

Reporting to:	Trust Board - 25 September 2014
Title	Integrated Education Report
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Previously considered by	
Executive Summary	This report presents key elements of Trust Integrated Education Activity over 2013-14 with priorities identified for 2014-15.
Strategic Priorities	
1. Quality and Safety	<input checked="" type="checkbox"/> Reduce harm, deliver best clinical outcomes and improve patient experience through our Quality Improvement Strategy
2a) Healthcare Standards: Operational Performance Standards	<input type="checkbox"/> To develop a transition plan, with supporting mitigation actions and contingency plans, that ensures the safety and short term sustainability of challenged clinical services. 2014/15 <input type="checkbox"/> To address the existing capacity shortfall and process issues to consistently deliver national healthcare standards. 2014/15 <input type="checkbox"/> To undertake a review of all current services at specialty level to inform future service and business decisions. 2015/16
2b) Healthcare Standards: Service Reconfiguration	<input type="checkbox"/> Complete and embed the successful reconfiguration of Women and Children's services <input type="checkbox"/> Develop a sustainable long term clinical services strategy for the Trust to deliver our vision of future healthcare services through our Future Fit Programme
3. People and Innovation	<input checked="" type="checkbox"/> Develop our leaders and promote staff engagement to make our organisation a great place to work through our People Strategy <input type="checkbox"/> Develop a robust Investment Strategy to modernise our equipment and estate to support service transformation and increase productivity through the use of technology)
4 Community and Partnership	<input type="checkbox"/> Embed a customer focussed approach and improve relationships with our GPs through our Stakeholder Engagement Strategy
5 Financial Strength: Sustainable Future	<input type="checkbox"/> Develop a transition plan that ensures financial sustainability and addresses liquidity issues pending the outcome of the Future Fit Programme

Board Assurance Framework (BAF) Risks	<input checked="" type="checkbox"/> If we do not deliver safe care then patients may suffer avoidable harm and poor clinical outcomes and experience <input checked="" type="checkbox"/> If we do not implement our falls prevention strategy then patients may suffer serious injury <input type="checkbox"/> Risk to sustainability of clinical services due to potential shortages of key clinical staff <input type="checkbox"/> If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards <input type="checkbox"/> If we do not have a clear clinical service vision then we may not deliver the best services to patients <input checked="" type="checkbox"/> If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale and patient outcomes may not improve <input type="checkbox"/> If we are unable to resolve our (historic) shortfall in liquidity and the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment
Care Quality Commission (CQC) Domains	<input checked="" type="checkbox"/> Safe <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input checked="" type="checkbox"/> Responsive <input checked="" type="checkbox"/> Well led
<input checked="" type="checkbox"/> Receive <input type="checkbox"/> Review <input type="checkbox"/> Note <input checked="" type="checkbox"/> Approve	Recommendation To receive and approve the Trust Integrated Education Report 2013-14

Integrated Education Report 2013-14



“ The NHS should continually and forever reduce patient harm by embracing wholeheartedly an ethic of learning.”

A promise to learn – a commitment to act. Improving the Safety of Patients in England, August 2013

FOREWORD

We recognise the vital role that education and learning have to play in enabling staff at all levels and working in all disciplines to fulfil their potential and deliver compassionate, skilled and effective care to our patients. When staff stop listening and learning from service users and each other, the results will be detrimental to NHS patients.

We also recognise that staff education and learning by itself can be no substitute for failing to organise ourselves effectively, recognise our priorities, and keep our patients at the heart of our decision-making. In SaTH we have taken considerable steps, in very challenging circumstances, to achieve significant changes in the way we organise and deliver our services. In fact, we continue to believe the most effective way of delivering excellent clinical services to our patients is by combining high quality education with inspirational leadership, values-based decision-making and sound performance management.

In this Integrated Education Report, we are signalling our continuing commitment to multi-disciplinary education and learning, together with a focus on each and every member of staff performing to the best of their ability, whether clinical or non-clinical, in a patient facing or support role.

In order to deliver this, we are combining a revitalised appraisal process with investment in education and learning support, as well as encouraging a culture of individual commitment to learning. In addition to focusing on getting the basics right, such as our clinical training and meeting our statutory and mandatory training requirements, we will support education and learning that helps staff embrace new technologies and more flexible ways of working.

We are also conscious that this report contains considerable detail and a key priority for 2015 will be the production of a report that is more reader-friendly that focuses on key outcomes and priorities in a more accessible format.

During 2014-15, we will build further on the achievements of the previous twelve months to ensure sound educational underpinning for future challenges.

Victoria Maher
Workforce Director

Edwin Borman
Medical Director

Sarah Bloomfield
Director of Nursing and Quality

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SECTION A - INTRODUCTION AND LINKS TO STRATEGIC OBJECTIVES

The challenges facing the Trust are identified in the Integrated Business Plan, Clinical Services Strategy, and NHS Trust Development Agency (NTDA) agreed action plan for 2013-14 and these are reflected in the Trust's People Strategy.

The Care Quality Commission's guiding principles of services that are Safe, Effective, Caring, Responsive and Well-Led have been considered in the way that we identify and provide learning opportunities for our staff. We have also have been responding to the findings of the Francis Report, Cavendish, Berwick and Keogh Reviews as well as facing up to the structural issues that have impacted on the quality of our services and our performance. We are also faced with significant cultural challenges, changing technologies and an increasingly difficult financial environment.

Throughout all the structural, clinical and organisational changes, the various providers of education and learning within SaTH are committed to continue responding flexibly, as well as planning proactively, for a fast moving healthcare environment. Key challenges include:

Identified Area of Challenge	How Education and Learning Contributes to Meeting these Challenges
Service Configuration and Pressures	<ul style="list-style-type: none"> • Clinical educators focus on skills assessment and development to ensure all staff are appropriately skilled for their role • Colour of Change workshops assist staff and managers to improve the way they experience and respond to changes at work • Education leads work with different staff groups to understand and plan for the way that service changes impact on the skills and education that staff need • Multi-skilled staff can be transferred to support areas experiencing high pressure • Targeted education interventions address specific skills gaps when changing work areas or when services are reconfigured
Delivering Core Standards	<ul style="list-style-type: none"> • Effective workforce planning and role design includes planning for education • Effective Workforce processes redesigned where necessary and HR Operational support • Education and Learning is fully aligned to Trust objectives, is competence based and, wherever practicable, is assessed. • An effective annual Appraisal and performance management system is focused on supporting staff to achieve
Quality of Services	<ul style="list-style-type: none"> • Education and Workforce Objectives are linked to CQC and CQINN outcomes, focusing staff daily efforts on the highest clinical priorities • High quality student placements in clinical areas contribute to the sustainable development of a skilled and caring workforce • Medical and Clinical Education meets core Educational Quality standards and fully supports revalidation of clinicians • Key Workforce Performance Indicators show managers and staff how they are doing • Effective leadership and management development programmes (including mandatory programmes for line managers) • Achievement of statutory and mandatory training targets will support safe and high quality services to patients • Improving the quality of robust workforce education data enables

Identified Area of Challenge	How Education and Learning Contributes to Meeting these Challenges
	effective people management and also encourages personal responsibility for learning
Improving Staff Engagement at all Levels	<ul style="list-style-type: none"> • The Lifelong Learning and Clinical Practice Education teams provide direct support for values based recruitment with taster days, selection methodology and induction to ensure that new staff are committed to the care of our patients • Effective induction and orientation of staff ensures staff are equipped to carry out their roles • Investment in Leadership and management development will improve effective engagement with staff and teams • A coaching culture supports staff engagement and performance • Education teams provide support for Workforce health and wellbeing initiatives that improve attendance, performance and morale • The measurement of key engagement indicators is supported by robust action plans
Sustainable Services and Financial Strength	<ul style="list-style-type: none"> • The 5-year People Strategy and Workforce Plan outlines the proposed staffing numbers and skill mix required to meet service requirements, including education plans • The continuing provision of excellent medical and clinical student placements helps ensure the sustainability of clinical services • Education teams source and manage ring-fenced educational funding from a variety of sources to support organisational funds • Robust and valid Key Performance Indicators (KPIs) ensure Education contribution and success

Education is organised, delivered, recorded and monitored by a variety of teams and individuals in the Trust, with responsibility and oversight maintained by the Medical Director, Director of Nursing and Quality and the Workforce Director. Education activity in SaTH is supported and guided by the Local Education and Training Council (LETC) under the auspices of the Health Education West Midlands (HEWM) Local Education and Training Board (LETB).

Working in partnership with a range of Higher and Further Educational institutions has been a key aim of the Trust during 2013-14 to help ensure that staff have the clinical, professional and leadership managerial skills to provide safe and effective services to our patients. Close and robust working relationships with these Higher Education Institutes, notably Keele and Staffordshire Universities, as well as Telford College of Arts and Technology (TCAT) and BPP University ensure that we continue to provide education and training to nationally accredited standards.

Underpinning all our learning programmes and partnerships is the provision of quality assured knowledge and library services that support the delivery of an evidence-based service to our patients. Library Services produce a separate comprehensive annual report which details its key activities and achievements. During 2013-14, we have continued to develop these services and in particular, now provide an integrated service for our Commissioning and Community Health partners.

SECTION B – NURSE AND CLINICAL EDUCATION

Nurse and Clinical Education falls under the professional remit of the Director of Nursing and Quality. Organised and delivered by a range of teams in different clinical settings, the Director of Nursing & Quality is responsible for ensuring high quality and effective education and training to nursing and clinical staff, including overseeing the education of the unregistered healthcare workforce, such as Healthcare Assistants. She is supported by a team of Clinical Practice Educators (CPE), Facilitators and Nurse Specialists all of whom have designated education roles.

During 2013-14, Nurse and Clinical Education focused on ensuring that staff in clinical roles have access to underpinning knowledge and skills development and accessed over £200,000 from the ring-fenced Learning Beyond Registration NHS funds for the continuing professional development of registered healthcare staff in nursing, midwifery, allied health professionals and healthcare scientists.

Clinical Practice Facilitation

The Trust worked in partnership with Staffordshire University to provide practical placements for nursing students in both hospitals, with qualified Trust nursing staff acting as mentors to these nurses in training. A full report of the Clinical Practice Facilitator (CPF) activity and outcomes with Student Nurses is included at Appendix D.

Key outcomes and conclusions are:

- The CPF team, in collaboration with clinicians, has continued to establish and maintain quality placement areas for healthcare students, utilising the established algorithm in the decision making process.
- The CPF team has continued to invest considerable time during 2013 to ensure placement areas continue to adhere to the NMC (2008) Standards to Support Learning and Assessment in Practice. Triennial reviews are 96% complete (to 31st August 2013).
- The CPF team has continued to work in partnership with Staffordshire University and professional governing bodies and the NHS Midlands and East to quality monitor placement areas and address any identified deficits.
- In order to ensure that the Trust has adequate number of mentors to sustain its current provision of placements, there needs to be continued commitment to funding the Mentorship in Healthcare Module.
- It is recognised that both students and mentors continue to value contact with the CPF team. It is identified as a valuable opportunity to discuss issues relating to the quality of the placement, learning opportunities, supervision and support with completion of assessment documentation.
- The CPF team has made significant changes to the preceptorship provision for newly registered nurses/ODP, with the development and on-going evaluation of the SaTH Preceptorship Programme as well as an annual review of the Preceptorship Workbook. Accredited modules linked to HEIs has ceased in favour of an in house approach.
- The CPF team continues to facilitate an increased demand for work experience placements within clinical areas as per Trust Policy.

Clinical Practice Education (CPE)

In nursing, the priority continues to be to provide practical skills training and assessment, particularly in:

- Medicines management and administration
- IV Administration
- Cannulation,
- Venepuncture
- Aseptic Technique
- Catheterisation

In order to achieve this, a system of train the trainers has been established whereby the CPE team trains and assesses the assessors nominated by the Band 7s for each clinical area. This process is used by the CPEs for the skills that require assessment in clinical practice identified above. Furthermore, this year there has been a focus on implementing the Chief Nursing Officers 6 Cs.

Nominated assessors are assessed by the CPE Team every 3 years.

CLINICAL PRACTICE SKILLS ASSESSMENT TRAINING AND DEVELOPMENT

1.0 Medicines Management

Priorities for 2013/14

Medicines management training is an on-going task, especially with the establishment of the new medical wards at RSH and PRH. It is then the responsibility of the assessors to cascade the assessment to the other trained nurses. The CPE team still supports newly qualified staff and staff who are subject to performance management issues.

Training and Outcomes

The training is a two- part process. A medicine train the trainer session is delivered by one member of the CPE Team and lasts 2 hours and includes information around the Trust Medicine Code and NMC Standards for Medicine Administration. Such training is delivered on an adhoc basis within the ward area where the assessors work. This session is followed by a practical assessment within the clinical area. The assessment process consists of an observation of practice followed by a viva. All staff are assessed every 3 years.

Numbers of assessors

There are currently 138 assessors in the Trust (breakdown can be seen in Appendix A – Nursing Education and Training Tables). These assessors will at some point have received medicines training although not necessarily between September 2013 and September 2014

2.0 Intravenous Administration Study Days

Priorities and Activities for 2013/14

There is an on-going need within the Trust for IV Study Days for both newly qualified nurses and nurses who have been administering IV Drugs for many years. Following feedback the CPE Team have altered the way in which the days are delivered. New and existing staff are taught together as it was felt that Newly Qualified nurses would benefit from the expertise of their colleagues during discussion sessions.

Newly qualified staff have a 6 hour session which includes them being assessed in continuous infusion.

Existing staff have a 4 hour session and they are assessed back in the Clinical environment.

Staff complete a workbook within the six weeks prior to the course and then sit a MCQ and drug calculations paper on the day. Pass marks for these tests are 80% for the MCQ and 100% for the calculations. Staff on this study day are also assessed to administer continuous infusions by a member of the CPE team.

For nurses who are new to the Trust and already give IV Drugs and also for the staff who need an update on this skill we offer a half day update course, again run at both hospital sites. The staff complete the same workbook and sit the same MCQ and calculations paper but are not assessed for continuous infusions.

In order for these study days to run smoothly the CPE team are responsible for distributing the workbooks to all those booked on to each course approximately 6 weeks prior to the day. One CPE will always facilitate and teach on each study day but for the full day course 4 CPEs are required to assess staff for continuous infusions in the afternoon.

If any member of staff fails to pass the MCQ or calculations paper they are asked not to continue to give IV Medication until a member of the CPE Team has gone in to their clinical area and offered support followed by a re-sit of the paper they have failed.

All members of staff who complete an IV course are required to be assessed for the practical skill of administering a continuous infusion and a bolus medication in the clinical area by an assessor every 3 years. There are currently 163 IV Drugs Administration Assessors across the Trust; the distribution across clinical areas can be seen in the table in Appendix A – Nurse Education and Training Tables

Outcome and Numbers

Between September 2013 and September 2014 the CPE team have delivered 10 Full Day IV Study Days and 11 updates. The attendance for each of these days can be seen below: There was no IV Full day in October 2013 and the new format course did not run in January 2014 as we have found that attendance is poor in January due to staffing difficulties in the clinical area due to winter pressures

Half Day IV Study Day	Sep 13	Oct 13	Nov 13	Dec 13	Jan 14	Feb 14	Mar 14	Apr 14	May 14	Jun 14	Jul 14
Numbers attending	10	10	14	15	0	3	7	6	11	7	14
Full day IV Study day	Sep 13	Oct 13	Nov 13	Dec 13	Jan 14	Feb 14	Mar 14	Apr 14	May 14	Jun 14	Jul 14
Numbers attending	8	0	17	14	0	19	16	12	17		

Priorities for 2014/ 2015

There is an on-going commitment from the CPE Team to provide IV Training to nurses across the trust. January 2014 saw the introduction of the new format. The new format enables newly qualified and more experienced staff to attend the same day, to enhance the learning experience and satisfy the increase in demand. 2 CPEs returned to the Redwoods Centre to reassess the staff who attended the IV Training last year.

3.0 Aseptic Technique

General priorities 2013/14

Aseptic Technique remains an on-going priority for training across the Trust.

Training and Outcomes

Aseptic Technique training is a two- part process. An Aseptic Technique train the trainer session is delivered by one member of the CPE Team and lasts approximately 2 hours. Such training is delivered on an adhoc basis within the ward area where the assessors work. This session is followed by a practical assessment within the clinical area. The assessment process consists of an observation of practice and all staff should be assessed every 3 years.

