

The QNI/QNIS Voluntary Standards for Community Learning Disability Nurse Education and Practice

For nurses who have undertaken an NMC approved
post-registration Specialist Practitioner Qualification

2021

Introduction and background

The Queen's Nursing Institute (QNI) and Queen's Nursing Institute Scotland (QNIS) have worked collaboratively with a group of leading experts and stakeholders across the United Kingdom (UK) to develop a set of voluntary standards to support Community Learning Disability Nurse education and practice across the four countries of the UK. The standards make explicit the expectations of an advanced level of practice demonstrated by Registered Nurses who will have completed a Nursing and Midwifery Council (NMC) approved Community Learning Disability Nurse (CLDN) Specialist Practitioner Qualification (SPQ) programme.

The term 'voluntary standards' differentiates the QNI/QNIS standards from professional regulatory standards such as those set by the NMC. All Community Learning Disability Nurse programmes leading to a recordable SPQ must meet the current NMC (2001) standards for specialist education and practice. As the NMC are currently reviewing Post – registration SPQ standards, the QNI and QNIS anticipate that this project work will inform the NMC review process to ensure the characteristics of the contemporary Community Learning Disability Nurse are articulated and representative, particularly as services and practice have developed significantly since the NMC standards were originally set.

This is the sixth in a series of standards setting projects and follows the successful launch and implementation of the QNI/QNIS Voluntary Standards for District Nurses (2015), Senior General Practice Nurses (2017), Community Children's Nurses (2018), Standards for Nurses New to General Practice Nursing (2020) and Standards of Education and Practice for Nurses New to Care Home Nursing (2021). All publications offer a basis for future practice and education programmes.

Community Learning Disability Nursing

With 1.5 million people with a learning disability in the UK, (ONS, 2019; Mencap, 2019) the projected priorities of the NHS Long Term Plan (NHSE/I, 2019) aim to address health inequalities, unmet needs and to ensure people with a learning disability and/or autism receive better support.

These standards are therefore timely in terms of raising the profile of the advanced specialist expertise of Community Learning Disability Nurses who hold a NMC recordable Specialist Practitioner Qualification (SPQ). Their role is central to the provision of health and care in the UK for people with a learning disability and/or autism, their families and carers, and as autonomous practitioners they are pivotal in ensuring best care and support. As the four countries of the UK 'Long Term Plans' outline (NHSE/I, 2019), (NHS Scotland, 2019) (Gov.Wales, 2019) (DOH, 2016), the policy shift now focuses on promoting community based, integrated and inclusive health and social care in all UK countries with specific recognition of health inequalities in people with a learning disability and/or autism.

This project is also timely in terms of offering a suggested UK-wide consistent approach to quality assured education provision for Registered Nurses completing the Community Learning Disability Nurses SPQ. Therefore, it is anticipated that Higher Education Institutions (HEIs) will adopt these voluntary standards as a best practice guide in developing future programmes.

Data collated from surveys undertaken during this project with course leads/lecturers from HEIs and nurses in practice, evidenced variability of education across the UK and NMC approved course provision at universities. Currently only four HEIs offer the Community Learning Disability Nurse SPQ programme across England, Wales and Northern Ireland, with reportedly small numbers of students. There are currently no HEIs offering the Specialist Practitioner Qualification in Scotland.

Through shadowing nurses in practice, focus groups and individual consultations with Community Learning Disability Nurses across the UK, the QNI/QNIS project lead has observed clear evidence of a strong, cohesive and consistent approach at an advanced level of practice by all Community Learning Disability Nurses working within this unpredictable and often complex service. Collated feedback from this engagement has highlighted the tensions in terms of education need in practice and funded opportunities, specifying the need for the Community Learning Disability SPQ programme to be established and accessible in all countries of the UK. This was apparent in feedback from Community Learning Disability Nurse leads undertaking a Master's degree in management recognising the importance of and need for a field-specific SPQ.

