

FOURTH PROGRESS REPORT

NURSING & MIDWIFERY STRATEGY 2003-2006

“PROGRESSING PRACTICE: TRANSFORMING CARE”

Reviewed and Updated by:

Gary Etheridge
Director of Nursing, Midwifery, Quality & Risk

Andrew Harrington
Deputy Director of Nursing, Quality & Risk

December 2004

INTRODUCTION

The Nursing and Midwifery Strategy (2003-2006) 'Progressing Practice Transforming Care' was launched in July 2003, following six months work undertaken by Trust Nurses and Midwives.

The Strategy details a number of targets focusing on Leadership, Clinical Practice, Recruitment & Retention and Education and Workforce Development and can be summarised as aiming to:

- ◆ Develop strong Nursing and Midwifery Leadership
- ◆ Optimise staffing levels
- ◆ Develop staff to their full potential and ensure they are competent to do their job
- ◆ Prioritise and focus on the fundamentals of practice
- ◆ Ensure that Nursing and Midwifery roles are developed to meet the changing needs of patients
- ◆ Enable innovative evidenced based practice
- ◆ Generate and co-ordinate views of practitioners

Progression of the targets outlined within this plan do not represent an exhaustive list of all Nursing and Midwifery initiatives taking place within the Trust, and the Nursing and Midwifery Strategy should not stifle local developments within wards, clinical settings and Divisions. In fact, it should be viewed as a platform from which the Nursing and Midwifery staff are working towards best practice Trust wide.

LEADERSHIP

Clinical engagement and leadership remains the key to achieving excellence in Nursing and Midwifery practice. The Trust has and will continue to identify, nurture and develop Nursing and Midwifery leaders as role models who will make a vital contribution to the modernisation of health service in the 21st century.

	TARGET (S)	PROGRESS
1	Heads of Nursing/Midwifery will undergo a structured personal development programme that will be crucial to the development of conceptual, analytical and strategic skills.	<ul style="list-style-type: none"> ◆ Heads of Nursing / Midwifery Development programme. Programme consisted of Action Learning Sets (3months) and 1-1 coaching (3 months). ◆ One-to-one meetings with Heads of Nursing / Midwifery and Director of Nursing & Midwifery take place every 5 weeks. ◆ The Director of Nursing & Midwifery undertakes a joint appraisal of the Heads of Nursing / Midwifery with their Divisional Manager.
2	Modern Matrons will actively participate in Action Learning Sets, in order to develop and enhance effective clinical and operational leadership skills, thereby developing their ability to meet challenging risk management and Clinical Governance objectives and service plans.	<ul style="list-style-type: none"> ◆ Modern Matrons completed a formal Development programme, which incorporated Action Learning in 2003. Matrons continue to meet in their Action Learning Set, which is self-facilitated. ◆ Modern Matrons are fully engaged in the Clinical Governance agenda and actively address governance issues at the grass roots of practice. ◆ Modern Matrons have regular one-to-one meetings with their Heads of Nursing / Midwifery and meet as a group with the Director of Nursing & Midwifery on a quarterly basis. ◆ A formal evaluation of the Modern Matron role will commence in Winter 2004. The evaluation will be undertaken in conjunction with the University of Hertfordshire.
3	The Clinical Leaders Development Programme for G grade Nurses and Midwives will continue quarterly, with a key focus on ensuring facilitation of the role from practitioner to visionary clinical leader against agreed competencies and performance objectives.	<ul style="list-style-type: none"> ◆ The Clinical Leaders programme chaired by the Director of Nursing & Midwifery continues quarterly. ◆ All Clinical Leaders have a yearly Individual Performance Review with their Modern Matron.