Numbers of assessors

There are currently 119 Aseptic Technique assessors in the trust and the distribution of these in clinical areas can be seen in the table in Appendix A, Nurse Education and Training Tables. These assessors will have received Aseptic Technique training although not necessarily between September 2013 and July 14

Priorities 2014/15

The process of training and assessing for Aseptic Technique is on-going with the skill currently being rolled out to several of the medical wards across the Trust. Administration of intravenous medication now forms part of the aseptic technique assessment

4.0 Cannulation

General Priorities for 2013/14

Cannulation training, as with other skills training, is an on-going priority for Team. Staff receive a workbook 4-6 weeks prior to the course. The course is a 4 hour course during which the staff sit a multiple choice paper with a pass rate of 80%. If staff fail to reach the pass mark then they are unable to complete the day, a message is sent to their manager and they have further time to complete the booklet. Training is limited to nurses who will use the skill on a regular basis and who have the support of their Band 7 ward managers.

Training and Outcomes

Cannulation study days are a half day study day and can be combined with a venepuncture half day study day.

The theory preparation for the cannulation course consists of completion of a pre course workbook, followed by attendance on a half day study day. The CPE Team are responsible for facilitating the study day, which is often combined with a half day venepuncture study day. As part of the study day staff are assessed performing cannulation in simulation – this requires 2 CPEs to be present. The CPE Team were also responsible for designing and producing the pre-course workbook that accompanies the study day and to this end are required to distribute these books to the staff attending each day.

All staff attending this study day are required to be assessed by an assessor in their clinical area every 3 years. If there are no assessors available then a member of the CPE Team will perform these assessments.

Numbers of Assessors:

There are currently 39 cannulation assessors for the Trust, the distribution for which can be seen in Appendix A – Nurse Education Tables

Cannulation training is offered at both hospitals. The table below shows attendance for the cannulation study days from September 2013 – September 2014. Please note 3 course took place during July 2014.

Cannulation Study Day	Sep 13	Oct 13	Nov 13	Jan 14	Feb 13	March 13	April 14	July 14
Numbers attending	14	15	15	14	15	13	13	36

Priorities 2013/14

Again, cannulation training is an on-going priority for the CPE Team going forward in to 2015.

5.0 Venepuncture

General Priorities 2013/14

Venepuncture training remains an on-going priority for the CPE Team, with more emphasis being placed on Nursing Staff rather than medical staff to perform this skill

Training and Outcomes

Staff wishing to attend this training must, in a similar way to cannulation, be able to prove that they will use the skill on a regular basis and have the support of their Band 7 Ward Manager. Venepuncture training takes the form of a half day study day and can be combined with the cannulation study day. There is no pre-course work to complete however, after the training staff must complete 10 supervised venepunctures with a registered assessor within the Trust, have a further 20 blood samples quality assured by phlebotomy and then have a final assessment in their clinical area carried out by a venepuncture assessor or one of the CPE Team.

Each venepuncture study day is facilitated by one member of the CPE Team with a second member attending to assist with the simulated assessments.

Numbers of Assessors

There are 29 venepuncture assessors in the Trust, the distribution of which can be seen in Appendix A – Nurse Education Tables.

Venepuncture training is offered at both hospitals. The table below shows attendance for the venepuncture study days from September 2013 – September 2014.

Venepuncture Study Day	Sep 13	Oct 13	Nov 13		Feb 13	March 13	April 14	July 14
Numbers attending	14	12	15		16	12	15	23

Priorities for 2013/14

The Clinical Practice Educator Team will continue to provide training around venepuncture as a priority for those staff on the frontline for which the skill is vital to patient care and flow. Priority is to get assessors in key areas.

6.0 Health Care Assistant (HCA) Induction programme

Specific HCA Study days were suspended in the Trust to enable the CPE Team to support training and development in the delivery of the new HCA Induction. The CPE team deliver two four hour sessions.

General priorities 2014/2015

The CPE team will continue to support training and development in the delivery of the induction programme.

From January 2015 the CPE team will deliver a 1 day HCA update study day that will incorporate privacy and dignity, legal aspects, recording base line observations, how to recognise the poorly patient and an assessment in recording base line observations

7.0 Diabetes Study Days

One member of the CPE Team is currently involved in assisting the Diabetes Specialist Nurses to deliver Back to Basics study days for both RGNs and Health Care Assistants. The RGN Study days take the form of a full study day whereas the Health Care Assistants receive a half day study day. These days are repeated three times per year. Attendance for September 2013 to July 14 can be seen below:

Study Day	Sept 13	April 14	July 14
Numbers attending – RGN	20	15	30
Numbers attending - HCA	15	10	20

8.0 SaTH Nursing Documentation

General Priorities 2013/14

The CPE Team have been involved along with other teams in the formulation of the new SaTH Nursing Assessment Document and the individual care plans.

Training and Outcomes

The training for the use of the new documentation was developed and delivered by the CPE Team over both hospital sites. The CPE Team continue to be involved in overseeing proposed changes in association with the Senior Nursing team.

General Priorities 2014/15

The Nursing Assessment Documentation and care planning has been reviewed and further changes have been made. With a working party being formed to continually update the document

9.0 Fundamentals of Care Study Days

General Priorities 2013/14

The CPE Team continue to facilitate and deliver a Trust study day based around the 6 Cs from England's Director of Nursing and Quality Jane Cummins and to include the SaTH Fundamentals of Care.

Training and Outcomes

The aim is for all registered nurses in the Trust to attend. The day starts with a DVD of various aspects of different patients journeys through a fictitious Trust. This DVD was written, directed and filmed by the CPE Team in various locations around SaTH. The CPE team also casted the parts – which included themselves and many other willing Trust staff! The Team also arranged for uniforms and props.

The staff attending the study day are expected to pick out the good and bad points from each scene. The day then continues to link into the 6 Cs and the Fundamentals of Care via input from the following teams;

- CCOR / Resus
- Health and Safety
- Tissue Viability
- Pharmacy
- Privacy and Dignity
- Legal
- Discharge
- Dietician

General Priorities 2014/15

Feedback from staff attending the study day is regularly reviewed to ensure that the information delivered meets the on-going training needs of SaTH staff.

10.0 Values Based Recruitment

The CPE Team have been involved in the Values based recruitment for Registered Nurses. They facilitate the delivery of the Values DVD, formulated the literacy scenario paper, relating to the DVD, formulated three drug calculations papers, assist with the marking of the papers and with interviewing the candidates

11.0 On-going Projects

- Formal Lectures provided by the Team for Staffordshire University in Preparation for Interview
- Regular attendance at local careers events to promote the roles of nursing and allied healthcare professionals.
- Regular support on the Trust Preceptorship Programme
- Supporting the Lead Nurse for Adult Safeguarding by delivering the adult protection sessions on stat training at PRH. This support will cease from September 2014 due to re-organisation of Safeguarding training
- Providing support to the Registered Nurses who are unsuccessful in their drug calculation papers

The CPE team are also involved in the wider activity of the organisation, including the performance management of staff, acting as Investigating Officers in formal investigations, and one member of the team is an accredited coach.

12.0 Administration

General Priorities 2013/2014

The CPE team are now supported by an Administration assistant who supports all of Corporate Nursing. The team put great emphasis on ensuring that all information used in teaching sessions is up to date, referenced and includes policies, protocols and guidance from relevant government and professional bodies such as the NMC, DoH etc. Teaching sessions are put together by the CPE team and reviewed on a regular basis as are the assessment documentation used for skills assessments.

The database continues to be updated between the Admin assistant and the CPE team. The CPE Team deliver workbooks to each and every clinical area and across site prior to the IV and Cannulation study days and ensure that certificates of competency are delivered promptly when a skill has been assessed and signed off. The CPEs also have access to the E Rostering in order to enable us to make appointments with assessors and other staff members where appropriate and necessary. We maintain our own work diaries and organise our own teaching space for corporate training. We also type up all our own assessments and letters/reports.

13.0 Support for Undergraduate and Postgraduate Medical Education

The CPE team has 2 Clinical Practice Instructors who work closely with the Postgraduate and Undergraduate Medical Education Teams to support practical training programmes for Undergraduate year 4/5 medical students and for Foundation Years 1 & 2 of Doctors in Training. The Director of Nursing and Quality supports this multi-disciplinary working and education, recognising the importance of clinical teamwork in the delivery of patient care.

FY1 Teaching sessions

General priorities 2013/2014

The Trust has prioritised the development of Junior Doctors' knowledge and practical skills with targeted support. Also there is a need to meet the Doctors curriculum, highlight NPSA alerts, trust and national targets and a desire to work towards Interprofessional learning. Support from the Nurse Education team continues to be around Aseptic technique, IV injectables and prescription writing.

Training and outcomes

This training is part of their protected teaching time which is a 2.5hr session, so all FY1s attend, unless on nights or Annual leave. It involves theory, but mainly practical stations, whereby each Doctor's practice in skills are observed, and additional support sessions offered to those who skills require further development. The sessions provided included Diabetes, Privacy/Dignity, Anticoagulation, Sepsis, Dementia Care pathway, Liverpool care Pathway, X-ray, Tissue Viability, Neutropenic Patient, Legal Aspects of care. All sessions are evaluated using an anonymous feedback form. Those that perform poorly are offered further clinical skills sessions at a time to suit them.

General priorities 2014/2015

- The sessions covered to be reviewed on a yearly basis and added to as the need arises.
- To continue to provide extra clinical skills training out of hours.
- To continue to support doctors in difficulty with extra skills training, to offer them support in their clinical areas.

Simulation Training

The Clinical Practice Instructors were successful in their application for the academies award within the Trust. They have used the funds to undertake a post graduate certificate in medical simulation. They are due to complete the course in November 2014.

Undertaking the above course has enabled the CPI's to develop simulation training within the Trust

Undergraduate Medical students

In 2013/2014 there were 37 year 5 medical students and 49 year 4 medical students. They were split up into groups and attended skills sessions throughout the year. These are clinical skills which are set by Keele University, GMC and Tomorrows doctors. When the students commence in SATH Trust they are introduced to the teaching and guidelines that are followed within SATH Trust. The CPI team deliver practical skills during year 5 induction.

The year 5 medical students are split up into six groups of six and one group of seven, 18 of the students spend the first 15 weeks in primary care, and the other remaining 18 students remain in secondary care rotating in five week blocks around surgery, medicine and critical care. The two groups swap over in December.

When the students commence their critical care block they spend a week in the skills lab covering clinical skills such as

- Blood Cultures
- Continuous infusion
- Preparing IV bolus medication
- Cannulation
- Arterial blood gases
- Catheterisation

A table showing the sessions covered in Undergraduate Critical Skills week can be found in Appendix A – Nurse Education Tables

The critical skills week is Facilitated by the CPI and delivered by Teaching Fellows, Medical devices, CPIs, Blood transfusion specialist nurse, the Resus team and lead Drs in Simulation. The feedback from these sessions continue to be excellent.

The medical students Simman session consist of a full day with the Simman Manikin.

The students also receive a presentation on human factors and Care of the critically ill patient. The Simman Critical Care scenarios include Sepsis, Asthma, ACS, DKA, Trauma, Overdose. The sessions are run by 2 Doctors and 2 CPI and attended by a maximum of 6 students at a time

Clinical skills

Clinical skills sessions are offered on a weekly basis on a Thursday 2-5pm

Priorities

This is an on-going priority as doctors are required to be competent in their clinical skills. The undergrad medical students to follow the requirements of the GMC, Keele University and Tomorrows Doctors'

Outcomes

Training is delivered by one / two members of the CPI team and lasts approximately 2/3 hours, and includes information around the Trust and Tomorrows Doctors' standards. The sessions are delivered in the skills lab, followed by a practical assessment within the clinical area. The assessment consists of a practical demonstration in simulation, and an assessment in the clinical area.

Clinical Skills sessions include Cannulation, ABG, Venepuncture, Blood Cultures, IVAB, Continuous Infusion, Blood Transfusion, Suturing, Aseptic Technique, Catheterisation and Nasogastric feeding.

The CPI team also support Year 5 revision sessions.

Year 4 Induction and Skills Sessions

The CPI team delivered practical induction sessions, together with 27 x 2-hour clinical skills training sessions for year 4 Keele University medical students placed at SaTH. Revision sessions for re-sits are put on an ad hoc basis.

Work Experience

Ten sessions were provided for Work Experience students for medicine, covering Hand washing, Infection control, Tomorrows Doctors, Cannulation, catheterization, Intravenous antibiotics-practical session and Continuous Infusion practical session.

FY1 SIMMAN SESSIONS

17 sessions were delivered in 2013-14. The FY1 Simman session consist of a full afternoon with the Simman Manikin. This enables the doctors to make assessment and immediate care for a broad range of emergency presentations in a safe environment. The scenarios covered range from Sepsis, Asthma, Overdose, DKA, Anaphylaxis, and Resuscitation. The sessions are run by 2 Doctors and 2 CPIs.

Priorities

In light of the Francis Report there is an on-going need to provide education and training for all health care professionals to improve patient safety and provide a quality care. By providing training in simulation students are able to make clinical decisions on a manikin and patients will not come to harm.

Outcomes

The doctors will take away with them increased knowledge and improved understanding of non-technical skills such as human factors, leadership, team work, communication as well as technical skills. Evidence has shown that in taking part in a simulated scenario, students learn more than if they were listening to a presentation.

The feedback from the sessions has been excellent.

IV Medicines

Priorities

To be made aware of the errors that occur around medicines management. To ensure patient safety.

Training and Outcomes

The junior doctors are updated about current policies and procedures. They have a practical session in setting up a continuous intravenous infusion and making up of intravenous antibiotics

To ensure the safe use of medicines, the knowledge of checking the patient details, and preventing the patient from potential harm (MHRA 2004). Information is included around the Trust and GMC/ NMC standards for medicine administration.

Aseptic Technique

Priority

2 sessions have been delivered in 2013/2014. It is important for doctors to have the knowledge of how to adequately prepare a trolley for an aseptic procedure. This is required for lumbar punctures, chest drains, suturing etc.

Training and Outcomes

FY1 doctors receive a presentation on aseptic technique, observe a DVD on aseptic technique, and have a session in simulation. To educate staff about maintaining asepsis and to prevent infection of bacteraemia, MRSA and Sepsis

Other sessions include Prescribing session, Diabetic session, X-Ray, Anticoagulation session, Liverpool Care Pathway, Neutropenia, Legal Aspects, Privacy and Dignity, Sepsis.

14.0 Maternity Education Report

In 2013/14 SaTH Maternity service provided antenatal, Intrapartum and postnatal care to approximately 5,500 women across Shropshire and Telford & Wrekin with 270 Midwives and 80 Maternity Services Assistants working rotationally within a consultant led unit and 5 Midwife Led Units across both areas. 2014 will see a reconfiguration of services and opening of a new Consultant unit at PRH and new Midwife Led Units at Shrewsbury, Ludlow and Wrekin.

This requires a creative and flexible approach to providing education and training to ensure all Maternity staff can access Mandatory training and develop and maintain skills and competencies for the specialised area they are working in and achieve required professional, NHSLA/CNST and quality standards, together with the challenge to ensure Maternity staff are trained in preparation for the move and enhancement of services.

Working in partnership with the Maternity multidisciplinary team, Specialist Midwives and Nurses, the Clinical Education Midwife leads and coordinates the delivery of Mandatory and profession specific training and education linking with the Trust Resuscitation services, Clinical Practice Educators, Clinical Placement Facilitators, University of Staffordshire Faculty of Health Midwifery School, Anaesthetists, Neonatologists and ANNP's.

This report sets out the training and educational activities and outcomes for financial year 2013/14 and priorities and progress to date for 2014/15.

Priorities for education for financial year 2013/14

NHSLA/CNST Maternity Standards Level 3. Level 2 achieved 2012 and planned Level 3 assessment March 2014:

- Priority to ensure CNST minimum dataset training compliance >75% and ensure learning from audit, serious incidents, complaints and feedback embedded in practice.
- Update Training guideline and DNA process across Maternity to improve training compliance

Improve compliance of Mandatory training, develop and coordinate training for new initiatives and CQUINs:

- All SSUs, Day 1 & 2 Midwife/Obstetric Day, Safeguarding Children, Blood Training and assessments, Information Governance, Medical Devices, MECC, GROW Customised Foetal Growth training, Flu and anaphylaxis, Baby Friendly Initiative Breastfeeding Management Training
- Develop new Newborn Life Support resuscitation sessions with Resuscitation Team and Neonatal Team for SSU Maternity course from June 2012. Develop MW Facilitators to support scenario training on sessions and Neonatal Stabilisation training.

Train the trainer/assessor training to be organised to more easily and effectively deliver training and complete assessments in practice environment:

- GROW Customised Growth Training to support Reducing Stillbirth Working Group strategy.
- Clinical Skills - Injections, IV and Cannulation, venepuncture, Drug assessments
- Blood administration assessments
- New technology and equipment - Urine analyser and Transcutaneous Bilirubinometers
- WSA Clinical skills and Obstetric Emergency skills

Develop Emergency Obstetric Skills Drills training to make more multidisciplinary, use of scenarios and role play to develop situational awareness and leadership skills and include learning from serious incidents and more time for practice of manoeuvres.

