Northern Ireland Practice and Education Council for Nursing and Midwifery

*Work Plan*

*April 2012 - March 2015*

Version 10: *Live and subject to update*

(Review August 2013)
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1.0 Introduction

The Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC) is a Non-Departmental Public Body established in October 2002 with a remit outlined in primary legislation to support the practice, education and continuous professional development of all NMC registered nurses and midwives in Northern Ireland. NIPEC also provides advice and information on matters relating to nursing and midwifery.

As an Arm’s Length Body (ALB) NIPEC is strategically and appropriately placed to translate regional direction and policy into practice. Due to the core functions, the strategic positioning, and the breadth of its stakeholder base NIPEC is well placed to create high quality innovative solutions which aim to support employers as well as nursing and midwifery staff, enhance professional practice, and in turn deliver safe effective person centred care.

As a modern outward facing organisation, NIPEC is acutely aware of the multi-professional nature of contemporary service models and provision within which nurses and midwives work. Consequently NIPEC is committed to effective positive partnership working, and, establishing, forming and maintaining collaborations and strategic alliances with a wide range of stakeholders, partners, agencies and sectors in order to promote and support the practice, education and performance of nurses and midwives.

2.0 Background

The *Programme for Government 2012-2013 and 2013-2014*¹ and the associated public services agreements and targets, set the context within which our health and social care system operates. The system is also characterised by increasing levels of demand which are related to a number of factors including demographic change, health care needs of our population, and a continued focus on improved quality, productivity, transparency, openness and accountability.

It is generally recognised that demographic change and the health care needs of our population has resulted in an urgent need to:

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- Increase our focus on the prevention of ill health and to promote health and well-being
- Establish and embed personalisation as an underpinning principle within the health and social care system
- Make a concerted effort to encourage individuals to take responsibility for their health and well-being
- Improving the treatment and management of long term conditions
- Maximise the impact of therapeutic and technological advance
- Deliver, more care in, or as close as possible to, the patient’s own home.

When combined, these factors generate a significant change agenda not only for services but also for the nursing and midwifery professions; an agenda that is characterised by both scale and pace. The recent review of health and social care provision\(^2\) captured the compelling case for change, presented a visionary solution and offered a total of 99 recommendations. The most critical of which are listed below:

- Quality and outcome determining factors in shaping services
- Prevention and Enabling individual responsibility for health and well-being
- Care close to or in own home
- Personalisation of care – direct and financial control
- Greater choice of service provision
- New approach to pricing and regulation in nursing home sector
- Coherent Early Years support
- Major review of inpatient paediatrics
- Review of hospital network (reducing to 5-7)
- Engagement of clinicians
- Changing role for General Practice

• Recognition of role of workforce
• Confirming closure of long stay Mental Health and Learning Disability hospitals
• Population planning
• Shifting resources (£83 million from hospital to primary community and social care services)
• Modernising technological infrastructure.

The implementation of Transforming Your Care will not only herald significant change in the nature and shape of patient and client services but also the nursing and midwifery workforce working within those services.

Alongside Transforming Your Care, the DHSSPS recently released Quality 2020: A 10-Year Quality Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland. It captures the essence of quality through the dimensions of patient and client focus, effectiveness and safety and sets the strategic goals of:

• Transforming the culture
• Strengthening the workforce
• Raising the standards
• Measuring improvement
• Integrating the care

These strategic imperatives, along with a need to achieve the expectations of A Partnership for Care: Northern Ireland Strategy for Nursing and Midwifery 2010-2015 and the regulatory landscape, present a challenging agenda for the professions.

As a result there is a need to continue to focus on the development of the nursing and midwifery workforce so that practice, education and professional development can reflect need at individual, community and population levels.

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As a regional enabler, NIPEC is well placed to facilitate and support development of these professions, within the stretching change agenda.

NIPEC strives to achieve and maximise the impact of the outcome of its work for the nursing and midwifery workforce. In a concerted effort to achieve this end, NIPEC will ensure the effective use of resources, capitalise on the benefits of working collaboratively with its stakeholders, and continue with its intention to deliver high quality work products and outcomes informed by key strategic direction and policy within agreed time-scales.

The draft outline work plan comprises of work streams which have been described within the broad themes of:

- Modernisation and reform (Theme 1)
- Safe and effective care (Theme 2)
- Education and learning (Theme 3)
- Professionalism (Theme 4)

The outline work-plan attached, supports the achievement of the aforementioned aim. It is also salient to note that prediction with certainty of work-streams in years two and three in the dynamic environment of health and social care brings with it a degree of challenge. Therefore this work plan has been designed in years two and three to allow for flexibility, enabling NIPEC to respond to new and emerging work stream demands. Consequently, this document is liable to change and is described as ‘live’.

