The QNI's Annual Conference
Healthcare in the Community 2023

In the Spotlight

Nurses Leading Care in People's Homes and Communities

DAY 2

SUNINARY
3 October 2023





Day 2:

Workforce development

Welcome from Dr Crystal Oldman CBE, QNI Chief Executive:

"We have a huge range of exciting and uplifting speakers today and this week and we want you to go back to your workplace energised, feeling connected to others and inspired by what you've heard."

Thank you to our sponsor







1. Gold Sponsor Session: Hallam Medical

Chief Nurse Lisa Locker, Hallam Medical, www. hallammedical.com

- Hallam was founded in 2007 by Advanced Practitioner Alex Munro and is now the UK's leading Advanced Practice healthcare recruitment partner. 'We're passionate about providing quality health care professionals to Primary Care, Community, Urgent Care, 111 Pathways Services across the country.'
- We are a framework accredited healthcare recruitment company based in Sheffield, South Yorkshire, supporting NHS and primate healthcare services across the UK with the provision of highly skilled Community specialists, Advanced Practitioners and 111 Clinical Advisors.
- The role of the Chief Nurse at Hallam and a little bit about me: I have 30 years experience within a number of NHS settings as and Advanced Nurse Practitioner and as a Senior Clinical Manager with additional international experience in Trinidad.
- I still practice as an Advanced Nurse Practitioner working at least one shift a month to ensure my skills and knowledge are up to date
- Having a Chief Nurse on Hallam has an impact in terms of having a strong professional leadership, clinical expertise, safeguarding experience, and dedication to deliver excellent clinical outcomes. Whether I'm in uniform or out of uniform, I represent Hallam and nursing every day.
- The biggest challenge from our community nurses (in all areas) is the ability to cope with the workload. There need to be better incentives to either stay or come back to the community. There needs to be more publicity of what amazing jobs there are in the community, it needs to be seen as the career of choice.





2. The Community Nursing Workforce - where are we now?

Professor Brian Webster-Henderson introducing Professor Alison Leary MBE and chair for the day

- Welcome everybody, it's an important time for us to come together for those who work in the community.
- I've been ill with Covid recently (I went on holiday and came back with it!) but while I was at home, I thought about what I'd say about Alison at this session: I like the fact that Alison is outspoken, that she has the courage of her convictions and calls things out. They are great qualities and our profession is better for having you in it, Alison.

"I go to many conferences, but it's always such a joy to come here! A huge thank you to you Crystal and your team for organising today. From all of the things I've gone to, this conference makes such a contribution, with its topical issues and its great speakers.

From one professional to another, a huge thank you for your leadership and what you do with your team year on year. Thank you!"





2. The Community Nursing Workforce - where are we now?

- There are significant workforce issues there's a 50,000 registered nurse deficit,
- District Nurses in English NHS are under 4000
- There are too many job titles, no clear identity: I've got 77,000 job titles in my database people call practitioners from people with masters to people with no qualifications whatsoever
- There's a lack of development and succession planning
- Nursing is seen as a pink collar workforce even if you're a male nurse you'll be paid less than others in complex work
- As Crystal says, be at the table or you'll be on the menu
- RCN definitions and upcoming professional framework coming up
- NHS Workforce Plan in England emerging workforce strategies in other UK countries
- Lots of policy initiatives particularly around post pandemic recovery, many do not include nursing!
- PRSB standards for how nursing is recorded, PRSB standards didn't seem to include the nursing process and didn't consider model of nursing, it was about recording tasks. We have challenged them about that and asked them to look into that.





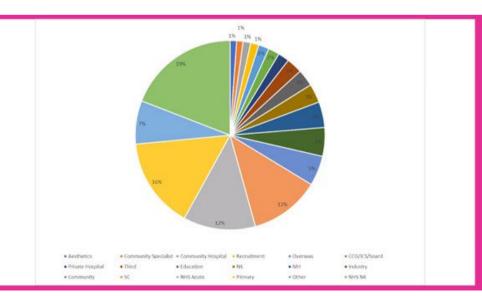
2. The Community Nursing Workforce - where are we now?