Work in partnership with University of Staffordshire Faculty of Health to undertake Educational Audit, prepare more Mentors, Student midwife recruitment process and participate in revalidation of Midwifery programme

Training and education delivered in 2013/14

22 Midwife/Obstetric multidisciplinary Mandatory Study Days for all Midwives Including Specialist training:

- Patient Safety and Patient Experience
- EFM update
- Safeguarding Children
- Mental Health updates
- Blood Administration assessments
- Emergency skills and NLS

5 MSW Study Days and local workshops providing updates on Emergency Obstetric Skills, NLS, Spotting the sick Newborn, Infant Feeding

Coordinated and delivered a programme of advanced Clinical skills workshops in consultant areas/1:1 training:

- Postnatal care workshops to support transition of wards- Ward 19 Midwives
- Fluid Balance- Ward 18,19,20 Midwives
- Flu and anaphylaxis – ANC/Scan Midwives
- GROW training – approximately 140 Midwives training priority Community
- Epidural updates – Ward 18, 19, 20, RSH MLU Midwives
- Back to basics training for WSA's – Ward 19
- Tissue Viability – ANC Midwives
- Urine analyser, Transcutaneous Bilirubinometers *train the trainer sessions
- Newborn Exam update – 33 Midwives
- Perineal Repair Workshops - new Midwives and those requiring updating
- Blood spot screening – MLU's and Community Midwives

- MW Obstetric Emergency and NLS Facilitator support workshops
- Live Emergency Obstetric drills – all areas

Outcomes

- DNA systems and processes improving. Ward managers now proactively monitor and coordinate bookings. New Training monitor and DNA process developed with filters & date coding which all Ward Managers can access to track DNA's.
- MDT training – MW/Obstetric Emergency skills training now more multidisciplinary and interactive, with more time to practice manoeuvres. 3 successful MDT Anaesthetic Advanced Emergency Obstetric Skills workshops run by Anaesthetic team using SIM man to continue with obstetric and Midwife input.
- Overall improvement in training compliance across mandatory training as well as specific quality and safety initiatives with more proactive education management
- Development of trainers and facilitators to enable more effective cascade of training/assessments across units over next year.
- University of Staffordshire Educational Audit completed with commendation of some Maternity areas. New Midwifery programme developed in partnership with Maternity Services validated by NMC.

LBR funded courses completed:

- Mentorship 10
- Newborn Exam 7
- NLS Provider 15
- Medicines Management 1
- Sexual Health
- Supervisor of Midwives 2

Priorities for 2014/15 and progress

- To embed DNA process further and tackle last minute cancellation/non-attendance of mandatory courses to ensure full utilisation of provision.
Training and Development now notifying last minute cancellations of SSU Maternity course and Managers have waiting list of potential replacement attendees.
- Training areas under compliant targeted and to look at creative ways to enable easier access training.
- MW/Obstetric Mandatory Training Days reviewed and new update/training planned for 2013: Perineal Repair, Care of a woman following an operative delivery, Epidural update, Midwifery Supervision Bereavement/Scanning Training/Sepsis, Substance Misuse
- GROW – continue train the trainer so every area has a trainer to deliver updates
- Clinical skills competencies: Assessors identified in all areas to now complete training with priority roll out programme of drug, IV Therapy and Cannulation assessments. Midwife recently completed Medicines Management course to assist development.
- Review EFM training to develop training to better assess ability to interpret CTG's
- Modernise MSW competency package and training to include:
 - Induction pack
 - Quarterly workshop
 - Working group to review role
 - Potential development of a University programme with University of Staffordshire
- Continue to develop advanced skills of Midwives, Examination of Newborn, Neonatal Life support and stabilisation training over year
10 Midwives to complete Newborn Examination course
15 Midwives to attend advanced NLS Provider training
Further Neonatal stabilisation training to be planned Oct/Nov 2013 with Neonatal Team and Ambulance services

- Neonatal Advanced MDT skills drills – MW NLS Facilitators to participate in new MDT sessions using Baby SIM model being planned by Neonatal team for Oct-Dec 2013
- Preparation for Reconfiguration – skills gap analysis
 - New pools installed in Oswestry and new units – Water birth training under development
 - HDU unit – critical care training for Midwives. 2 Midwives to attend LBR
 - Funded
 - University module and develop package for roll out to all Midwives
 - Medical Devices – work with EBME to make training more area
 - Specific and train assessors in areas
- Continue to develop Emergency obstetric skills – new scenarios under development for perimortem LSCS, Sepsis and working with Medical staff to develop provision of new medical PROMPT training course
- Preceptorship – workshops for Preceptors and Preceptees planned

14.0 Therapies Education and Training

The Therapies Centre has continued its commitment to the systematic development and training of its staff in all disciplines, together with significant investment in multi-disciplinary development and education. Central to this is the appraisal and staff supervision process. Therapies were a pilot site for the draft revised Appraisal process that focuses on how staff demonstrate Trust Values and how personal performance links to Trust objectives.

Therapies also has a robust induction programme and competency framework for all grades and staff undertake in service training within professions to explore and discuss the latest evidence based practice.

A significant programme of Continuing Professional Development is run, assisted by over £31,500 accessed from Learning Beyond Registration funding for registered healthcare professional staff.

Key activities and outcomes in 2013-14 have included:

- Development and provision of nutrition support training for clinical staff within SATH (e.g. fundamentals of care training, HCA developmental days)
- Advanced communication skills training to improve patient outcomes
- the development and hosting of joint CPD sessions (eg with Diabetes and Pressure Ulcer nurse specialists)
- End of Life Care CPD
- Close working with Coventry University to host highly regarded Dietician Student placements
- Hosting physiotherapy students from Keele and Birmingham Universities
- Supporting interviews for students applying for OT placements
- Continued investment in the leadership development of the Senior Therapies Leadership Team.
- Workshops on team working
- Development of shared IT drives to facilitate shared knowledge and generic information
- Joint training sessions with Community colleagues, with integrated patient pathways as an key aim
- A survey of staff on appraisal effectiveness with resulting actions to improve the impact of appraisals on staff performance and patient care

In addition, despite pressures on capacity as the services are developed, the Therapies teams are committed to continue to host high quality therapy student placements for Birmingham University.

15.0 Audiology Education Report

Continuous Professional Development

Shropshire Audiology Services has a robust, relevant and up-to-date training and development programme. We have achieved 100% appraisal rate in the preceding 12 months ensuring all staff have a personal development plan, linked to the departmental and trust strategic objectives. Staff suggestions for in-house training via staff meetings and appraisals have been integrated into the 2014-15 training and development plan to utilise LBR funding effectively.

Competency Checks and KPIs

A rolling programme of competency checks by senior staff regularly reviews clinical quality mapped to national recommended procedures and local policies and procedures, together with KPI's. Adult Audiology Services is a nationally accredited service by the United Kingdom Accreditation Service and has been externally peer reviewed and praised for its holistic approach to patient care and support for staff training.

University Clinical Placements

Audiology provides training placement for the Audiology BSc Patient Practitioner Programme at Aston University, each year providing clinical placements. We have achieved 100% success, with most students succeeding with a 1st class Honours degree.

Clinical Leadership

There is a commitment to developing greater knowledge and skills in Clinical Leadership with staff members attaining Masters level learning in Healthcare management, NVQ Level 3 in Team Leading and attending in-house training in change management, dealing with difficult conversations, coaching for managers and audit skills. Three staff members are enrolled on the Professional Higher Training Scheme run through the professional body. A programme of training senior staff in IOSH and risk management skills is in place. Audiology were trust finalists for Leadership and Innovation in 2013 and won a Trust Award in 2014.

Key activities and outcomes in 2013-14 include:

- Attendance at National Audiology conferences: British Academy of Audiology, British Society of Audiology, British Tinnitus Association
- Workshops on Team building, mentoring, coaching, personality traits
- In-house training e.g. updates from hearing aid companies
- Attendance at Middlesbrough training in Paediatric assessment and Adult Hearing Aid inside track using LBR funding
- Clinical Supervision training via e-learning from Aston University
- Attendance at Audiology Heads of Department meetings, BAA Professional meetings and regional rehabilitation meetings
- Up skilling staff in research skills through masters training and GCP courses as part of the strategy to be involved in research
- Attendance at IT meetings/Audit data meetings due to the high reliance on technology for assessing hearing and fitting hearing aids

16.0 Pharmacy Care Group Education Report– 2013-14

The Pharmacy Care Group employs 3 main staff groups

- Pharmacy Support Workers
- Pharmacy Technicians
- Pharmacists

Each staff group has its own Education and training needs delivered by Pharmacy Department staff in partnership with a variety of Higher and Further Education Institute partners and the General Pharmaceutical Council (GPhC), the regulatory body for pharmacy.

Pharmacy Support Workers

Although pharmacy support staff are not registered by the GPhC, the GPhC does require all staff working in a pharmacy to be appropriately trained and pharmacy support staff who actively handle medicines are required to undertake and pass a GPhC accredited or recognised NVQ level 2. Pharmacy support staff undertaking the NVQ2 are assessed by pharmacy NVQ assessors and internal verifiers.

Training and outcomes

Over the past 12 months 4 pharmacy support workers have commenced their NVQ level 2 with Stoke on Trent College, 3 have successfully completed and the one is due to submit their portfolio for completion.

Priorities for the next 12 months

We have 3 further pharmacy support workers who need to undertake this training. Recent changes in staff skill mix means that we will need to develop some existing staff as NVQ assessors and verifiers. A new local provider, Walsall College, is available who may be able to provide suitable pharmacy capable assessors and verifiers whilst we develop our own staff.

In-house training rotations Aseptics/Dispensary/Distribution Training and outcomes

Pharmacy support staff are continually being trained and updated to support the core functions of the department.

Priorities for the next 12 months

To streamline when and how the training is planned so that service impact is minimised and training happens as planned and on time.

Pharmacy Technicians

Pharmacy Technicians are GPhC registered and must complete accredited training to achieve this. NVQ level 3 with an approved underpinning knowledge certificate is a 2 year course and is funded via a regional central contract with 2 providers. Currently SaTH use Stoke on Trent College.

NVQ Level 3 – Preregistration Trainee Technicians

Training and outcomes

We have 2 first year students who have successfully completed their first year of training and 2 second year students who have completed their training and submitted their paper work to GPhC for registration. A further trainee needs to complete NVQ before registration.

The training process at the Trust was visited by the Regional Pharmacy Quality Assurance Programme Lead and received excellent results with 2 of the 27 standards at RSH and 1 of the 27 standards at PRH giving the auditor opportunity to suggest minor improvements. Three band 5 Pharmacy technicians have achieved their NVQ assessor qualification with support from the Trusts corporate education department.

Priorities for the next 12 months

We have recruited 3 new preregistration trainee technicians to start in September 2014. Recent changes in staff skill mix means that we will need to develop some existing staff as NVQ assessors and verifiers. Opportunity for more structured cross site standardisation as a result of skill mix changes. Need to address the issue highlighted in the quality assurance visit in time for the follow up visit due 2014-2015

Accredited Checking Pharmacy Technicians Training and outcomes

Two Band 5 technicians have passed their Accredited Checking course for Pharmacy technicians which allow them to provide an accuracy check for dispensed items which have been previously clinically

checked by a pharmacist. SaTH currently uses Birmingham Metropolitan College (BMetC) to provide this course

Priorities for the next 12 months

We will have up to 4 band 5 technicians who will require this training in the next 12 months. BMetC have fixed start times which allow little flexibility for starters, Walsall College is a new provider in the region who may offer some flexibility with start times or allow us to stagger new starters.

In-house training rotations Medicines Management/Aseptics/Dispensary/Distribution Training and outcomes

Pharmacy technicians are continually being trained and updated to support the core function of the department.

Priorities for the next 12 months

To streamline when and how the training is planned so that service impact is minimised and training happens as planned and on time.

Pharmacists

Pharmacists are registered with GPhC and must complete a 4 year Masters degree at University which has been accredited by GPhC before undertaking a competence based preregistration training year at a GPhC approved training site and completing a registration assessment.

Undergraduate teaching Training and outcomes

We have joint appointments with 2 Schools of Pharmacy in the West Midlands. PRH with Wolverhampton and RSH with Keele. Undergraduates from all four years of study undertake short practice visits with our pharmacists. Students from the Welsh School of Pharmacy in Cardiff have been on weeklong placements with us too.

Priorities for the next 12 months

This programme is now established and is planned to develop over the next 12 months. Modernising Pharmacy Careers (MPC) are consulting on the future structure of undergraduate and preregistration pharmacist trainee with the prospect of a 5 year integrated degree. We also await the outcome on the Higher Education Funding Council for England (HEFCE) and Health Education England (HEE) consultation on future pharmacy student numbers and funding. The undergraduate and preregistration models currently in use are likely to be overhauled in the next 12-24 months.

Preregistration training

The training process at the Trust was visited by the Regional Pharmacy Quality Assurance Programme Lead and received excellent results with only 1 of the 28 standards at RSH giving the auditor opportunity to suggest minor improvement. The 28 standards at PRH were all met.

Training and outcomes

Four preregistration trainee pharmacists have successfully completed their preregistration training here demonstrating their competence over 76 performance standards and all have successfully passed the GPhC registration assessment. These trainees are supported by 4 preregistration pharmacy tutors and a training manager.

Priorities for the next 12 months

Need to address the issue highlighted in the quality assurance visit in time for the follow up visit due 2014-2015. We have 4 new trainees starting this year and we await the results of the MPC, HEFCE and HEE consultations and their potential consequences on pharmacist training

Post registration training and CPD Training and outcomes

Two Pharmacists have completed postgraduate diplomas in clinical pharmacy, one with Sunderland University and the other with Keele University. We have 4 more pharmacists at different stages of the 2 year course with Keele with 1 choosing the flexible CPD plus option.

Two Pharmacists are currently undertaking the Independent Prescribing Course for Pharmacists with Aston University as part of the Health Education West Midlands (HEWM) project in Emergency Departments. One Pharmacist has successfully completed an MSc with Leeds University in Aseptic services and Quality Assurance.

Priorities for the next 12 months

Depending on the next round of recruitment we will support 1 or 2 pharmacist through the clinical diploma and seek to support any pharmacists who wish to undertake any further formal study programme.

In-house training rotations Medicines Management/Aseptics Training and outcomes

Pharmacists are continually being trained and updated to support the core function of the department.

Priorities for the next 12 months

To streamline when and how the training is planned so that service impact is minimised and training happens as planned and on time.

Nurses

Fundamentals of Care Training and outcomes

Pharmacy have a 30 minute session on the Fundamentals of Care study day which receives strong positive feedback and covers non-administration of medicines, medicines at discharge and safe and secure storage of medicines.

Priorities for the next 12 months

The session will be increased to 1 hour in 2015 and will include controlled drugs and any other issues arising from the forthcoming CQC inspection.

Induction Training and outcomes

There has been no medicines management input from pharmacy in the past

Priorities for the next 12 months

From September 2014 Pharmacy will have a 1 hour session on day 1 of the induction programme covering controlled drugs, safe and secure storage of medicines, key security and non-administration of medicines. The Trust e-learning package for medicines management will be a core feature of the new induction.

IV study day Training and outcomes

Pharmacy contribute to the IV study day sessions.

Priorities for the next 12 months

Pharmacy will continue to support these sessions and review content as necessary.

Doctors

Undergraduate Training and outcomes

A Pharmacist supports the 5 prescribing and therapeutics sessions for module 5 medical students from Keele University. These 5 modules take place during the 5 week long rotation in medicine. A Pharmacist also runs a prescribing workshop for module 4 medical students from Keele. The work of the main pharmacist involved has led to them being appointed as an honorary lecturer with the School of Medicine at Keele.

Priorities for the next 12 months

To continue to support and develop the prescribing and therapeutic workshops for both year groups. To contribute to development of assessment of prescribing skills.

Foundation Training and outcomes

Pharmacy run 1 session each year in prescribing for Foundation Year 1 doctors.

Priorities for the next 12 months

To continue to support and develop this input.

Core Training and outcomes

Pharmacy run 1 session each year in prescribing for doctors undertaking their core training

Priorities for the next 12 months

To continue to support and develop this input.

Doctors induction Training and outcomes

Pharmacy have a 20 minute session to introduce the e-Script system which is used to generate the electronic discharge summaries as well as providing a medicines management resource for them

Priorities for the next 12 months

To integrate the Trust e-learning for medicines management into the induction for all doctors.

Senior Doctors induction Training and outcomes

A senior pharmacist runs a 30 minute session at each of the 11 sessions per year for senior doctor induction. This session covers the medicines management service at SaTH, specific formulary issues, e-Script and discharge.

Priorities for the next 12 months

To continue to support and develop this input.