3.0 Resources

NIPEC will manage and co-ordinate the work plan, within its own resources. In addition in keeping with a spirit of effective collaborative working, a number of the work streams will capitalise on the inclusion and participation of relevant partners and stakeholders.
4.0 Risk Assessment

There are two main potential risks associated with this work plan:

a. Budgetary constraints

b. Level of engagement from partners and stakeholders

NIPEC will develop processes to minimise such potential risks.

5.0 Evaluation

NIPEC will be responsible for reviewing annually this work plan and will be responsible for the quality of that review report based upon an operating principle that any information submitted by partners and included within the report is quality assured by the latter organisation prior to submission to NIPEC.

6.0 Communication and Dissemination

The NIPEC website and regular news bulletins will reflect the progress of the work plan. A copy of the annual review report will be released and disseminated to the sponsoring department and other stakeholders as well as being accessible via the website www.nipec.hscni.net

7.0 Work Plan Overview

Year One - April 2012 to March 2013; Year Two - April 2013 to March 2014; and Year Three – April 2014 to March 2015

Theme 1: Modernisation and Reform

Several work streams are concerned with the translation of Modernising Nursing Careers: Setting the Direction\(^5\) and Midwifery 2020: Delivering Expectations\(^6\) Reports into the local context and are set out below.

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7.1 Leading Care Regional Ward Sister/Charge Nurse Project

NIPEC will continue with ongoing work to support this initiative by maintaining the NIPEC mini website which contains various products including: self assessment competency tool, core job description and core KSF post outline, career development pathway. NIPEC published and issued for use across HSC Trusts and Education Providers a regionally agreed learning and development framework for programmes/activities aimed to support the development of ward sisters/charge nurses and guidance to support NMC registrants aspiring to these roles.

NIPEC has continued to successfully support the hosting of an annual conference for ward sisters and charge nurses, and in 2013 this was extended to include team leaders for the first time, and will continue in this format in future years.

7.2 Leading Teams Regional Team Leader Project

This initiative commenced during autumn 2011. Working with our stakeholders NIPEC led on the development and production of a range of products designed to support community based nursing and midwifery team leaders during the year 2012-2013. This support included an annual conference for these team leaders, which was held jointly with ward sister/charge nurse colleagues. The annual conference will continue to be held jointly in coming years. NIPEC also supported HSC Trusts to promote the team leader resources and support their implementation.

7.3 Strengthening the Commitment - Modernising Learning Disability Nursing Report

This Four-Country Report was released in April 2012 in Scotland\textsuperscript{7}. At individual country level arrangements to enable implementation have been discussed. This process should go some way to ensuring that account is taken of country specific factors. During 2012 on behalf of DHSSPS, NIPEC put in place arrangements to draft a regional action plan to support implementation of the recommendations of

this Report. Following the recent appointment of the new Chief Nursing Officer, the initial draft action plan has been reviewed and it is understood that in the near future, this will be issued for consultation. NIPEC on behalf of the DHSSPS attends the Four-Country Strategic Steering Group meetings. NIPEC is also keen to support the modernisation of the learning disabilities nursing family in a way which is in keeping with the recommendations of this Report and has therefore tentatively included the potential for this work across the lifespan of this work plan.

7.4 Delivering Excellence Supporting Recovery: A Professional Framework for Mental Health Nursing in Northern Ireland

In October 2010, the Chief Nursing Officer launched Delivering Excellence Supporting Recovery: A Professional Framework for Mental Health Nursing in Northern Ireland 2011 – 2016. NIPEC, in partnership with the Public Health Agency (PHA), is reviewing progress and monitoring the implementation of Delivering Excellence: Supporting Recovery with a range of key stakeholder organisations including the HSC Trusts, education providers, professional and voluntary organisations.

7.5 Promoting Recovery Orientated Practice

During early 2013, in line with the recommendations of Delivering Excellence Supporting Recovery: A Professional Framework for Mental Health Nursing in Northern Ireland 2011 – 2016 and on behalf of the PHA, NIPEC completed a scoping of Recovery Orientated Practice training. Following submission of the scoping report NIPEC is actively supporting the dissemination of the findings within HSC Trusts.

It is anticipated that in partnership with the PHA, NIPEC will work with a range of multi-professional stakeholders to take forward other related work. It is therefore expected that this element will continue for the lifespan of this work plan.
7.6 Connecting Community Nursing – Maximising the Potential of ICT within Community Nursing (Anticipated work-stream and title to be confirmed)

During 2011, on behalf of the PHA, NIPEC undertook a scoping exercise in respect of the use of ICT in community nursing services (District, Treatment Room and Specialist Nursing). Discussion was initiated with the PHA to explore the potential need and parameters of any further associated work, however, for a variety of reasons this did not result in further work for NIPEC.