The complexities of Community Learning Disability Nursing are apparent in that no two services are the same in terms of the employer and the context of care delivery. For example, there is variability in the management of nursing services, with some under the domain of social care services rather than health services, leading to professional and support implications for these autonomous practitioners. Thus, the QNI/QNIS standards are welcomed as benchmark guidance in promoting consistency and standards of best practice across all UK organisations providing Community Learning Disability Nursing services.

The outcomes of this project and engagement with the Community Nursing Learning Disability teams across the UK, emphasised the true collaborative approach and enhanced focus on person-centred care. All teams demonstrated full engagement in co-production, early intervention support, hospital admission avoidance, promotion of early discharge and assurance of best interest support for individuals, carers and families at home or their alternative community home setting. This aligns with the ethos of any community-based nursing team supporting individuals to remain in their home environment whenever it is safe to do so. The most compelling observation throughout this project has been the consistency in cohesive, passion and compassion demonstrated by all personnel involved with care and support provision from first contact to end of life, for people with a learning disability and/or autism.

Aim of the new Standards

Extensive collaboration and consultation with Experts by Experience, Higher Education Institution (HEI) programme leads and Community Learning Disability Nurses in all settings has led to the development of these standards.

They present as a set of benchmarks and guidance to inform current and future education and practice requirements expected of a registered nurse on completion of a post registration Community Learning Disability Nurse Specialist Practitioner Qualification. It is anticipated that these standards will be embraced to inform the advanced level career progression point for nurses choosing Community Learning Disability Nursing.

Using the QNI/QNIS Standards

The following standards are not set to prescribe academic levels or how current Community Learning Disability Nurse education should be delivered and do not focus on discrete clinical skills, as they are based on the assumption that any Registered Nurse entering a Community Learning Disability Nurse SPQ programme would have already achieved the fundamentals of clinical practice either gained in the community or in a secondary care setting. However, in order to demonstrate the advanced level of education and practice of a nurse completing the NMC approved Community Learning Disability Nurse SPQ, these standards have been aligned to the following 4 domains of Advanced Practice incorporated in advanced practice documents in all four UK countries:

- A) Clinical Care
- B) Leadership and Management
- C) Facilitation of Learning
- D) Evidence, Research and Development

The Standards

Community Learning Disability Nurse Specialist Practitioner Qualification. At the end of a programme mapped against the QNI/QNIS Voluntary standards the nurse will be able to:

Domain	
Domain 1 - Clinical Care	<p>1.1 Demonstrate effective and innovative, advanced communication skills with people with a learning disability and/or autism, their family and/or carers. Employ a person-centred approach to communication providing Easy Read or alternative, where appropriate, to promote understanding and ability for the person to make an informed choice about their care.</p> <p>1.2 Demonstrate cultural awareness and sensitivity to all people, with consideration of and attending to equality and diversity, when meeting the population health needs and leading on the promotion of health equalities.</p> <p>1.3 Demonstrate an understanding of and an ability to critically reflect upon the potential impact of unconscious bias on clinical interventions and be cognisant of health inequalities experienced by people with a learning disability and/or autism.</p> <p>1.4 Promote the mental health and well-being of people with a learning disability and/or autism in conjunction with mental health professionals and General Practitioners, identifying needs, mental capacity and ensuring identifiable safeguarding issues are actioned and processes implemented.</p> <p>1.5 Develop clear and effective partnership approaches to ensure the full range of healthcare needs for people with a learning disability and/or autism are met by the most appropriate service and agencies, including voluntary and charitable sectors. Ensure all information is documented in appropriate Easy Read format or as agreed.</p> <p>1.6 Develop innovative strategies for effective co-production with people with a learning disability and/or autism, their families, and carers. Employ positive behaviour support (PBS) to address potential underlying needs, lowering potential barriers and empowering the individual to express their needs, remaining cognisant of escalation processes where there are potential safeguarding issues.</p> <p>1.7 Employ a biopsychosocial approach using advanced assessment skills in prevention and early identification to intervention approaches that reduce escalation of risk when assessing people who have complex and co-morbidities health care needs.</p> <p>1.8 Use a range of evidence-based assessment and outcome measurement tools to ensure accurate decision-making and appropriate referral processes are initiated within the scope of competence.</p> <p>1.9 Be cognisant of the processes of incident reporting, incident reviews and learning from deaths (e.g. Confidential Inquiry into Premature deaths of people with learning disabilities CIPOLD (Hislop et al, 2013) and Learning Disabilities Mortality Review (LeDeR) NHSE/I 2019), to inform own and the wider team's practice evaluation to ensure evidence-based practice is applied consistently.</p> <p>1.10 Role model a biopsychosocial approach in providing advice, support and education in a person-centred way to people with a learning disability and/or autism. Promote and facilitate health education and health promotion activities including access to annual health checks and appropriate health screening.</p>