LEADERSHIP cont/d

	TARGET (S)	PROGRESS
4	Explore the need to establish a forum / structured buddying system for Clinical Leaders to share best practice/practical solutions in order to overcome operational constraints.	<ul style="list-style-type: none"> ♦ A brainstorming session will be undertaken at a future Clinical Leaders Day to determine if they would like a buddy system to be established.
5	Review leadership development programmes / modules so that aspiring Nurse / Midwife leaders are encouraged and nurtured and their development needs are systematically identified through the appraisal process.	<ul style="list-style-type: none"> ♦ A Staff Nurse development programme continues, (one day per month for 6 months) ~ two cohorts per year. Evaluation of the programme in September '04 revealed that 100% of Nurses had a preceptor allocated to them. ♦ A new D grade rotational programme commenced in April 2004. A second cohort is planned to start in October '04. ♦ The first D-E grade transition programme completed in Winter 2003. A second cohort commenced in January 2004. A further cohort is planned for November 2004. An evaluation of how many D grades progress into E grades will be conducted during October 2004. ♦ 5 cohorts of the F grade development programme have been held within the Trust since March 2001. The turnover of F grades within the Trust has further reduced from 16% to 10%, (March 2004). The next course is planned for October 2004. ♦ Midwives continue to work within a structured competency framework. ♦ An ongoing evaluation of the success of all Nursing & Midwifery Development programmes is completed on a regular basis and reported to the Nursing & Midwifery Strategy Group. ♦ The Clinical Leaders programme, chaired by Director of Nursing & Midwifery continues quarterly. ♦ SCBU has recently developed a framework for transition for Nursery Nurses. ♦ All Nursing & Midwifery staff have an updated IPR and PDP, in order to facilitate Agenda for Change.

LEADERSHIP cont/d

	TARGET (S)	PROGRESS
6	Continue the RCN Clinical Leadership programme and explore widening access to include other professional groups, ensuring programme objectives reflect the changing service requirements.	<ul style="list-style-type: none"> ♦ Two cohorts of 6 clinical leaders have been facilitated through the 18-month programme since July 2001, with a total of nine clinical leaders completing the programme. ♦ The license to proceed with a further cohort of 11 clinical leaders has been renewed. The third cohort programme commenced in July 2004. ♦ AHPs will be encouraged to join future programmes.
7	All Clinical Nurse Specialists / Nurse Practitioners will have clearly defined roles and competencies in line with a higher level of practice. These roles will be reviewed in terms of their contribution to patient care and the education and support provided to ward/departmental based Nurses and Midwives.	<ul style="list-style-type: none"> ♦ A clear job description for the role of Specialist Nurse and Highly Specialist Nurse has been developed, in preparation for Agenda for Change. Job Descriptions will be reviewed yearly at appraisals. ♦ A Specialist Nurse Directory has been developed and circulated Trust-wide. The Directory will be updated yearly. ♦ Nurse Specialists meet collectively with the Director of Nursing & Midwifery twice a year.
8	The Trust will encourage the development of Nurse / Midwife Consultant posts in relation to national guidance and recommendations, linked to clearly defined service requirements.	<ul style="list-style-type: none"> ♦ The Trust has appointed a Consultant Midwife and a Pre-Operative Consultant Nurse. ♦ The Director of Nursing & Midwifery explores the appointment of future Consultant Nurse posts in conjunction with the Heads of Nursing/Midwifery and Divisional Managers.
9	All Nursing and Midwifery leaders will be encouraged to reflect on and change existing patterns of behaviour and clinical practice in light of evidence based research and approaches/targets to modernize services in accordance with the NHS Plan and Improving Working Lives standards.	<ul style="list-style-type: none"> ♦ All Midwives have an annual review with their Named Supervisor of Midwives and have access to a Supervisor of Midwives at all times. Three experienced Midwives are currently undertaking the Supervisor of Midwives course at the University of Hertfordshire. ♦ The Trust's Clinical Supervision Strategy was re-launched in May 2004. There is now a cohort of 20 trained and active supervisors. The principles of clinical supervision are included in all Trust Nursing development programmes. Supervision workshops are planned throughout 2004/05. ♦ Information about clinical supervision is included in all recruitment packs for Nursing Applicants.

CLINICAL PRACTICE

The challenge for Nursing and Midwifery is to continue to meet patient and carer needs through new ways of working and effective utilisation of all Nursing and Midwifery resources with the Trust. Clinical practice will be based on the best evidence available. The specific targets outlined below represent not only discrete and fundamental areas of practice prioritised for development, but also a mechanism for challenging existing practice and exploring new practices to meet ever-changing demand.