7.7 Transforming Your Care

It was anticipated that NIPEC would make a contribution, across the lifespan of this work plan, to address the nursing and midwifery workforce development and practice implications associated with the implementation of the recommendations of Transforming Your Care.

This contribution during 2012 – 2013 included NIPEC hosting, on behalf of the DHSSPS, three TYC Education Commissioning Workshops to consider the educational needs of the workforce in relation to TYC.

In addition NIPEC has been asked to join the Integrated Care Partnership Stakeholders Reference Group and therefore this contribution features in the latter years of NIPEC’s work plan. By way of background, one of the key proposals of TYC is the introduction of Integrated Care Partnerships (ICPs). The ICPs aim to enable local health and social care professionals and the voluntary and community sector to work more closely on a collaborative basis to improve the efficiency and effectiveness of services. The ICP Stakeholder Reference Group will have an important role in informing the development of these partnerships.

7.8 Nurse Prescribing

In Northern Ireland (NI), nurse prescribing was initially introduced in 1998 into five community pilot sites, and subsequently rolled out across the province during April 1999. At that time, Health and Social Care Trusts responded by adopting a structured approach to the implementation of nurse prescribing, by training all District Nurses (DN) and Health Visitors (HV) (1999) and subsequently included it
in core training for staff undertaking these specialist practice programmes. In 2006, *A Review of the Implementation of the Nurse Prescribing Role*\textsuperscript{10} was undertaken by the NIPEC, which identified seven recommendations that aimed to further facilitate the embedding of the Nurse Prescribing Role.

More recently the DHSSPS's Chief Nursing Officer requested that a regional review, to assess the impact of nurse prescribing on NI’s health care needs, be undertaken. Therefore in partnership with the PHA, NIPEC established a steering group in April 2013, to describe the current position and assess impact on patients/clients of nurse prescribing within the delivery of health care services in Northern Ireland. The engagement with patients and clients in this process is being sought through the Patient and Client Council's Membership Scheme and through the HSC Trusts PPI groups.

7.9 **Regional Bereavement Pathway for the Holistic care of women and their families who experience a miscarriage, stillbirth or neonatal death**

This multi-professional initiative, facilitated by NIPEC, is reviewing the DHSSPS's *Bereavement Care Plan*\textsuperscript{11} in line with current legislation, evidence and best practice. The aim is to produce a regional bereavement pathway/s for the holistic care of women and their families who experience a miscarriage, stillbirth or neonatal death up to 28 days.

Sensitive, thoughtful care cannot take away the pain of parents' loss, but it may provide some comfort in the months and years to come. Establishing care pathway/s should prevent care being uncoordinated which can have adverse effects at a time when parents and in particular women are vulnerable. Research confirms that good care can affect parents' long-term wellbeing and may prevent the need for costly intervention later\textsuperscript{12}. In addition, evidence shows

\textsuperscript{10} Northern Ireland Practice and Education Council (NIPEC 2006) *Review Of The Implementation Of The Nurse Prescribing Role* Belfast
\textsuperscript{11} Department of Health Social Services and Public Safety (2006). *Care plan for women who experience a miscarriage, stillbirth or neonatal death*; Belfast, DHSSPS
\textsuperscript{12} SANDS (2011) *The Sands Audit Tool for maternity services Caring for parents whose baby has died, Stillbirth and Neonatal Death Society*; London, 2011
that listening to parents about the care they receive around the time of their baby’s death is extremely important\textsuperscript{13}.

A multi-professional steering group was established in April 2013, facilitated by NIPEC, to take this work-stream forward with an additional aim to consider the development of a training package and an associated implementation strategy in the use of the care pathway/s.

7.10 Advanced Nursing Practice Framework

It is essential that NI accelerates the development of nurses to meet the challenging demands of health care, in particular with the \textit{Transforming Your Care} agenda. More Nurses will be needed with skills in complex case management, advanced specialist practice knowledge, and the confidence to work independently in community rather than acute hospital settings. To meet this nursing workforce need the CNO requested NIPEC to lead the development of an Advanced Practice Framework for Nursing across NI. It is anticipated the project will commence in year two with a possibility of rolling into year three of this work plan.

\textbf{Theme 2: Safe and effective practice}

Under the banner of safe and effective person-centred care NIPEC is pursuing a number of work programmes, which are set out below.

7.11 Health Visiting Initiative

Following the \textit{Review of Health Visiting and School Nursing in Northern Ireland}\textsuperscript{14} and the release of \textit{Healthy Futures 2010-2015}\textsuperscript{15}, NIPEC was commissioned by the PHA to progress work focused on promoting the best possible outcomes for children and families through the development of working arrangements in

\textsuperscript{12} \textbf{RCOG} (2006) \textit{The Management of Early Pregnancy Loss: Clinical Green Top Guideline No 25}  
Royal College of Obstetricians and Gynaecologists, London


Primary Care Teams. This work commenced in December 2011. A final report was accepted by the PHA in July 2012, and awaits public release.