Consultant Statutory Updates Training and outcomes

A senior pharmacist runs a 30 minute session at each of the 11 statutory update sessions for consultants each year. This session covers current prescribing issues, highlights recent changes in medicines management policies and procedures and allows discussion of medicines issues.

Priorities for the next 12 months

To continue to support and develop this input.

SECTION C – STATUTORY AND MANDATORY EDUCATION

Introduction

The Trust arrangements around Statutory and Mandatory Training have been set around the requirements of the NHS Litigation Authority framework and are described in a number of Trust Policies, including the Risk Management Training Policy (RM04) and Corporate and Local Induction Policy (HR02).

All staff are required to complete the Statutory Safety Updates organised for their staff group, either annually (for patient handling staff) or every 2 years (all other staff). These update days cover the generic subjects which can be presented to all relevant staff in that group, including Fire Safety, Moving and Handling training, Cardio-Pulmonary Resuscitation, Food Safety, Adult Safeguarding and Infection Prevention and Control. Additional NHS requirements are included in the Risk Management Training Policy, including:

- Information governance (annual)
- Equality and Diversity (3-yearly)
- Conflict Resolution (3 yearly for frontline staff)
- Child Protection (3 yearly depending on staff group)

Other subjects that become mandatory are addressed in a variety of ways according to the risk rating and urgency of the subject (eg Making Every Contact Count, Falls Prevention etc.).

Deloittes Audit Action Plan

A report was made to the February 2013 Workforce Committee outlining the process for, and issues around, Statutory and Mandatory Training compliance in SaTH. This included the findings of the Deloittes Audit into Statutory and Mandatory Compliance, and an action plan was put in place to improve staff compliance throughout the Trust.

As a method of focusing on training requirements that impact most directly on patient care, the Trust has been focusing its measurement on compliance with completion of the Statutory Safety Updates (SSUs) and Corporate Induction (which include Fire Safety, Patient and Load Moving and Handling, Infection Control, Adult Protection, Food Safety, and Basic Life Support) and Information Governance.

A key area of concern has been that, as at 31st March 2014, the current overall compliance levels with these areas was 58% for Statutory Safety Update and 75% for Information Governance.

Priority for 2014-15

The Audit action plan is almost complete, however compliance rates have not increased significantly. Feedback focuses on staffing issues in clinical areas particularly and the difficulty in releasing staff to complete their SSU. Senior management has also identified issues around Ward and Department Management and actions have been agreed by the Workforce Committee to increase compliance. This will be a significant priority for 2014-15. Actions will include:

- Targeting Wards/Departments and individuals with poor compliance records
- Introducing withheld increments for non-compliant staff
- A further review of the content and length of the SSU programmes to ensure effectiveness
- The introduction of a fully comprehensive SSU programme by Women's and Children's services

Evaluation of Corporate Induction

470 evaluations were received and collated; the average over the year was 2.76 (with 0 being poor & 3 being excellent). Various individual comments made on evaluation forms were fed back to trainers with minor improvements made to presentations. No negative trends were identified.

Evaluation of Statutory Training

This was evaluated during October 2013 and percentage responses are shown below.

Question	Too long	Too short	About right
Was the study day?	9%	0%	91%

Question	Yes	No	No response
Has the course improved your knowledge/ skills?	97%	0%	9%

Question	All Relevant	Some relevant	Not relevant
Was the course relevant to you?	90%	10%	0%

How would you rate your session	Very Good	Good	Average	Poor	Very Poor
Fire Safety Awareness	34%	56%	9%	1%	0%
Adult Protection	52%	43%	4%	1%	0%
Patient Moving & Handling	60%	38%	2%	0%	0%
Infection Prevention & Control	45%	49%	6%	0%	0%
CPR	59%	40%	1%	0%	0%

Question	Very Good	Good	Average	Poor	Very Poor
What is your immediate reaction to the programme	17%	61%	22%	0%	0%
How would you rate; Training room?	10%	54%	28%	7%	0%
Trainers/instructors?	38%	59%	3%	0%	0%
Training materials?	20%	70%	10%	0%	0%
Course content?	24%	71%	5%	0%	0%

Content and Subject Issues

Corporate Education continues to work with the various clinical education teams that provide the training to address issues of subject relevance, content and session length.

Environmental Issues

The main issue raised was the Training Room rating and additional comments also criticised the condition of the training room & equipment. During 2012-13 we tried to address this by replacing the projectors & screens, adding notice boards to PRH & painting the Link Dining Room at RSH. During 2014-15 we will be planning for the relocation of clinical and corporate training to the Rainbow Learning Centre (situated in the Paediatric Wards being vacated in 2014). This will include ensuring a suitable learning environment.

Moving and Handling training

In addition to the stat training dates arranged through the training and development department we continue to provide and expand our departmental specific moving & handling training. These departments include: theatres, breast screening, x-ray, audiology, domestics, and mortuary departments

on both sites. We are working with managers to increase this provision to the dental and Portering departments.

An aim for the coming year is to review the provision of load handling training. At the moment the load handling courses are less tailored to specific departments than are the patient handling courses. Our aim is to identify the staff groups who would benefit from more task-specific training, for example the Estates team, and devise separate training interventions. We are also exploring the possibility of changing the method of delivery of courses for administration and clerical staff, which would offer benefits for both staff and the Trust.

We have successfully trialled the use of competency assessments on Ward 24E and the catering department at RSH. The staff at CSSD are currently being assessed. This has allowed the moving & handling team to observe whether training techniques are put into practice and allowed many staff to discuss handling difficulties or problem solve in the workplace. As moving and handling staffing levels allow we plan to further this work with the transfer teams on both sites.

Falls Prevention training

In later 2013 the Trust appointed a Falls Prevention Practitioner on a 12-month secondment, and a key part of that role is to develop and deliver the Fall Safe e-learning programme training. The workshops began in March 2014, and have been exceptionally well received by delegates drawn from the Trust's nursing staff. This training is delivered in preparation for the Trust moving across to a new style of falls risk assessment tool, which is due for introduction into the nursing documentation later this year.

Health and Safety training

In addition to sessions on the Corporate Induction programmes, the Health and Safety Team continued to deliver a range of training courses aimed at line managers, link workers and staff/ union safety representatives. These courses include the IOSH Healthcare: Risk and Safety Management course, which is a nationally recognised qualification. We also ran workshops supporting managers in their local implementation of the Trust's policies on risk assessment, control of hazardous substances, stress risk assessment and risk management, and work with display screen equipment.

The team also arranged first aid training, delivered by an external training company. However, We have since have gained Centre approval with the Highfield Awarding Body for Compliance (HABC), in May 2014. This will allow Trust staff to access externally accredited first aid courses in-house for the first time, which will allow us to offer courses more flexibly to better meet the needs of our wards and departments.

SECTION D – CORPORATE EDUCATION AND WIDENING PARTICIPATION

INTRODUCTION AND COURSE ATTENDANCE

The Corporate Education Team consists of 5.97 wte, with an additional 2 seconded staff supported by ring-fenced funding from the SHA (now Health Education West Midlands) for the purpose of increasing Apprenticeship take up and pre-employment engagement. The team organises itself flexibly to respond to a range of legal, NHS and Trust requirements.

The team consists of 1.97 administration staff to support the organisation with statutory and mandatory training, Corporate Induction and the recording and monitoring of a range of education and learning on ESR/OLM, including Conflict Resolution, Equality and Diversity, Appraisal training for managers, Leadership and Management Development training, Information Governance, statutory and mandatory training. The team also records appraisal completion and provides monthly reports for managers showing all staff appraisal and training completion. Some of this training is also delivered by 2.0 wte Corporate Education staff at Bands 6 and 7. The remainder of the team (2.0 wte) form the Vocational Learning Team (see below).

In May 2014, the team was supported by the appointment of a Nurse and Clinical Education assistant (Band 2), funded from MADEL funds, to record nurse and clinical education on the Trust database. This is increasing the range and quality of the Trust data available on clinical education to enable more effective planning and monitoring of education for this staff group.

Course Attendance

The table in Appendix C shows a record of all courses recorded on OLM during 2013/14, listed by Course Name, Places Offered/Maximum number of places, Places Attended & Did Not Attends (DNA)

Key areas for concern include a DNA rate of around 25% for Statutory Safety Updates for Patient Handling Staff. That means that staff pre-booked onto the courses are not released to attend from their clinical areas.

During 2013/14, the number of courses & competencies recorded directly onto Oracle Learning Management (OLM) was increased again from the previous year. Our main challenge was around attendance of booked courses and lowering DNA rates.

We have been working with IT for the last 6 months to improve the functionality of the training diary to have the capability to automatically inform attendees and managers of non-attendance, this has now been completed and is being trialled. Further improvements will be made during 2014-15 to produce a system fit for purpose that incorporates the ability for automatic e-mail reminders being sent out 1 week before a course (as this has been identified as a potentially helpful action by some clinical staff). This will only be fully implemented when all staff have a SaTH e-mail account address that can be transferred onto ESR/OLM. There is not currently a date for this upgrade by IT.

Evaluation of Courses

We currently evaluate Induction, Statutory Safety Update Training, Conflict Resolution, Equality & Diversity, Communications & Colour of Change courses and continually address issues as they are identified.

VOCATIONAL LEARNING

1.0 Introduction

1.1 The Vocational Learning Team sits within the Workforce Directorate, Corporate Education Department and currently consists of 2 WTE permanent staff (1 x Band 6, 1 x Band 4 post) and 1.4 WTE temporary staff who were initially employed for 12 months utilising external funding. These have now been extended by 6 months and 12 months respectively. (1 x Band 5, 1 x Band 4 post). It is proposed that this structure will change later in the year following the retirement of one of the post holders.

1.2 The team's remit falls into 3 main areas:

- Providing access to Vocational Qualifications and providing support specifically to new Healthcare Assistants.
- Supporting staff to achieve Essential Skills at nationally recognised levels.
- Enhancing Pre-employment activities through promoting NHS careers, supporting events internally and externally and to assist in recruiting the right people into the organisation. Including the co-ordination of Work Experience opportunities within the Trust and liaising with schools, colleges and other relevant organisations.

Our aim is to reinforce the message that the patient must always come first and to support the delivery of high quality care. This report provides data and outcomes related to:

- Staff who are either currently undertaking or have achieved a Vocational award during the past financial year.
- Staff accessing help with Essential Skills
- Work Experience placements offered to students attending Shropshire schools and colleges.
- Trust representation at Careers events within Shropshire
- Prince's Trust 'Get into Hospital Services' programmes.
- Planned activity for the Vocational Learning Team for 2014 -15

2.0 Vocational Training

2.1 Background

The Trust is an accredited Centre with Edexcel to offer nationally recognised vocational qualifications in Care and the Work based Assessor and Verifier awards to support a variety of departments where staff are undertaking vocational awards.

The Vocational Learning Team also work closely with an external training provider, Telford College of Arts & Technology (TCAT), to offer a variety of other qualifications, this includes for example: Care, Housekeeping, Business Administration, Medical Administration, Cleaning Support, Catering, Management and many more.

The Qualification Curriculum Framework (QCF) launched in 2011, was designed to be flexible and allow progression to other qualifications e.g. Foundation Degrees and Nursing Degrees, through a credit system. During the last 4 years 20 Healthcare Assistants from the Trust have progressed to registered Nurse Training. The benefit of this is twofold; the students are knowledgeable around the tasks performed by Nurses resulting in a lower drop-out rate from nurse training courses and on completion of their training many come to work back in the Trust as Staff Nurses. Currently 13 Healthcare Assistants are undertaking the Level 3 Diploma in Clinical Healthcare Skills and 4 Allied Health Professional Support Workers are working towards the Level 3 Diploma in Allied Health Professions both of which can provide the stepping stone to professional training.

2.2 Cost

Level 2 qualifications are delivered through TCAT this enables access to national funding through the Apprenticeship Framework for eligible staff. There is a charge for staff who are not eligible; the cost is dependent on which qualification is undertaken.

The Level 3 Diploma Clinical Healthcare Skills Award and Level 3 Diploma in Allied Health Professions are delivered by the Vocational Learning Team, registration and certification fee for these Awards is currently £120.50

The Assessor and Internal Verifier Awards are also delivered by the Vocational Learning Team with registration and certification fees currently £60.45 for the Assessor certificate and £42.15 for the Verifier Award

2.3 Activity April 2013 to March 2014

- 73 members of staff achieved an award.
- 14 members of staff did not complete or withdrew from the qualification.
A variety of reasons are cited including: leaving the Trust, changing job roles within the Trust where the qualification is not appropriate to the new role, personal issues including health problems and changing family responsibilities and also inability to cope with the academic requirements, especially within the new QCF qualifications. All candidates are given extensive support from the Vocational Learning team to achieve the qualification including help with Numeracy and Literacy skills.

2.4 Activity by Qualification (April 2013 – March 2014)

Award	Level	Starters	Completers
Assessor Award	3	1	1
Verifier Award	4	2	0
Business Administration	2	7	7
Business Administration	3	9	0
Business Administration	4	1	0
Medical Administration	2	18	16
Allied Health Professions	3	4	2
Clinical Healthcare Support	2	71	13
Clinical Healthcare Skills	3	19	9
Cleaning and Support	2	8	7
Customer Service	2	1	7
General Healthcare Support Services	2	8	0
House Keeping/Facilities Services	2	1	0
Team Leader	2	10	0
Management	3	3	5
Peri-Operative	2	0	1
Peri-Operative	3	5	1
Portering & Security	2	18	0
Renal Healthcare Skills	3	0	0
Clinical Laboratory Support	2	0	4
Clinical Laboratory Support	3	1	0
Totals		187	73

2.5 Awarding Body Centre Accreditation

To retain accreditation and continue to offer qualifications the Centre has 4 inspections a year from the Awarding Body; Edexcel, with external Standards Verifiers for each of the Awards visiting twice a year. The Standard Verifiers role is to undertake sampling of assessment and internal verification decisions through the scrutiny of assignments, observations, candidate's reflection and other forms of assessment, in order to confirm that national standards have been achieved and upheld. They also provide support to Centres during the sampling process, the outcome from these visits are relayed to

the Centre in a report, with recommendations for aspects needing improvement. A poor outcome can result in Centre activity being stopped; with candidate registration and certification withheld.

The Vocational Learning Centre for the Trust has consistently received A's in all areas for the past 7 years for the Health Awards. In Integrated Education report last year it was highlighted that the external Standards Verifier for the Assessor & Verifier Awards had raised some issues and action points to fully meet the standard required. All actions were put into place and it was reported that the issues had been resolved. Following this year's visits the Standards Verifier made the observation that: " the Centre demonstrates a very good level of assessment and quality assurance through a refreshingly rigorous approach to qualifications"

Below are further comments made by the Standards Verifiers in their reports:

- Trainee Assessors and Quality Assurers (Verifiers) have been extremely well supported this year... which has had a positive effect on both the completion of the Awards and the confidence of the Assessors and Quality Assurers who have completed. (Assessor & Verifier Awards 2014)
- New team members are driving the need to review all practices and processes.. using a simplified approach which is resulting in a highly effective system. (Assessor & Verifier Awards 2014)
- The assessment principles are adhered to at all times. All records are well maintained, auditable and current. (Health Awards 2014)
- The Centre demonstrates excellent practice (Health Awards 2014)
- The support provided to learners is exemplary and permeates throughout the setting. (Health Awards 2014)

2.6 Candidate Evaluation

The planned evaluation for September 2013 did not go ahead due to a focus on supporting the Healthcare Assistant Values based recruitment process and up skilling existing and new team members as part of the teams succession plan.

2.7 Highlights and New Activity during the year

During this year 166 staff employed in Band 1 - 4 roles commenced an apprenticeship framework with the Trust. There is a requirement to report this activity to Health Education West Midlands to support the Health Education England mandate of increasing Apprenticeship opportunities in the NHS. The Trust has the highest level of apprenticeship activity in the NHS across the West Midlands, with the highest proportion of apprenticeships being in clinically related roles. The team are responsible for driving the apprenticeship agenda within the organisation, linking with the Training provider, collating the data and reporting this activity.

The team has actively supported the new Healthcare Assistant 'Values based' recruitment process including:

- Helping to plan and run 2 Information days on either site during July 2013, October 2013, January 2014 and April 2014. Each event attracting over 50 people interested in finding out more about the HCA role within the Trust. This entailed the team members specifically delivering ' A Day in the Life of a HCA' session and carrying out Essential Skills tests.
- Providing feedback, support and guidance to those unsuccessful in the Essentials Skills tests.
- Assisting with the interview process.
- Delivering sessions on the extended HCA Induction programme.
- Visiting newly recruited HCAs in their work area to provide support and guidance and to assist in testing competence against the criteria in the HCA Core Competency Workbook.

