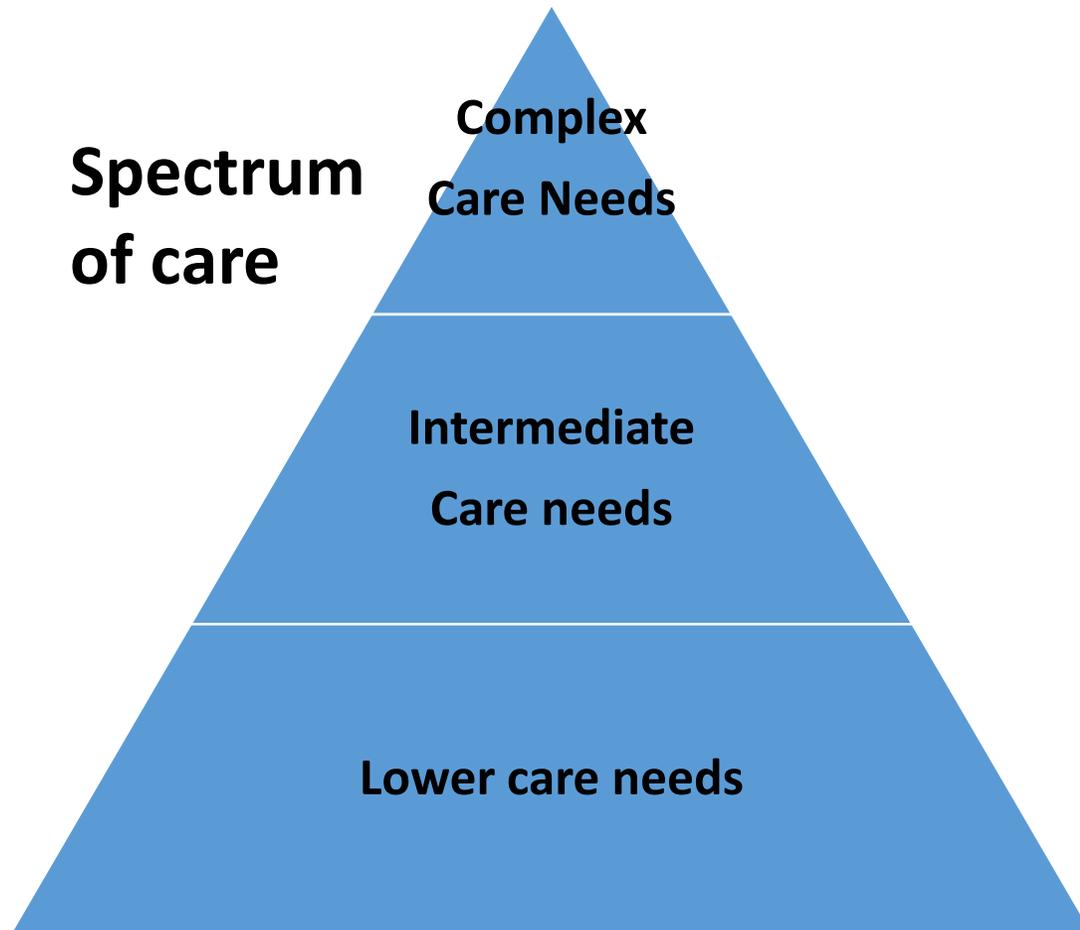
District Nursing - Key Roles and functions

Refocused role includes:

- Prescribing
- Advanced Clinical Assessment



Refocused District Nursing Role in an Integrated H&SC system



Key leadership role in:

- Public Health
- Anticipatory care planning
- Prevention –promoting health and well being
- Early intervention
- Supported self-management
- Complexity/frailty
- Intermediate care
- Palliative and end of life care

Models of Care / Tests of Change

- NUKA Health Care
- Canterbury Health Care
- Buurtzorg/neighbourhood care
- House of Care
- Community Lead Support
- The Life Curve
- Frailty and end of life care pathway

GP Contract MoU Priority Areas

- Community treatment & care services
- Pharmacy/prescribing
- Community Link Worker
- Other (MSK) dermatology
- Urgent care

Policy Drivers

- *Health & Social Care Delivery Plan (2016)*
- *National Workforce Plans pts 1,2,3 (2017/18)*
- *Realistic Medicine (2015)*
- *Clinical Strategy (2016)*
- *New GP Contract (2018)*
- *Chief Nursing Officer, Transforming NMAHP Roles Programme (2016)*
- *Digital strategy*

HOW CAN WE?