**Domain 1 -
Clinical Care
continued**

- 1.11** Work collaboratively with multi professional agencies, to ensure access to health care meets the individual's health and wellbeing needs across the life span, including sexual health, long term co-morbidities and end of life care.
- 1.12** Provide support to other professionals to ensure a consistent and seamless health care approach across health and social care sectors for all individuals. Adopt an approach to promoting health checks and observation of the physical health care needs for any person with a learning disability and/or autism.
- 1.13** Develop and monitor the efficacy of specialist care plans to ensure complex, physical health, social, psychological, behaviour with challenges and medical interventions are integrated. Address health inequalities and ensure the implementation of the different legislative and human rights-based frameworks underpin nursing practice.
- 1.14** Demonstrate advanced clinical skills in key specialist areas such as epilepsy, mental health, forensic, autism spectrum disorder, behaviour with challenges and dementia health facilitation. Ensure that capacity and best interest decisions involve the person with the learning disability and/or autism in a way that they can express their views and understand the decision to be made.
- 1.15** Monitor the risk of a potential crisis for people with a learning disability and/or autism. Initiate and augment interventions; support and collaborate with all appropriate agencies to reduce the risk of harm and unplanned admission to hospital.
- 1.16** Support and facilitate all staff to use local reporting systems to identify changes in physical, mental or behavioural status, where the person is showing signs of deterioration or exhibiting new symptoms.
- 1.17** As an autonomous practitioner with advanced skills and competence around clinical judgement and decision making, develop specialist expertise in at least one area of community learning disability nursing and/or autism.
- 1.18** Establish clear lines of accountability with a range of professionals in respect of roles and responsibilities. Ensure the information is disseminated in a meaningful manner to the individual person with a learning disability and/or autism, their families/carers.
- 1.19** Demonstrate a broad range of specialist Community Learning Disability Nursing clinical expertise that supports high quality person-centred care for the caseload population in a variety of community settings. This may include a V100/150 community prescribing or V300 independent prescribing, dependent on local policy.

**Domain 2 - Leadership
and Management**

- 2.1** Demonstrate professional and compassionate leadership of the Community Learning Disability Nursing team and all nurse led teams. Apply advanced communication skills when communicating across health, social care, education and third sectors.
- 2.2** Effectively demonstrate self-awareness and self-development, by critically reflecting on own actions and recognising the potential impact of behaviours on collaborative working with colleagues and the wider team.
- 2.3** Support, supervise and appraise all team members in nurse led teams in practice, identifying opportunities for development for all. Demonstrate confidence in addressing and managing interpersonal and conflict issues within the team.
- 2.4** Manage the community learning disability nursing team within regulatory, professional, legal, ethical and policy frameworks ensuring staff feel valued and developed. Demonstrate accountability by monitoring and managing own case load.

