

Continuing the Conversation
Practice Learning *IN and FOR THE FUTURE*
Event Report from 9th June 2017
COSLA Conference Centre, Edinburgh



NHS Education for Scotland (NES) hosted a national event to explore practice learning experiences and support roles needed for the future nursing workforce. This report provides a brief background to the event; an outline of the programme; the key points from the three group discussion sessions facilitated throughout the day and the actions identified to inform the development of a forthcoming national delivery plan to shape the future of Practice Education and Learning within Scotland.

1. Brief background

The event brought together 30 invited delegates from across Scotland to:

- enable an exchange of ideas between a diverse range of stakeholders (from the perspectives of the student, mentor, clinical leaders, educational supporters, organisations, and regulators)
- discuss the implications of the NMC programme of change for education¹ within the Scottish context of the Chief Nursing Officer 2030 vision for nursing and health and social care integration.

2. Outline of the programme for the day

The programme for the day is available in Appendix 1. The “conversation” began with a brief introduction from Dr. Lesley Whyte and an activity that encouraged delegates² to identify words associated with the letters which make up PRACTICE LEARNING. The wordle on the first page of this document was created from the responses.



The 30 delegates were divided into four table top groups for the day which supported three group facilitated discussions dispersed throughout the day.

¹ Details of the NMC programme of change for education can be accessed at <https://www.nmc.org.uk/education/programme-of-change-for-education/> (last accessed 31/01/2018)

² For other photographs and Twitter posts from the event access [#PLScot2017](#)

3. Key points from the discussions

This section provides access to the presentations given on the day and outlines the key points that emerged from the group facilitated discussions.

3. 1 Group facilitated discussion 1

The first discussion followed on from Dr Colette Ferguson's session titled '*Practice Learning, Our Journey So Far – What have we learned along the way?*' The presentation slides can be accessed and read via the icon below.



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Key messages from presentation

The national infrastructure of support for learning *in* and *for* practice was established to enhance relationships and partnership working across education and practice, and to contribute to the development of the practice setting as a quality learning environment for all. A key focus of the role of practice education facilitators (PEFs) and subsequently care home education facilitators (CHEFs) was on mentors; primarily enhancing mentors' capability, confidence and capacity to support, supervise and undertake complex assessment decisions and provide feedback to students.

Key enabling factors in the establishment of the national network included: gaining strategic commitment from all stakeholders; developing national core role descriptors, common objectives, induction and a development programme with a toolkit of key resources to provide consistency across Scotland e.g. Quality Standards for Practice Placement. A core purpose of these roles was to support Boards and care homes in ensuring robust systems were in place to monitor NMC Standards for supporting learning and assessment in practice.

Learning from the journey so far can inform our future model,

- The importance of preparing individuals and organisations for support roles which have a regulatory responsibility and work across organisations and sectors
- The recognition that roles that are not static and must reflect the nature/context of health and care services.
- The importance of listening and responding to the student, practitioner, patient and public voice and utilising an evidence informed approach.

The question posed after this presentation was –

“What do you see as the strengths of the current practice learning model in Scotland that we need to build on?”

Delegates were asked to capture their responses in one sentence. The picture inserted below illustrates some of the feedback received. All the responses received from delegates from group facilitated discussion 1 are collated in Table 1 (See Appendix 2).



Review of the feedback revealed that the strengths identified could be collated under three main headings, namely:

- the national approach taken within Scotland - facilitating the co-creation of standardised resources, including mentor preparation, Scottish Ongoing Achievement Record (SOAR), and the single student practice learning experience feedback tool, as part of the Quality Management of the Practice Learning Environment (QMPLE) system
- the partnership working that had taken place across Scotland which supported robust quality assurance of the learning environment
- the building and development of a practice learning infra-structure and national network to ensure consistency in Scotland and facilitate cross-organisation working and sharing.

3. 2 Group facilitated discussion 2

The second facilitated discussion session followed Hugh Masters’ presentation titled *‘Planning the next phase of the journey for Practice Learning in Scotland – the policy context.’*³

Key messages from presentation

- Recognise that the quality learning environment is there for all and that every practice learning experience is precious. The workforce should feel supported in a context where increasingly there will be a greater focus on cross-setting and interprofessional working and learning

³ Hugh McMaster’s presentation was not available for insertion in this report.

