



Case Study: Developing placements to support Pre-Registration Learning Disability Nurse students in Non NHS Organisations

The North West Placement Development Network (NWPDN) works in partnership with Higher Education Institutes (HEIs) and Practice Education Facilitators (PEFs) based in healthcare provider organisations to maximise the multi-professional utilisation of all placement areas across the NHS and non-NHS organisations. This will ensure the delivery of a future workforce compliant with the Fitness for Practice, Fitness for Award and Fitness for Purpose guidance to support 21st Century Healthcare.

The following project describes how the network developed a placement area to support Pre-Registration Learning Disability nursing students within Future Directions CIC, a specialist community interest company based in the North West of England with the experience and expertise in delivering social care services to individuals with Learning Disabilities and complex needs.

Key Outcomes

• Increased capacity by two at any one time to support formative and summative assessment.

• Learners have the opportunity to experience a broad range of learning experiences when providing support to tenants with Learning Disabilities who have complex needs.

- Ensures the future workforce has the right skills and competences to deliver effective values based care and services.
- Accreditation as an approved placement provider by a local Higher Education Institution.

Background

Future Directions CIC, previously part of an NHS Foundation Trust until April 2015, are a specialist community interest company with the experience and expertise in delivering social care services to individuals with learning disabilities and complex needs. With a knowledgeable, experienced and skilled workforce they are committed to delivering high quality personalised care and support. Throughout the culture of the company, the people they support, their families and carers are at the centre of everything they do.

Future Directions CIC employs over 250 staff and currently provides services across eight locations in the North West of England. They are registered with the Care Quality Commission to ensure care provided for supported living, domiciliary care, personal care and non nursing care to individuals in care homes is maintained to a high standard. Investing heavily in all employees by delivering high quality training specific to the people they support, meeting the requirements of Skills for Care, they are committed to the development of the next generation of nurses and social workers.

Quality placements approved by HEIs in the North West of England are available. Social work students may be offered an onsite Practice Educator. They have eight mentors to provide support to nurse learners; four of these are Sign Off Mentors, which could support future recruitment of Learning Disability Nurses.

The NWPDN is committed to supporting the new Agenda for Health and Social Care and understand that implementation of the following is paramount:

• Transforming Care: A national response to Winterbourne View hospital (DH, 2012)

• Winterbourne – Time for Change Transforming the commissioning of services for people with learning disabilities and/or autism. A report by the Transforming Care and Commissioning Steering Group, chaired by Sir Stephen Bubb – 2014

• Delivering high quality, effective, compassionate care: Developing the right people with the right skills and the right values. A mandate from the Government to Health Education England: April 2015 to March 2016 (DH, 2015) The events at Winterbourne View triggered a wider review of care across England for people with Learning Disability / Challenging Behaviour.

The interim report of the Department of Health review published in June 2012 found that:

- Too many people were placed in hospitals for assessment and treatment and staying there for too long.
- People should have access to the support and services they need locally, near to family and friends.
- There was widespread poor quality of care, poor care planning, lack of meaningful activities to do in the day and too much reliance on restraining people.
- Concerns were raised about the quality of person centred planning, involvement of individuals and families in developing their care plan, and in ensuring personalised care and support.

The report identifies actions for health and local authority commissioners working together to transform care and support for people with learning disabilities or autism who also have mental health conditions or behaviours viewed as challenging.

Good practice guidance emphasised:

- Commissioners to ensure services meet the needs of individuals, their families and carers.
- Personalisation and prevention in social care.
- Commissioners should ensure services can deliver a high level of support and care to people with complex needs or challenging behaviour; and services/support should be provided locally where possible.

Children, young people and adults should live in their own homes with the support they need for independent living within a safe environment. Evidence shows that community-based housing enables greater independence, inclusion and choice, and that challenging behaviour lessens with the right support. People with challenging behaviour benefit from personalised care that is harder to provide within larger settings.

Sir Stephen Bubb, Winterbourne View – 'Time for Change' (2014), proposed the following reforms:

- The closure of inappropriate institutions and increasing community provision.
- The Government should legislate for a Charter of Rights for people with learning disabilities and their families.
- To give people with learning disabilities and their families a 'right to challenge' decisions and the right to request a personal budget.
- A requirement for local decision-makers to follow a mandatory framework that sets out who is responsible for which services and how they will be held to account, including improved data collection and publication.
- Improved training and education for NHS, local government and provider staff.
- To start a social investment fund to build capacity in community-based services, to enable them to provide alternative support and empowering people with learning disabilities by giving them the rights they deserve in determining their care.

In October 2015 NHS England (NHSE) published a closure programme. Bubb welcomed NHSE's October announcement and subsequent commitments as step changes in progress. NHSE proposals were based on there being 2,600 people in institutional units. Research since shows that this figure could be as much as 33 per cent higher at nearly 3,500.

