

# Report on District Nurse Education in the United Kingdom 2013-14

## Key Points

- 351 District Nurses are due to qualify in the summer of 2014 in comparison to 254 in 2013 - an increase of 38% (in England, Wales and Northern Ireland)
- 427 new entrants to the District Nurse programme in 2013/14 in the UK, of which 30% are registered on the part-time route
- 25% increase in the number of universities running NMC approved Specialist Practice –District Nurse programmes in England in comparison to 2012/13.
- 31% increase in the number of programmes running with 11 or more students in each cohort in comparison to 2012/13.
- The QNI and QNI Scotland will be developing standards for District Nursing education and practice in 2014/15.

## Introduction

The education of District Nurses is essential to ensure that community nursing team leaders develop the specialist skills and knowledge to enable them to lead and manage teams of nurses and nursing assistants to deliver care in the community effectively and efficiently.

The majority of registered nurses who lead District Nursing teams complete the Specialist Practitioner – District Nurse with Integrated V100 Nurse Prescribing programme, an approved specialist qualification that is recorded against the nurse's registration with the Nursing and Midwifery Council (NMC).

The purpose of this specialist community nursing programme is to support the nurse to develop the skills and knowledge required to be a team leader and manager, capable of working autonomously in leading a team caring for people in the community with increasingly unpredictable, dynamic and complex nursing needs.

This review is the second of its kind and outlines the current context for District Nurse education in the UK in 2014. It presents trends and changes that have emerged since the last review in 2013 (QNI 2013).

## Data collection

Telephone interviews were conducted during April and June 2014 with all of the programme directors for the NMC approved Specialist Practitioner – District Nurse programme in the UK (England, Wales, Scotland and Northern Ireland).

All interviews were completed following a pre-arranged appointment and each programme director gave verbal consent for their data to be used in the review.

Assurances of confidentiality were given and individual universities are not identified in the report. All data were stored securely and are used within this report to illustrate trends over time since the 2012/13 review.

All 43 programme directors participated enthusiastically in the review and their contribution has enhanced the development of the final report. The majority of the programme directors have more than five years' experience of running the programme as well as preparing programmes for the NMC approval and re-approval process. This collective experience will be invaluable for the future development of the Specialist Practitioner - District Nurse education in the UK.

## Findings

The Specialist Practitioner programmes are offered in all four countries of the UK and there has been an increase of 6 universities in England delivering the programme in the past year, representing a 25% increase (from 24 to 30). The programme directors stated that the increase illustrates a significant change in the priorities for commissioner and provider organisations. The number of universities running the programme has remained stable in Wales and Northern Ireland and the figures are provided in the table below. Scotland was not included in the 2013 review.

**Table 1: Universities running the Specialist Practitioner – District Nurse programme**

Country	Universities running the Specialist Practitioner Programme (2012/13)	Universities running the Specialist Practitioner Programme (2013/14)
England	24	30
Wales	4	4
Northern Ireland	1	1
Scotland	N/A	4

There is a small group of universities in England (n4=12%) that did not run the programme during 2013/14 even though they were approved to do so. In one case the programme did not run because an insufficient number of applicants met the programme entry requirements. The remaining three universities are developing revised District Nurse courses and plan to run these from September 2014.

During the last 12 months, programme directors reported that they had seen an increased commitment on the part of provider organisations to develop their community nursing staff with the Specialist Practitioner Qualification (SPQ).

As part of this, provider organisations that had promoted community staff nurses without the SPQ to District Nurse team leader posts are now reported to be requiring those post holders to complete the

SPQ programme, in order to retain their post.

Furthermore, it is reported that in some areas where an alternative to the Specialist Practitioner programme has been offered, these courses are now being withdrawn and the Specialist Practitioner programme reintroduced.

The visible increase in commitment to commission the SPQ and the increase in the number of universities delivering the programme is reflected in the number of new entrants to the programme during this academic year (427 in 2013/14). Of these, approximately 30% (n=128) are undertaking the programme part time, over a two or three year period.

The table below shows the numbers of new entrants in each country. It must be noted that these entrants do not reflect the numbers qualifying in summer 2014 due to there being two entry points for some universities in the academic year (September *and* January/February) and the percentage of those undertaking the programme on a part-time route.