Domain 2 - continued

- 2.5** Use a range of supervision methods to support and enhance staff practice. Through clinical supervision, support staff to explore moral and ethical dilemmas encountered in community learning disability nursing.
- 2.6** Introduce and apply change management strategies to ensure staff respond flexibly and innovatively to unpredictable changing contexts of care, adhering to local and national policy.
- 2.7** As an autonomous practitioner, demonstrate advanced skills and competence around clinical judgement and decision-making and articulate the complexity of clinical decision making at this advanced level. Demonstrate critical thinking, reflection and evidence-based care, enabling a high level of judgement and complex decision making.
- 2.8** Work collaboratively and creatively across professional boundaries to ensure co-ordinated seamless services are in place, for example, transition from child to adult services or transition from the criminal justice system and integration within society.
- 2.9** Create and embed a service and quality improvement approach within the team, generating a culture of innovation and creative thinking. Promote an enquiring mindset whilst ensuring governance around the team's practice, valuing staff contributions and demonstrating collective, inclusive, and compassionate leadership.
- 2.10** Advocate and contribute to public health initiatives to promote understanding of inequalities and the needs of people with a learning disability and/or autism. Co-ordinate and provide specialist education and training to range of professionals, advocating on the person's behalf, creating social inclusion environments and access for individuals to mainstream services as outlined in current national policy and legislation.
- 2.11** Lead, manage, monitor and analyse clinical caseloads, workload, team capacity and dependency to assure safe staffing levels in care delivery, using effective resource and budgetary management skills.
- 2.12** Articulate the unique contribution of roles within the learning disability community nursing service in meeting health care needs, collating and presenting evidence of improved health outcomes for people with a learning disability and/or autism in the community.
- 2.13** Develop career pathway opportunities for all levels of staff, identifying potential 'talents' within the team and supporting staff to undertake further learning and development that will benefit people with a learning disability and/or autism.
- 2.14** Engage stakeholders and use high level negotiating and influencing skills to develop and improve practice, advocating for developments that enhance and improve care for people with a learning disability and/or autism.
- 2.15** Work across professional, organisational and system boundaries and proactively develop and sustain new partnerships and networks to influence and improve health, outcomes and health care delivery systems for people with a learning disability and/or autism.

Domain 3: Facilitation of Learning

- 3.1** Facilitate and enable people with a learning disability and/or autism to have a better understanding of their health needs, through co-production of appropriate strategies to support them and their carers/families to develop their own skills to manage their individual mental or physical health needs.
- 3.2** Assess the learning and development needs of all nurse led teams. Formulate and lead professional development opportunities for the team including leadership development, demonstrating commitment to learning and excellence in practice. 3.3 Demonstrate professional and effective leadership in supervision, assessment and peer support. Develop structured clinical supervision support, incorporating strategic guidance to escalate concerns.
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- 3.4** Create positive, safe and effective learning environments for students from all fields of practice including post-registration and during a period of preceptorship. Demonstrate competence and confidence in the ability to relate to different learning styles in knowledge and skills acquisition and maximise learning opportunities.
- 3.5** Develop and facilitate action learning opportunities, encouraging reflection in and on practice, promoting a positive and supportive learning culture.
- 3.6** Promote and model effective team working within the Community Learning Disability Nursing team, the wider multi-disciplinary team, primary care colleagues and other agencies. Collaborate with universities to encourage opportunities to teach or facilitate learning in related academic programmes, evaluate and record the impact of any educational interventions.
- 3.7** Facilitate learning for others and provide training for other professional disciplines within the Community Learning Disability fora, for example advocating Annual Health check provision in General Practice.
- 3.8** Develop and facilitate information health days for people with a learning disability and/or autism and those who support them; to include for example, understanding the importance of breast screening, testicular screening, opportunities for de-sensitisation of blood tests and initiatives to promote the development of their own digital literacy to better understand and use health applications.
- 3.9** Liaise with other appropriate services to ensure reasonable adjustments are in place for all health appointments and consultations, including preparation for unpredictable behaviours.
- 3.10** Adopt a creative approach to problem-solving to develop a positive teaching and learning environment for all professions, people with a learning disability and/or autism, their carers and families and non-clinical staff. This should include initiatives to promote the development and application of health technologies.
- 3.11** Role model as an autonomous practitioner, non- judgemental and value-based care delivery, demonstrating the values of high quality and compassionate nursing care. Demonstrate an innovative and flexible approach in an evolving and demanding role, ensuring safe and effective high-quality care delivery.