Following consultation with carers, relatives and people with learning disabilities, Bubb 2014 produced his findings in 'Time for Change - The Challenge Ahead', suggesting that 10,000 extra members of staff will be needed to support people in their own community and that these staff need to be trained and equipped for the task. With at least 1,300 people expected to move out of hospital care by 2019, the report details the critical need to deliver housing for the vulnerable and how this might be delivered.

The delivery of high quality care can only happen if the staff employed to undertake this work are suitably trained and competent to undertake their roles. Providers of care are responsible for ensuring that they have the right staff, in the right place, at the right time and with the right values, behaviours and awareness of different cultures to provide safe and high quality care (Dept Of Health, 2015).

Health Education England (HEE) propose recruitment, education, training and development of the workforce results in patients, carers and the public reporting a positive experience of care that is consistent with the values and behaviours identified in the NHS Constitution.

In order to achieve this HEE are working with healthcare providers, regulators and educational institutions to ensure recruitment processes, education and training curricula identify and consistently reinforce these values.

HEE will continue to promote higher education institutions' use of values based recruitment of applicants to nursing degree programmes, which should include providing evidence of commitment and suitability to a career in nursing.

The delivery of training should reflect an increased need to deliver healthcare in multidisciplinary teams and student placements should be based on high quality outcomes. Students should receive an appropriate level of support to ensure that they are able to provide safe and effective care as part of their supervised training. Feedback from students to placement and education providers will provide an opportunity to address quality issues, monitoring and acting on feedback to measure effectiveness of their education and training. Staff and student feedback will be forwarded to the Care Quality Commission within one month of receiving it where concerns are raised.

Placements should be supported through the engagement of employers and supervision of students. The role of the 'educator', in the context of delivering excellent education and training, is an essential part of the healthcare professional's role and responsibilities.

With regards to Future Directions CIC, placement for Pre-Registration nursing students are supported by social care staff and Registered Nurses with a recognised Mentor qualification.

Key Aims

• Ensure there are enough appropriate placements to support learning disability pre registration nursing curriculum.

• Placements need to be developed and sustained to ensure Pre-Registration nursing students possess the right skills, values and behaviours.

• Ensure professional accountability is being achieved in terms of advancing students within the profession.

• Provide Pre-Registration nursing students with an opportunity to gain knowledge and experience of supporting people with a learning disability and complex needs

• Increase placement capacity and breadth of experience.

• Develop collaborative working between NHS and Non NHS services to enable students to embrace non-traditional employment opportunities.

Key Stages of Set-up

The first meeting took place with Director of Operations, Operational Manager, Network Manager, North West Placement Development Lead (NWPDL) and Placement Development Manager (PDM) in January 2015. Discussion took place regarding development of placement and how Learning Disability nursing students could be best supported.

Three universities across the North West utilise Future Directions CIC for Learning Disability and Social Work placements. The main concern raised focused on mentor numbers and availability. Whilst there are Learning Disability nurses with a mentor qualification employed by Future Directions CIC they are in management posts. All placement providers must comply with Nursing and Midwifery Council (NMC) standards for supporting student nurses on placement. A scoping exercise identifying numbers of mentors and Registered Nurses willing to undertake a Mentorship course. Multi-Professional Supporting Learning and Assessment in Practice (MSLAIP) was carried out.

An action plan was developed and forwarded to NWPDLs to progress placement development in their localities.

A further meeting was arranged with the Operational Network Manager, Cumbria and Lancashire locality, to discuss placement type, learning opportunities and level of learners that could be supported. Across Cumbria and Lancashire there are currently nine supported tenancies, each could provide diverse learning experiences. There are three mentors, including a Sign Off Mentor who is supported by team managers and support staff (personal assistants).

A review of the staff profile of each supported tenancies was undertaken to ascertain if a qualified mentor was in situ. All mentors had recently attended a mentor update, but had to complete Triennial Review.

A review of the learning opportunities available in each supported tenancy was discussed and documented in the NWPDN toolkit (Appendix 1) and the placement profile templates. A meeting was arranged with a Practice Education Facilitator (PEF), University Link Lecturer (ULL) Operational Network Manager, Team Leaders, Mentors and Placement Development Manager. An overview of the Nursing programme, placement expectation, learning outcomes and practice assessment documentation was discussed. Placement and Mentor support was also provided by the ULL and PEF. There was an opportunity to ask questions and clarify any concerns. The ULL agreed to visit learners and mentors early on in placement to offer support and the PEF agreed to support mentors regarding Triennial Review.

A core educational audit (Appendix 2) was completed and information specific to each supported tenancy was added reflecting the diverse service provision and learning opportunities that could be acquired whilst learners are on placement. On completion of the draft educational audit the ULL and PEF were invited to provide input. A final audit meeting was arranged between the ULL, PEF, Operational Network Manager and PDM. Each audit standard was reviewed and evidence to support discussed as appropriate.

