

PACESETTER SCHEMES 2018-19

Health Board	Cwm Taf University Health Board
Pacesetter Title	Development of Advanced Training Practice Hubs for Pre-registration and Advance Nurse Practitioner roles
Context: what is the current evidence and how does this project add value?	<p>As we all know General Practice is currently facing an unprecedented workforce crisis comprising of severe GP shortages and a looming shortage of Practice Nurses and Advanced Nurse Practitioners. The timing of this coincides with increasing demands on primary care with an ageing population with multiple comorbidities and increasing chronic diseases in the wider population.</p> <p>A survey of general practice nurses (GPN) from the Queens Nursing Institute in 2015 found that 33.4% of general practice nurses are due to retire by 2020. This means that general practice will lose a critical mass of experienced and skilled General PNs in the next three years. In Cwm Taf the average age of the current practice nurses is 45 years across 41 practice and therefore we have a looming crisis but an opportunity to do something about it. Alongside this picture there has been a drop in student nurses selecting Primary Care placements.</p> <p>Presently there is no clear plan at a cluster level to recruit and retain enough GPNs primary care and we will be in a situation where there is both an acute shortage of GPs and practice nurses, at a time when we are facing the greatest demand on services that we have ever faced. Although there is a focus on the development and expansion of 'new roles' within Primary Care, practice nursing remains one of the core and critical components of the transforming model for Primary Care.</p> <p>Historically student nurses have had little or no exposure to general practice. Compared to the well-established placements that medical students have in general practice and the clear training path that there is for GP training, no clear comparable pathways exist for practice nurses or ANPs. In most cases pre-registration nurses have a 6-8 week placement out of their whole training programme in primary care and community but out of this placement may spend just a week in a GP Practice. In respect of Nurses who wish to develop their skills to Advanced Practitioner Level, there is no robust structured framework to ensure they develop their skills and competencies. In the large they gain the qualification after 3 years of academic work and are then expected to operate at an enhanced level often taking on complex work that a GP would do after 7 years intensive training and mentorship.</p> <p>In respect of ANPs</p>

This Pacesetter is focusing on the development of a sustainable nurse workforce at both the pre-registration stage and also the Advanced Nurse Practitioner. This is not to say that the existing practice nurses are overlooked; their needs are already supported by the Primary Care Support Unit by way of mentorship, coaching and also training programmes.

The Advanced Training Practice Hubs for Pre-registration Nurses - The initiative mirrors the very successful GP training scheme that has been operating in England for a number of years; it is based on a model used in Yorkshire which has been running since 2009 and has recruited significant numbers of student nurses into primary care.

The model is extremely simple. It is based on the premise that GP practices, in particular established training practices, are already very experienced in offering high quality training places to postgraduate doctors and medical students. This model would put GPs in control of their future nursing workforce, allowing practices to work together and the clusters their 'grow their own'. The initiative will involve the identification of HUBs and Spokes. The Hubs will be responsible for liaising with the Universities and setting the standards and enrolling Spokes. The Spokes will host and train students. For the first year, 9 students have been accommodated across 3 practices in Cwm Taf.

This model is based on the advanced training practice scheme, which was developed in 2009 in Yorkshire and we are working closely with Dr. Peter Lane who is the Clinical Lead and Christine Pearce who is the Programme Lead. Health Education Yorkshire and the Humber set up the Advanced Training Practice Scheme to ease workforce pressure. In just over six years, it has created capacity for 350 student placements in more than 130 practices in the region.

Cwm Taf have been to visit the Yorkshire team and they are willing to 'partner' with us and share their Learning and to further contribute to the evaluation of the concept. Early discussions have also taken place with Dr Christopher Jones in his new role as Interim Chair Health Education and Improvement Wales and he is interested from the perspective of developing a model for Wales.

Is there evidence that this works?