3.12 Support staff to engage with digital technology in monitoring the health and wellbeing of people with a learning disability and/or autism. Promote digital engagement and the use of clinical informatics to ensure the effective use of data and robust clinical record keeping.

3.13 Influence staff to participate and develop innovation projects to test and improve service provision at local level and dissemination across Learning Disability services to inform co- production of care and support and improve consistency and sustainability in the quality-of-care delivery.

Domain 4: Evidence, Research and Development

4.1 Monitor outcomes of effective care planning using evidence - based frameworks that can positively influence timely and prioritised approaches to improve health and social care outcomes for individuals.

4.2 Analyse peer reviewed, published evidence-based outcomes and engage in research development to inform and implement in practice, evaluating the underpinning evidence of successful approaches.

4.3 Use a range of change management strategies, encouraging peers to engage in enquiry-based practice to promote understanding of the role of strategic drivers and evidence-based practice to inform best care.

4.4 Lead and contribute to national initiatives and research to steer organisational best practice and service improvement. Encourage team contribution to collation and monitoring of data to inform audit, research and quality improvement. Promote understanding of recognised methodologies to improve systems and processes that improve standards of care and support for people with a learning disability and/or autism.

4.5 Engage people with a learning disability and/or autism, their families, and carers to be involved in service planning and development, monitoring and valuing their views and contributions in a safe and confidential forum. Adhere to duty of candour and ensure responses are documented and responded to in a timely and strategic manner.

4.6 Initiate learning from evidence and national improvement programmes, for example 'Death by indifference: 74 deaths and counting.' (Mencap, 2012). Co-produce and develop appropriate pathways to inform local and national improvement programmes.

4.7 Influence networking across organisations supporting people with a learning disability and /or autism, to identify key risks and early warning signs that may present within the local population of people with a learning disability and / or autism. Ensure findings are articulated and inform the production of future management, operational and local business plans.

4.8 Engage and support staff in undertaking audit and developing Quality Improvement projects in practice, ensuring experts by experience participate in the development, evaluation and impact of projects.

4.9 Develop robust governance systems by contributing to the development and implementation of evidence-based

4.10 Identify and lead research initiatives to improve standards of care through undertaking or contributing to research, engaging people with a learning disability and/or autism, their families/carers and networks in co-production and partnership working.

4.11 Engage in preparing bids for research projects and joint working with university nursing programme leads to develop joint research opportunities. Devise and undertake research to inform practice and implement outcomes.

Appendix 1

Project: Background and Methodology

In 2019, Trustees from both the Queen's Nursing Institute and the Queen's Nursing Institute Scotland approved and agreed to fund this project to develop Voluntary Standards for Community Learning Disability Nurse Education and Practice for Registered Nurses completing the Nursing and Midwifery Council (NMC) recordable Specialist Practitioner Qualification (SPQ) programme.

The most recent Nursing and Midwifery Council data (NMC, 2020) identifies that across the United Kingdom there are 423 Community Learning Disability Nurses with the NMC recordable SPQ, an increase of 17 from 2019, many of whom lead Community Learning Disability Nursing services. These voluntary standards are designed to support future education programmes and practice demands of contemporary and future expectations of this advanced role in leading and managing the service in ensuring consistency of education and practice across the UK in supporting the 1.5 million people with a learning disability and/or autism in the UK (Mencap and ONS, 2019).

A project advisory group was convened with representation from the four UK countries. To ensure UK wide perspectives were reflected, the advisory group included: Experts by experience, the professional regulatory body, the Nursing and Midwifery Council (NMC), the Royal College of Nursing (RCN), service and education providers, education commissioners, Council of Deans of Health, Consultant Community Learning Disability Nurses and Clinical Commissioners. The group met four times during the project, the list of stakeholders and interest group contributors is provided in Appendix 3.

A project manager (QNI) with extensive community nursing and academic experience was appointed on a part time basis and the project commenced in September 2019.