It was agreed that two students could be supported at any one time. Each student would be allocated a mentor with the opportunity to gain experience in other supported tenancies working with team leaders and support staff (personal assistants) (Appendix 3).

The NWPDN toolkit was revisited, completing any outstanding quality assurance checks.

The final stage of placement development was to complete the formal handover process of the placement to the University, Nursing Placements and PEF, activating the placement.



How it Works

An identified co-ordinator is the key contact between Future Directions CIC and HEIs who place learners with providers. HEIs notify the learner co-ordinator of all learner allocations at least six weeks prior to placement if possible. On receipt of this information the co-ordinator liaises with the Operational Network Managers for each locality. Operational Network Managers are responsible for managing learner allocation and experiences in conjunction with team managers and mentor.

Allocation to a specific supported tenancy is considered on year and level of learner experience. Mentor support and supervision is maintained throughout with the opportunity to gain exposure to other learning environments across supported tenancies.

Within each supported tenancy various experiences and learning opportunities are available (Appendix 3).

Resources

The main resource for development of this project was the time of staff involved:

- Director of Operations and Operational Network Manager attended initial meeting to discuss placements.
- Operational Network Manager attended local meetings to discuss placement development and completion of educational audit.
- Deputy Operational Manager, Team Leaders, Mentors, ULL, PEF, PDM attended meeting to provide an overview of placement development.

• ULL - provided an overview of curriculum and support available to mentors, staff and learners whilst on placement. Supported completion of education audit. • PEF – provided an overview of role and support available for mentors. Supported the delivery of mentor update and completion of education audit.

• PDM – Attended meetings with Operational Network Manager to develop placement and complete educational audit.

Key Challenges

• Limited mentors – Future Directions CIC actively promote the employment of Learning Disability Nurses and plan to increase the number of mentors by offering Registered Nurses Mentorship training in the future.

• Mentor availability - This was overcome by allocating learners to a mentor in placement and where appropriate long arm mentoring was provided.

• Assumption that staff may or may not be aware of learner placement expectations and support - This was overcome by meeting with Operational Network Manager, Deputy Operational Network Manager and team leaders to discuss placement, expectations and level of support.

• Clarity of communication processes -This was overcome by HEI communicating learner allocations to the Operational Network Manager who has responsibility for overseeing all learner allocations across the organisation. Allocation information is forwarded to the Operational Network Manager in the local area who co-ordinates learner allocations in conjunction with mentors and team managers.

Key Learning

• The team realised that a different approach to managing learner placements can be adopted when there are few mentors e.g. allocating learners to mentors or providing long arm mentoring, which is still successful, and learned how to implement this approach.

• Staff are enthusiastic about supporting and providing appropriate placement opportunities for learners.

• Clear communication processes are important when allocating learners as misunderstandings can arise with regard to placement location and numbers of learners.

Sustainability

• Learners are placed throughout the academic year. They are allocated a mentor and are supervised in all aspects of care delivery. Team leaders and support staff (personal assistants) are experienced and contribute to the learner's placement experience.

• Staff that support learners have access to training that focuses on the complexities of the people they support and provides skills and knowledge to deliver personalised services.

• The reputation of Future Directions CIC, their experience and relationship with local health and social care services mean that individuals receive high quality support in all areas due to ongoing professional relationships.

For more information contact:

Susan Smith Placement Development Manager Susan.smith2@uhsm.nhs.uk 01772214434

Next Steps

• Offer Registered Nurses employed by Future Directions CIC the opportunity to access mentorship training funded through CPD Apply

• Explore new placements in collaboration with Future Directions CIC as service provision develops

Develop Sign Off Mentors

Supporting Material

- Appendix 1 NWPDN toolkit
- Appendix 2 NWPDN Audit document
- Appendix 3 Supported Tenancy, Learning Placement Model

References:

Department of Health (2012) *Transforming Care: A national response to Winterbourne View Hospital* <u>https://www.gov.uk/</u> <u>government/uploads/system/uploads/</u> <u>attachment_data/file/213215/final-report.pdf</u>

Bubb, S. (2014) Winterbourne – Time for Change: Transforming the commissioning of services for people with learning disabilities and/or autism https://www.england.nhs.uk/ wp-content/uploads/2014/11/transformingcommissioning-services.pdf

Department of Health (2015) *Delivering high quality, effective, compassionate care: Developing the right people with the right skills and the right values. A mandate from the government to Health education England* <u>https://www.gov.uk/government/uploads/</u> <u>system/uploads/attachment_data/file/411200/</u> <u>HEE_Mandate.pdf</u>

Further Links

Future Directions CIC www.futuredirectionscic.co.uk/

NHS England - News item https://www.england.nhs.uk/2014/11/learningdisabilities-action/