	TARGET (S)	PROGRESS
1	Promote the Trust's commitment for enhancing the quality of patient care by using the 'Essence of Care' framework.	<ul style="list-style-type: none"> ◆ Work to progress the Food & Nutrition Benchmark commenced in June 2001 with two Trust wide audits having taken place in September 2001 & February 2003. The results of the audit have initiated the following changes: <ul style="list-style-type: none"> Introduction of snack boxes Trust wide Re-establishment of the Trust Nutrition Focus Group Implementation of a 'red tray' system, (which indicates that a patient is in need of assistance with feeding) within the Elderly Care Unit. Trust wide launch of the Red Tray system ~ August 2004 Development of a dedicated Essence of Care web page on the Nursing & Midwifery Intranet site Protected Mealtimes pilot project launched in October 2004 Re audit of Food & Nutrition planned for end of 2004 to allow for red tray and Protected Mealtimes Initiatives to become embedded. ◆ Work to progress the Record Keeping Benchmark commenced in September 2001 with two audits having being undertaken in December 2001 & December 2003. The outcome of the audits have resulted in the following changes: <ul style="list-style-type: none"> Standardization of Nursing & Midwifery documentation Trust wide Development of core care plans Record keeping training being included in all relevant development programmes A newly formed Nursing Documentation Steering Group reporting into the Trust Health Records Group Quarterly record keeping audits initiated throughout the Trust.

CLINICAL PRACTICE cont/d

	TARGET (S)	PROGRESS
1 cont /d	Promote the Trust's commitment for enhancing the quality of patient care by using the 'Essence of Care' framework.	<ul style="list-style-type: none"> ◆ The Privacy & Dignity Benchmark was launched in December 2003 with clinical teams discussing and reviewing their practice around Privacy & Dignity guided by an in-house tool based on the "Essence of Care" framework. Thirty-four areas across the Trust completed their audits and returned their results by March 2004. Nurses led the exercise but many areas involved other members of the care team (e.g. Physiotherapist, Occupational Therapist, Doctor, Chaplain, Ward Clerks) in their discussions. A number of wards were able to involve patients and/or visitors. Many good examples have been shared. Each area has developed their own action plan (equivalent to over 230 action points within the Trust) and common themes are being addressed through a Corporate Action Plan. Site-based comparison Groups meet on a monthly basis to share best practice and are currently planning next year's review utilising this information, aiming to involve users more comprehensively this time. ◆ A Steering Group to progress the Communication benchmark was established in November 2003. This group merged in January 2004 with the Trust wide "Thinking of Patients, People & Staff" (ToPPS) Group (<i>responsible for ensuring the principles of Clinical Governance are communicated to all</i>) to avoid unnecessary duplication of work. The ToPPS group continues to meet monthly. Issues involving communication between staff, patients, the Trust and other agencies have been explored. Work has commenced on projects to improve communication within the Trust such as the development of guidance on answering the phone and message taking and on the use of secrecy buttons on phones. <p>A local tool based on the Essence of Care Communication factors to assist teams appraise their practice was recently developed and reviewed by the group. The tool was launched through Divisional Sisters/Team Leaders meetings in June 2004. Benchmarking was undertaken by Clinical Teams over the summer period and completed by the end of September 2004. The results are currently being collated. As well as resulting in individual ward/department action plans to improve practice, this work will provide valuable base-line data for the continued work of the Steering Group.</p> <ul style="list-style-type: none"> ◆ Progression of the remaining benchmarks will take place throughout 2005.

CLINICAL PRACTICE cont/d

	TARGET (S)	PROGRESS
1 cont /d	Promote the Trust's commitment for enhancing the quality of patient care by using the 'Essence of Care' framework.	<ul style="list-style-type: none"> ◆ A Regional Essence of Care Network Group, chaired by the Trust's and a PCT Director of Nursing has been established. An Inaugural meeting was held in November '04. ◆ Essence of Care quarterly reports are produced and discussed at Trust Board & Clinical Governance Committee. ◆ Delivering the Essence of Care Benchmarks has been included as one of the Trust's Strategic Objectives.
2	Support evidence based practice by ensuring that all Nursing and Midwifery development programmes are designed to integrate theory with practice.	<ul style="list-style-type: none"> ◆ All Nursing & Midwifery programmes run in the Trust (D Grade Staff Nurse Development Course, D-E Grade Transition Course, D Grade Rotational Programme, F Grade Development Programme, Clinical Leaders Development programme & RCN Leadership) incorporate evidence-based practice within their overall content. ◆ The RCN Leadership programme license has been renewed and a further programme commenced in Summer 2004. <p><i>See Leadership, section 6, page 4.</i></p>
3	Reflect new ways of working in order to maximize the potential of the Nursing and Midwifery workforce and promote and progress multi-professional working by integrating the Chief Nursing Officer's 'Ten Key Roles for Nurses and Midwives' into service delivery.	<ul style="list-style-type: none"> ◆ Following Trust wide consultation two policies have developed which will enable Nurses from a number of clinical areas to be trained and approved to request pathology and x-ray investigations. A review of practice against these policies is planned for Summer 2005. ◆ A Policy for Nurse-Led discharge of patients to ensure that they are safely discharged home (or to another care setting) having undergone rigorous assessment of their individual needs by skilled Nurses to prevent delays in discharge and ensure beds are available for patients requiring admission has been ratified. This practice has been implemented and audited on a number of wards throughout the Trust. ◆ Active development continues in all areas relating to the Ten Key Roles, with progress reports produced and circulated Trust wide three times a year. ◆ Further work will be undertaken in 2005 in under to scope the possibilities for increased midwife scanning.