- Future learning and assessment will increasingly take place outwith secondary care – this will influence the preparation and support of nurses for future roles. We need to acknowledge how technology will change practice learning and embrace innovative approaches to virtual learning
- Take account of changing demography of the workforce and the number of years that future nurses will be in employment, and consider different working opportunities for nurses nearing the end of their career
- Make best use of the resource of our practice learning environments and assure best quality for all learners and the wider workforce. It is critical to have up to date information on learning environment capacity, quality and student experience which will contribute to the bigger picture of care quality (Excellence in Care Programme).

The following question was posed; ***“All members of the nursing profession will need to be able to support, develop, educate and/or practice within new and emerging health and care contexts. How, where and what practice learning should be experienced by future students within Scotland?”*** Feedback was gathered using a modified 'world cafe' technique, the results of which are presented in Table 2.

Table 2 – Collated responses from facilitated discussion 2	
HOW	WHERE and WHAT
Multi-disciplinary mentoring – especially with integration	Placements in different settings – community, voluntary, Primary Care – GP practices
Promote inter-disciplinary working	Further develop primary care practice learning
Make full use of technology to enable practice learning e.g. Electronic Ongoing Achievement Record	Local forum groups
eLearning support and all that goes with it	With “Mentors” in voluntary sector who do not meet current NMC learning and assessment practice standards

Some of the feedback from delegates did not directly answer the question posed but rather raised issues that require to be deliberated when considering how, where and what practice learning should be experienced by future students within Scotland. Delegates underlined the necessity to value those who support students in practice with comments such as the following:

'Consider reward for sign-off mentor'

'Develop mentor support – value time to champion the role'

'Time for mentoring (protected time)'

'Ensure equity between professions and resources to support'

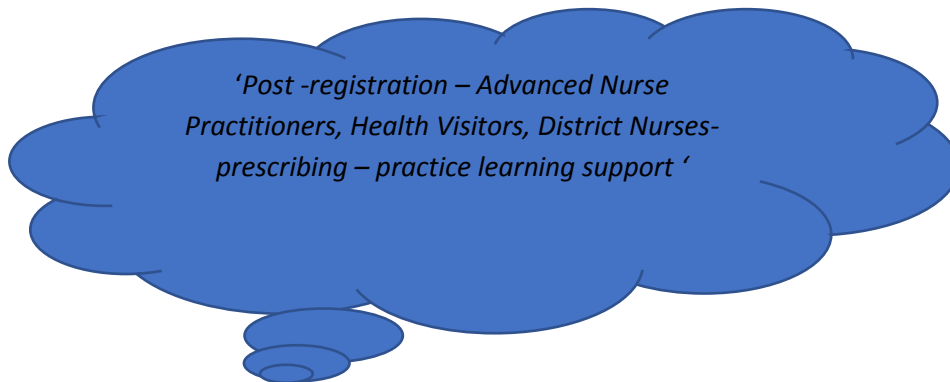
Delegates also highlighted the need for a *'National model mapping/ Capacity calculator to identify placement capacity'* and for careful consideration to be given to *'Placement allocation flow'* which took account of *'mentor's working patterns (part time, flexible)'*. Also raised was the need to *'Consider recruitment and selection of mentors, identifying who have the time, desire and ability.'*

Delegates considered that the Canadian supervision model introduced in Hugh Masters' presentation was worthy of consideration, commenting:

'Explore other models e.g. Canadian model where staff nearer to retirement have 25% of their time allocated to coaching'

'Tap into mentors due to retire – consider part time mentor/supervisor role'

The need for ‘*Succession planning and retaining expertise*’ in mentorship and practice education alongside ‘*nurturing education stars*’ was highlighted and commended by delegates. A request emphasised by participants was not to forget post registration practice learning needs, particularly in wake of the Transforming Roles Programme of work.



Following group facilitated group discussion 2, Anne Trotter presented a session titled ‘*What’s Coming over the Horizon? - Standards of proficiency for the future registered nurse and draft model of learning and assessment.*’ The presentation slides can be accessed and read via the icon below.