- Create the paradigm shift to increase care at all levels within the community to shift the balance of care?
- Achieve this 24/7?
- Improve continuity and reduce fragmentation/transitions for older people and people with complexity within our communities?
- Develop care and well-being pathways for older people and people with complexity in the community?
- Develop a health and social care collaborative for older people?
- Incorporate the best from Tests into a 'one team approach'?

Building Sustainability and Resilience within Integrated Urgent Care Workforce in NHS Fife

Olivia Robertson Lead Nurse Urgent Care Service Fife



Transforming Urgent Care Workforce NHS Fife National Drivers



2030 NURSING
A VISION FOR NURSING IN SCOTLAND

NURSING 2030 VISION:
PROMOTING CONFIDENT, COMPETENT AND COLLABORATIVE NURSING FOR SCOTLAND'S FUTURE



Advanced Practice: Achieving Consensus A Toolkit Approach

www.advancedpractice.scot.nhs.uk

Pulling together: transforming urgent care for the people of Scotland

The Report of the Independent Review of Primary Care Out of Hours Services

Main Report

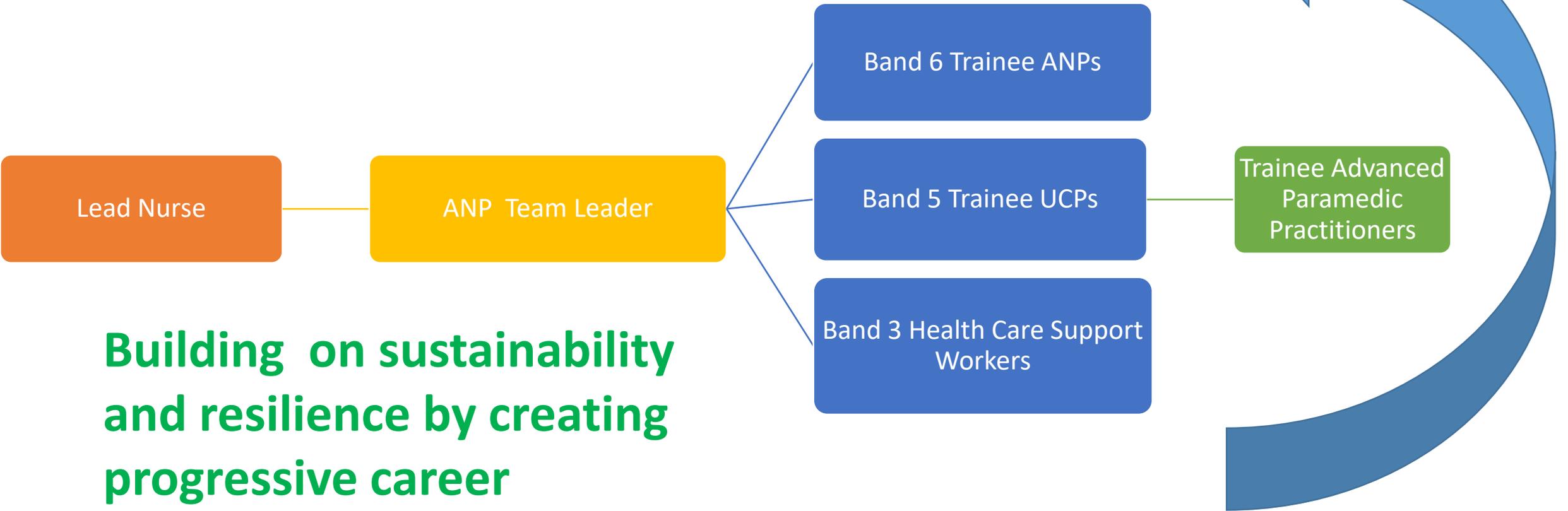
For more information on the National Review, please visit the Scottish Government website:
<http://www.gov.scot/topics/health/services/nrpool>

