



# **Nursing and Midwifery Practice Education Facilitator Collated Annual Report 2011/12**



# Contents

Introduction	3
Service Level Agreement and Governance	3
Practice Education Facilitator Workforce Profile	4
• PEF Banding	
• PEF Career Pathways	
Working in partnership to support the national PEF network	5
Promoting and developing the PEF role	6
The benefits of the national PEF network	7
PEF Priorities and Activity Evidence	8
Summary	11
References	11

## **Introduction**

As part of our commitment to capturing the “added value and benefits of practice education roles” stated in our Quality Education for a Healthier Scotland NHS Education for Scotland (NES) nursing and midwifery strategy: 2011 - 2014 (NES 2011) we are delighted to introduce the 2011/12 national Practice Education Facilitator(PEF) collated annual report.

This document reports on PEF activities and highlights some of the benefits reported during 2011/2012 in relation to the core PEF role and 2011/12 National PEF priorities. This report should therefore be read in conjunction with the PEF Review publication (due for publication in Winter 2012) and also the Mentor Bulletin 2011/12 available at:

([http://www.nes.scot.nhs.uk/media/818078/mentor\\_bulletin\\_2012\\_print.pdf](http://www.nes.scot.nhs.uk/media/818078/mentor_bulletin_2012_print.pdf)).

## **Service Level Agreement (SLA) and Governance**

During 2011/12, SLAs were issued in line with the NES 2011/2012 Corporate Plan (NES 2011) and the strategic theme of ‘strengthening education where nurses and midwives practice’ was progressed as part of this. Executive Nurse Directors across NHS Scotland have approved and signed off their individual NHS Board SLAs to provide continued support of the national Practice Education infrastructure.

As part of national governance processes, the PEF workforce profile is collated through well established templates namely, the annual report and six month interim report and tracking sheets. In addition, regular collaboration and engagement with NHS Boards enable early identification of emerging issues that may impact on the core PEF role and facilitate early and flexible agreement of solutions.

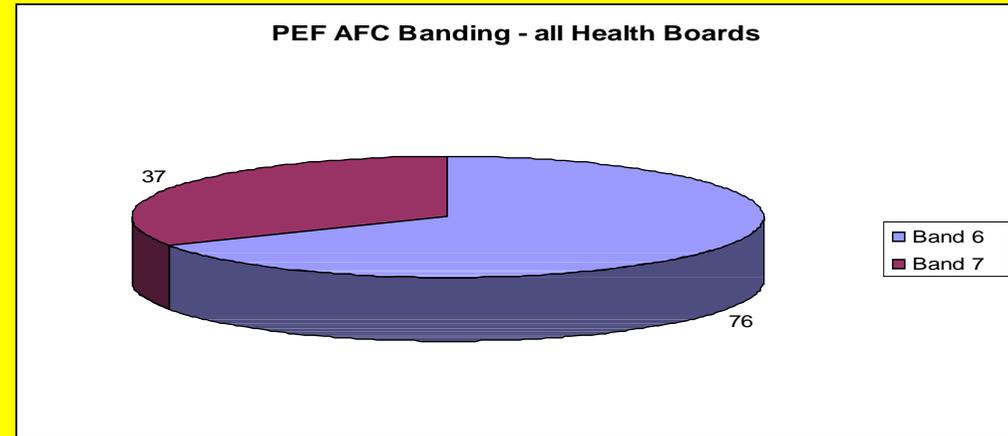
## Workforce Profile

### *PEF Banding*

During 2011/2012 there were 113 PEFs in post.

Figure 1 shows the overall configuration of PEF posts Agenda for Change (AfC) banding as of 31<sup>st</sup> March 2012.

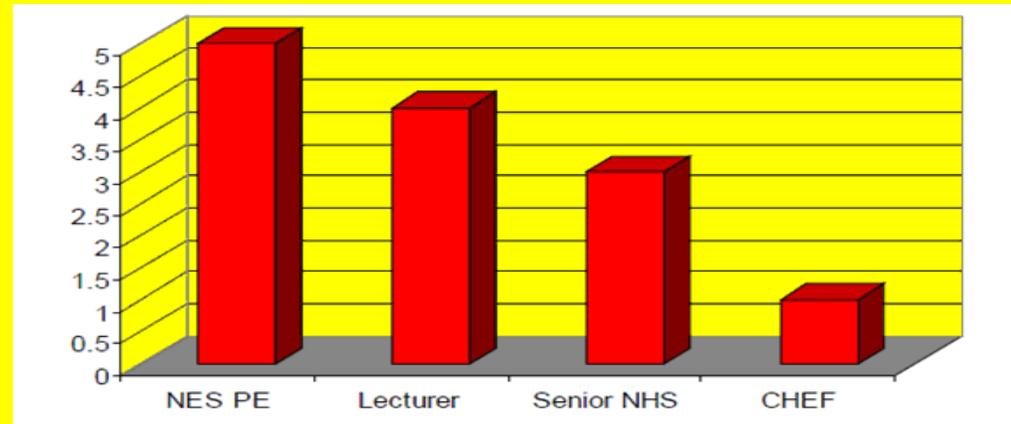
Figure 1: PEF banding March 2012



### *PEF Career Pathways*

During 2011/12, PEF movement was highlighted through secondment opportunities and taking up new posts in the following areas as shown in Figure 2.