The project methodology (Diagram 1) was based on the same format as previous QNI/QNIS standards to ensure consistency for educators and practitioners as a reference point. The intention of this project was not to prescribe future SPQ course structure, length or academic level; however, it is anticipated that these standards will inform future academic SPQ programmes and contribute to the current NMC Post-Registration SPQ standards review. The standards also provide clarity of the advanced level of practice of the Community Learning Disability Nurse with an SPQ to inform any future career frameworks for nurses working within Community Learning Disability Nursing.

A literature review was undertaken and subsequent survey with nurses working in Community Learning Disability Nurse (CLDN) services, to establish insight into the skill mix and the role of the Community Learning Disability Nurse with an NMC Specialist Practitioner Qualification. 360 responses were received from across the four United Kingdom (UK) countries including the Channel Islands.

Key findings show that 31% of respondents identified that their organisation required all team leaders to have the NMC approved Community Learning Disability Nurse Specialist Practitioner Qualification (SPQ) in view of the complexities involved in case management of Community Learning Disability Nursing services.

86% of respondents indicated that their organisations did not specify other required qualifications in order to be a CLDN leader due to insufficient access to NMC approved SPQ programmes across the UK. Thus, many nurses who assume the leadership role either hold or are studying for a Master's degree in management, but identify this provides a broad overview of management skills as opposed to the required specialist practitioner qualification that incorporates advanced clinical knowledge and skills, such as independent prescribing. 20% of respondents reported to have had to take annual leave in order to undertake Continuing Practice Development opportunities.

A further survey was undertaken with academics who lead Community Learning Disability Nurse education within Higher Education Institutions across the United Kingdom (UK). As previously identified, current SPQ provision for Community Learning Disability Nurse education is limited to 4 NMC Approved Education Institutions (AEIs) across England, Wales and Northern Ireland. This is reflective of the limited opportunities to provide consistency in preparing for the Specialist Practitioner role in Community Learning Disability Nursing.

The project manager shadowed nurses and nurse managers/leaders in practice across England, Scotland and Wales. Covid-19 restrictions unfortunately prevented visits to Northern Ireland. Further data was collated across the UK from face to face and online focus groups with Community Learning Disability nursing teams, consultant nurses, nurses working with people with a learning disability and/or autism in the Criminal Justice system and academic programme leads. A

Twitter chat, further telephone consultations with experts by experience, individual nurses, third sector providers, and hospital liaison nurses provided additional UK-wide data.

Overwhelmingly, findings from all data collated indicated the importance and call for consistency of education and practice for future Community Learning Disability Nurses particularly as there remains tension between practice need and education provision of post-registration education Specialist Practitioner Qualifications. This was further supported by service leads who either held or were undertaking a Master's qualification in Management and recognised the need for the Specialist Practitioner Qualification (SPQ) as opposed to a broad-based management course content, in order to be prepared to lead teams and managing the complexities in Community Learning Disability Nursing. A lack of funding/investment and geographical distances to access post-registration education were cited as significant barriers to ensuring consistency of education and preparation for leadership and management, hence previous SPQ programmes had been closed as they were no longer financially viable.

