



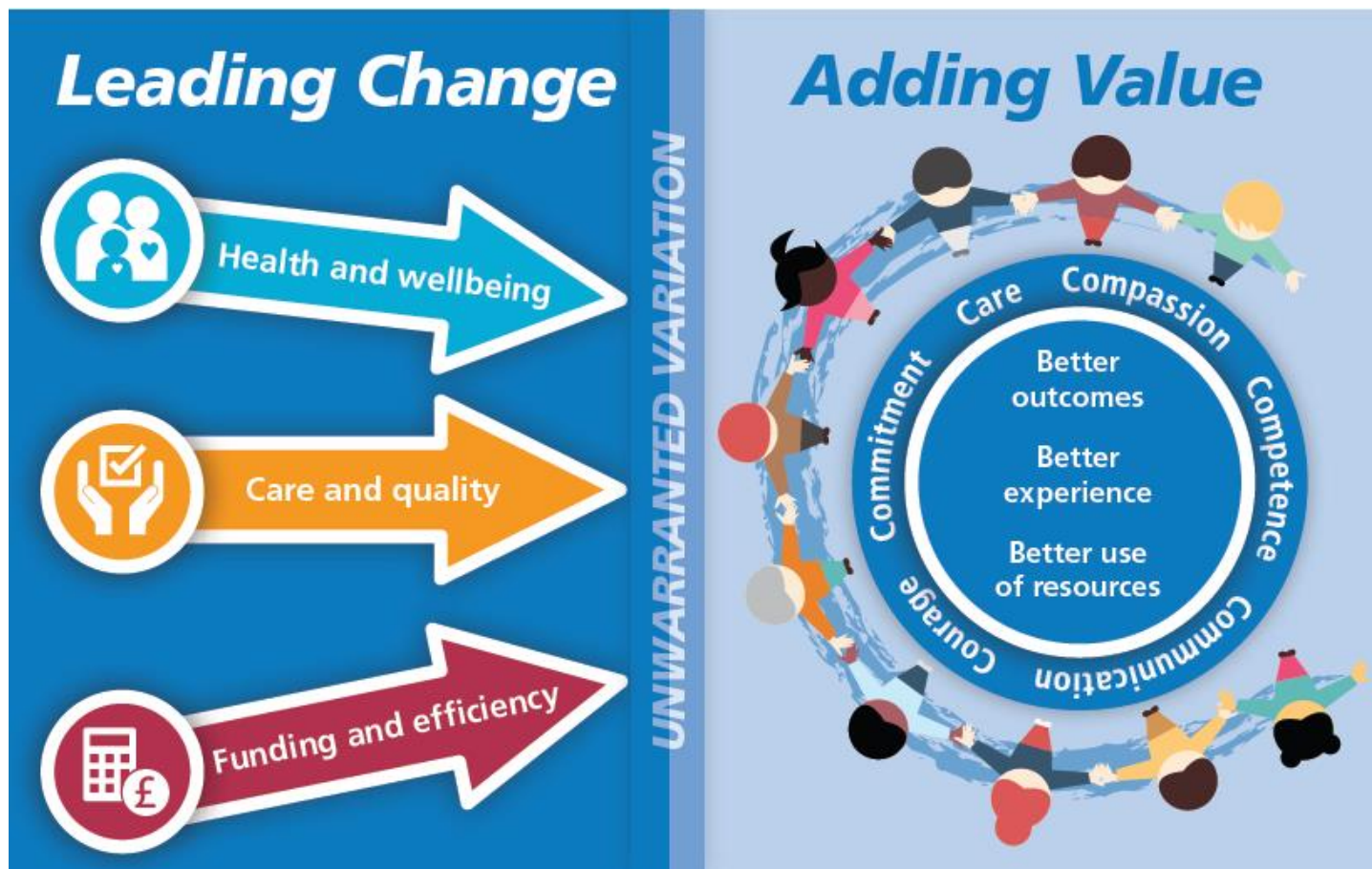
Nursing Training & Education Session

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Chief Nursing Officer
23 March 2017

Recognise, Reform, Rethink



Leading Change, Adding Value



<https://www.england.nhs.uk/wp-content/uploads/2012/12/compassion-in-practice.pdf>
<https://www.england.nhs.uk/wp-content/uploads/2016/05/nursing-framework.pdf>



Recognise, Reform, Rethink:

The General Practice Nursing Workforce Development Plan:

The Summary of Recommendations

(In 4 sections – spot the deliberate mistake!)

Section 1

Recommendation 1: Raise the profile of general practice nursing careers:

A nationally co-ordinated campaign to increase the understanding of the value given to the general practice nursing role across all healthcare organisations, schools, colleges and the general public.

Recommendation 2: Increase the number of pre-registration nurse clinical placements in general practice.

Recommendation 3: Introduce quality assurance of the learning environment in general practice for pre-registration nurses. The *HEE Quality Framework* and regulatory processes must be adopted across England.