The Core Competency Workbook is also being introduced to existing HCAs gradually across the Trust to ensure standards are being maintained and therefore help to ensure that patients are receiving high quality care.

A focus this year has been to ensure the team is in a position to maintain levels of activity following the retirement of the Senior Vocational Learning Advisor in August 2014. A succession plan is being

worked through to up skill the Vocational Learning Advisor to be able to assume the role of Centre Co-Ordinator this will enable the Trust to retain 'Accredited Centre' status with Edexcel for vocational qualifications. This also required supporting an additional member of the team to become an assessor and verifier for the awards we offer, this person is currently one of the seconded staff supported through external funding.

In January 2014 a celebration event was held at both sites to acknowledge the first 100 members of staff to achieve a QCF Vocational Award where they were presented with the new achievement badge by a member of the Trust board.

2.8 Proposed Priorities for 2014-15

In addition to continuing with existing objectives, priorities for 2014 -15 include:

- Embedding the new team structure post August 2014
- Reviewing data collection and ensuring ESR utilised to record vocational training activity
- Supporting existing HCAs to complete the Core Competency Workbook.
- Providing on-going support to new HCA's in their role and enabling them to transfer classroom learning into the workplace and to provide support in the achievement of vocational qualifications to ensure competence.
- Ensuring all new Healthcare candidates complete the Equality & Diversity and Falls e-learning programmes within 3 months of commencing their QCF programme.
- Supporting the launch of the new national Care Certificate.
- Increasing further the opportunities for Apprenticeships by encouraging managers to provide apprenticeship placements for young people in particular.

3.0 Essential Skills Support

Vocational Learning Team members are trained to carry out initial Essential Skills Assessments. These assessments assist staff to determine if they have the numeracy and literacy skills necessary to be effective in their day to day lives and in the working environment. These skills are assessed to a nationally recognised level. Since this provision was made available there has been a steady increase in the uptake of staff in various roles coming forward for assessment. Where a need is identified individuals are referred to one of our local colleges for further support and can gain a recognised qualification. All new staff are given information and the opportunity to request confidential support when attending the Corporate Induction programme.

Any member of staff commencing a QCF qualification is assessed and given the necessary support. Individual members of staff can request an Essential Skills Assessment by contacting the Vocational Learning Team or referral can be made via their managers. All referrals are treated in the strictest confidence by the Team and the training providers who deliver the on-going support and access to the national qualifications. There is currently no cost for the provision of this service by the training providers as it attracts national government funding.

In addition during this year all prospective Healthcare Assistants, Phlebotomists and Staff Nurses have been tested for Essential Skills prior to being able to apply for a post within the organisation using the Skills for Health Assessment tool. The Vocational Training team has been involved in carrying out over 620 assessments for HCAs and Phlebotomists since July 2013. (The Corporate Nursing team have assessed Staff Nurses). This has resulted in the recruitment of staff who are more able to deal with the demands of the post and if relevant the underpinning Vocational qualification. This has reduced the demand for testing once in post and is reflected in the numbers requesting assessment at Induction and being referred for additional support. Those who do not attain the grade required in both the literacy and numeracy papers are signposted to local training providers, who offer the support or to online support sites to hone their skills, where this precludes people from applying for posts in the Trust they are given the opportunity to re-sit the assessment at a later date.

3.1 Activity April 2013 to March 2014:

- 49 staff completed a request for support form at Corporate Induction
- 13 manager or self-referrals for assessment
- 620 Numeracy & Literacy tests for prospective Healthcare Assistants and Phlebotomists
- 13 Numeracy & Literacy tests for Prince's Trust Students
- 9 members of staff requested help with their English skills, being referred to The Bridge Centre at TCAT and Country Training in Shrewsbury to undertake Level 2 training in English.
- 9 requested help with their Maths skills, being referred to The Bridge Centre at TCAT and Country Training in Shrewsbury to undertake Level 2 training in Maths.

4.0 Pre-employment, Work Experience and Careers

4.1 Pre-employment

During the year we have utilised external funding to support the creation of a Pre-employment Advisor post (Temporary Band 5). The remit for this post was to 'expand and enhance the Trust's approach to promoting both NHS Careers and pre-employment opportunities in the Trust. Identifying and creating sustainable, innovative ideas to engage people of all ages, not just work experience opportunities for school and college students, but wider pre-employment opportunities for both young people and adults investigating employment options in the NHS. The postholder was employed from July 2013 onwards.

4.2 Activity July 2013 – March 2014

- A review of practices within schools to consider what currently exists to educate young people about the variety of careers available within the NHS and how to navigate different pathways. All schools and colleges in Telford & Wrekin and Shropshire were contacted offering to meet and discuss ways of working together to raise student awareness. Eight schools or colleges took up the offer to meet, with attendance at a further 13 careers events during the year.

Outcomes included:

- Opportunities do exist to improve the level of engagement.
- The need for a robust and reliable work experience programme that is consistent across the Trust.
- To work in conjunction with them and their students to determine the content of their work experience programme.
- A single point of access for all activities relating to information advice and guidance. regarding NHS careers, work experience, simulated learning etc.
- Links to the school curriculum to raise awareness of health care careers.
- An increased availability of quality work experience placements.

Recommendations to carry forward for next year's activity are:

- Develop an Ambassador network within the Trust
- Create an opportunity for work related learning within the Trust e.g. a skills lab
- Develop a peripatetic skills lab provision to take out into schools and colleges
- Create a single point of access for all work experience requests, to determine appropriate placements and suitable alternatives, if necessary.
- Develop an easily accessible, comprehensive, consistent work experience programme.
- Increase the number and variety of placements available.

- To support the Trust objective of 7 day working within the Phlebotomy service, it was identified that there was a need to recruit several new staff, recruitment and retention to this role had proved challenging in the past. Support was provided by the Pre-employment Advisor, including working with Job Centre plus to promote the vacancies through an employer led presentation, hosting 2 information event where members of the Phlebotomy team gave a presentation about the role and numeracy, literacy and dexterity essential to the role were tested. Resulting in successful appointments being made to the vacancies.
- Recruitment issues were identified in Domestic Services at the Royal Shrewsbury Hospital site in particular. Following discussions with the managers of the service it was decided to try an alternative approach to recruiting to the staff group, through working with Job Centre Plus and a local training provider to host a 6 week 'Sector based Work Academy'. The focus would be up-skilling unemployed people with an emphasis communication skills and the values and behaviours required to work within the Trust. Followed by a period of work placement to give the Domestic Service Managers the opportunity to assess the suitability of the participants for the role and interview them for the vacant posts. The Academy was due to commence during March, with an evaluation to be carried out afterwards.
- Prince's Trust 'Get into Hospital Services'. Health Education West Midlands had approached the Trust to host a four week programme for a group of 12 'work ready' young people consisting of 2 weeks taught input and 2 weeks work placement. The first programme was hosted in March/April 2013 with a second in October 2013. The taught programme was planned by the Corporate Education Manager with some of the content delivered by the Pre-employment Advisor, who also acted as a mentor to the participants. The programme included talks by staff within the Trust about their jobs and how to access the various careers, support in developing CV's and interview skills, information on how to search the NHS Jobs website. Group work around the Trust values, behaviours and communication skills. The participants also achieved a nationally recognised First Aid at Work certificate and Food Hygiene Certificate to enhance their CV. During the second 2 weeks the young people had 2 separate placements in a variety of Departments across the Trust depending on their preferences and career aspirations. Some of those who participated have secured work in the Trust or in allied organisations, directly attributable to attending the programme.
- Enhancing the relationship with Job Centre Plus in Telford and Shrewsbury, providing information to staff within JCP giving a better understanding of the roles available, exploring different recruitment methods and promoting jobs available in Health & Social Care that may not have been considered previously. Raising the Trust awareness of the incentives and schemes available to integrate people who were previously unemployed.

4.3 Work Experience

The Trust continues to have a very high demand for work experience placements across a variety of departments on both hospital sites. The areas offering placements are included in the Work Experience Directory available on the Trust website, together with an application form. Each area offering placements has to be annually risk assessed on the behalf of the Education Committees in Shropshire this is to ensure they are able to offer a safe environment for young people. Each area included in the Directory has a nominated person who prospective students send completed application forms to; they have the opportunity to interview students prior to placements and then provide supervision to the student while in the Trust.

- During 2013-14, the Trust has offered 180 placements to students in a wide variety of areas throughout the Trust, including shadowing Doctors.

Unfortunately the Trust is often unable to accommodate all the requests received for many reasons, including limiting placements to ensure that each is age appropriate, is appropriate to the student's career aspirations, is properly structured, risk assessed and supervised.

The Work Experience offering will be reviewed during 2014-15 based on the previously mentioned feedback from schools and colleges.

4.4 Careers

During the year team members were invited to attend various career events (see table Appendix 1) throughout the County these were all very well attended by both students and their parents; generating a lot of enquiries about careers in the NHS and how to access further information. Enquirers were provided with information to take away, together with advice and guidance on the variety of career options; they were also signposted to both the NHS Careers and NHS Jobs websites.

5.0 Vocational Learning Team Objectives 2014- 15

The Team continues to contribute to the opportunities to people seeking to join the NHS and to the development of staff primarily in Bands 1 – 4. The main priorities for 2014 - 15 are contained in Appendix B.

Appendix 2

SECTION E – CLINICAL SYSTEMS TRAINING

Introduction

Since 2010, the Informatics Clinical Systems Training team has evolved in line with the demands and requirements of users and in conjunction with the needs of the organisation. A framework has been set up to deliver improvements to data capture and to ensure that users undergo regular refresher training. This will provide the basis for the organisation to move forward with future strategic developments of an Electronic Patient Record (EPR) in line with the current Informatics Strategy.

A team of 4 core Clinical Systems Trainers have delivered a high number of training courses along with corporate system roll outs of Operating status at a glance, SemaHelix PAS, Clinical Outcome Forms, new Emergency Department system, Complete Pathway Management in SemaHelix and A&E Clinical Correspondence Discharge summaries. Training is delivered to staff across SATH and to the wider healthcare community.

Achievements 2013/14

- Introduction of awareness sessions for any system upgrade.
- Upgrade of SemaHelix to version 7.6 with Theatre Module enhancements
- System Roll out of Operational Status at a Glance
- Re-designed Training Programmes for
 - Patient Master Index
 - Accident and Emergency
 - Clinical Management
 - Out-patient Referrals and Appointments
 - Elective Admission Lists
- More efficient delivery of standards support for reconfiguration services.
- More comprehensive modules of training and clear supportive documentation.
- Involvement in the Clinical Correspondence and Local Health Economy Electronic Communications Group.
- Streamlined process for Junior Doctors induction and Keele Undergraduates with appropriate documentation.
- Introduction of Governance Framework for the PAS
- Introduction of Paediatric CAS card
- Regular Crystal Letter workshops and rationalisation and standardisation of out-patient and in-patient letters

Key Actions 2014-2015

- Update the Clinical/Corporate Systems Training Strategy in line with the organisations strategic priorities, Informatics Strategy and the Trust Education Strategy.
- Design and develop refresher training courses via modern technologies to meet the needs of the users.
- Continue to develop tighter links with the operational areas to build on efficiencies of system use.
- Continued promotion of the importance of training and development to ensure high standards of data quality to enable a right first time approach.
- Improved Training links with the wider healthcare community.

Headline Summary 1 April 2013 to 31 March 2014:

- *A number of our managers and leaders have signed up to and are working through the newly launched national leadership programmes provided by the NHS Leadership Academy. These range from the introductory Edward Jenner e-learning course through to a full Masters Level programme and beyond.*
- *18 leaders are currently studying on the Staffordshire University Management in a Healthcare Setting programme at PG Certificate, Diploma or Masters level, with 3 members of staff becoming the first to reach their full Masters in January 2014.*
- *More than 110 managers have now completed a level 2 or 3 Certificate in Line Management, with another 21 starting in May 2014.*
- *A new course, Coaching Skills for Line Managers, was launched in January 2014 helping managers and leaders develop new communication styles and skills.*
- *Over 200 leaders and managers have accessed coaching support, and an impact evaluation was conducted to highlight how the Trust and our staff have benefited from this support.*
- *Over 200 Managers and leaders came to the 2nd Annual Leadership Conference, and feedback about the day was extremely positive*

A Review of the Previous 12 Months:

The last 12 months have seen much progress in leadership and management development both regionally and nationally. The Leadership Education Manager has been Working with Health Education West Midlands to ensure that the Trust's leaders and managers have access to the appropriate new NHS Leadership Academy national leadership programmes. These programmes have been designed specifically to meet the challenges that leaders face as identified through reports such as Francis. Take up has been steady, and current students are progressing well. In recognition of having this option available to leaders and managers, recruitment to the negotiated Masters programme, delivered with Staffordshire University, was put on hold for 12 months. This will allow the Trust time to evaluate the benefit of both programmes, both to the Trust and its staff. For those already on programme, the students are finding the course of real value to their role and have been able to implement much of the learning within their own working areas. 3 students have also completed the full masters programme, with their Masters Dissertations being used to help develop services and learning across the organisation.

Time has been spent ensuring that, to reflect the Trust's transformation programme, all leadership programmes have been adapted to be supportive of the Trusts aims and ambitions. This includes the development of a new mandatory leadership module, for all leaders, which will cover leadership behaviours, a culture of performance management and motivating and leading people. This is being developed with the Trust's Executive team and will be launched across the wider Trust later this year.

A second Leadership Conference was delivered in October, in which staff from across the Trust heard about the local, regional and national leadership perspectives, as well as had the opportunity to learn new skills. As well as this, the leadership education and development programmes offered to staff continue to provide excellent support to our new and developing leaders. This has included our second cohort of coaches completing their training, which means the Trust has access to over 20 coaches who will work with leaders at all levels to help support them in role. Current figures indicate more than 250 managers and leaders have already accessed coaching and their feedback is overwhelmingly positive. A formal evaluation study took place to give the Trust a clear view of how coaching is making an impact, with the results being used to enhance the programme across the organisation. A new 'coaching skills for line managers' course has also been developed in recognition of how basic coaching skills can positively influence conversations with teams and staff members. Feedback is being monitored and evaluated throughout 2014.

Newly appointed and junior managers continue to be able to access the Level 2 and Level 3 Line Management and Leadership programmes offered through Telford College. The 8th Cohort is due to begin in May 2014, and this will mean over 110 managers have accessed this course since we began in 2009.

In-house workshops and learning opportunities continue to be developed to recognise development requirements. Topics such as *equality and diversity*, *decision making under pressure* and *Finance* courses are proving popular. These programmes are regularly reviewed to ensure appropriate content. Leaders and managers who face challenges around change are also able to access support to create bespoke development sessions for them and their teams. This can be anything from short development sessions, to full day facilitation and group work.

Priorities for 2014-15

As well as ensuring the delivery and evaluation of all formal development programmes, and the continued support of leaders and their teams through bespoke programmes, priorities for the Leadership Education Manager include:

- The implementation of the new mandatory module for leaders and managers on Trust Leadership Behaviours. It is hoped this will be ready to launch during the Winter, with key information being shared with staff at the Leadership Conference in October 2014.
- A continued commitment to ensure that, to reflect the Trust's transformation programme, all leadership programmes are adapted to be supportive of the Trusts aims and ambitions.
- The delivery of a third Leadership Conference in October, focusing on Transformation, in which staff from across the Trust will hear about leadership challenges and opportunities during times of transformation and change, as well as have the opportunity to learn new skills. The day will offer a flexible programme, and over 200 people will be able to attend.
- Promotion and engagement with the NHS national leadership programmes, namely the Edward Jenner, Mary Seacole, Elizabeth Garrett-Anderson, Nye Bevan, and Top Leader programmes.

Measures and Evaluation:

The impact and influence of learning and development opportunities are notoriously difficult to measure. Data is usually qualitative and individual experiences can be influenced by many different perceptions. However, evaluation data can be gathered if appropriate methods and methodologies are used. Planned evaluation and measures for the coming years include the use of:

- Staff survey results, particularly those relating to questions on leaders and perceptions of leadership
- A temperature check from those who have completed courses
- Continued use of interviews to gain feedback, as with the Postgraduate Certificate programme.

Management Development Attendances April 2013 – March 2014

Staffordshire University	3 completed full Masters 2 completed Postgrad. Diploma, 7 working towards completion 1 completed Postgrad. Certificate, 5 working towards completion
Telford College	Vocational Qualification in Management L2 and 3 Cohort 7 (Start May 2013) – 22, all completed Cohort 8 (Start May 2014) - 21
In-House Management Courses	E&D for Managers - 31 Appraisal Skills for Managers - 113 Coaching Skills for Line Managers - 22 Colouring Change for Managers - 30 Intro to Finance for Managers – 17 HFMA Introduction to Finance (e-learning) - 10 IT for Managers – 7 (one course only) Managing Data – 8 (one course only)

SECTION F – MEDICAL EDUCATION

Undergraduate Department

It is a great achievement that Keele Medical School has been named second in the country for student satisfaction by the National Student Survey for the second year in a row. Oxford was the only medical school rated higher.