	TARGET (S)	PROGRESS
4	Develop a framework whereby complaints and untoward incidents are used positively to influence the developments of practice.	<ul style="list-style-type: none"> ◆ A Complaints Advisory Group (CAG) has been established. ◆ PALS record all relevant informal complaints against the 9 Benchmark Standards. Themes and trends of all informal / formal complaints are explored at CAG and at the Professional Nursing & Midwifery Strategy Group. Practice issues are progressed accordingly by the Heads of Nursing / Midwifery, Modern Matrons & Practice Development Team.
5	To regularly review and agree staffing establishments for all clinical areas, which take account of evidence-based guidelines, budgets and safe levels of patient care.	<ul style="list-style-type: none"> ◆ All Nursing establishments were reviewed by the Heads of Nursing & Director of Nursing & Midwifery in February 2004. Ongoing reviews of the Nursing & Midwifery establishments are undertaken by the Heads of Nursing/Midwifery as and when staff leave. ◆ A Review of the Maternity establishments will be undertaken in Winter 2004 following the receipt of the Birth Rate Plus report. Consideration is being given to further development of the midwifery assistant role to provide greater clinical support to midwives.
6	Review and standardise all Nursing and Midwifery patient documentation and support work towards the establishment of the electronic patient record.	<ul style="list-style-type: none"> ◆ Standardised Nursing documentation was introduced Trust wide in June 2003. ◆ ICP for Pre Operative Assessment and Day Surgery developed. ◆ ICP Nurse, employed by Watford & Three Rivers PCT will be working with the Trust to develop an ICP for # NoF, Heart Failure, Sickle Cell, the Patient Journey and Breast Care. ◆ An ICP for the Care of the Dying has been approved for use within the Trust. A Palliative Care Nurse Specialist has been seconded for one year to implement this pathway.
7	Develop ways of facilitating a greater understanding of risk management, clinical effectiveness and audit in order to change and improve practice. Thereby, ensuring learning and development as a result of adverse events.	<ul style="list-style-type: none"> ◆ A Trust-wide Risk Action Plan has been developed and is reviewed on a quarterly basis by the Director of Nursing & Midwifery, Trust Risk Manager & the Trust's Risk Management Committee. ◆ Divisional analysis of historic data is being carried out by Divisional Risk Leads. Divisional data is fed to the Clinical Governance Manager for inclusion in Clinical Governance reporting.

CLINICAL PRACTICE cont/d

	TARGET (S)	PROGRESS
7 cont /d	Develop ways of facilitating a greater understanding of risk management, clinical effectiveness and audit in order to change and improve practice. Thereby, ensuring learning and development as a result of adverse events	<ul style="list-style-type: none"> ◆ Risk Scoring Workshops are being delivered on a quarterly basis as part of the Risk Management and Health and Safety training for Managers. ◆ A self-directed learning Root Cause Analysis (RCA) toolkit has now been launched by NPSA (on their website) and Divisional Risk Leads have been directed towards it and asked to ensure staff who undertake RCA within their Division access the tool. ◆ The Trust Risk Manager regularly contributes on Nursing and Midwifery Development Days. ◆ Divisional Annual Risk Reports & Strategies have now been written. ◆ Nursing & Midwifery staff are involved in numerous clinical audit initiatives. ◆ Quarterly wristband audits are now undertaken Trust wide to ensure levels of good practice are maintained. Results are fed back at the N&MS Group and appropriate intervention taken by the Heads of Nursing/Midwifery & Modern Matrons.
8	Ensure all Nurses have access to clinical supervision on a regular basis and for Midwives statutory supervision to develop and value their skills and competence and enhance team working.	<ul style="list-style-type: none"> ◆ The Trust's Clinical Supervision Strategy was re-launched in May 2004. ◆ All Midwives have an annual review with their Named Supervisor of Midwives & have access to a Supervisor of Midwives at all times.
9	Focus on closer collaboration across professional roles and functions, through the development of shared care pathways.	<ul style="list-style-type: none"> ◆ ICP for Pre-Operative Assessment and Day Surgery has been developed. ◆ ICP Nurse, employed by Watford & Three Rivers PCT is working with the Trust to develop a number of ICPs.
10	To work with colleagues to devise a mechanism to support the supply and administration of medicines under 'Patient Group Directions' Trust wide.	<ul style="list-style-type: none"> ◆ An index of Patient Group Directives is currently available from Pharmacy. ◆ There are 7 Non-Medical Prescribers (NMP) in the Trust. A further cohort of 5 staff have enrolled on the 2004/05 programmes. ◆ The Director of Nursing & Midwifery meets with NMPs on a quarterly basis.