### 7.12 Guidance for Specialist Nurses

In support of the PHA, NIPEC had, in late 2011, been involved with the development and production of *Clinical Nurse Specialist Roles: Interim Job Planning Guidance*. The outcome of the first stage of this work was released on 28th March 2012. The Guidance document is now in its final stages of completion and will comprise Clinical Nurse Specialist roles which span Hospital and Community settings and exist solely in each setting. NIPEC is facilitating midwifery leaders to explore how the guidance may be adapted for some midwifery roles.

### 7.13 Job Planning (Midwifery)

The term 'clinical specialist' is not utilised in midwifery, however there are a number of 'midwifery roles' within the workforce that have a unique contribution in supporting the care of women and their families during pregnancy. These roles are also an additional support to the midwifery workforce.

Following the successful development and release of the document *Clinical Nurse Specialist Roles: Interim Job Planning Guidance* NIPEC agreed to facilitate engagement with a range of Regional Midwifery Leaders including the Assistant Directors (Workforce Leads) for the five HSC Trusts.

There was a majority agreement that exploring the Job Planning Guidance use was a useful exercise however a general consensus was that in its current format it is probably not a 'best fit' within the midwifery workforce. However, the group were very willing and open to explore a possible 'job outline framework' for those roles identified which do not naturally 'fit in' with a job planning approach. NIPEC plans to facilitate further engagement with the Midwifery Leaders to progress this work-stream.

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7.14 **Evaluation of the Impact of the Role of Ward Sister/Charge Nurse Support Officer**

Commissioned by the PHA, this evaluation commenced in February 2012. The completed evaluation report was accepted by the PHA and is available to view on NIPEC’s website.


7.15 **Recording Care: Evidencing Safe and Effective Care**

In year one of this work programme NIPEC continued to support this project which included the implementation of improvement methodologies within the five HSC Trusts until February 2013 at which point an evaluation of this phase informed a need for further work including for example care planning, regional nurse abbreviations policy and implementation to other health care settings.

In year two, NIPEC is using the evidence gathered through the evaluative phase of year one\(^{17}\) to continue to support this project including the implementation of improvement methodologies within the five HSC Trusts across other care settings such as mental health, learning disability and paediatrics, and scoping of issues relating to for example care planning and the production of an electronic care record for nursing. In addition, as noted below (paragraph 7.16) a regional nursing and midwifery abbreviations policy is being progressed.

7.16 **Regional Abbreviation Policy**

Nurses and midwives are professionally and legally accountable for the standard of their practice which they deliver and contribute to, patients and clients. The quality of records maintained by nurses and midwives is a reflection of the standard of care provided by them to their patients/clients. The temptation to use jargon and abbreviations as a form of professional shorthand is compelling, especially for busy nurses and midwives\(^{18}\). The Nursing and Midwifery Council\(^{19}\) advises that patient/client records should not include abbreviations as these, and

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\(^{17}\) The Final Report for the first Phase of the Recording Care Project can be found at:xxx


\(^{19}\) Nursing and Midwifery Council (NMC 2009) Record-keeping. Guidance for Nurses and Midwives. NMC, London.
other short forms such as acronyms and initialisations, can be misinterpreted with significant risks to patient safety and the quality of care\textsuperscript{20}.

In December 2012, NIPEC was asked by the Chair of the Recording Care Project to regionally agree a way forward in the use of abbreviations by nurses and midwives in the first instance with an aim to develop regional policy. An Expert Reference Group was established and engagement with registrants was through a stakeholder workshop. The outcome has been an ‘Options Paper’ which is currently being consulted on which contains 'Principle Statements' on the use of abbreviations within nursing and midwifery practice.

The Options Paper will be presented to the Recording Care Steering Group in September 2013.

7.17 Respiratory Competency Assessment Tool

Linked to the \textit{Service Framework for Respiratory Health and Wellbeing}\textsuperscript{21}. NIPEC produced the Respiratory Competence Assessment Tool (R-CAT). Mindful that nursing and midwifery practice is continuously changing, work was completed to ‘refresh’ and update this competence assessment tool. It is hoped that the final version will be converted into an online version housed within NIPEC’s cadre of competence assessment tools. Therefore this work features in year one of this work plan.

7.18 Evidencing Care: Regional Key Performance Indicators

This work stream is on target to deliver a regionally agreed set of key performance indicators for nursing and midwifery. Clarification with CNO will be required to determine if additional phases of this work are required which might feature in year three of this work plan.

\textsuperscript{20} Dimond B (2005) \textit{Abbreviations: the need for egibility and accuracy in documentation}, British Journal of Nursing, 14 (12), pp. 665-666.