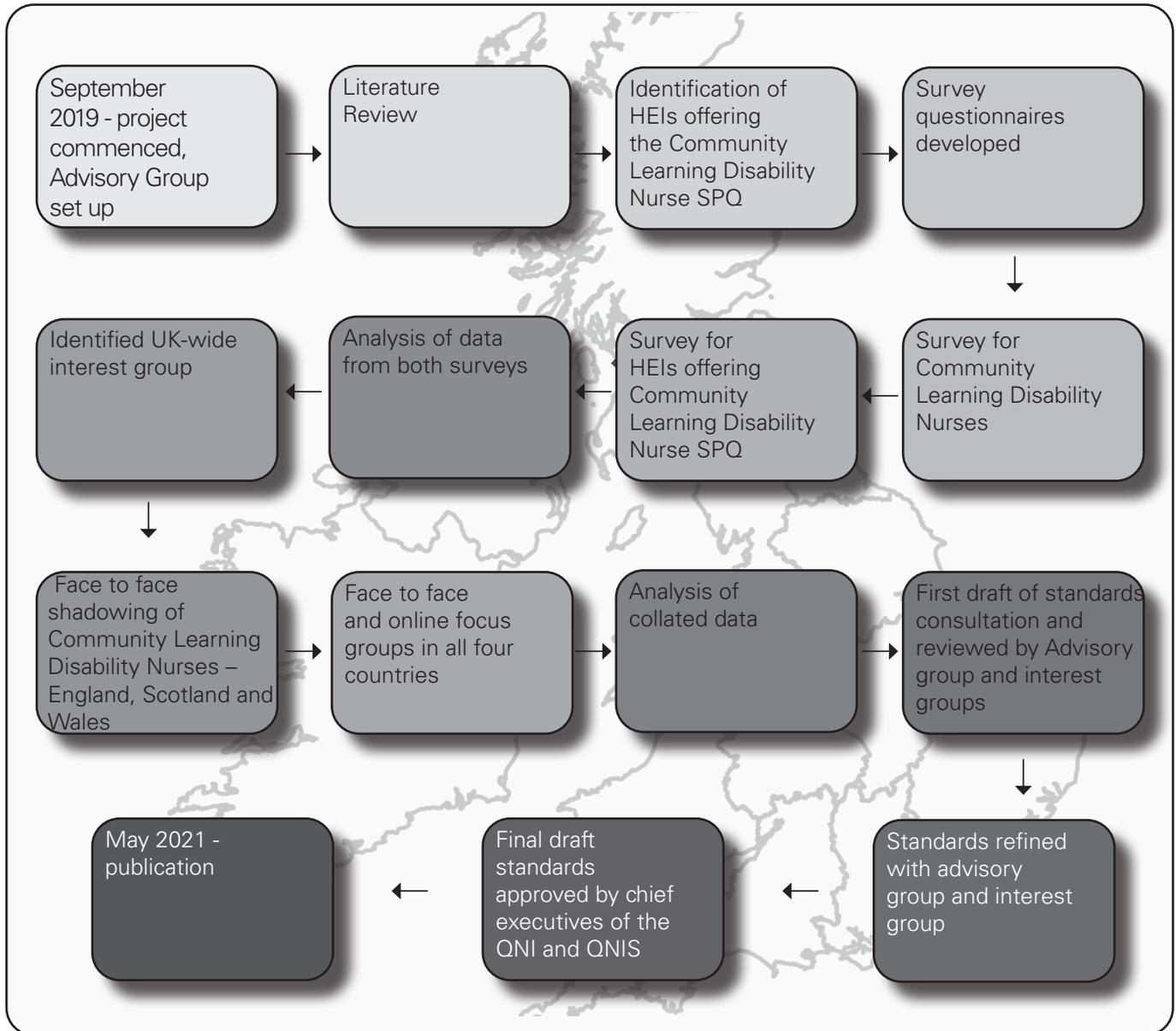
A further key theme identified the importance of recognising the specialist role of Community Learning Disability Nurses as leaders of co-production in supporting people with a Learning Disability and/or Autism. As articulated by participants, there is a call for all nurses to be educated to improve overall support for people with a learning disability and/or autism and to ensure equity of care, as outlined through the MENCAP 'Treat Me Well' campaign.

The standards were drafted and distributed to the advisory board and interest groups for final consultation in late December 2020, the standards were revised with minor amendments. The collaborative approach to this project has yielded overwhelming support and acknowledgment that these standards provide a 'good benchmark that can only improve consistency across the workforce in Community Learning Disability Nursing'. These new standards will provide the basis for consistency in future educational and practice development in supporting people with a learning disability and/or autism.

The project manager would like to extend her sincere gratitude to all contributors for their phenomenal engagement, positive support and timely responses despite the challenges they have faced particularly over the last 18 months. This evidences the positive ethos of Community Learning Disability Nurses and their commitment to ensuring co-production is key to enabling and supporting people with a learning disability and/or autism.