- The Nursing Associate role in England's workforce plan is 63,000 nursing associates in the next few years. We know they are being used as substitutes for Registered Nurses.
- The return of non-graduate nursing worries me, we need to think about how it's going to work out in the real world.
- During the pandemic we did work with care homes and those working there and as you may know we uncovered this issue of blanket DNRs which are illegal in all 4 countries. Amnesty International took up that work and we've also submitted that to the Covid-19 inquiry.
- That also shows you where your data goes. It doesn't up in a file somewhere but it goes to people who have influence and who can change things.
- We have 14,000 people with an SPQ but don't have that amount working in the NHS, so where have they gone? The DN Today report was last completed in 2019. In England, if you ask the government they will say that there are more nurses than ever before and that's true but it's also inflated by Nursing Associates. Community Matrons have also dropped enormously, these jobs seem to be disappearing.
- If you look at Scotland, what we can see is a down-drift in pay. We've been tracking this, and what we're seeing is there are more lower paid people. 8% of their workforce is Band 7: there's a story there that needs to be unpicked.



2. The Community Nursing Workforce - where are we now?

- Where have they all gone? See chart below. As per the chart, 1% of SPQ work in aesthetics now; 12% work in social care; 12% are working in wards or intensive care in hospitals; 16% are working in general practice. In fact district nursing seems to be a supply route into general practice.
- It just shows you how talented and flexible this workforce is.
- The Nursing in the Digital Age report was originally created in 2018. It showed a digitally literate workforce, experience workforce and technology was being effectively in some place.
- The challenges included lack of reliable IT, more training was required, lack of interoperable systems.
 - Scheduling platforms are a real challenge to people, in some cases they were making people leave their jobs! It became a barrier to work. By now in the 21st century, most of us should have access to wi-fi but they didn't.
- We've just closed the survey on the workforce impact assessment of Additional Roles Reimbursement Scheme (ARRS) (England specific), 500 people responded in only 3 weeks which was great.
- ARRS hasn't decreased the workload, it's increased people's workload.





2. The Community Nursing Workforce - where are we now?

- This is not uncommon however, as when you introduce something novel into the workplace because there's a form of adaptation.
- But people should be consulted on things which affect their work or workloads
- Initial emerging issues are inequality by pay and conditions, shifting work that colleagues can't complete, role creep particularly for nursing associates (assuming that nursing associates can do the same job as a general practice nurse, when they can do the same tasks which is not the same as the same work as they don't have the experience and can't perform at the same level.
- The taskification of care has become prevalent.
- DN Today report has also recently closed, thank you to all 1600 who responded. You work a lot of pain overtime! 1/3 said that virtual wards have increased their workloads. The report will come out soon.
- We've also recently finished some work with Marie Curie: 70 years ago we looked a end of life care with them and we decided to do the same survey 70 years later, sadly not much as changed. This report will be out soon too.
- I was talking to midwives the other day and they said, bring your own chair or build your own table!
- It's up to us to do more, but it's up to others to do more too. We should insist on being invited! Ally-ship is important, if I'm at a table I ask where the nurses are.
- If we devalue nursing, everyone else devalues nursing.