CLINICAL PRACTICE cont/d

	TARGET (S)	PROGRESS
11	Strengthen the public health roles of Nurses and Midwives by focusing on the needs of patients and their families in areas of soci-economic deprivation.	<ul style="list-style-type: none"> ◆ Community Midwives promote smoking cessation programmes and service through contact with women. ◆ Joint antenatal guidelines introduced January 04 to provide Trust wide protocols for antenatal care, thereby, improving equalities of the service. ◆ MSLC established and functioning effectively. ◆ Focus Groups with maternity users currently being planned to identify needs for service development.
12	Partnership working with patients and service users will be embraced to ensure that their involvement and contribution shapes the future of Nursing and Midwifery practice.	<ul style="list-style-type: none"> ◆ Patient representatives are actively involved in the Essence of Care Benchmarking and results from audits are fed back to the Patient Panel. It is expected that further audits will involve patient representatives and again be fed back to the Patient Panel. ◆ Patient Representatives have joined the Privacy & Dignity Benchmark Comparison Groups.
13	To improve the quality of care delivered locally through the implementation of an 'Observation of Care' Strategy Trust wide.	<ul style="list-style-type: none"> ◆ An Observation of Care Strategy was developed and ratified by the N&MS Group in June 2004. ◆ Ten pilot areas completed observations during December 2003 & January 2004. ◆ Trust wide launch took place in June 2004 with first observations taking place in June & September 2004. Quarterly reports will be presented to the Professional Nursing and Midwifery Strategy Group identifying themes that arise from the observations. Further observations are planned for December '04 and April '05.
14	In partnership with the Area Child Protection Committee and Designated/Named Professionals agree a local action plan in response to the recommendations as stipulated in the Victoria Climbié Inquiry Report, 2003.	<ul style="list-style-type: none"> ◆ A Trust Action Plan and Gant Chart have been developed addressing all relevant Health, Social & General Recommendations. ◆ The action plan is reviewed on a quarterly basis by the Named Nurse & Director of Nursing & Midwifery and is presented regularly to the Trust Board and the newly formed Hospital Child Protection Steering Group. ◆ Child Protection Annual Report presented to the Trust Board in December 2004.

RECRUITMENT AND RETENTION

To ensure success at personal, professional and organisational level the Trust must work to ensure the numbers, skills and competencies of Nurses and Midwives reflects activity across the organisation and can meet future development and demand. Stabilising the workforce will ensure the Trust supports, develops and retains its staff. This approach will be incorporated into the Trust's Human Resource Strategy, 2002-2004 and supported by the following targets, which interlink with the Improving Working Lives initiative.