7.19 **Core Competency Framework for Safeguarding Children for Nurses and Midwives**

This competency framework\(^{22}\) was launched at NIPEC’s Annual Conference (10th October 2012).

7.20 **Review of Management of Aggression and Violence Training for Nurses and Midwives**

On behalf of the Education Strategy Group, NIPEC produced a review of the management of aggression and violence training for nurses and midwives. This report was submitted to Dr Jim Livingstone as it was anticipated that additional work would be required to develop this work further, particularly from a multi-disciplinary perspective. Whilst NIPEC would be keen to be involved in this additional development work it is not possible to be absolutely clear about including this stream in this work plan.

7.21 **Infection Prevention Control Lead Nurses Forum**

Building on earlier work in the field of Infection Prevention and Control it has been agreed that NIPEC will continue to support this new Regional Forum for Lead Nurses. As a result this stream is included in years one and two of this work plan.

In addition it is worth noting that the need to review arrangements for Infection Prevention Control Link nurses has been raised in the past. It is understood that the Central Nursing and Midwifery Advisory Committee (CNMAC) will provide further direction to NIPEC on this matter. At this time it is not possible therefore to provide a specific timeframe for this work stream.

7.22 **Independent and Voluntary Sector Forum**

In year two of this work plan NIPEC will bring together nominated representatives from the Independent and Voluntary Organisations in collaboration with RQIA, with the aim of enabling peer supervision, learning and development for members

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of the group. It is anticipated that senior nursing staff of relevant organisations would participate in this group. It is expected that this work will continue in year three of this work plan.

7.23 Delivering Care: A Northern Ireland Framework for Nursing and Midwifery Normative Staffing Ranges to Support Person Centred Care

This project is being progressed collaboratively with the PHA. The aim is to produce a framework of agreed nurse and midwife staffing ranges for a variety of care settings including hospital and community based services. Year one of this work plan incorporated the completion of ranges for acute adult in-patient medical and surgical units. Year two will incorporate the production of ranges for the community care setting, in particular, district nursing services. It is anticipated that this programme of work will continue across all years of this work plan.

7.24 Preceptorship

This programme of work was initiated in the latter months of 2011. The Preceptorship Framework (NIPEC, 2013) and supporting mini-website were launched in February 2013 for implementation across HSC statutory and independent sectors and with education providers. On the assumption that the application of the framework for preceptorship by employers will require monitoring, this work stream features across the full period of this work plan.

7.25 Promoting Good Nutrition

In line with the strategy Promoting Good Nutrition, NIPEC has recently completed the development of guidance and templates to support the effective implementation of screening to support effective nutritional in practice. The Project Report and Resources have been submitted to the Chief Nursing Officer with recommendations to support their effective implementation. NIPEC was also approached by the Chairs of the Promoting Good Nutrition Regional Group to

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carry out work relating to education and training. NIPEC is awaiting confirmation from the CNO that this work will be assigned to NIPEC.

7.26 Impact of the Regional Maternity Support Worker Programme

This work stream was completed during September 2012; the final report was subsequently submitted to the CNO and disseminated to the key stakeholders thereafter.

7.27 Quality 2020

Following the publication of *Quality 2020*, NIPEC has worked to play a positive and meaningful role in the process of implementation, particularly through the development of regional solutions to support the nursing and midwifery contribution. During 2013 NIPEC was tasked to project manage the development of an attributes framework to support leaders of quality and safety in clinical practice in HSC Trusts across Northern Ireland (NI). Dr Gavin Lavery Director of the Northern Ireland Safety Forum was asked to lead the Project and it is anticipated that this project with continue into year three of NIPEC’s work plan.

7.28 Midwives and Medicines

Midwives at the point of registration may supply and/or administer, on their own initiative, any of the substances specified under the ‘*midwives exemptions*’, provided it is in the course of their midwifery practice. It is imperative that midwives fully appreciate their professional responsibility in ensuring they keep themselves up to date with current medicine legislations, relevant to their sphere of practice.

NIPEC has been approached by the CNO to work in partnership with Local Supervising Authority Midwifery Officer (LSAMO), with the objective to explore and develop evidence based guidance, communication and education support arrangements. It is anticipated that these will be of benefit by providing clarity to the local midwifery workforce on medicines legislation.

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26 Nursing and Midwifery Council (NMC 2011) *Changes to Midwives Exemptions* (NMC Circular 07/11) London
During June 2013 a steering group was established to take this work-stream forward. The steering group comprises midwifery representation from practice, education and professional leadership and pharmacy colleagues.