3. Round table sessions

Table 1	Janice Algar QN	How the care act and the local authority can support the work of community nurses
Table 2	Sarah Jarvis QN	Developing the Advanced Clinical Practitioner Role within the Prison Environment
Table 3	Helena Brady QN	Management Referrals in Occupational Health
Table 4	Grace Henderson QN	Developing Advanced Clinical Practice Roles Within a Community Setting
Table 5	Michelle Hoole QN	The NQN System Rotations Programme - The Derbyshire Nurse
Table 6	Hannah Jones QN	End of Life Care Boxes, the little box of love and hugs
Table 7	Heather Pepper QN	Genomics in the Community
Table 8	Sharon Neill QN	Our wound care community: empowered through education
Table 9	Ruth Bailey QN	Management of menopause in the community
Table 10	Donna Lord QN	Management of Chronic Pain
Table 11	Heidi Dine QN	Preparing Social Care Nurses for OSCE Success
Table 12	Marie Massey QN	Building a Resilient Primary Care Workforce - South Yorkshire Approach
Table 13	Lynne Barlow QN	Bitesize Learning - How to Perfect the Video Consultation
Table 14	Michelle Griffin QN	Dental Desensitisation, care planning, and support for people with learning disabilities in accessing dental services and effective oral care
Table 15	Sandra Lawton QN	Supporting Children, Young People and their Families with eczema
Table 16	Katie Mills QN	Shared Decision Making and Community Nursing
Table 17	Sam Sherrington QN	Safer staffing
Table 18	Cate Wood QN	Leadership Programmes
Table 19	Agnes Fanning QN	Field Specific Standards for Specialist Practitioner Qualifications
Table 20	Amanda Young QN	Community Nursing Innovation Programme



4. NMC in Exploring the Regulation of Advanced Practice

Sam Foster, Executive Director for Professional Practice, NMC

Regulatory Role

• The NMC set standards, maintain a register, investigate concerns; resources and guidance to deliver our standards and address challenges; share intelligence to support workforce development and support sectorwide decision making

Advanced Practice

- Management of complete episodes of care in areas/scope of practice assessment, diagnosis and treatment
- We recognise the need to engage as wide a range of views as possible and we are focusing on working together across the sector.
- Nine key lines of enquiry group outputs will create development of recommendations to be presented to Council (January 2024)
- Read more about the 8 work-streams here: https://tinyurl.com/5a6km8p4

Progress so far

- The appointment of an independent chair (Kay Fawcett OBE), inaugural meeting 4 September
- Exploring specific key lines of enquiry (KLOE) to inform the future direction of this work
- Joint regulatory roundtable
- Community of interest which more than 900 have joined



4. NMC in Exploring the Regulation of Advanced Practice

Sam Foster, Executive Director for Professional Practice, NMC?

- Convening a nursing and midwifery researchers' roundtable
- Next steps
- Paper to Council 31 January 2024
- Phase Two from February 2024
- How you can help
- Engage with specialities group, with nursing and midwifery adviser workshops
- Join the community of interest
- For more, email, AdvancedPractice@nmc-uk.org



5.The UK Advanced Practice Landscape: A Council of Deans of Health Perspective

Professor Alison Machin, Chair of the Council of Deans of Health

- I'm a nurse and health visitor by background, community nursing is dear to my heart!
- We have 105 University members across every region and nation of the UK representing faculties, schools and departments that teach nurses, midwives and AHPs
- Our members teach 97% of nursing students and 97.7% of all postgraduate healthcare students in the UK
- Together they are teaching 200,000 healthcare students at any one time.
- Our members are big stakeholders in this conversation, it's a big collective voice.
- The reason I'm here today is to talk about Advanced Practice: we have an Advanced Practice CoDH Group of members who can act as a reference group in the collaboration
- Ed Hughes, CoDH CEO, is a member of the NMC Advanced Practice Steering Group
- Advanced practice is also on our agenda for ongoing discussions with our Australian Council of Deans partners
- We don't yet have a single CoDH policy position on the future of advanced practice
- We are working with the possibility that there will be greater regulation for nursing and midwifery going forward and are keen to be part of the conversations





COMMENTS

A selection from today's 471 delegates:





Thank you for attending Day 2 of our #QNI2023 conference!

We look forward to seeing you tomorrow for Day 3, where the theme will be Population Health and Sustainability.



Please consider donating to the QNI so that we can continue to deliver free conferences like this one.

Scan the QR code to find out more. Thank you!