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Following this presentation, a collective group discussion took place which enabled delegates to explore the implications of the NMC draft education framework and the draft requirements for learning and assessment for practice learning. One overwhelming response from delegates was to ‘*Ensure ALL staff across Scotland become involved in the NMC consultation.*’

3.3 Group facilitated discussion 3

The third and final facilitated group discussion of the day followed on from a presentation given by Belinda Emmens titled ‘*Planning the next phase of our journey*’ which was drawn from the findings of a rapid review of the literature on *practice education support roles for pre-registration nursing students and their mentors*, which was undertaken by NES Knowledge Services in preparation for the event, along with other pertinent literature. The presentation slides and the summary digest of the rapid literature review can be accessed and read via the icons below.



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KN Summary Digest
May 2017.docx

Key messages from the review of literature and presentation

Three main models of clinical education were identified from the review. The traditional model is described as an education sector funded clinical facilitator who acts as a primary instructor for a group of students across several wards/units, with students 'buddied' with registered nurses each day. The mentorship or preceptorship model focuses on a 1-1 relationship between the student and health sector registered nurses (possibly supported by a clinical educator from HEI). Finally, there is the collaborative model which is a combined education-industry/service collaboration, with the majority of student placements occurring in one healthcare organisation and all staff engaging in teaching and support (Forber et al 2016⁴).

The following factors, regardless of any specific model or practice, were recognised as important for developing and sustaining practice learning, namely:

- Centrality of relationships to promote student engagement, generate sufficient challenge, and support constructive and meaningful feedback. Longer placement times were enablers to developing insightful student assessment
- Consistency and continuity in delivery must be well defined, including key roles and pathways for communication and welcoming, engaging, teaching and assessing students
- Opportunity for varied models to increase diversification of learning settings and different opportunities for student learning
- Validity of the model to include staffing levels and workload capacity, willingness to embrace a new model and adequate preparation and support to engage and sustain the model.

Belinda's presentation also drew on Passmore and Chenery- Morris's⁵ (2014) review of tripartite assessment in pre-registration midwifery education. Using a tripartite approach to student assessment was seen to add value from an education, quality assurance and social perspective. The benefits included: learning from one another, developing professional relationships, increasing assessor reliability and accountability of the mentor, enhancing opportunities for discussions of student/mentor issues, and increasing awareness of the reality of practice.

Whilst the presentation and review were focused on pre-registration students, equally the learning could apply to all learners.

In a final facilitated group discussion delegates were asked to consider "**What actions do we need to take forward from today?**" All the actions suggested by delegates were collated and themed under six key headings and are presented in section 4.

⁴ Forber J et al (2016) In pursuit of an optimal model of undergraduate nurse clinical education: An integrative review. *Nurse Education in Practice*. 21, 83-92.

⁵ Passmore H, Chenery- Morris S. (2014) Exploring the value of the tripartite assessment of students in pre-registration midwifery education: a review of the evidence. *Nurse Education in Practice*. 14, 1, 92-97.

4. Suggested actions

4.1 Scotland-wide response to NMC Consultation

- Responding at individual, local and organisation level
- Establish national and local mechanisms for feedback.

4.2 Build on national approaches

- Develop national practice model for 2020 and beyond for supervisor and assessor roles (undergraduate and post graduate), taking account of workload/workforce tools and costings, and broad principles that are applied to local context
- National programme of preparation developed for supervisor and assessor with flexible delivery options
- Infrastructure in place to provide strategic leadership for this work and refine terms of reference i.e. core groups with connections to strategic groups of Scottish Executive Nurse Directors, Council of Deans.

4.3 Future practice support roles

- Consider the implications and requirements of potential new NMC roles (practice assessor/academic assessor and practice supervisor), and how we maximise the contribution of education facilitator roles (PEF/CHEFs)
- Continue to work with and develop partnerships which reinforce quality of mentor/support roles and enhancement of student experience across all sectors
- Explore factors of selection, preparation and related skills and knowledge, quality assurance and protected time to afford recognition of assessor role
- Build capacity and capability of senior practitioner and advanced practitioner roles as assessors for prescribing.

4.4 Practice learning environments – experiences, quality and capacity

- Continue to develop a variety and diversity of learning environments across health and care. settings
- Identify types of learning experiences needed to prepare the nurse of the future
- Review the flow of all learners through placements and consider how quality is enhanced and usage maximised
- Explore use of technology to enhance real-time practice learning.