There is overwhelming evidence that the Yorkshire scheme is hugely successful. 10% of the undergraduates that pass through the primary care placements have been recruited into general practice. A recent evaluation in January 2017 showed that 68% of students who had a placement in general practice changed their views for the

better. In total 84% of the students viewed general practice in a positive light. The scheme has been so successful that it has now informed the development of the wider National Training Hub Initiative (NTHI) in England. The NTHI is part of the 10 point plan developed by investment from NHS England to expand and support the general practice workforce.

The Yorkshire ATPs is the leading Hub model in the UK. There are now a total of 187 GP practices participating in the Yorkshire and Humber region, which equates to 23% of the GP population. Given its undoubted success it is vital for us to understand how and why it works and how it differs from other NTHI models that have been set up in England.

There have been a number of small evaluations of the various NTHI models in the UK, however these have mainly focused on feedback from students and mentors. Many of the NTHI schemes funded by health education England have been small-scale pilots and have already finished due to funding being stopped. The Yorkshire model is showing that a key factor in the success of the ATPS scheme has been the support and buy in from partner organisations.

The Advanced Training Practice Hubs for Advanced Nurse Practitioners

Although the Advanced Nurse Practitioner (ANP) role within Primary Care is well established, the role within the GP Out of Hours service is less well developed. At a local level, this is currently limited to one Advanced Nurse Practitioner working within the GP Out of Hours service although they are in the process of recruiting more. The aim of this scheme is to provide a supportive training environment which will equip individuals with the skills and competencies required for general practice in hours and OOH for urgent care.

Against this background we aim to help to support 4 individuals gain their ANPs skills and competencies through a structured training/development programme. On completion of the MSc Advanced Clinical Practitioner the ANP trainees will be appointed as Advanced Nurse Practitioners - Primary Care. This is a 3yr programme and they will be required to work within a named GP Practice alongside their "Designated Supervisory Medical Practitioner (DSMP)" to ensure that all Clinical Learning Outcomes (CLOs) are met. At the same time they will shadow their designated ANP mentor one day per week, the ANP trainee will be supernumerary to the staff establishment.

3 practices are involved, 2 of which are currently training practices and providing medical training and / or post graduate medical student training. 2 of these are also involved in the pre-registration nurse training programme. A GP clinical lead has been identified and has scoped the training curriculum and in house competency assessment for the placement in GP Practice in conjunction with Cardiff University and the UHB's Senior Nurse for

	<p>Primary Care and Community.</p> <p>The ultimate aim is for the Advanced Training Hubs/Spokes to offer multidisciplinary training places for clinical pharmacists, physician associates, physiotherapists and other professions who are important members of the transforming primary care team. They would train, learn, consolidate learning and work together from the start of their career. This will be explored in year 2.</p>
Aims of project	<p>The aims identified below apply to the development of Advanced Training Practice Hubs include:</p> <ol style="list-style-type: none"> 1. To increase the number of structured educational learning placements within Primary Care within Cwm for both Pre-registration Nurses and for ANPs 2. To promote Primary Care Nursing as a first choice career pathway 3. To enable GPs and Primary Care Clusters to work together to focus on workforce planning and development and 'growing their own'. 4. To develop the local footprint's education training capacity and capability via increasing its ability to accommodate multi-professional education/training and development opportunities 5. To encourage the establishment and lead the development of Educator networks 6. Improve education quality and governance and act as a local coordinator of education and training for primary and community care 7. To encourage the up-skilling existing primary care staff to act as mentors and supervisors as professionally appropriate 8. To create and maintain local relationships so that mentorship and supervision skills can be shared across a the cluster footprint 9. Making sure cluster education/training provision is appropriate for primary care need 10. Collecting feedback and sharing best practice on a cluster and also inter-cluster basis to improve the quality of all placements 11. The ultimate aim is the development of 'Centres of excellence' for all health and social care professionals e.g. development of staff in nursing homes or supporting mentors in the interdependent sector such community pharmacies etc. 12. Collaboration between the UHB and the University of South Wales and Cardiff University, GP Practices,