Figure 2: PEF Careers



**Working in partnership to support the national Practice Education Infrastructure**

**The following diagram show how the national Practice Education infrastructure integrates to promote collaboration and development from all involved within practice education.**



## Promoting and Developing the PEF Role

### *Educational Opportunities*

- Completion of Supervisor of Midwives programme and appointment as Supervisor of Midwives
- Completion of MSc Advanced Practice (Practice Education)
- Completion of Diploma in Advanced Practice (Practice Education)
- Completion of Post Graduate Certificate – Frontline management and leadership
- Completion of Post Graduate Certificate in Education
- Completion of MA in Education
- MSc completed in Professional Education
- Masters in Advancing Healthcare Practice
- Professional Recognition as a Fellow Status at the Higher Education Academy

### *Wider Support and Conferences*

- Presentation on PEF Role at the RCN Joint Education Forum 3rd International Conference on 'Enabling factors leading nurse mentors to the decision to fail their student'
- Poster presentation on 'Mapping Practice Education in Grampian' at the RCN Joint Education Forum 3rd International Conference
- Supporting the implementation of the new pre-registration programmes

### *Publications*

- 'The benefits of ward simulation exercise as a learning experience' British Journal of Nursing. 21 (2) p116-122
- NES Mentor Bulletin 2011/12 contributions
-

## **The benefits of the national PEF network.**

During 2011/2012 PEFs across NHSScotland have:

- Supported 627 student mentors through mentorship preparation.
- Supported 11 new practice teachers through their preparation programme.
- Delivered annual updates to 15899 mentors.
- Ensure that 8263 mentors were able to provide evidence for their continued competence in the NMC mentor role and complete their triennial review.

These actions ensured that mentors are fit to practice in their role when supervising and assessing learners in practice areas, and are also equipped to negotiate the complex decision-making processes they need to go through to ensure learners are fit for practice.

In addition to this significant work commitment PEFs are integral to:

- Supporting practice education across the career framework
- Developing Senior Charge Nurses' skills in the delivery of triennial review.
- Contributing to the successful completion of Flying Start NHS® in NHS Boards through working with the 1635 registered Flying Start NHS® mentors who provide support to the current 1588 newly qualified nurses (including interns) and the 110 newly qualified midwives undertaking the development programme in their very important year of transition from student to confident and capable nurse or midwife.
- Promoting and encouraging engagement with the Pre-registration survey for mentors and Charge Nurses

## PEF Priorities and Activity Evidence

The delivery of the core functions of the PEF role have been demonstrated through the development of national priorities which are agreed each year between NES, NHS Boards and HEIs. Through these national priorities, PEFs are encouraged to demonstrate the impact and benefit of their role.

Every Board delivers on a number of activities for each core function and we have selected some examples to demonstrate the breadth and range of activities that have taken place in 2011/12.

### National Objective 1 – Nursing and Midwifery Practice Learning Support the common Goals of the Healthcare Quality Strategy for NHS Scotland (SGHD 2010) and the joint declaration on NMAHP Leadership from the CNO.

Supporting the One Year Job Guarantee in relation to internship and utilising intern / staff feedback to inform the future of the initiative in practice. Positive outcome with interns being employed into substantive community posts.  
**Core Functions 4 and 6**

Development and delivery of Care and Quality reflection programme with Band 5 mentors to support person centred care for staff, students and patients.  
**Core Functions 1 and 6**

Supporting the patient experience indicator survey in acute care settings involving year three undergraduates. This is being formally evaluated by the partner university and provides local quality data on patient experience and informs quality improvement strategies and increases student learning in service user involvement.  
**Core Function 6**

Interprofessional learning sessions have explored using patient case studies where different professionals' perspectives and experiences are shared to enhance learning.  
**Core Functions 2 and 5**

Facilitate clinical supervision education for nurses and midwives including newly qualified staff. This is felt to support and develop staff and ensures that the practice based education sessions allow the functions of the multidisciplinary team and person centred care to be explored.  
**Core Functions 1 and 5**

Introduction of placements within general practice on Remote Island NHS Board and increasing the use of specialist nurses in specialist nurse rotation placements.  
**Core Functions 4 and 5**

## National Objective 2 – Nursing and Midwifery Regulation

**In partnership with NHS Boards, education providers, regulatory and professional bodies, support the preparation of the nursing and midwifery mentor workforce for regulatory changes that will affect all nursing and midwifery learners.**

Development of electronic module as an option to support mentor education. Working in partnership with university in the development of a programme for new sign off mentors.