Aims

- Develop a workforce fit for the future in line with CNO's Nursing Vision 2030
- Meet the service recommendations of Ritchie Report 2015
- Build sustainability and resilience within current Urgent Care workforce
- Develop the nursing workforce by creating progressive career pathways
- Develop a fully integrated workforce model
- Provide clinically excellent care which is accessible, integrated and responsive to the people of Fife



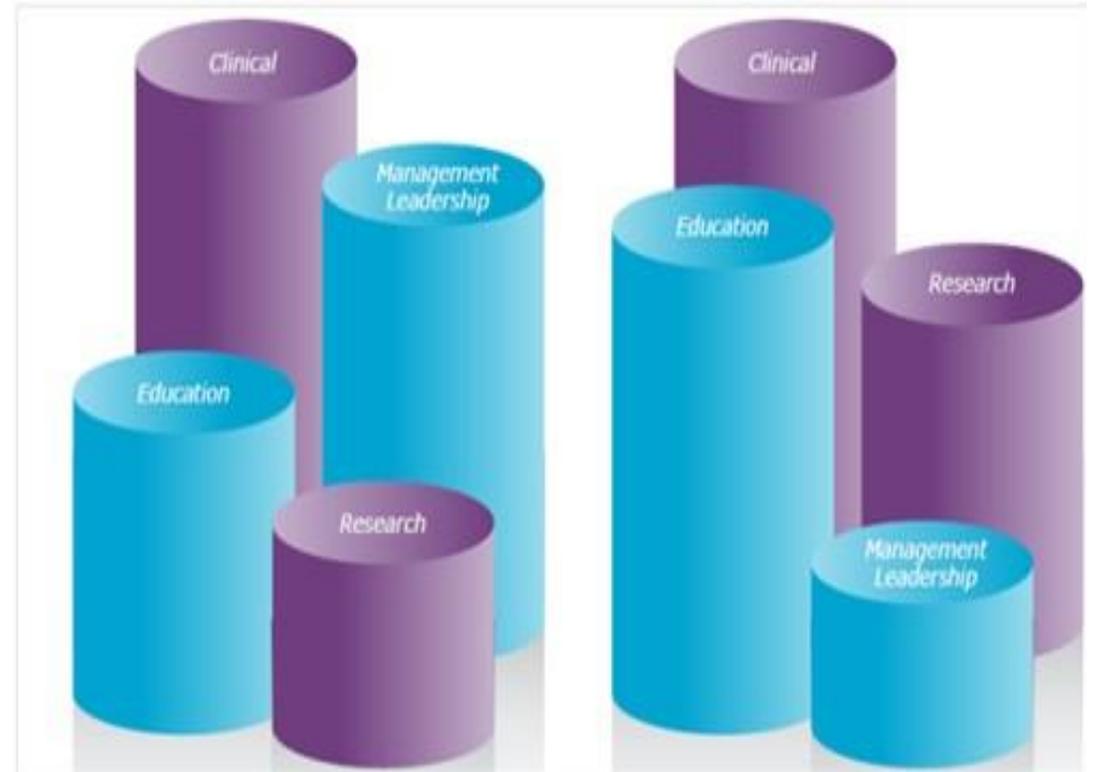
Workforce Structure



Building on sustainability and resilience by creating progressive career pathways