	and the UHB to ensure that we train and support skilled, competent and confident individuals who wish to work within Primary Care in Cwm Taf.
Allocation	£286K (previously allocated to the extended PCSU)
Start date of project	We have already commenced the two schemes in November 2017 for the ANP element and January 2018 for the pre-registration element. This was necessary to align with the academic year as we did not wish to lose the opportunity to support the initiatives. Both have been driven by GPs and are fully supported by their clusters. It was also felt that we did not want to curb the enthusiasm of these GP Trainers who are interested in developing the workforce.
Alignment with Emerging Model	<p>The work which is taking place around the transforming Primary Care model states that stability lies at the heart of the success and that it is dependent on a skilled, confident and competent workforce. Whilst a lot of work has previously focused and continues to take place around developing 'new professional roles' and a wider multidisciplinary team this cannot be done at the expense/neglect of the traditional roles which are still required. The practice nursing workforce (from HCSW, practice nurse to ANP) will continue to be a vital role within the Primary Care team.</p> <p>The Advanced Training Hub Initiative will ensure that trainees are exposed to the 'true' challenges of providing care in the community within a supportive team-based working culture and not in isolation, and for a meaningful period of time.</p> <p>This model will provide the scaffolding for the training of newly qualified nurses into practice nurses, and potentially provide a training model for all multi-professional roles such as, paramedics, pharmacists and physician associates, physiotherapists, OTs etc.</p>
Potential to demonstrate financial redesign / resource shift	The shift of resources from secondary care to primary care can only take place where there are stable practices employing a sufficient workforce who are both skilled and competent. This initiative aims to help support the core foundation of General Practice.
	Ready to submit

Dates for submission of Business Plan and Delivery agreements	
Status within: HB strategy IMTP process Cluster Action Plans	<p>Merthyr Cluster and Rhondda Clusters plans already incorporate the developments and there is interest from the 4 remaining clusters in the event it is possible to extend the pilots.</p> <p>This scheme has been included within the Primary Care and Localities IMTP. Formal feedback is due 13th February and final submission is due in mid-March 2019.</p>
Timescales for each stage of project, with rationale	<p>Pre-registration nurses</p> <p>January 2018: 9 undergraduate students have already been chosen from this academic year cohort. The first students have been placed in the Hub and spokes. We have one Hub practice, Pont Newydd Medical Centre and two spoke practices, Cwm Gwrydd Medical Centre and Morlais Medical Practice.</p> <ul style="list-style-type: none"> • Two of the practices are training practices, and all provide undergraduate medical student training. • The practices have completed an educational clinical audit with the University of Glamorgan. • A total of 5 practice nurses have completed mentorship training. • The Hub practice team has met with each spoke and explained the scheme and answered any questions. • The Hub practice has created an outline of an educational timetable and this can be adjusted to the individual practice requirements. • Each placement will be 6 weeks in duration; the students are expected to be a combination of 1st, 2nd or 3rd year students. • The student have a named mentor who will lead the placement. <p>9 students will continue to be recruited for each academic cohort for 2018 and 2019.</p> <p>ANPs</p> <p>November 2017: 4 ANPs have been appointed (to align with academic year).</p> <ul style="list-style-type: none"> • 6 week induction programme completed. • 4 Practices have been identified across, 3 clusters to host the ANP students. These include Morlais Medical Practice, Pont Newydd Medical Centre, Dr Indu Nair and Forest View Medical Practice. • GP Mentors have been identified