7.29 Community Midwifery

During 2013 NIPEC was asked by the PHA to progress work in respect of community midwifery services. This work will support the implementation of the regional strategy *A Strategy for Maternity Care in Northern Ireland 2012 – 2018*²⁷. Having sought and secured the agreement of the CNO NIPEC has agreed to progress this work on the basis of a partnership arrangement with the PHA. It is expected that this work-stream will feature in the latter part of the second year and extend into the third year of NIPEC’s work plan.

**Theme 3: Education and Learning**

Several NIPEC work streams are directly related to education and learning. These are set out below:

7.30 All Ireland Practice and Quality Database

The promotion of this database continues and as a result this work features across all years of this work plan.

7.31 Quality Assurance of Non-NMC Approved DHSSPS Commissioned Education Programmes

This activity is commissioned by DHSSPS and is undertaken by NIPEC on an annual basis. As a result this work steam features in all years of the work plan.

7.32 Quality Assurance of In-House Training Activities

In line with NIPEC’s business plan for 2013/14 NIPEC initiated work with HSC Trusts nursing education leads to identify and develop a quality assurance...
process for their “in-house” teaching activities. It is anticipated that this work will extend into year three of this work plan.

7.33 Development of Competence Assessment Tool Resources in Resources Section of NIPEC Website

A competence section has been developed. It has been successfully tested with Infection Prevention Control Nurses. Further development will be required to facilitate ‘an invite assessor component’. At this stage it is anticipated that this stream will continue for ongoing maintenance and review in subsequent years of this work plan.

7.34 Online Portfolio Sessions for Nurses and Midwives and Registrants Working in the Independent Sector

This ongoing work aims to support registrants in developing and maintaining individual online portfolios. The work features across all years of this work plan.

7.35 Online Portfolio Sessions for Student Nurses and Midwives (QUB and Ulster)

This ongoing work aims to support registrants in developing and maintaining individual online portfolios. The work features in all years of this work plan.

7.36 Update for Senior Nurses and Midwives

This update is released on a monthly basis and aims to bring recent publications to the attention of Trust senior nurses and midwives. The work features across all years of this work plan.

7.37 Development Framework

The NIPEC Development Framework offers nurses and midwives a range of resources to support personal development. This site requires both maintenance and updating and as a result is included in all years of the work plan. Bearing in mind future needs in respect of revalidation for nurses and midwives NIPEC has commenced a project to seek feedback from registrants, managers, education
providers and students to refine the Development Framework to ensure that it is capable of facilitating revalidation.

7.38 Evaluation of the Infrastructure to Support Learning and Assessment in Practice

Building on previous work related to the implementation of Standards to Support Learning and Assessment in Practice\(^{28}\). NIPEC was commissioned to produce an evaluation framework to measure the impact of the associated infrastructure. NIPEC has continued to support HSC Trust colleagues in the implementation of the evaluation methods including data collection. This work continued into year two of NIPEC’s work plan and has cumulated in the completion of the final phase of the evaluation framework commonly referred to as the external evaluation phase. The report of this phase has been submitted to the CNO for dissemination. NIPEC also hosts and maintains a mini website as a repository for associated information.

7.39 Education Commissioning - Interim Arrangement

In response to a verbal request, NIPEC prepared a proposal to support DHSSPS colleagues in the business management aspects of Education Commissioning for nursing and midwifery. The proposal was accepted and resulted in a support arrangement being in place for the first year of this work plan. During year two of the work plan in order to support the HSC system NIPEC on a temporary basis has continued to provide administrative support and nursing advice to those education commissioning activities specifically related to TYC.

Theme 4: Professionalism

The professionalism of nurses and midwives has featured in general and nursing and midwifery press. NIPEC is pursuing a range of programmes which are related to this critical concept.

7.40 Nursing and Midwifery Career Website and Leaflets

NIPEC hosts this website which aims to provide information for those people who might be interested in a nursing or midwifery career. As might be expected there are maintenance and updating aspects to this work and as a result it features across all years of the work plan.

7.41 Gateway to Nursing

This project, commissioned by the Education Strategy Group, DHSSPS, aimed to review application and selection processes for pre-registration nursing programmes in NI and to develop a strategy for streamlining the process. The project outcomes have been achieved. A report was submitted to the Education Strategy Group with proposal for further work. Following recent discussions with colleagues from the wider UK countries, a collaborative four country approach is being maintained, linking in with colleagues from the other three countries to maintain a national approach where appropriate. Phase two of this work stream intends the development of a strategy which seeks to optimise efficiency of application and selection processes and enable the identification of individuals who display attributes which are valued to realise future potential in a career in nursing. Consequently this stream features across all years of the work plan.

7.42 Professionalism – Scoping

In February 2012 NIPEC led a workshop to scope out work to enhance professionalism within the nursing and midwifery professions in NI. A report of that workshop has been prepared and shared with invitees. It is anticipated that related work will feature across all years of this work plan.