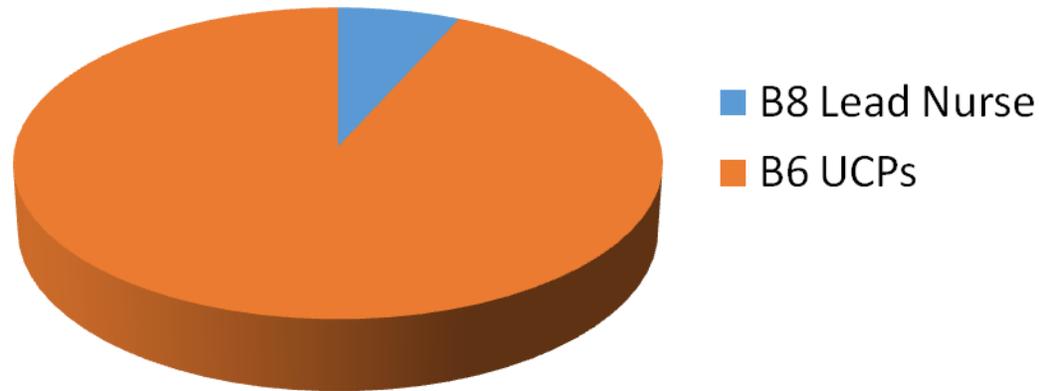
Methodology

- Leadership and Management commitment to programme of professional development for all staff
- Trainee B5 UCPs study Minor Illness and Minor Injury SCQF Level 11
- 1 year programme inc structured practice based learning moving from direct to indirect supervision & aligned to knowledge and skills framework. Trainees transition to B6 upon evidence of completion
- Trainee B6 ANPs working towards Pg Dip Advanced Practice SCQF Level 11 (on Annexe 21)
- ANP/GP Mentorship using structured clinical supervision and clinical effectiveness tools
- Trainee Paediatric Nurse Practitioner –Pg Dip Advanced Practice (specialty) Napier University
- Development of the practice placement. Mentorship support to trainees and student nurses
- B3 Health Care Support Workers studying SVQ Level III at West Lothian College in partnership with Modern Apprenticeship Scheme

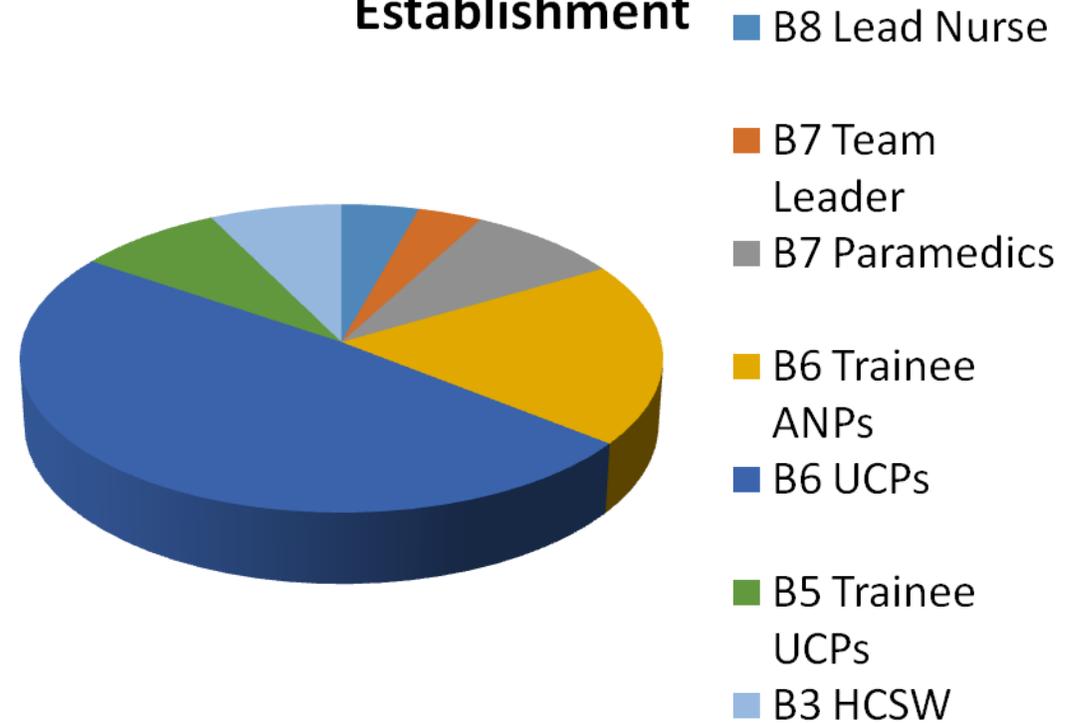


Creating a fully integrated workforce

**Previous WTE Staffing
Establishment**



**Current WTE Staffing
Establishment**



What's next?

- Development and implementation of independent home visiting
- Development of the Clinical Coordinator role
- Development of nurse led Confirmation of Death within the community
- Building on integrated workforce model with Scottish Ambulance Service
- Conducting full rota review which meets full integrated workforce model
- Succession planning and maintaining business continuity

Any questions?