	<ul style="list-style-type: none"> • ANP Mentors have been identified • ANP is based a minimum of 2 days a week within a practice alongside GP Mentor • ANP is based a minimum of 1 day a week with her/his ANP mentor <p>April 2018 to December 2019: preparation to extend the programme to Clinical Pharmacists</p> <ul style="list-style-type: none"> • Work with cluster GPs and Medicines Management team to develop a training / competency <p>2019 (date to be confirmed): first intake of clinical pharmacists</p> <p>Cwm Taf is waiting to receive confirmation of the placement of physician associates and if approved this group will be factored into the development programme.</p>
Evaluation methodology and measures to be used	<ul style="list-style-type: none"> • The evaluation methodology will follow that of the Yorkshire model. The team in Yorkshire have agreed to 'partner' with Cwm Taf UHB and to share their information. It will include an assessment of ; • Ongoing workforce needs assessment on cluster basis • How many practices reporting that they are experiencing practice nurse/ANP recruitment issues • Survey of Student experience • Survey of GP Satisfaction / experience • No of Students decided to take up posts within the Cwm Taf as a result of the programme • No of substantive appointments (for all professions) made within Cwm Taf as a direct result of the training programme • Assessment of number of the increase in the no of training places currently available in primary Care compared to current training provision • Workforce data, including number of substantive practice nurses and ANPs, clinical pharmacists, physician associates <p>Data collection will be collated and provided by the Hub Practice with support from the Rhondda Cluster Development Manager who is providing the project management support.</p>
Project support available	<p>Project Management Support is provided Cluster Development Manager is supporting the project</p> <p>Clinical Lead identified for ANP – Dr Mark Semmens</p> <p>Clinical Lead identified for pre-registration – Dr Gaynor Thomas</p> <p>Yet to gain support from WEDS</p>
	Primary Care can only effectively respond to the challenges and reduce health inequalities if it has a stable

<p>Describe anticipated impact on health inequalities</p>	<p>confident and competent workforce. The pacesetter aims to achieve this.</p>
<p>Potential for rollout at scale, with indication of costs and workforce implications</p>	<p>Pre-registration Nurses The second year of the pilot April 2018 – March 2019 will focus on recruiting additional spoke practices and those that currently undertake training will be prioritised as these practices will already have the required structure in place within their practice. It is envisaged that by the end of the second year of the pilot there will be 12 spokes in place.</p> <p>April 2019 to March 2020 will focus on the development of another Hub to support the additional spokes that were recruited in the previous year as well as recruiting additional spokes.</p> <p>ANP 4 nurses have commenced the ANP 3 year programme in autumn 2017 and it is hoped that a 2nd intake of further 4 nurses can take place in the new academic year in the autumn 2018. This is dependent on the approval of this Training Hub Initiative as part of the pacesetter funding.</p> <p>This Training Hub Initiative will provide the scaffolding for the training of newly qualified nurses into practice nurses, training of advanced nurse practitioners, paramedics, pharmacists and physician associates.</p>

NATIONALLY AGREED CRITERIA FOR PACESETTER PROGRAMME – 2018/19

1. The schemes should be aligned to the work of the Implementing the Emerging Model Group in terms of building on:
 - Outcomes of previous Pacesetter projects
 - The whole system emerging model for primary care
 - Outcomes of the Pacesetter Critical Appraisal
 - Outcomes of the Parliamentary Review into Health and Social Care
2. Projects should actively explore the potential for whole system financial redesign and resource shift between sectors
3. Each project to be underpinned by a clear business plan and delivery agreement that has been agreed by the Health Board executive team, PC Directorate, cluster leads, the relevant cluster and the professionals responsible for delivering project outcomes.
4. A clear and realistic approach to timescales for project outcomes that takes account of bedding in, transforming care and reporting arrangements.
5. Robust measures for evaluation to be defined at the outset and using an appropriate range of methodologies to give a clear understanding of outcomes and benefits, including costing
6. The programme of work to be an integral part of the relevant cluster action plan, the health board strategy and the IMTP process
7. Evidence that the project team will be supported through appropriate backfill arrangements; dedicated project management; access to expertise in research analysis, IT systems usage and data analysis.
8. Consideration should be made of the specific challenges faced by professionals working with deprived communities in relation to innovation and redesign. Primary care teams in these areas often need more support and/or resource to initiate new ways of working and a proactive approach is required to promote innovation.