	TARGET (S)	PROGRESS
1	To improve recruitment and retention rates for Nurses and Midwives, in accordance with the Trust's Nursing and Midwifery Recruitment and Retention Strategy.	<ul style="list-style-type: none"> ♦ The Trust's Nursing & Midwifery Recruitment & Retention Plan is updated and circulated Trust wide on a quarterly basis. Quarter 2 figures indicate that qualified Nursing & Midwifery turnover has again reduced. It now stands at 14.5%. The total number of Nursing / Midwifery staff in post (head count) is now 2050. Turnover rates for HCA/NA have reduced from 29% to 22% ~ the high rate is partly due to an increase in staff leaving to take up nurse training.
2	Identify the implications of moving into the national programme of NHS Professionals, and make the necessary preparations to ensure a smooth transfer.	<ul style="list-style-type: none"> ♦ NHS Professionals in place within the Trust.
3	In partnership with the HR Department, local job centres, career forums and Higher Education Institutes, promote educational opportunities for careers in the NHS and particularly for nurses and midwives. Thereby meeting the Confederation's local commissioning targets and promoting the NHS as a model employer.	<ul style="list-style-type: none"> ♦ A Multi-professional Cadet Scheme (20 candidates employed) was established in September 2003. ♦ The Scheme was re-launched in Spring 2004 and 40 have recruits been employed to date. Two candidates have progressed to nurse training. Applications have already been received for the March 2005 intake. ♦ The Trust has participated in the National NHS Job Shop NHS recruitment campaign. ♦ Trust representatives will attend recruitment events during 2004 / 05. ♦ A Nursing & Midwifery Careers Advisory service was established in 2004 and continues to offer support and advice to pre & post-registered staff.
4	Review the professional development needs of the Trust's temporary workforce, i.e. nurse/midwife bank, in line with service objectives and in conjunction with NHS professionals.	<ul style="list-style-type: none"> ♦ Any decision re appraisal of NHSP staff is on hold until decisions are made regarding where future contracts are held. NHSP Special Health Authority have plans to build a call centre locally, this may change how NHSP operates in West Hertfordshire. ♦ The Deputy Director of Nursing chairs the NHSP Professional Advisory Group. This group ensures that there is consistency in expectations of NHSP staff across the quadrant.

RECRUITMENT AND RETENTION cont'd

	TARGET (S)	PROGRESS
5	To develop core competency based job descriptions and competencies for staff, which allow flexibility to meet the needs of individual specialities.	<ul style="list-style-type: none"> ◆ Core Job Descriptions and competencies have been developed for D, E, F, G Grades, Heads of Nursing, Modern Matrons and Specialist Nurses. ◆ Competency frameworks are in place in many specialist areas such as ITU & A&E. The KSF will assist with the dissemination of competency-based frameworks for all staff. Competency frameworks are in place for newly qualified F grade midwives and for progression from F to G grade. ◆ The Head of Nursing for Surgery and Head of Practice Development will take on the role of reviewing, with colleagues, the Nursing competencies across the Trust. The Clinical Practice Forum is the vehicle to challenge collaborative dissemination and agreement of the competencies.
6	Enhance adaptation / supervised practice for overseas nurses and midwives, ensuring competency is maintained through structured personal development plan, local supportive infrastructure and in accordance with agreed standards.	<ul style="list-style-type: none"> ◆ Courses continue bi-annually. The last recruitment drive saw 250 electronic applications in one month. Due to visa application hold-ups the next course will now commence May 2005. ◆ Careers advice/professional development opportunities offered to all Nursing & Midwifery staff. ◆ Approximately 20 Indian Nurses joined the Trust in April 2004, to undertake adaptation. A further 20 places have been offered to Nurses from overseas for November 2004. ◆ Nurses from S. Africa, Zimbabwe, the Philippines, and the Caribbean have also joined the Trust. ◆ 8 overseas recruits have been promoted to junior sisters within the Trust. The possibility of supporting overseas trained midwives through adaptation is being given further consideration and 1 midwife is currently being supported through the programme.
7	To ensure that Nurses and Midwives are enabled to work in flexible ways according to their needs as well as those of the service.	<ul style="list-style-type: none"> ◆ IWL criteria achieved in 2003. ◆ Focus groups held during the summer of 2004, giving all staff the opportunity to debate how they perceive working in the Trust. ◆ The Trust is currently working towards Practice Plus status.