Keele Medical School was also rated fourth in the Guardian Newspaper's university league table for medicine with only Oxford, Cambridge and University College London finishing higher. Keele Medical School has only been open since 2003.

This high accolade is greatly rewarding as the Trust has contributed to the training of 88 students this last academic year 2013-14.

There were 50 Year 4 medical students and 38 year 5 students on placement within the Trust.

The Shropshire Faculty consists of 57 educational tutors employed by the Trust with time seconded to teach the Keele Students as well as enormous support from all our health care professionals and administrative staff. We have an administration team of four people and a full-time practice instructor.

Retention~ There has been an increase in the number of Keele Graduates returning to the Trust to work both at Foundation year level and core training. 23 doctors returned as FY1 or 2 last year.

Last year we saw the first Keele graduate return to the Trust as a Teaching Fellow.

The majority of students studying in Shropshire choose to take up accommodation in the purpose built flats on the Royal Shrewsbury Hospital site, which are now managed by a private housing association, Rooftops.

A full Induction has been provided to all Keele students on placement as they are all new to the Trust.

Objective Structured Clinical Examination (OSCE)

The Undergraduate Department has delivered practical exams for half of all the 4th and 5th year medical students from Keele during the course of the academic year. These exams include very intensive preparation and recruitment of both large numbers of real and simulated patients. These examinations are inspected and reported by external examiners from other Medical Schools. The feedback has been very positive and complimentary on the standard of delivery achieved

The year 5 students undertook a smaller formative OSCE examination in December to prepare them for the finals in April.

Year 5

The year 5 students spent 15 weeks on hospital placement and 15 weeks on GP placement. 10 of the GP placements were based in South Shropshire at the Rural campus in Ludlow where they also were accommodated for the 15 weeks at the Ludlow Mascall Centre. The rotation swapped on 9th December. All year 5 students undertook their final practical OSCE exams in April. The final OSCE exams were delivered at the Shropshire Education and Conference Centre over two days on 9th and 10th April. Yr. 5 students from Keele and Stafford were examined here and our students were transported over to Keele to take their exams.

The GP students came into the hospital during the year for 3 Away Days where they are taught several important areas ie: death certification/ IV fluids/ COPD etc. It also means the whole year group meet for an hour at the end of the day where any issues and queries can be raised. The GP students also come into the Trust to do a whole day on "End of Life" training.

Hospital based students rotate in three areas Medicine, Surgery and Critical Care.

All students on hospital placement attend two post mortems and attend a Coroner court session either in Shrewsbury or Telford

Critical Care Training Week

All year 5 students undertook an intensive weeks training in Critical care and emergency medicine before being based in SAU and MAU. This classroom based week in the Clinical Skills labs was facilitated by two Emergency senior medical staff, two Teaching Fellows and Clinical Practice Instructors. There was only a small group of 6 students taught at a time with enabled excellent tuition and personal feedback.

During the week the students had simulation training with Simman which all the students have found as an invaluable part of their learning and find that it equips them with greater confidence for their future careers as FY1 junior doctors. The scenarios that they covered were Sepsis, Asthma, ACS, DKA Trauma and overdose. The students are also taught cannulation, arterial blood gases, catheterisation, preparing IV medication, suturing and continuous infusion.

Year 4

The year 4 curriculum is very intense as the students have their final written exit exams at the end of the year. The students rotate around four blocks ; Women's' health, Surgery, Integrated Medicine 1 at RSH (IMP 1 – Medicine and Neurology) ,Integrated Medicine 2 at PRH (IMP2 – Medicine and Musculoskeletal) plus a multi-block which includes Mental Health, Paediatrics and GP placement with Higher Consultation Skills (HCS)

The students were also taught in larger groups during the year at Spine sessions and superblock sessions where other topics are covered. Other Consultants and specialists from SaTH teach ENT, Pharmacology, Osteoporosis, Ethics, pain, palliative care, Trauma, Ophthalmology, Cardiology, Neurosurgical emergencies, Plastics, Thoracics, Sexual health, Dermatology, Endocrinology, Emergencies, COPD, Tuberculosis, Dementia awareness plus others.

The students had two weeks revision prior to their exit exams in June. The practical OSCE exams took place over two days 26th and 27th June. SaTH students were examined at UHNS and vice versa.

After their exams year 4 then all undertook a SSC (Student Selected Component) which was a 4 week opportunity to work in a department to reflect in future career opportunities.

Clinical Skills Teaching

This is an invaluable part of the students experience when based at SATH and it has received excellent feedback. There is an on-going priority to ensure that doctors are competent in their clinical skills in accordance with infection control requirements following guidelines from the GMC, Keele and Tomorrows Doctors

All students are required to complete a skills passport as part of their course – these skills were completed during their ward/GP placements but important practice of these skills was provided by the Practice Instructors and the Teaching Fellows. Training sessions were provided both within the weekly timetable and out of hours for drop in sessions – these were increased in the period leading up to the practical OSCE exams.

Work experience students

The department takes one student a week for work experience from the schools in Shropshire. This enables the sixth form students to shadow various departments at RSH including Theatres to see if they really want to pursue a career in medicine. It also allows them to use some of their experiences of hospital life to refer to in their medical school applications.

Elective Student placements

The department also hosts a number of elective students from a whole variety of countries for elective placements which vary from a week to eight week placements. The German students seem to particularly find the Trust a very good place to work and often comment on the good teaching, quality of patient care

and friendliness of the staff. Some students who have been here have posted very good comments on University websites which encourages other students to apply.

Library Services (via Survey monkey survey to all service users)

- Almost all of students (89% of those that had needed the help of library staff) agreed or strongly agreed that staff are helpful and knowledgeable, as well as being available (92% agreed or strongly agreed) when required during our staffed opening hours.
- 81% of respondents felt that overall, the library services provided to them was ‘terrific’
- 23% of respondents used the library or its resources more than once a week
- The most used electronic information resources were databases (e.g. Medline, CINAHL etc.), NHS Athens accounts, the Shropshire Health Libraries Catalogue, and the Library website
- 91.8% rated the helpfulness/knowledge of library staff as ‘terrific’
- “The health library at UHNS is very limited in terms of opening hours especially at weekends and out of hours when compared to sister sites (Shrewsbury and Stafford)”

The most popular method of receiving training was through guides and hand-outs, closely followed by one-to-one training

Faculty Meetings

These meetings are held three times a year offering opportunity for tutors to meet and discuss key subjects. External speakers (from Keele or other specialists) are encouraged to participate to raise important issues and talk about relevant educational issues.

Student Support

This year there has been an increase in the level of student and direct 1:1 academic support provided for the students.

This is in keeping with our wish to support students through what is a very demanding course. Student conduct is managed carefully by the undergraduate team with close communication with the university and SaTH tutors are represented on all the health, conduct, and progress panels. The undergraduate administrative provide all the support for these important academic activities.

Liaison Meetings

Quarterly meetings are held between the Trust and senior Keele Executives including financial leads from both. Discussions regarding future funding have been discussed and have included the Medical Director and Deputy Finance Director.

Adverse and Critical Incidence Report

The department as a highly commended critical incident investigation process triggered by Datix reports. This includes feedback to students on actions carried out in response to concerns. All logs are followed through to closure and reported at the quarterly Liaison meetings and these in turn are taken to the Medical School’s patient safety committee. All students involved in any incidences are met by the Dean or Deputy Dean and individual file logs are kept.

Priorities for the following year 14-15

- Proposal for increasing the student intake to half of each academic year to result in all Keele students being placed in Shropshire at least once during their training (some undertake 3rd year GP training in Shropshire)
- Further progress the Simulation training increasing tutor support and Clinical Practice assistant support
- To resource an incoming elective programme to support an expansion of our administrative team.
- To review the balance of resource in response to reconfiguration of Women’s and children’s services.
- To look at the development of integrated training within a IPE framework after a very successful trial this last year

- To provide a follow up real patient event to thank the numerous patients who help the Trust to deliver the OSCE examinations
- To provide a course to help support students suffering from stress ~ Mindfulness/yoga
- Development of cross site shared IT access via VPN to reduce travel times made by tutors
- To begin a 3 year rolling plan of teaching observation to support revalidation

Quotes from student feedback can be found in Appendix D.

Postgraduate Medical Education Report 2011-14

Postgraduate Medical Education Department

Postgraduate medical and Dental Education is managed at RSH from the SECC and at PRH from the Education Centre. The Postgraduate Team provides support to Medical Education and Medical Educators. They staff both Education Centres, they also co-ordinate the room bookings and book/set up AV equipment as and when required..

Over the past 12 months a significant amount of building work has taken place within the Education Centre at Princess Royal Hospital. A reception area has been created and the team have moved into a larger open plan office at the back of the Reception area. Over the next 12 months a plan is in place to develop and improve the training and audio-visual facilities on the Princess Royal Hospital site.

In October 2013 Medical Education and SECC invested in a Video Conferencing system. The Foundation doctors and the Medical department use the system weekly for their classroom based training sessions across site, thereby allowing training to take place to large or small groups without the requirement for trainees to move across from one site to another, as previously. Feedback from the system has been positive and by using this travel costs have been reduced and trainees are also able to spend more time in the workplace.

The Education Faculty (Speciality Tutors, Foundation Programme Director and SAS Tutor) report to the Director of Postgraduate Medical and Dental Education. A regular Educational Leads meeting is held between the Director of Postgraduate Medical and Dental Education and the Tutors. Tutors are required at this forum to report any issues both positive and negative.

Both Education Centres work closely with the local Dental Tutors and provide an education programme for Dentists and their teams. The courses at SaTH are very often oversubscribed and we are becoming a very popular venue for Dentists based within Shropshire, Birmingham and the Black Country.

The Education Centre at PRH also administers the Dental Foundation Year 1 (DF1) Training Scheme for the Telford area. The scheme currently has 12 trainees who are attached to a senior clinician in a Shropshire Dental Practice. The DF1 will also attend study days in the Education Centre at PRH. The Education programme for this is administered within the Department.

In July 2014 a proposal to reduce the number of Foundation Schools from 5 to 3 was accepted by HEWM. SaTH now sits in West Midlands North Foundation School, previously the Black Country and Staffordshire Foundation Schools. We are not sure as to whether this move will have any impact on SaTH, it is however hoped that we will attract more Keele Medical Students.

Currently the Trust has 187 training grade doctor posts.

Induction Training

Induction took place between 30th July and 9th August 14 for trainees new to SaTH. Close working took place between Medical Education, Medical Staffing, IT and Estates to ensure that the process was

managed effectively with minimal impact on service provision. Trainees were also issued with an ID badge, IT codes and car parking permits on their first day.

The Foundation Year 1 doctors were required to complete a shadowing week. Feedback from this has again been positive. As well as receiving corporate induction and clinical skills training during this week they attended an ALERT Course ([Acute Life Threatening Events: Recognition & Treatment](#)) to prepare them for their first clinical role. A 2 day Adult Life Support Course also took place for some new FY1 trainees, prioritising the doctors that would be joining the acute medical take in the first four-month rotation.

On appointment to the West Midlands Deanery it is mandatory for all trainees to complete the on-line Generic Induction. Non-compliance is reported to the Director of Postgraduate Medical and Dental Education and where necessary to the Postgraduate Dean.

WORK EXPERIENCE

The Education Centre at PRH organised and administered 36 work experience applications from 6th Form students attached to local Colleges who intended to apply for Medical School. Placements were provided for the trainees (that met the selection criteria) shadowing a number of Clinicians and their teams on the PRH site.

Simulation Training

A Simulation Faculty has been developed within SaTH, currently the faculty consists of 10 Consultants and 2 CPis. A *Simman Essential* has recently been purchased to use alongside the *Simman 3G*.

Currently simulation training is offered to all the FY1s and FY2s within SaTH as part of their protected half day teaching (3 hours). Feedback from the trainees is excellent and a common request is that more of this type of training is required. At present discussions are being held around the feasibility of increasing this session to a full day to include training in more detail on human factors, the deteriorating patient and a detailed de-brief.

Between March 13 and April 14 3 simulation sessions were provided for the Obstetric department which included Anaesthetists, ODPs and Obstetricians and Midwives. Topics covered included sepsis, maternal resuscitation, pre-eclampsia and post-partum haemorrhage.

Faculty Development and Recognition and Approval of Trainers

It was a general Medical Council and HEWM requirement that by 31st July 14 all of SaTH's "named" Clinical and "named" Educational Supervisors be appropriately trained for their role. As a minimum since 2009 the Supervisors needed to have attended a Train the Trainer Course via the Deanery, Royal Colleges or University.

The team have successfully managed this and can report that all of the trainers at SaTH have been added to the Deanery database (Intrepid) which in due course will be made available to the GMC. At the moment all trainers have been granted Provisional Accreditation. By 2016 we must ensure that trainers are Fully Accredited. In order for this to happen the trainers will need to have an Educational Appraisal as part of their Annual Appraisal. The Director of Postgraduate Medical and Dental Education will be required to work alongside the Medical Director to ensure that this happens.

In March 2014 the department ran an accredited 2 day Train the Trainers Course in conjunction with Keele University. The course has been developed in accordance with the GMC Recognition and Approval of Trainers implementation plan and covered the following topics:-

- a. ensuring safe and effective patient care through training

- b. establishing and maintaining an environment for learning
- c. teaching and facilitating learning
- d. enhancing learning through assessment
- e. supporting and monitoring educational progress
- f. guiding personal and professional development
- g. continuing professional development as an educator.

The 2 days were facilitated by Dr Charlotte Hart and feedback was extremely positive. 24 places were made available to the Trusts more experienced educational leads and educators. The department purchased the materials of the course after the event and we plan to run in house training facilitated by those that attended the March 14 course. We hope to run another course January 2015. These courses will be repeated in-house from time to time to ensure that all trainers in SaTH are fully compliant with the current GMC requirements for approval, recognition of Trainers and, in years to come, with requirements for full registration, and full revalidation of this role.

GMC Trainee and JEST (Job Evaluation Survey Tool) Surveys

Results of the annual GMC Trainee and JEST Surveys have been received, analysed and distributed to Education Leads within each area. We are required to investigate red and green flags on behalf of the Trust. An excess of red flags will trigger a QA inspection. The results for 2014 GMC Survey are available on the GMC website.

Quality Assurance Visits

During 2013/2014 routine Quality Assurance visits from HEWM were scheduled to the departments listed below:-

Foundation Training
Anaesthetics at RSH
Emergency Medicine at RSH
Obstetrics and Gynaecology
General Internal Medicine at RSH
General Internal Medicine at PRH
Ophthalmology
GPVTS
Dental

Following the visits all of the training posts have been approved for training on the proviso that the Trust ensures completion of the relevant action plans and progress reports are submitted to HEWM. In order for this to happen the team are required to work closely with educational leads. Preparation for these visits and preparation, collation and submission of Action Plans and Progress Reports conveys a considerable workload on all the Postgraduate staff.

Clinical Skills

There have been plans for the construction of a fully equipped and staffed Skills Lab on the PRH site for several years. This necessitated the vacation of one meeting room at PRH by Staffordshire University to allow construction. We have recently been informed that the Staffordshire University have given notice of their intention to leave during 2015, and this will allow us, finally, to provide this essential and long-overdue facility. This is one of our Major Priorities for 2015 and will need full support from the Trust Executive Board. However, at the present time, there is no skills lab on the PRH site and this must be

regarded as presenting a considerable clinical risk due to the lack of ability to train junior doctors and other staff onsite for essential skills which are used in every-day treatment of our patients.. Provision of an onsite Skills lab will also help recruitment to PRH / SaTH and ensure that the Deanery and training bodies continue to send high quality trainees to our Trust.