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*Ipswich and East Suffolk
Clinical Commissioning Group*

Section 2

Recommendation 4: Increase the uptake of general practice nursing as first destination employment for newly-qualified nurses. Review and develop recruitment schemes and support mechanisms to specifically attract newly-qualified nurses into general practice.

Recommendation 5: All new entrant nurses and support staff to general practice have access to an approved employer-led induction programme. This must be tailored to meet local need, accompanied by a personalised continuing professional development (CPD) plan.

Recommendation 6: All new nurses to general practice must receive a standardised and accredited competency based preceptorship programme to equip them for their general practice nursing role. Such preceptorship programmes should reflect the HEE Preceptorships Standards and the HEE. Preceptorship Outcomes Framework and be mapped to the Royal College of General Practitioners General Practice Foundation, RCN (2012 updated 2015) General Practice Nurse Competencies and the NMC Code.

Recommendation 7: GPN educator roles should be developed to cover all CCG areas. Their role should include promoting mentor training for all GPNs including sign off mentor roles. Joint higher education and primary care initiatives to further develop mentorship programmes and include registration on local mentor registers. This is critical to growing the capacity of nurse education in a general practice setting.



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Section 3

Recommendation 8: All GPNs should have access to accredited training to equip them for each level of their role. Training should be aligned with the RCGP General Practice Foundation, General Practice Nurse Competencies, HEE District Nursing & General Practice Nursing Services Education & Career Framework (2015), supported by the HEE National Education Commissioning Specification and the QNI/QNIS Voluntary Standards for General Practice Nurse Education and Practice. GP leaders and commissioners should work with HEE to achieve a coalition of support for HEE taking on this role with appropriate resourcing.

Recommendation 9: All GPNs and HCAs should have access to quality assured CPD to support career development and inform revalidation if appropriate. This should be based on practice population health needs and individual annual appraisal, including skills training to conduct consultations other than face to face, using IT platforms.

Recommendation 10: Improve general practice nursing retention by implementing measures to encourage nurses at all levels to remain within practice.



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Section 3 (continued)

Recommendation 11: Every nurse considering a return to general practice nursing should be offered a general practice specific 'return to practice' programme. There must be a nationwide standardised general practice nursing 'return to practice' education programme which includes a general practice placement, mentorship and appropriate support to meet the NMC requirements for 'return to practice'.

Recommendation 12: All CCG areas should have identifiable GPN leaders. General practice nursing leadership should be supported by multi-professional leadership development programmes at local, regional and national level.

Recommendation 13: Actively promote the development of general practice nursing clinical academic careers. Stimulate the development of clinical academic careers by promoting and enabling a culture in general practice nursing that embraces research and innovation to inform and champion changing health needs and deliver care excellence.



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Section 4

Recommendation 14: Increase the number of HCAs in general practice to include widening participation schemes that encourage use of the HCA apprenticeship route and support the emerging role of the nursing associate.

Recommendation 15: All HCAs in general practice care settings must hold the Care Certificate.

Recommendation 16: All education and training for HCAs in general practice must be aligned to the Royal College of General Practitioners (2015) Healthcare Assistants (General Practice) Competency Framework and the HEE District & General Practice Nursing Services Education & Career Framework (2015).



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Section 5

Recommendation 17: The development of a national sustainable and easily accessible ‘how to’ toolkit and practical web based resource to support the implementation of general practice workforce initiatives as outlined in this document.



NHS RightCare programme

NHS England is investing in this programme to enable every health economy in England to embed the NHS RightCare approach at the heart of their transformation programmes.

It is a programme committed to improving people's health and outcomes. It makes sure that the right person has the right care, in the right place, at the right time, making the best use of available resources.

NHS RightCare is all about:

- **Intelligence** – using data and evidence to shine a light on unwarranted variation to support an improvement in quality
- **Innovation** – working in partnership with a wide range of organisations, national programmes and patient groups to develop and test new concepts and influence policy
- **Implementation and improvement** – supporting local health economies to carry out sustainable change.

<https://www.england.nhs.uk/rightcare/programme/>



NHS Right Care

“

There is no doubt that transparency of data, transparency of difference and transparency of variation promotes change and improvement. The RightCare programme places the NHS at the forefront of addressing unwarranted variation in care.

Professor Sir Bruce Keogh, National Medical Director, NHS England

”

NHS RightCare makes sure local health economies:

- **make the best use of resources** – offering better value for patients, the population and the tax payer
- **understand how they are doing** – by identifying unwarranted variation between demographically similar populations
- **get talking about the same stuff** – about healthcare rather than organisations
- **focus on the areas of greatest opportunity** by identifying priority programmes which offer the best chances to improve healthcare for populations
- **use tried and tested processes** to make sustainable improvement to care to reduce unwarranted variation.

<https://www.england.nhs.uk/rightcare/programme/>