7.43 Development of Health Care Support Worker Roles Supporting Nursing

Following the publication of the Mid-Staffordshire Public Inquiry Report (2013) the Department of Health England published standards of conduct and training for all care assistants. It also required that all employers in England ensure that Health and Care Support Workers are properly trained and inducted before they care for people. As a result of this and the work completed in Scotland and Wales, the
Deputy Director HR and the Chief Nursing Officer, DHSSPS, requested that NIPEC take forward a project, on behalf of the Regional Workforce Planning Group, to provide consistency around the role, remit, function and training of Health Care Support Workers supporting nursing. The project will commence in year two with a possibility of rolling into year three of this work plan.

7.44 Review of Partnership for Care: A NI Strategy for Nursing and Midwifery (DHSSPS 2010)

This review commenced in February 2012. The Review Report was submitted to the CNO in October 2012. The findings of the Review were considered at a CNMAC workshop to determine if there was a need for further work to support the implementation of the strategy which could extend into year three of the work plan.

8.0 Protocol to be included in NIPEC’s Work Plan

NIPEC works closely with its stakeholders in an effort to ensure that work streams, products and outcomes are closely aligned with strategic direction and professional standards and guidance. To facilitate the effective use of resources, both those of NIPEC and its stakeholders, and to facilitate openness and transparency the following protocol has been developed.

8.1 Work Stream Request Initiation Stage (Sources External to NIPEC)

Following initial discussion with the Chief Executive of NIPEC a formal request/commission is made to NIPEC. The requester/commissioner is normally the Chief Nursing Officer but on occasion the Central Nursing and Midwifery Advisory Committee (CNMAC) or one of its sub committees may approach NIPEC to progress a specific work stream.

A Project Initiation Document detailing the key elements of the work stream is then drafted by NIPEC and submitted to the commissioner.

A meeting is arranged between the commissioner and NIPEC (Chief Executive and normally a Senior Professional Officer) to discuss and agree a final draft
NIPEC Work Plan, time-frame and other relevant details of the proposed work stream.

8.2 Work Stream Stage

NIPEC initiates the work stream, providing updates (normally verbal) to the commissioner as required.

Progress of the work stream is also normally available via NIPEC News and through www.nipec.hscni.net

On completion of the work stream, a report and any associated project outcomes/products are submitted in final draft form to the commissioner.

8.3 Launch and Distribution Stage

Following any necessary amendments the final report and products are submitted to the commissioner and arrangements for launch and distribution are agreed. In addition the final report and products are published by NIPEC (in hard and electronic format) and any necessary copyrights are also dealt with through this process.

8.4 Work Stream Initiation by NIPEC

On occasion NIPEC will bring to the attention of the Chief Nursing Officer areas of nursing practice, education or professional development which it considers might warrant consideration for inclusion in its work plan. Following discussion a decision will be reached as to whether or not a NIPEC work stream will be initiated.

9.0 Other activities

In addition, over the period of this work plan NIPEC will continue to host and facilitate various events related to its core function and purpose, such as, consultation events, regional workshop events and supporting activities associated with the anticipated regional professional assurance framework for nursing and midwifery. It is not always possible to forecast such events but these ad hoc events are referenced at this time as a
means of highlighting and acknowledging the value and resources associated with these types of activities. NIPEC will lead and facilitate the implementation of NIPEC’s Impact Measurement Framework to measure the impact of the regionally agreed resources developed as a result of the “Leading Care” project.
### 10.0 Work Plan Overview (LIVE)

Year One - April 2012 to March 2013; Year Two - April 2013 to March 2014; and Year Three - April 2014 to March 2015