**Core Functions 3 and 5**

Developing mentor updates and clinical supervision sessions using “Brain Friendly Training” techniques ensuring staff develop inclusive learning strategies through experiential learning.

**Core Functions 1 and 5**

In partnership with HEI, developed welcome pack and orientation for students to ensure continuity and equity of student information across Mental Health and community placements in NHS Board.

**Core Functions 2 and 4**

Support the new HNC/D Care and Administrative Care programme with regards to preparing mentors and the practice learning environment and supporting students when on placement. PEFs are seen to contribute to the wider agenda of practice education and workforce development and planning, thus equipping the nursing and midwifery workforce to meet education and regulatory priorities for learners.

**Core Functions 1, 3, and 4**

Involvement in resolving ‘cause for concerns’ in relation to pre-registration programmes has resulted in concerns being highlighted earlier and being dealt with appropriately.

**Core Function 1**

Developing mentor updates that include QSPP and associated audit tool to encourage mentors to use the standards (individually and/or in groups) to evaluate their own learning environment and their own practice as a mentor. This also serves to remind mentors of the standards required and they then in turn disseminate this amongst other non-mentoring colleagues who also have a duty to support learning.

**Core Functions 1 and 2**

Contributing towards provision of reasonable adjustments for learners with a disability through the use of NES Dyslexia resources.

**Core Functions 4, 5 and 6**

## National Objective 3 – Nursing and Midwifery Workforce

**Evidence the added value of the PEF function through gathering data of impact and benefit of PEF activity in relation to educational initiatives that support stakeholder objectives.**

Working with AHP practice education colleagues on remote island boards to develop a short guide to support staff to use e- KSF to evidence their professional development.  
**Core Functions 6 and 7**

Partnership working with Workforce Redesign project team for the NHS Board city centre community health partnership to increase pre and post registration students placements and mentor capacity. This work is replicated across the NHS Board as further service redesign is implemented  
**Core Functions 4 and 6**

PEFs contribute to the development of essential skill training for Health Care Support Workers and trainee social care workers as part of a collaborative initiative with local authority colleagues to support the integration of health and social care.  
**Core Functions 3, 6 and 7**

PEFs support the delivery of the intern education programme with the outcome of increased confidence, knowledge and skills of newly qualified practitioners and work with their Practice Educator colleague to signpost other educational resources that are available to support their practice.  
**Core Functions 6 and 7**

Continued support and embedding of educational initiatives to support practice learning. This has been undertaken with Senior Charge Nurses who have been supported to work on the workforce planning toolkit.  
This includes an academic portfolio submission to help develop and prepare them for their changing role.  
**Core Functions 2, 4 and 6**

Partnership working across a Special Health Board, its neighbouring NHS Board and two partner universities to produce a single educational audit tool incorporating NES Quality Standards for Practice Placements audit tool. This will ensure evidence of the learning environment and a single audit system that is recognised and shared across both universities.  
**Core Functions 2 and 3**

## Summary

2011- 12 has been a busy year for Practice Education across NHS Scotland and PEFs continue to deliver both the core functions and the national priorities for the role in responsive and flexible ways..

From the excellent examples that have been included in this year's national annual report it is clear to see the innovative work that PEFs do every day to support learners and those that support them in practice.

As 2012 – 13 continues the Practice Education team at NHS Education for Scotland will continue to support their development and work in partnership with our NHS and University Practice Education colleagues to set national priorities that define their work, ensuring it is aligned with safe, effective, person-centred and professional care.

## References

NHS Education for Scotland (2011) *Quality Education for a Healthier Scotland. NES nursing and midwifery strategy: 2011 –2014*. Edinburgh: NES. Access at: [http://www.nes.scot.nhs.uk/media/76966/strategy\\_2011\\_2014.pdf](http://www.nes.scot.nhs.uk/media/76966/strategy_2011_2014.pdf)

NHS Education for Scotland (2011) *Corporate Plan 2011 – 2012*. Edinburgh: NES. Access at [http://www.nes.scot.nhs.uk/media/880008/corporate\\_plan\\_2012-13\\_webres.pdf](http://www.nes.scot.nhs.uk/media/880008/corporate_plan_2012-13_webres.pdf) (September 2012)