**Table 2: New entrants to the Specialist Practitioner – District Nurse programme in 2013/14**

Country	Number of new entrants
England	329
Wales	31
Northern Ireland	26
Scotland	41
<b>Total</b>	<b>427</b>
	(of which 30% (n=128) entered a part time programme)

The number of District Nurse Specialist Practitioners due to qualify within England, Wales and Northern Ireland in the summer of 2014 has increased by 38% (n=351) in comparison to the number reported to be qualifying in the summer of 2013 (n=254). These figures, which do not include Scotland as the last year’s review did not cover Scottish universities, are provided in the table below.

**Table 3: Nurses due to qualify with Specialist Practitioner – District Nurse in the summer of 2014**

Country	Number due to qualify with SPQ
England	303
Wales	20
Northern Ireland	28
Scotland	N/A
<b>Total</b>	<b>351</b>
<b>Percent increase from summer 2013</b>	<b>38%</b>

The situation in London has improved, with 25 District Nurse Specialist Practitioners due to complete their programmes in the summer of 2014, in comparison to just five in the summer of 2013. However, this number remains disproportionately low in comparison to the numbers qualifying in the rest of the UK and consideration must be given urgently, both in London and throughout the rest of the UK to whether the number of District Nurses qualifying this summer is sufficient to meet the increased demand for the service and the replacement of those due to retire.

Currently, we see a very encouraging trend in the investment into the leadership of the District Nursing service. The majority of programme directors are anticipating an increase in commissions: 88% of the universities had confirmed commissions for 2014/15, which for the majority showed an increase again on the 2013/14 figures.

There is, however, an urgent need to understand and predict the numbers of District Nurses that are required across the UK and to plan the District Nursing workforce accordingly, in support of the agenda to move patient care closer to or in the home. This will require significant investment into the workforce planning of the service, which the QNI is keen to support.

In England, the QNI was recently commissioned by NHS England to explore examples of good practice in relation to caseload allocation and workforce planning within the District Nursing service (NHSE/ QNI March 2014). The QNI is keen to see this work expanded further to understand the required staffing levels to meet current and future patient need and from this to predict the shape of the future workforce.

## Academic Level of the Programme

The specialist practitioner District Nurse programme is offered at undergraduate and post graduate levels, corresponding to academic Level 6 and 7 in England, Wales and Northern Ireland, or 9 and 11 in Scotland (Table 4, below).

The trend is for each university to offer the programme at both academic levels. However, there is a move by some universities to offer the programme at postgraduate Level 7 (11) only and 21% (n=9) of universities have taken this step. This move has been completed in preparation for the change in the exit level for the pre-registration nursing education programme in the UK, which from September 2013 is required to be at Level 6 (9) (NMC 2010).

In order to commence a programme at Level 7 (11) some universities require a classification of 2:2 and above in a first degree. Some nurses do not meet the entry requirements for the postgraduate programme as they do not hold a first degree, a factor which was reported in some universities to contribute to an inability to meet commissioned numbers and to reduced cohort sizes.

This review has also identified that many provider organisations have decided to restrict their recruitment to the District Nurse programme to internal candidates only. This means that the recruitment pool is further restricted, because many community staff nurses qualified prior to 2013 when the exit academic award was, for the majority, below a first degree level. Over time this trend is expected to change; however large-scale changes have not yet been seen.

**Table 4: Academic Level of the District Nurse – Specialist Practitioner programmes**

Academic Level	Number of programmes (UK)
6(9) and 7(11)	30
7(11) only	9
6 (9) only	4
<b>Total</b>	<b>43</b>

## Programme Duration

The Specialist Practitioner programme continues to be offered on a full time (one year) and a part time (two or three year) basis. The NMC education standards include a requirement for the programme to be taught over a minimum of 32 weeks in an academic year and the same outcomes apply irrespective of the duration of the course. The decision about the length of the programme is made in collaboration with the provider organisations and the education commissioners, where appropriate.

Decisions about the length of the programme are reported to be, in part, related to the funding available for the programme, which includes a salary for the student undertaking the programme.