Challenges / Risks

- 1 A number of rotations and rotas have been changed due to the relocation of the Women's and Children's Centre. It is important that the Director of Postgraduate Medical and Dental Education is involved in discussions as necessary and also made aware of any issues as and when they arise.
- 2 From 2016 all "named" Clinical and "named" Educational Supervisors will need to be Fully Accredited with the GMC in order to be able to train. As detailed above all of SaTH's trainers have been granted Provisional Accreditation. A lot of work will need to take place to ensure that information with regards to Consultant Appraisal is recorded.
- 3 The lack of a Clinical Skills Lab on the PRH site continues to be a significant risk. As stated last year we are already aware of several instances where by trainees have been allocated elsewhere due to lack of these facilities. This has the potential not only to affect training within a department but will also have an adverse effect on service provision and patient safety.
- 4 Lack of office space on the Princess Royal Hospital site has resulted in negative comments at QA Inspection Visits. Trainers and trainees have both reported that they do not have dedicated space made available to them and they find it difficult to find space to conduct appraisals and 1:1 meetings. Following a recent QA Visit to Medicine a room has been designated in Education for this purpose. Work is currently underway to renovate an office at the back of the Canteen at PRH for the junior doctors to use. We need to ensure that training space on both hospital sites is protected.
- 5 Difficulty in recruitment is still a national problem. Training numbers are being cut back and now is the time for the Trust to be more creative when it comes to staffing vacancies. This is essential because if there are gaps in the rotas, this will affect the workload of every doctor on the rota leading in some cases, to dissatisfaction by the trainees. This is always expressed by trainees in Junior Doctors Forums and on QA visits and has lead, in some cases, to a poor report by the visiting QA panel. Basically, if we wish to train, we MUST provide suitable facilities.
- 6 Due to workload and staffing pressures it is not always possible for trainees to attend the required 70% of in-house training. The department is currently working alongside the Education Lead for Medicine at RSH and the Medical Illustration department to record the weekly teaching sessions. Trainees who have missed the sessions are able to obtain a DVD and catch up and a more suitable time. It is hoped that eventually a dedicated restricted intranet page will be available for presentations to be stored and accessed as required.. HEWM praised this initiative at a recent QA visit.

SENIOR MEDICAL EDUCATION

During 2013-14, attention has continued to be focused on the need to prepare Senior Medical Staff for the requirements of Revalidation. A programme of Doctors Essential Education Programme (DEEP) training was initiated and devised by the Medical Director and two modules on the Ethics of Medical Practice and National Markers of Quality ran from October 2013. During 2014-15 modules 7 and 8 are being delivered.

The new Medical Director has identified the need to put a greater focus on the Continuing Professional Development of Consultant Medical Staff and SAS doctors, including the co-ordination of a centralised programme of development and recording and monitoring CPD activity to ensure it meets professional and service requirements. This was a priority for the Medical Directorate in 2013-14.

Appendix A – Careers Promotion Activity

Careers Activity within Schools and Colleges 2013 -14

Date	Location	Activity
12 th April	Bridgnorth Community Centre	Careers Fair at request of Philip Dunne M.P
12 th July	Thomas Adams School, Wem	Careers Convention
23 rd Sept	Hadley Learning Centre, Telford	Careers Talk
23 rd Oct	The Grange School, Shrewsbury	Careers Talk
23 rd Oct	The Burton Borough School, Newport	Evening Careers Fair
7 th Nov	Telford College of Arts & Technology	Employability Event
27 th Nov	Phoenix Academy, Telford	Careers Festival
11 th Dec	Oswestry School	Careers Convention
10 th Jan	Madeley Academy	Interview Skills Workshop
15 th Jan	Abraham Darby Academy, Telford	Careers Event
5 th Feb	The Burton Borough School, Newport	Year 11 Futures Conference
14 th Feb	The Grove School, Market Drayton	Careers Fair
11 th Mar	Bridgnorth Endowed School	Careers Fair

Appendix B - Vocational Learning Team Objectives 2014 - 2015

Objective	Success Criteria	Date for Review
Continue to provide support to all staff undertaking Vocational qualifications either through partner organisations or through the Trust accredited Centre.	High proportion of staff who commence vocational qualifications achieving within an appropriate time frame.	Quarterly.
Continue to offer initial assessment for Essential Skills, provide feedback and access to further support where appropriate.	Staff who require support are able to access it and achieve the national standard in Numeracy & Literacy.	Annually
Ensure information is available within ESR OLM regarding individuals' starting and achieving vocational qualifications.	Information available within ESR OLM	On-going
Collate report regarding all QCF awards activity to include starters, leavers, and completers. Combine feedback from EV reports and any actions taken.	Information available for Integrated Education Report	Sept 2014
Continue to support the HCA 'Values based' recruitment process and development period	HCAs feeling supported and integrating into the Trust. Developing competence in the role through completion of the workbook within 3 months of start date.	On-going
Review the structure the Vocational Learning Team post August 2014	Have new structure identified. Produce new Job descriptions and Person Specs. Recruit to posts	April 2014 August 2014
Support the introduction of the Care Certificate for relevant staff groups	Staff achieving certification	Mar 2015 onwards
Continue to co-ordinate the Trust Work Experience Programme and provide information regarding Careers for schools and colleges within Shropshire.	Up to date information available through the Trust Website and Intranet. Liaison with Departmental Co-ordinators to ensure they are informed regarding Policy. Maintain records of activity. Attend Careers events with relevant information.	On-going
Review Work Experience and Careers offering	Schools and colleges aware of opportunities available and contact points within the Trust. Trust receiving positive feedback through evaluation exercise.	Dec 2014 During 2015
Gather information and collate report regarding Work Experience and Careers activity to end of academic year 2013/14	Information available for Integrated Education Report	Sept 2014
Host 2 x Princes Trust programmes per year		Autumn 2014 Spring 2015
Increase the number of Apprenticeships available within the Trust. Achieve minimum of 165 people undertaking an apprenticeship framework within the Trust during 2014 – 15.	Increase opportunities for young people joining Trust on Apprentice placements. Continue to offer access to apprenticeship framework qualifications to existing staff Broaden the variety of opportunities available to cover different vocational areas.	On-going

Appendix C – Record of Staff Training on Oracle Learning Management (OLM) – 2013-14

Course / Competence	Places Offered / Max Capacity	Places Attended	Did Not Attend
223 ABLIS and AED Training :ABLS:	12	6	
223 ALS - Advanced Life Support Provider Course - Adult Only	54	54	
223 Basic IT Training	32	20	8
223 Breastfeeding Management Courses	90	52	16
223 Cannulation Training	130	95	26
223 Catheterisation Training	90	7	12
223 Child Protection Awareness :SC:2:	1000	726	118
223 Colour of Change Workshops	135	74	7
223 Communication at Work	144	70	17
223 Conflict Resolution Foundation Excluding Breakaway 1/2 Day :CRT:	504	318	144
223 Conflict Resolution Refresher Training :CRT:	306	208	77
223 COSHH Risk Assessment Training :H&S:	30	17	1
223 Dementia Awareness :DA:		296	
223 Diabetes Study Days	180	115	44
223 Dignity Workshop		83	
223 Domestic Abuse Training	50	30	
223 DSE Workstation Assessor Training :H&S:		18	2
223 Equality & Diversity Awareness :E&D:		325	81
223 Equality & Diversity Theatre Event :E&D:		16	
223 Fire Incident Control Officer Training (CSM)		2	
223 First Aid - Emergency :H&S:	45	21	
223 First Aid - Foundation :H&S:	20	8	
223 First Aid - Refresher :H&S:	30	15	1
223 Fundamentals of Care Study Day	450	266	91
223 HCA Development Programme	70	45	17
223 ILS - Immediate Life Support Course - Adult Only	240	147	6
223 Induction Basic CPR - Adult Only :ABLS:	n/a	340	28
223 Induction Corporate Day :SC:1: :FSA: :IPAC: :E&D: :H&S:	n/a	635	58
223 Induction Food Safety :FS:	n/a	225	3
223 Induction for HCAs	n/a	196	11
223 Induction for Junior Doctors :ABLS:	n/a	85	
223 Induction for Junior Doctors :PM&H:	n/a	78	
223 Induction M & H for NPHs :LM&H:	n/a	153	13
223 Induction Medical Devices	n/a	114	
223 Induction Moving & Handling for PHs :PM&H:	n/a	307	34
223 Infection Control Training :IPAC:	n/a	104	
223 Information Asset Owner Training	150	17	2
223 IOSH Managing Safely for Healthcare Professionals :H&S:	20	17	
223 IV Full Day - Foundation	182	132	29
223 IV Half Day - Update	216	107	45
223 Junior Doctors Induction	n/a	138	
223 Lone Worker Device Training :H&S:	n/k	39	
223 Making Every Contact Count :MECC:	2000	1247	80

223 Man Dev - Coaching Skills for Line Managers	36	16	
223 Man Dev - Colouring Change Workshops	66	30	5
223 Man Dev - Equality & Diversity for Managers :E&D:	75	33	7
223 Man Dev - Introduction to Finance	60	17	12
223 Man Dev - Manager Development Programme - Data	14	8	2
223 Man Dev - Managing Attendance	318	154	14
223 Man Dev - Managing Patient Safety in a Clinical Area	40	4	3
223 Man Dev - Managing Patient Safety Root Cause Analysis	125	33	15
223 Man Dev - Meaningful Appraisals for Appraisers	176	93	39
223 Medical Induction Day 2 :PM&H: :IPAC: :ABLS: :PBLs:	180	66	19
223 Mental Capacity - Clinical Holding Programme :SA:	25	11	
223 Mental Capacity - Deprivation of Liberty Safeguards :SA:	420	198	
223 Mental Capacity Act - Advanced Level 2 :SA:	30	20	
223 Moving & Handling Link Worker 2 Day Course	12	10	
223 Nursing Documentation Training 2014	60	27	
223 PBLs - Paediatric Basic Life Support Training :PBLs:	192	82	10
223 PILS - Paediatric Immediate Life Support Course	306	149	1
223 Pressure Ulcer Prevention	30	12	6
223 Risk Assessment Workshop :H&S:	40	28	3
223 Safe Load Moving & Handling :LM&H:	n/a	157	
223 Safe Patient Moving & Handling :PM&H:	n/a	163	
223 Safeguarding Children & Young People Level 3 :SC:3:	80	31	
223 Safeguarding Children e-learning :SC:	n/a	54	
223 SSU for Maternity 2014-2015 :ABLS: :PBLs: :SA: :FS: :PM&H:	331	224	81
223 SSU for Medics :FSA: :IPAC: :PM&H: :ABLS:	142	77	9
223 SSU for Midwifery & Obstetrics 2013-2015 :IPAC: :SC: :FSA:	400	222	
223 SSU for Non-Patient Handlers 2012-2018 :FSA: :LM&H:	865	508	154
223 SSU for Patient Handlers 2012-2018 :FSA: :PM&H: :ABLS: :FS: :IPAC: :SA:	3000	1404	446
223 Statutory Departmental Training (Adhoc)	n/a	355	5
223 Statutory Fire Safety Awareness Training :FSA:	n/a	261	
223 Statutory Medical Devices Training	528	113	64
223 Tissue Viability for HCAs	20	17	6
223 Venepuncture Training	120	79	46
223 Work Related Stress Workshop :H&S:	40	22	
223 LOCAL BT-Administering Core	n/a	505	
223 LOCAL BT-Collecting Core	n/a	418	
223 LOCAL BT-eLearningModule1 Core	n/a	18	
223 LOCAL BT-eLearningModules1&2 Core	n/a	139	
223 LOCAL BT-Organising Core	n/a	503	
223 LOCAL BT-RTC-Module6 Core	n/a	6	
223 LOCAL BT-RTCPack-AllModules Core	n/a	7	
223 LOCAL BT-RTCPack-Modules1&6 Core	n/a	4	
223 LOCAL BT-RTCPack-Modules1&8 Core	n/a	6	
223 LOCAL BT-RTCPack-Modules1,6,8&10 Core	n/a	2	
223 LOCAL BT-RTCPack-Modules1,8&10 Core	n/a	93	
223 LOCAL BT-RTCPack-ModulesAllExcept11 Core	n/a	40	
223 LOCAL BT-Sampling Core	n/a	41	
223 LOCAL eLearning-Medical-eInduction Core	n/a	89	

223 LOCAL Hand Hygiene Core	n/a	793	
223 LOCAL HCACompetenceWorkbook Core	n/a	142	
223 LOCAL InformationGovernance Classroom or eLearning	n/a	3885	
223 LOCAL Local Induction	n/a	64	
223 LOCAL MECCMakingEveryContactCount-eLearningModule1 Core	n/a	250	
223 LOCAL NHSWMSafeguardingChildreneLearning	n/a	75	
223 LOCAL Prevention of Pressure Ulcer Workbook	n/a	60	
NHS MAND Equality, Diversity and Human Rights - 3 Years - eLearning	n/a	167	

Appendix D - Quotes from Undergraduate Medical Student feedback

- *"Teaching at Shrewsbury Hospital has been particularly excellent."*
- *"Shrewsbury was very organised."*
- *Almost all questions asking students about their experience at SaTH agree or strongly agree in over 90% of responses*
- *Feedback about our clinical skills instruction was outstanding 92.31% found the staff supportive in the clinical skills lab (CSL)*
- *Feeling more part of the team. Doctors saying 'thank you for doing that, it was really helpful'*
- *Year 4 Teaching is described in glowing terms such as "amazing" and "excellent"*
- *Year 5 comments included "they allowed me to be part of the team", "I have plenty of opportunity to work closely with the team", "being a vital part of the team" and of particular value "Very helpful and considerate team, in particular the F1s and SHOs. Being provided specific jobs to do as part of the team, and not just left by yourself doing non-specific things". These comments fully support the School's intention to embed the students in an apprentice role.*
- *End of life day described as "great" by one student*
- *SSC feedback was very positive with typical descriptors of "fantastic", "excellent", "very supportive", "exceptional" and "brilliant" being used*
- *The Undergraduate Manager was described as "supportive and helpful" and the staff at the undergrad office and teaching staff "are an asset to the hospital and Keele"*
- *I was heavily considering Shrewsbury as I have really enjoyed my time here, but the need for a change was more overwhelming. The staff and the general 'vibe' in Shrewsbury makes it a much nicer place to work than Stoke. When it comes to speciality training or senior posts Shrewsbury is at the top of my list*
- *There has been some really great teaching! It is obvious that a lot of the doctors really enjoy having students and this makes no end of difference to the experience of being a medical student!*
- *Obstetric and gynae placement- lots to do and see and get involved*
- *The teaching at SaTH is brilliant*
- *Doctors were very keen in our learning and stimulated personal interest in the subject. Possibly the best firm tutors I have experienced*
- *The responsibility i have been given and the shadowing the juniors has meant I feel I have learnt a lot about being an F1*
- *I have plenty of opportunity to work closely with the team, they are very accommodating and kind!*
- *At SaTH, the skills team and student/teaching support team are excellent and provide a lot of valuable support and resources. I have been very impressed by the level of support and enthusiasm they have for the students here. Very friendly and welcoming hospital with a great atmosphere for learning and working.*

Clinical Placement Facilitators Annual Report
for
Nursing, Midwifery and AHP Placements

To be read in conjunction with the Mentorship Strategy 2014

Jacqui Alexander
Donna Clark
Fiona Farrington

August 2014

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1.0 Introduction

- 1.1 A vital component of pre-registration education is the provision of practice placements, ensuring that students are fit for purpose and practice. This requires a collaborative approach between Health Education West Midlands (HEWM) , the placement provider (Trust) and Higher Education Institutions (HEI).
- 1.2 In line with the LDA, the practice placements which the Trust provides are largely for pre-registration healthcare students undertaking study at Staffordshire University. This includes nurses, midwives ODPs and paramedics. The Trust also offers placements to post-registration nurses undertaking a Return to Practice course at Staffordshire University. The Trust also provides placements for pre-registration Allied Health Professional students at Universities within the West Midlands.
- 1.3 The Trust frequently (but not regularly) facilitates placements for pre-registration and return to practice student nurses/midwives from other Higher Education Institutions throughout the country.
- 1.4 Additionally the CPF team facilitates work experience placements for students working in partnership with local Further Education Institutions.
- 1.5 The CPF team is responsible for co-ordinating, facilitating and partial delivery of a preceptorship programme for newly qualified nurses and operating department practitioner registrants.
- 1.6 The CPF team facilitates secondments of staff for professional and second registration on behalf of the Director of Nursing and Quality, Director of Nursing and Quality.

2.0 Placement Capacity

Placement capacity relates to a whole system approach, encompassing, development of the student, exposure to clinical skills, appropriate supervision, and the requirements of the NMC pre-registration clinical competencies (NMC 2010). Additionally mentor numbers, bed capacity, staff vacancies, student evaluations and CQC reports form an integral part of placement capacity. Staffordshire University have also developed an algorithm which assists in determining capacity.

- 2.1 Collaborative working with the Ward/Department Managers, Matrons, and Lead Nurse for Quality and Standards enables effective management of student capacity.
- 2.2 Although the CPF team work closely with the allocations team this has been problematic due to the introduction of a new electronic allocation system, which continues to give challenges to both the CPF team and placement areas.

The CPF team continually strives to not only maintain or return current placements but seek suitable new placement areas that can offer students a quality learning environment. This is reflected in the return of ward 7 PRH and Oncology as a student placement.