RECRUITMENT AND RETENTION cont'd

	TARGET (S)	PROGRESS
8	To support the development of an action plan to address concerns raised in staff attitude surveys.	<ul style="list-style-type: none"> ◆ Staff Attitude Survey information is currently being reviewed, new survey questionnaires sent to staff October 2004.
9	Every Nurse and Midwife who leaves a position in the Trust will undergo an exit interview, which will inform the Trust's Nursing and Midwifery Recruitment and Retention Survey.	<ul style="list-style-type: none"> ◆ Exit Interviews are conducted Trust wide. ◆ The results of exit questionnaires are circulated and considered by the Director of Nursing & Midwifery and Heads of Nursing / Midwifery on a quarterly basis. ◆ Modern Matrons conduct exit interviews with staff that leave their area of responsibility.
10	Continue to develop and enhance the Trust's Return to Practice initiative in collaboration with the Confederation to reach the desired target levels with specific support to returnees post employment. Thereby maximising potential capacity in recruitment and workforce development.	<ul style="list-style-type: none"> ◆ The Trust's Return to Practice course has been identified by the Nursing Times (NT) as an example of good practice. Presentation at NT national conference in Manchester, took place in March 2004. ◆ 10 Nurses and 3 Midwives commenced in March 2004, all of which passed and are now employed by the Trust. All midwives who have undertaken the RTP programme have been retained within the Maternity Unit. ◆ September 2004 cohort has now started, with 7 nurses and 2 midwives. ◆ Coffee mornings for March 2005 cohort to be held in November 2004.

EDUCATION AND WORKFORCE DEVELOPMENT

Equipping clinical staff with skills for inter-professional working is crucial to securing continuous quality improvement for patients and the development of a dynamic workforce. There is now clear evidence that inter-professional education is an approach, which cuts through traditional barriers leading to more efficient and effective practice. Many national reports have elevated inter-professional education very close to the top of the agenda for the Modernisation of the NHS. This approach will be embraced and integrated into the Trust's Education and Development Strategy, 2002-2004 and supported by the following targets.

	TARGET (S)	PROGRESS
1	An annual appraisal will be provided to all nurses and midwives. The outcome of the appraisal process will inform the Education and Training programme for the Trust, which will meet the needs of the organisation as well as the individual practitioner.	<ul style="list-style-type: none"> ◆ Review of Trust wide appraisal system commissioned. The new process will reflect the requirements of the Mandatory Training Plan and NHS Knowledge and Skills Framework and underpin progress towards IWL standards. ◆ A New Skills Training programme commenced in April 2004. ◆ The Lifelong Learning Plan has been ratified and is in use within the Trust.
2	Ensure appropriate clinical placements and assessors of a sufficient number are available across the Trust for NVQ / Cadet training scheme and pre-registration Nursing and Midwifery programmes which incorporate widened access.	<ul style="list-style-type: none"> ◆ 2 wte Education Support Nurses in post from January 2004 & 2 wte Education Support Midwives appointed February 2004. ◆ The Cadet programme is being evaluated over a 2-year pilot period in accordance with WDC requirements. Measures will include retention of cadets, progression into higher education and subsequent retention. The Cadet Scheme will also be progressively extended to ensure this is multi-professional. ◆ A new HCA/NVQ strategy has been developed and will be issued for consultation in during 2004. This addresses the complete HCA/NVQ pathway from workforce planning, recruitment, support, mentorship and pastoral care through to assessment as part of a systematic approach to the skills escalator. The strategy is part of the wider initiative to progressively introduce NVQ training across a range of staff groups. ◆ 52 HCAs have accessed Nurse training through the Widening Access Scheme since February 2003. ◆ Widening Access Scheme posters and information booklets are currently being designed. Work towards a standardised Beds & Herts wide information booklet through collaboration with WDC and HEI's are currently being developed.

EDUCATION AND WORKFORCE DEVELOPMENT cont/d

	TARGET (S)	PROGRESS
3	Draw upon local expertise in education, training and research to enable greater empowerment of students as learners, recognizing the value of work based learning in maximizing individual potential.	<ul style="list-style-type: none"> ◆ The 'Skills Facilitation' programme aims to train a cohort of staff to support the transfer of learning into practice and learners at practice level. ◆ All in house Nursing / Midwifery development courses include a work based element and participants have a practice supervisor to support learning in the workplace. Accreditation is currently being sought from the University of Hertfordshire for the F Grade Development Course and Staff Nurse Development course.
4	In collaboration with Hertfordshire Partnership Trust, enhance knowledge and development of skills in managing care for clients with learning disabilities/mental health in the acute hospital reflecting 'Valuing People' ~ A New Strategy For Learning Disability for the 21 st Century (2001).	<ul style="list-style-type: none"> ◆ A&E have worked with Hertfordshire Partnership Trust (HPT) to devise a protocol and policy for admission of Learning Disabilities service users. ◆ A Modern Matron, Lead Nurse for A&E, and the Lead Nurse for Clinical Support all attend a collaborative meeting to review and develop practice between HPT and WHHT, for Learning Disabilities service users. ◆ A bid for an Acute Learning Disabilities Liaison Nurse has been submitted to the WDC. Although the postholder will be employed by HPT, the Trust supports and endorses this initiative.
5	Enhance knowledge and skills of the nursing and midwifery workforce in contributing to the Trust's service and financial framework in line with local and national targets.	<ul style="list-style-type: none"> ◆ Ward Managers received training on budgeting skills as part of the Clinical Leaders Development programme in 2003. All Ward Managers meet with their respective Finance Manager to review their budgets on a monthly basis. ◆ Ongoing support is provided via regular one-to-one meetings with their Matrons.
6	In accordance with the Nursing and Midwifery Research and Development Strategy and Action Plan ensure that all nurses and midwives actively contribute to the research and development agenda, thereby striving to improve clinical care.	<ul style="list-style-type: none"> ◆ A new Nursing & Midwifery Research & Development Strategy and Action Plan were developed in late 2003 and launched Trust wide in Summer 2004. ◆ All Clinical Practice Guidelines for Nurses and Midwives are evidenced based. ◆ Introduction to evidence based practice is included in all Nursing / Midwifery Development Programmes. ◆ A successful bid has been made to the Burdett Trust for funds to support nursing research on Croxley Ward (WGH).