4.5 Evidence, data and intelligence

- Commission knowledge services to undertake rapid reviews of literature to inform model and role development i.e. peer support and supervision; interprofessional models of supervision; nurses working in social care; tripartite assessment

- Consider learning from assessor roles in other professions with a regulated responsibility
- Explore methodology, and data required to evidence quality and impact
- Use data from Quality Management of the Practice Learning Environment (QMPLE) to inform improvements and to target support role activity.

4.6. Strategic direction

- Determine which national group (i.e. one already established or to be newly formed) should have responsibility for steering the future developments within Scotland
- Clarify and confirm connections with other groups – Scottish Executive Nurse Directors (SEND), Council of Deans of Health Scotland (CofDofH), SCEPRN, National Strategic Group for Practice Learning (NSGPL)
- Widen membership of existing groups to strengthen non-NHS contribution towards practice learning and preparation of the future nursing workforce.

5. Conclusion

The event was designed to enhance and extend collaborative endeavours to unlock unknown, hidden or underutilised resources that contribute towards practice learning experiences. It reaffirmed the strategic commitment to aligned and integrated actions in response to the revised standards which will emerge from the NMC programme of change for education. The day enabled delegates to consider the next steps in reshaping the health and social care practice learning support model for the future. The event generated lively debate throughout the day and, as is seen, from the summaries of the discussions that took place and the suggestions for future actions outlined above, there was a commitment from delegates to building on Scotland's legacy of nursing and midwifery national approaches to practice learning and education. Since the event the Nursing 2030 vision⁶ has been published and the suggestions for action in section 4 require to be considered in the context of the forthcoming action plan associated with that document. The NMC consultation is completed and proposed date for publication is April 2018.

⁶ Scottish Government (2017) *Nursing 2030 vision: Promoting confident, competent and collaborative nursing for Scotland's future*. The Scottish Government, Edinburgh (available at <http://www.gov.scot/Publications/2017/07/4277>)

Appendix 1

Programme 9th June 2017

9.30am	Registration, refreshments and networking	
10am	Welcome, introductions and purpose of the event	Dr. Lesley Whyte, Associate Director Nursing and Midwifery, NHS Education for Scotland
10.10am	Practice Learning, Our Journey So Far – What have we learned along the way?	Dr. Colette Ferguson, Director of Nursing, Midwifery and Allied Health Professions (NMAHP)
10.30am	Discussion and Debate 1	Facilitator
11am	Planning the next phase of the journey for Practice Learning in Scotland – the policy context	Hugh Masters, Associate Chief Nursing Officer, Scottish Government
11.20am	Discussion and Debate 2	Facilitator
12pm	Lunch and networking	
12.50pm	What's Coming over the Horizon? - Standards of proficiency for the future registered nurse and draft model of learning and assessment	Anne Trotter, Assistant Director: Education and Standards, Nursing and Midwifery Council
1.10pm	Whole group discussion	
1.50pm	Shaping our future journey– looking at the evidence	Belinda Emmens, Practice Education Co-ordinator, NHS Education for Scotland
2.10pm	Planning the next phase of our journey - Discussion 3 and Call to Action	Belinda Emmens, Practice Education Co-ordinator, and Dr. Kathy Duffy, Head of Programme Practice Education, NHS Education for Scotland
3pm	Close	

Appendix 2

Table 1 – Collated responses from group facilitated discussion 1

Theme 1 -The national approach

National approach to enhancing learning environment

National approach

A national co-ordinated quality assured approach

Robust quality assurance of the practice learning environment

The quality standards provide assurance around certain aspects of consistency

Consistency across Scotland helps us to be strategic

Theme 2 - Building of a practice learning infra-structure and national network to ensure consistency

Continuous development of Practice Education Facilitator role and Care Home Education

Facilitator role across sectors to support mentors

Recognition of the varied settings in which care is delivered and the support given

The opportunity to experience a breadth of learning opportunities – making it consistent for all students.

Theme 3 - Partnership working

Collaborative partnership in placement environments

Role of PEF/CHEF and partnership working between HEI/Practice

The role of the PEF with mentors in the community – the partnership and support

Development of QMPLE

Strength is in working together towards the standardised approaches i.e. mentor training, SOAR

It is important for students to know that the mentors are being prepared and updated and supported in their role

Taking opportunities to learn from our many years' experience as to what works and what the deficits are.