- 2.3 In accordance with the algorithm and in conjunction with other factors to maintain quality placements and appropriate supervision for students, capacity on a number of wards had been adjusted in 2013/4. Discussions with the ward managers of Children's areas indicates that minimal changes to capacity in 2014. The CPF team have quarterly meetings with Staffordshire University where capacity is a regular agenda item.
- 2.4 Student nurses/midwives studying at a University other than Staffordshire regularly approach the CPF team requesting an elective or return to practice placement within the Trust. All such students need to fulfil agreed criteria prior to confirmation of the placement which is then negotiated with the CPF team and placement area. Payment is only attached to students studying at a HEI within the NHS Education West Midlands. In 2013/14 the Trust offered such placements .
- 2.5 The CPF team also facilitate work experience placements on a regular and 'ad hoc' basis for those expressing an interest in a nursing career. This is predominantly with Thomas Telford School/Madeley Academy, Shrewsbury College of Arts and Technology, Shrewsbury VI Form College and Telford College of Art and Technology. However, several other institutions and individuals have also approached requesting work experience. No payment is attached to these students. In 2013/14 the Trust provided 54 one week work experience placements.

3.0 Quality of Placements

Quality of placements continues to be monitored in a number of ways:

Internal monitoring by CPF team

- 3.1.1 A mentor register (total number of available nurse/midwife mentors 648) capturing data relating to, 'in date' mentors, triennial review and the number of sign off mentors in clinical areas is maintained by the CPF team and is available on the intranet.
- 3.1.2 Letters are sent to individual mentors who are out of date or will be out of date within the next month. Additionally monthly email reminders are sent to Ward/Department Managers indicating their out of date mentors.
- 3.1.3 In 2013/4 the CPF team has provided nursing mentor updates across both sites, of which were pre-planned, the remaining were ad hoc to meet operational needs. Mentor updates for the independent sector placements have also been provided .
- 3.1.4 The vast majority of mentor updates for nurses have been provided by the CPF team during 2013/14 with two paediatric updates provided by Staffordshire University staff .
- 3.1.5 Mentor briefings form part of the annual mandatory update for midwives and are delivered by the midwifery lecturers. ODP and AHP mentor updates are also provided by the relevant University staff.
- 3.1.6 In partnership with Staffordshire University, the mentor briefing for nurses is reviewed annually ensuring it meets the requirements of the NMC Standards (2008).
- 3.1.7 The CPF team regularly visits clinical areas ensuring that the Trust is compliant with the NMC Standards (2008). Where placements are not compliant this is raised with the ward manager and/or mentor. The following checks are completed:-
 - Audit allocation of mentors against the mentor register ensuring allocation of an appropriate mentor i.e. qualified 'in date' and met triennial review and a sign off mentor where required.

- Students are working 40% minimum with their mentor
- Sign off students are achieving their one hour protected time with their mentor
- Student off duty is planned and documented in advance and accessible to staff and students.

3.1.8 The CPF team in conjunction with the Ward / Department Managers and Director of Nursing and Quality continually strive to ensure that the Trust has sufficient, appropriately prepared and 'in-date' mentors and sign off mentors to support/assess pre-registration students in practice. This includes ensuring that those with responsibility for allocating Learning Beyond Registration funding are aware of priority areas.

The Trust supports a number of staff to undertake the Mentorship in Healthcare module resulting in a number of new mentors, however, a proportion of these fail to commence/complete the course or cease employment with the Trust

3.2 Student Evaluations

This year has seen the introduction of an electronic student evaluation system (QUALTRIX) at Staffordshire University for all healthcare students. Although training has been provided by the University it has been minimal and difficulties remain in producing meaningful reports that can be shared with the relevant care groups within the Trust.

3.2.1 It has proved problematic to identify areas of improvements however where these are apparent, the CPF team and Ward/Department Manager jointly develop/review action plans. If trends are apparent, the CPF links with the Director of Nursing and Quality and Matron, utilising the algorithm to determine if a placement area remains a suitable learning environment, taking appropriate action accordingly

3.2.2 Evaluations forms completed by students continue to form a valuable part of placement evaluation; however, CPF placement visits, frequently capture and address any student and/or mentor issues or concerns during placements prior to evaluation.

3.3 NHS Midlands and East – Education Commissioning Quality

3.3.1 The Director of Nursing and Quality and CPF team annually report to the NHS Midlands and East using the agreed Education Commissioning Quality (ECQ) process. As part of this process the CPF team liaise with Allied Health Professional leads within the Trust ensuring the self-assessment is representative of all professions and education providers.

3.3.2 The Director of Nursing and Quality and CPF team monitor progress of the nursing annual review action plan (see appendix 1 for 2013/14 action plan)

3.4 Educational audit

3.4.1 The annual educational audit is undertaken in partnership with Staffordshire University. The focus of the 2014 audit continued to include the quality of patient care as well as the support provided to pre-registration student nurses, midwives, ODPs and paramedics from both clinical staff and the CPF team

3.4.2 The CPF team attends annual educational audit training in order to prepare and support Placement areas, plan the audit timetable, assist auditors as required during the audit week and respond to the audit report in terms of an action plan.

3.4.3 The audit report presents recommendations both to individual placement areas and also on a corporate basis. Action plans, both placement specific and Trust wide have been agreed.

- 3.4.1 Progress towards the Trust wide action plan is monitored by the Director of Nursing and Quality (see appendix 1 for Trust wide action plan) and individual action plans are monitored by the ward/department manager, CPF team and matron.

4 Support for Students

- 4.1 In collaboration with Staffordshire University, the CPF team continues to be involved in the induction and preparation of pre-registration student nurses for their practice placements and clinical assessments. It is also involved with the midwifery programme both in terms of the CPF role and in preparation for their general and gynaecology ward placement.
- 4.2 The CPF team remain accessible and visible within the clinical areas, establishing a point of contact for both the student and mentor, providing support and information as required and/or sign posting / liaison as appropriate.
- 4.3 Placement areas within the Trust have a local student induction pack accessible on the Trust intranet and within the placement area. Induction packs are reviewed annually, based on a standard template which encompasses requirements of the ECQ ensuring consistency of information.
- 4.4 In order that placements can clearly demonstrate students working 40% of the time with their mentor (NMC Standards 2008) a standard student off duty template has been adopted by many placement areas. Where areas have used a different format essential criteria is demonstrated (40% mentor contact time, where appropriate protected time for SOM students)

5 Support for Mentors and Mentorship

The CPF team is accessible to mentors for guidance and advice relating to the supervision, education and assessment of students in clinical practice, supporting mentors in numerous way.

- 5.1 The CPF team is a conduit for dissemination of current information relating to pre-registration nursing/ midwifery education, from Staffordshire University, Education West Midlands and the NMC to Matrons, Ward/Department Managers and mentors.
- 5.2 The educational link meetings continue as an additional support, education and information sharing mechanism. Outside speakers have been invited to provide additional education and training beyond the scope of the CPF team.

The CPF team supports mentors in ensuring consistency, validity and reliability of student assessment documentation. Guidance on the process of completion is given at both mentor updates and on an ad hoc basis as required. Additionally, the CPF team audits the completed clinical assessment documents, giving individual feedback to mentors

- 5.3 When mentors are assessing a student who is under achieving in clinical practice the CPF team support mentors in their decision making process. This can involve regular and repeated one to one meetings and re-enforcement of education from mentor updates.
- 5.4 The CPF team provides a wealth of information for mentors through the CPF Trust intranet site which is updated monthly
- 5.5 The CPF team ensures that adequate numbers of sign off mentors continue to be available with succession planning and subsequent training for new sign off mentors. In line with NMC guidance (2008) this is achieved by:-

- a supporting work book (devised and reviewed by the CPF team),
- two practice assessments by the CPF team

- A final assessment in practice from an existing sign off mentor during the practice assessment period.
- 5.6 The CPF team provides guidance and support to mentors and students in the development and annual review of induction packs as required. This includes a standard induction checklist and signature confirmation to meet health and safety standards.
 - 5.7 Mechanisms are in place to ensure that newly qualified mentors and those transferring from other organisations are supported in their mentor role and added to the mentor register in a timely fashion. This is achieved by the development of an advice sheet, mentor record and targeted visits for new mentors when they are added to the mentor register.
 - 5.8 Awareness of triennial review has been raised through mentor updates. A support pack and mentor record have been developed to assist mentors in the provision of appropriate evidence.
 - 5.9 To support mentorship in clinical practice the CPF team reviews the mentorship strategy every three years ensuring it reflects current NMC and Trust Standards.

1.0 Allied Health Professionals (AHP)

The CPF team provides support and guidance as requested by the AHP managers, however, at their request, student activity relating to Allied Health Professions is managed by the appropriate service managers/lead superintendents. The CPF team links with these key individuals to ensure that the ECQ (self-assessment) is representative of all education providers and professional groups.

- 6.1 In conjunction with the Practice Supervisors the CPF team continue to engage with the Operating Department Practitioner (ODP) Paramedic and Physiotherapy awards. There is regular liaison with Staffordshire/Keele University course management teams. CPF team and Practice Supervisors represent the Trust at meetings in relation to the ODP, physiotherapy and Paramedic programmes.
- 6.2 The CPF team links with the Practice Supervisors in practice areas where appropriate and as required by the Practice Supervisor.
- 6.3 The CPF team meets to discuss allocation and quality initiatives with Keele University regarding the Physiotherapy programme on a regular basis and have been involved in the recruitment and selection process
- 6.4 Student Physiotherapy evaluations are received from Keele University, electronically in a format which the CPF team forward to key individuals within the therapies department. If any areas require follow up/action the CPF team would offer support as required to the appropriate teams

7.0 Partnership working

Partnership working is essential, ensuring that students are fit for purpose on completion of their pre-registration programme.

- 7.1 The CPF team continue to provide a link between Staffordshire University and the Trust in relation to recruitment and selection of students for pre-registration nursing programmes and facilitate the involvement of Trust clinicians for this purpose.
- 7.2 The CPF team have represented the Trust on the Curriculum Development Group, ensuring Trust views are fed into this group by consulting key staff within the organisation throughout the process. CPFs will be instrumental in updating mentors about the changes within the 2013 Pre-Registration nursing Curriculum via Mentor updates link nurse meetings and one to one training.

7.3 The CPF team represent the Trust at Staffordshire University Fitness to Practice meeting and disseminate this information to the Director of Nursing and Quality.

7.4 The CPF team are also active members of recruitment and selection working group.

8. Preceptorship -

In 2013/4 new registrants have commenced the Preceptorship programme, of these completed the programme.

8.1 The CPF team has designed and facilitated/delivered an 'in house' preceptorship programme for newly qualified nurses and OPD registrants. The content of which was based upon networking, research, liaison with ward managers and evaluation of previous programme (accredited modules commissioned from local HEIs) The current programme consists of regular study days provided by CPFs and clinical experts delivering on a variety of key Trust initiatives relevant to the preceptorship period. Each study day has been evaluated to date these have been largely positive.

8.2 Preceptors have also been provided with support and education as part of the programme. This involves a preceptor guidance book and an invitation to accompany the preceptees on their first study day 'Introduction to Preceptorship, although this has been poorly attended

8.3 In order for preceptees to demonstrate their progress towards their KSF a competency based workbook has been developed by the CPF team.

8.4 The CPF team co-ordinates the initiation of the nursing preceptorship programme through liaison with ESR and the ward/department manager. CPF team provide newly qualified registrants with a Trust preceptorship workbook and commencement on the study programme in a timely fashion, there have been rare occasions when there has been a small time lapse in new registrants commencing their preceptorship programme

8.5 Liaison with the temporary staffing department has ensured that new registrants undertaking work within the nursing bank will receive a preceptorship workbook and are included on the study days, although some temporary staffing attendance at study days has been sporadic

8.6 In order to ensure that the Trust preceptorship programme aligns with other Trusts throughout the West Midlands and to share best practice the CPF team represent the trust at regional preceptorship meetings

9 Secondments

9.1 On behalf of the Director of Nursing and Quality the CPF team co-ordinates secondments of HCW into a course leading to a professional registration and registered practitioners into a course leading to a second registration.

10 Miscellaneous

10.1 The CPF team is also involved /support a number of other activities:-

- support the CPE team in the IV assessments
- OSCE assessment of students
- Pre-registration /return to practice interviews

11 Conclusion

- 11.1 The CPF team in collaboration with clinicians has continued to strive to both maintain and establish quality placement areas for healthcare students, utilising the established algorithm in the decision making process
- 11.2 The CPF team has continued to invest considerable proportion of time during 2014 to ensure placement areas continue to adhere to the NMC (2008) Standards to Support Learning and Assessment in Practice.
- 11.3 The CPF team has continued to work in partnership with Staffordshire and Keele University and professional governing bodies and the NHS Education West Midlands to quality monitor placement areas and address any identified deficits.
- 11.4 In order to ensure that the Trust has adequate number of mentors to sustain its current provision of placements, there needs to be continued commitment to funding the Mentorship in Healthcare Module.
- 11.5 It is recognised that both students and mentors continue to value contact with the CPF team. It is identified as a valuable opportunity to discuss issues relating to the quality of the placement, learning opportunities, supervision and support with completion of assessment documentation.
- 11.6 over the last 12 months the CPF team have made significant changes to the preceptorship provision for newly registered nurses/ODP, with the development and on-going evaluation of the SaTH Preceptorship Programme as well as an annual review of the Preceptorship Workbook. Evaluations have highlighted the value of the programme and areas where improvement can be made, taking this and the requirements for timely Trust induction the programme will alter in 2014/5
- 11.7 The CPF team continue to facilitate a demand for work experience placements within clinical areas as per Trust Policy.
- 11.8 the CPF team will further develop their skills and knowledge in relation to facilitating secondments and will be pivotal in the review of the Trust policy.

12.0 Key priorities for 2014-15

- 12.1 In order to ensure sufficient and appropriate clinical placements for healthcare students the CPF team will continue to monitor current placements, through existing internal and external quality mechanisms. On-going and future reconfiguration of services will be closely monitored to ensure that any impact on placement quality and capacity is taken into consideration.
- 12.2 The CPF team will continue to represent the Trust working in partnership with Staffordshire University both to sustain the NMC Standards to Support Learning and Assessment in Practice (NMC 2008). Progress and specific challenges will be fed back to the Deputy Director of Nursing and Quality and at the appropriate forums within the organisation.
- 12.3 The CPF team will support mentors through the changes to assessment and documentation resulting from the 2013 Nursing Degree Curriculum.
- 12.4 The CPF team will continue to facilitate and deliver the 'in house' Preceptorship Programme with on-going evaluation and this will be review annually in accordance with the Department of Health and Trust Policies.

- 12.5 The CPF team will liaise with ward/department managers, to ensure all placement areas within the Trust have an educational link nurse who meets their role as outlined within the Trust mentorship strategy.
- 12.6 The CPF team will prepare managers within the Trust for identification of suitable staff for secondment for training for professional registration and second registration.
- 12.7 At the request of the Therapy Service Managers, the CPF team in conjunction with the Therapy Service Managers, developing the Clinical Placement Facilitator intranet site to include relevant information.

AUDIT RECOMMENDATION (INCL REF NUMBER)	ACTION (INCL NAMES OF AREAS)	ACTION BY	TIMESCALE	OUTCOME
<ul style="list-style-type: none"> • Policies need review : Fire Safety 	Liaise with SaTH fire officer when appointed	CPF team	8.weeks	
<ul style="list-style-type: none"> • Complaints, Concerns and Compliments 	Liaise with Graeme Mitchell (person responsible)	CPF Team	8 weeks	
<ul style="list-style-type: none"> • Mentor register to be updated with changes to location of mentors and mentor status 	Educational Link Meeting (May 14) Mentor updates Starters and leavers Monthly	CPF Team	8 weeks	
<ul style="list-style-type: none"> • Audit visits to be rescheduled to Wards 9, 10, 15 and Hospital at Night as soon as possible 	Date set 21.5.14- areas to be contacted to arrange times. MS and KT auditing	CPF Team	By 21.5.14	
<ul style="list-style-type: none"> • Mechanisms for disseminating information from student electronic placement evaluations to be developed (University and Clinical Placement Facilitator Action) 	Meet to discuss with SU	CPF and SU jointly		
<ul style="list-style-type: none"> • Raise awareness of the Practice Support Team in the Trust 		CPF team		
<ul style="list-style-type: none"> • Individual action plans to be achieved (see appendix) 	Educational Link Meeting (May 14) Mentor updates	CPF team Ward/area managers Educational Link Nurses Mentors		

Appendix F

Bibliography

- A Promise to Learn – A Commitment to Act: Improving the Safety of Patients in England. National Advisory Group on the Safety of Patients in England. August 2013
- The Cavendish Review: An Independent Review into Healthcare Assistants and Support Workers in the NHS and Social Care Settings. July 2013
- Competent, Confident and Compassionate: West Midlands Workforce Skills and Development Strategy 2013-18
- People Strategy 2014-19. The Shrewsbury and Telford Hospital NHS Trust
- Report of the Mid-Staffordshire NHS Foundation Trust Public Enquiry, chaired by Robert Francis QC.