<table>
<thead>
<tr>
<th>THEME</th>
<th>WORK STREAM</th>
<th>Year 1 April 2012-March 2013</th>
<th>Year 2 April 2013-March 2014</th>
<th>Year 3 April 2014-March 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Modernisation &amp; Reform</td>
<td>Leading Care Regional Ward Sister/Charge Nurse Project</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Leading Care Regional Team Leader Project</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Modernising Learning Disability Nursing Report</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes but not confirmed</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Delivering Excellence Supporting Recovery: A Professional Framework for Mental Health Nursing in Northern Ireland</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Promoting Recovery Orientated Practice</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes but not confirmed</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Connecting Community Nursing – Maximising the Potential of ICT within Community Nursing</td>
<td>Not confirmed</td>
<td>Not applicable</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Transforming Your Care</td>
<td>Yes</td>
<td>Anticipated Yes</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Nurse Prescribing</td>
<td>Not applicable</td>
<td>Yes</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Regional Bereavement Pathway for the Holistic Care of women and their families who experience a miscarriage, stillbirth or neonatal death</td>
<td>Not applicable</td>
<td>Yes</td>
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<tr>
<td>Modernisation &amp; Reform</td>
<td>Advanced Nursing Practice Framework</td>
<td>Not applicable</td>
<td>Yes</td>
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<tr>
<td>Safe &amp; Effective Practice</td>
<td>Preceptorship</td>
<td>Yes</td>
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<tr>
<td>Safe &amp; Effective Practice</td>
<td>Impact of the Regional Maternity Support Worker Programme</td>
<td>Yes</td>
<td>Not applicable</td>
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<tr>
<td>Safe &amp; Effective Practice</td>
<td>Health Visiting Initiative</td>
<td>Yes</td>
<td>Not applicable</td>
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<tr>
<td>Safe &amp; Effective Practice</td>
<td>Recording Care: Evidencing Safe &amp; Effective Care</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>THEME</td>
<td>WORK-STREAM</td>
<td>Year 1 April 2012-March 2013</td>
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<tr>
<td>Safe &amp; Effective Practice</td>
<td>Refreshing of Respiratory Competency Assessment Tool</td>
<td>Yes</td>
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<tr>
<td>Safe &amp; Effective Practice</td>
<td>Evidencing Care: Regional Key Performance Indicators</td>
<td>Yes</td>
<td>Yes</td>
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<td>Safe &amp; Effective Practice</td>
<td>Core Competency Framework for Safeguarding Children for Nurses and Midwives</td>
<td>Yes</td>
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<td>Safe &amp; Effective Practice</td>
<td>Review of Management of Aggression and Violence Training for Nurses and Midwives</td>
<td>Not confirmed</td>
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<td>Safe &amp; Effective Practice</td>
<td>Infection Prevention Control Lead Nurses Forum</td>
<td>Yes</td>
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<td>Safe &amp; Effective Practice</td>
<td>independent and Voluntary Sector Forum</td>
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<td>Safe &amp; Effective Practice</td>
<td>Promoting Good Nutrition including Education and Training work-stream</td>
<td>Yes</td>
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<td>Safe &amp; Effective Practice</td>
<td>Delivering Care: A Framework for Normative Staffing Ranges</td>
<td>Yes</td>
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<td>Safe &amp; Effective Practice</td>
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<td>Safe &amp; Effective Practice</td>
<td>Guidance for Specialist Nurses</td>
<td>Yes</td>
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<td>Safe &amp; Effective Practice</td>
<td>Job Planning (Midwifery)</td>
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<td>Safe &amp; Effective Practice</td>
<td>Evaluation of the Impact of the Role of Ward Sister/Charge Nurse Support Officer</td>
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<td>Safe &amp; Effective Practice</td>
<td>Regional Abbreviation Policy</td>
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<td>Safe &amp; Effective Practice</td>
<td>Midwives and Medicines</td>
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<td>Safe &amp; Effective Practice</td>
<td>Community Midwifery</td>
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<td>THEME</td>
<td>WORK-STREAM</td>
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<td>Education &amp; Learning</td>
<td>All Ireland Practice and Quality Database</td>
<td>Yes</td>
<td>Yes</td>
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<td>Education &amp; Learning</td>
<td>Quality Assurance of non NMC Approved DHSSPS Commissioned Education Programmes</td>
<td>Yes</td>
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<td>Education &amp; Learning</td>
<td>Development of Competence Assessment Tool Resources in Resources Section of NIPEC Website</td>
<td>Yes</td>
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<td>Education &amp; Learning</td>
<td>Online Portfolio Sessions for Nurses and Midwives and Registrants Working in the Independent Sector</td>
<td>Yes</td>
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<td>Education &amp; Learning</td>
<td>Online Portfolio Sessions for Student Nurses and Midwives</td>
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<td>Education &amp; Learning</td>
<td>Update for Senior Nurses and Midwives</td>
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<td>Development Framework</td>
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<td>Evaluation of the Infrastructure to Support Learning and Assessment in Practice</td>
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<td>Education &amp; Learning</td>
<td>ECG – Interim Arrangement</td>
<td>Yes</td>
<td>Yes (Part Year)</td>
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<td>Education &amp; Learning</td>
<td>Quality Assurance of In-House Training Activities</td>
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<td>Yes</td>
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<td>Professionalism</td>
<td>Nursing and Midwifery Career Website and leaflets</td>
<td>Yes</td>
<td>Yes</td>
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<td>Professionalism</td>
<td>Gateway to Nursing</td>
<td>Yes</td>
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<td>Professionalism</td>
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<td>Professionalism</td>
<td>Review of Partnership for Care: A NI Strategy for Nursing and Midwifery</td>
<td>Yes</td>
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<td>Professionalism</td>
<td>Development of Health Care Support Worker Roles (Supporting Nursing)</td>
<td>Not applicable</td>
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</table>