EDUCATION AND WORKFORCE DEVELOPMENT cont/d

	TARGET (S)	PROGRESS
7	Target priority areas in enhancing knowledge of child protection issues enabling informed decisions on managing multi-professional/multi-agency care for vulnerable neonates, children and young persons.	<ul style="list-style-type: none"> ◆ A Trust Child Protection Action Plan and Gant Chart have been developed addressing all relevant Climbié Health, Social Care & General Recommendations. ◆ The Trust's Named Nurse has developed a Child Protection Training Strategy. To date 450 plus staff have received training. An External Consultant will provide Child Protection training until a new Named Nurse has been appointed. ◆ The Trust has successfully recruited a full-time Named Midwife. ◆ Relevant Child Protection audits will be conducted late 2004.
8	Assist the Education and Training Department in developing a standardised Trust study leave policy and establish effective monitoring mechanisms that will record continuing professional development activity.	<ul style="list-style-type: none"> ◆ A 'Life Long Learning Plan (LLP) has been approved and ratified and is now in use within the Trust.
9	To undertake a Trust-wide training needs analysis (TNA) in order to encourage proactive commissioning of Pre and Post-registration education.	<ul style="list-style-type: none"> ◆ Following implementation of the LLP in September 2004, the Deputy Director of Nursing will undertake the TNA, in collaboration with Education and Training department. during October-December 2004.
10	Ensure that all clinical staff have appropriate training to develop information and technology skills and data analysis skills	<ul style="list-style-type: none"> ◆ The IT training needs of clinical staff will be identified during the appraisal process. ◆ European computer driving licence training has commenced in the Trust. All clinical staff are being given information on how they can access this training.
11	Explore the potential for a development programme for administrative and clerical staff to enhance their role in supporting clinical leaders by undertaking additional duties.	<ul style="list-style-type: none"> ◆ The Ward Managers Personal Assistant role is currently being piloted on Lancaster Ward at HHGH. An evaluation of the role has indicated that a comparative piece of work needs to be undertaken re the Ward PA and Ward Clerk role. Exploration to take place at the N&MS Group in early 2005. ◆ Housekeeper competencies are currently being developed and will be piloted in October 2004. An evaluation of the role will be produced and discussed at the N&MS Group in January 2005.

EDUCATION AND WORKFORCE DEVELOPMENT cont/d

	TARGET (S)	PROGRESS
12	Review and ensure the ongoing support to the continuous professional development of Nurses and Midwives, thereby maximising their potential within the multi-professional team.	<ul style="list-style-type: none">♦ The appraisal of Nursing / Midwifery staff is ongoing.♦ The Trust has trained twenty Clinical Supervisors who provide supervision on a regular basis.

CONCLUSION

Commitment to achieving the targets relating to Leadership, Clinical Practice, Recruitment & Retention and Education & Workforce Development is evident and has resulted in tremendous progress being made in all key areas.

Evidence demonstrates an environment where the development agenda is being taken forward to benefit local patient care.

Progress reports will now be produced 6 monthly, with the next report due in June 2005.

Gary Etheridge
Director of Nursing, Midwifery, Quality & Risk

December 2004

Andrew Harrington
Deputy Director of Nursing, Quality & Risk