The duration of the full time programmes varies in the following way:

- 28% (n=10) of universities are commissioned to deliver the programme in 40 weeks
- 49% (n=21) of universities that are commissioned to deliver the programme over 52 weeks
- 23% (n= 12) of universities offer the programme on a part-time basis only

This timescale is inclusive of annual leave, which means that the time available for teaching in practice and in the university, for the full time programmes, is further reduced to 35 weeks in some cases. Programme directors report that this presents a significant challenge, because they need to ensure the required content is covered to enable to students to meet the learning outcomes of the programme. The students also find the length of the programme a challenge because they must successfully complete the course work and gain the required experience in practice within this timescale.

Many nurses, especially those who undertake the programme on a part-time basis, continue working in their usual place of work as a student and a team member simultaneously. It can then be problematic to differentiate between the learner and the worker. It is also reported to be confusing for other team members who expect the student District Nurse to be part of the substantive team, especially when the caseload requires more staff resource than is available.

It is also a challenge for the nurse to recognise the need to focus on their learning, rather than contribute solely to the completion of the workload, and it can be equally challenging for the team members to recognise the student District Nurse's learning needs.

The NMC Standards for Specialist Education and Practice require the integration of the V100 Nurse Prescriber qualification into the programme (NMC 2001; NMC 2006). It is of note that 12% (n=5) of universities have incorporated the V300: Non-Medical Prescribing for Nurses, Midwives and Allied Health Professionals into their programmes (NMC 2006), which is a reflection of the changing skills required for the role.

Furthermore this demonstrates that the universities have responded to the needs of the provider organisations in the delivery of care in the community, ensuring that the nurses completing the programme are prepared for the demands of contemporary District Nursing in their locality.

## Conclusions and recommendations

A number of changes have been seen since the first QNI review of District Nurse education in 2012/13. Notably, there has been an increase in the number of universities providing and running the Specialist Practitioner programme. There has also been an encouraging number of new entrants to the programme and an increase of 38% in the number of District Nurses qualifying in the summer of 2014 compared to a year earlier. There are clear indications that commissioned numbers are increasing for 2014/15 entrants too.

The picture is not uniform across the country however and there remains an urgent need to develop a national system to plan the number of District Nurses required, as leaders and managers of teams in the community, who will coordinate and deliver appropriate care for an increasingly older, frail population with more complex health conditions than have been seen previously.

The QNI recommends the following actions:

- To review District Nursing workforce planning as a matter of urgency
- To review the NMC (2001) Standards for Specialist Education and Practice
- To consider the academic level and position of the Specialist Practitioner - District Nurse in the career pathway from initial NMC nurse registration to advanced nurse practitioner.

## The Queen's Nursing Institute response

The Queen's Nursing Institute welcomes the increase in numbers of nurses undertaking the District Nurse specialist practitioner qualification, but recognises that there is still much work to be done to support the development of the workforce to meet the current and future needs of patients, their carers and families.

Commissioners of the service need to be confident that they can secure a high quality, well led District Nursing service, which is appropriately prepared and configured to address the increasing imperative of moving care closer to or in the home.

The recent report based on the 2013 District Nursing survey by the QNI, '2020 Vision Five Years On: Reassessing the Future of District Nursing' (QNI May 2014), provides a clear illustration of the current state of District Nursing practice and the conclusions of that study align well with the findings and recommendations in this report.

As a result of the concerns raised within both the District Nursing survey and the education reports of 2013 and 2014, The Queen's Nursing Institute (QNI) is to partner with The Queen's Nursing Institute Scotland (QNIS) to fund the development of QNI/QNIS standards for District Nurse education and practice.

This work will commence in September 2014 and it is anticipated that it will be completed in September 2015. Key stakeholders will be involved, including, but not limited to, the Council of Deans of Health (CoDH), the Association of District Nurse Educators (ADNE), Health Education England (HEE), NHS Education Scotland (NES), Workforce Education and Development Services in Wales (WEDS), Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC), the Department of Health and the National District Nurse Network (NDNN).

The recommendations of this education report will be considered as part of this project. When the standards have been completed, it is anticipated that universities will map their District Nurse specialist programmes to the QNI/QNIS standards - in addition to the NMC standards, which are required to be met for the recordable qualification.

In undertaking this work, The QNI and QNIS will be setting an agreed standard for District Nurse specialist education and practice which will accurately reflect the complexity of patient needs and the advanced skills required to lead and manage nursing care in the community.

## References

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