A very special thank you to Mr Lloyd Page (Expert by Experience) who has expertly educated and supported the project manager throughout this project.

Diagram 1: Development of the standards



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Appendix 2: QNI/QNIS Project Advisory Group

The QNI/QNIS would like to thank the representatives of the advisory group for their support and enthusiasm for this project.

Advisory Group Members

Contact name	Job title	Organisation
Professor John Unsworth	Chair	The Queen's Nursing Institute
Sam Abdulla	Field Leader, Learning Disabilities	Edinburgh Napier University
Nicky Ashby	Head of Learning and Professional Development	Royal College of Nursing
Jonathon Beebee	Chair RCN Learning Disability Forum	Royal College of Nursing
Jim Blair	Learning Disability Consultant	Independent Consultant Nurse Learning Disability
Sue Boran	Director of Nursing Programmes (Innovations)	The Queen's Nursing Institute
Clare Cable	Chief Executive	The Queen's Nursing Institute, Scotland
Rebecca Chester MBE	Consultant Nurse for people with learning disabilities; Chair, UK Learning Disability Consultant Nursing Network	Berkshire Healthcare NHS Foundation Trust
Gill Coverdale	Professional Lead - Education	Royal College of Nursing
Tim Devanney	Learning Disability and Autism Programme Lead	Health Education England
Susanne Forrest	Programme Director NMAHP	NHS Education for Scotland
Mark Gallagher	Lecturer (learning disability nursing), Lead for community engagement, Admissions lecturer	Glasgow Caledonian University
Ursula Gallagher	Deputy Chief Inspector of General Practice (London) and Children's Health & Justice	Care Quality Commission
Ellie Gordon	Specialist Senior Nurse (Mental Health and Learning Disability)	Health Education England
Angie Hack	Project Manager	The Queen's Nursing Institute
David Harling	Director, Learning Disability	NHSI/E
Ben Higgins	Group Chief Executive Officer	BILD
Simon Jones	Nurse Consultant, Learning Disability	Oxford Health NHS Foundation Trust Royal College of Nursing forum
Jackie Kelly	Dean of School, School of Health and Social Work	University of Hertfordshire
Katerina Kolyva	Executive Director	Council of Deans of Health

Isla McGlade	Interim Associate Nurse Director	NHS Grampian Mental Health & Learning Disability Services
Professor Ruth Northway	Professor of Learning Disability Nursing, University of South Wales	4 country LD network
Dr Crystal Oldman CBE	Chief Executive	The Queen's Nursing Institute
Lloyd Page	Expert by Experience	National Patient Advisory Group and MENCAP volunteer
Hazel Powell	Nursing Officer for Mental Health & Learning Disability	Office of the Chief Nursing Officer, Welsh Government
Siobhan Rogan	Nursing Lead for Transformation	Department of Health, Northern Ireland
Susan Stewart	Professional Adviser	Chief Nursing Officer's Directorate, Scottish Government
Jim Thomas	Director	Skills for Care
Professor David Colin-Thomé	Independent Healthcare Consultant	National Association of Primary Care
Anne Trotter	Assistant Director: Education and Standards Education, Standards and Policy Directorate	Nursing and Midwifery Council
Rob Webster	Chief Executive	South West Yorkshire Partnership NHS Foundation Trust

Appendix 3: QNI/QNIS Project Interest Group

The QNI/QNIS would like to thank the representatives of the interest group for all their support and enthusiasm for this project.

Contact name	Job title	Organisation
Ann Norman	Professional Lead -learning disability nursing/Justice & forensic nursing	Royal College of Nursing
Barbara Tate	Lead Nurse Learning Disability / Senior Practitioner Intensive Support Service	South East Trust -Health and Social Care - Northern Ireland
Bethany Ford	Enhanced Support Nurse	Essex Partnership University NHS Foundation Trust
Bethany Kruger	Improvement Manager	Wales
Christine Hutchinson	Consultant Nurse Community Learning Disability Services	Lancashire Care NHS Foundation Trust
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