



<b>Meeting Date</b>	<b>23 May 2019</b>	<b>Agenda Item</b>	
<b>Report Title</b>	<b>High Value Opportunity Project (Enabling Top of Licence Nursing): Role of the Assistant Practitioner (Level 4)</b>		
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<b>Report Sponsor</b>	Gareth Howells, Director of Nursing and Patient Experience		
<b>Presented by</b>	Lesley Jenkins, Unit Nurse Director and Lynne Jones, Head of Nurse Education.		
<b>Freedom of Information</b>	Closed		
<b>Purpose of the Report</b>	To identify opportunities for the introduction of the role of the Assistant Practitioner to support high quality, patient centred care and optimising the role of the Registered Nurse.		
<b>Key Issues</b>	<p>Nurse Staffing Levels (Wales) Act 2016.</p> <p>Significant Registered Nurse vacancy gap and achieving safe staffing levels.</p> <p>Poor patient experience and outcomes.</p> <p>Challenges to delivering high quality, patient centred care.</p> <p>Opportunity to better utilise existing workforce and to develop the nursing workforce.</p> <p>Developing the role of healthcare assistants and providing nursing career pathways.</p> <p>Sustainable staffing.</p>		
<b>Specific Action Required</b> <i>(please ✓ one only)</i>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>
<b>Recommendations</b>	<p>Members are asked to:</p> <ul style="list-style-type: none"> <li><b>Approve proposal</b></li> </ul>		

## 1. INTRODUCTION

The NHS is facing a deepening staffing crisis as we see growing shortages of nurses and other professionals including doctors and therapists. This creates an escalating demand for nursing skills. Demographic projections clearly highlight our ageing population and the prevalence of multi morbidity and frailty predictions, which will place an even greater demand on the need for nursing skills in the future.

The delivery of Prudent Healthcare demands that practitioners operate at the top of their license, namely that they only perform tasks that only they can undertake and that they do not spend time doing something that could be effectively done by someone else. Nurses should be encouraged to practice at the top of the license, to the full extent of their education and training with other tasks being performed by other roles.

The Parliamentary Review (2018) identifies that workforce shortages are very acute in the health and social care system and that this is a critical issue which urgently requires both immediate and longer-term action. Swansea Bay University Health Board recognises that the only sustainable way forward is to meet this challenge and to shape a future nursing workforce that maximises premium nursing skills and influences roles from healthcare assistants to registered practitioners, advanced practitioners and consultant nurses.

This paper will set out the opportunities for the introduction of the Assistant Practitioner (Band 4) role within future workforce planning. This role will help ameliorate service delivery pressures whilst providing better care for patients.

## 2. BACKGROUND

Swansea Bay UHB currently has 307 WTE Registered Nurse (RN) vacancies and recognises the challenges to workforce supply and the delivery of high quality care, against a backdrop of increased demand for services and financial constraint. Innovative approaches and planning are required to ensure an adequate workforce for the future.

Employers are increasingly developing their support worker workforce to meet future service needs along with financial and workforce challenges. To support this the NHS Wales Skills and Career Framework for Healthcare Support workers provides a governance framework to inform the career development of the healthcare support worker workforce in NHS Wales from Level 2 to Level 4.

The Level 4 Assistant Practitioner is a role that can help employers to have the flexible mix of skills required to meet complex patient needs, whilst enabling registered practitioners to deliver what they have been uniquely trained for. The role occupies a

unique position where post holders will be able to deliver more complex interventions than health care assistants, but will be able to undertake specific tasks delegated from registered practitioners. In principle these tasks would be more simple and /or routine and could be performed safely with training and agreed protocols and supervision. In turn, this enables the role of the registered practitioner to be maximised and to spend proportionally more of their time on more complex needs that require their specialist skills.

The role can assist organisations to deliver high quality, patient centred care in a variety of settings using a high level of skills, developed through both experience and training. Assistant practitioner roles would support the development of the healthcare support worker roles career pathway to registered professional roles, whilst also supporting employers where there are shortages of registered staff, but opportunities to use highly skilled non-registered staff to deliver elements of care.

### **3. PROBLEM**

Registered Nurse staffing makes a critical difference for patients and the quality of their care. Appropriate nurse staffing levels keeps patients safe and protects them from preventable harm. There is a significant shortage of Registered Nurses within the organisation which has an impact on the care provided to patients. The Nurse Staffing Levels (Wales) Act 2016 became law in March 2016 and requires health service bodies to have regard for the provision of appropriate nurse staffing levels, and to ensure that there are sufficient numbers of nurses to allow them time to care for patients sensitively. The Act, which is currently applied to adult acute medical inpatient wards and adult acute surgical wards, places a duty on health boards to calculate and take steps to maintain nurse staffing levels.

### **4. PROPOSAL**

The role of the Assistant Practitioner does not replace that of the Registered Nurse, but forms part of a spectrum of nursing and caring roles in practice. It is proposed that in order to be most effective, these roles will be delivered as part of a planned workforce strategy between the Service Delivery Units (SDUs) where the need for role has been identified.




#### **4.1 STEP 1- Defining the role through job descriptions**

Core job descriptions at Band 2, 3 and 4 have been developed for consistency and to clearly differentiate between the roles. Table 1 summarises the key role differences and qualifications required. To note, the Assistant Practitioner job description has a 'core duties' element and person specification with a section entitled 'Scope of

Practice’, this is to enable specific development of the scope of the role to match the area of practice.

The titles Healthcare Assistant (Band 2), Senior Healthcare Assistant (Band 3) and Assistant Practitioner (Band 4) have been assumed following the ‘Review of Clinical Health Care Support Worker Indicative Titles (All Wales Task and Finish Group Report July 2018) Appendix 1, which concluded this provided better clarity to the public and staff and supported workforce information processes.

**Table 1. Summary of Role Difference**

<b>Job Summary/Job Purpose</b>	<b>Job Summary/Job Purpose</b>	<b>Job Summary/Job Purpose</b>
<b>Band 2 HCA</b>	<b>Band 3 Senior HCA</b>	<b>Band 4 Assistant Practitioner</b>
<p>The Healthcare Assistant (Level 2) will work at all times under the delegation of a registered practitioner or assistant practitioner in the delivery of person centred care.</p> <p>The post holder will be responsible for following care plans and recording all personally generated observations and documenting care given in individual’s notes.</p>	<p>The Senior Healthcare Assistant (Level 3) has a greater degree of autonomy than the Healthcare Assistant and undertakes a broader range of health and care in accordance with policy and procedures. The post holder will work on their own initiative, undertaking delegated tasks with appropriate supervision in place from a registered practitioner/assistant practitioner.</p> <p>The post holder contributes to assessment and assists in the development, implementation and evaluation of individualised care plans. They will supervise other staff and promote the delivery of high quality care</p>	<p>As an Assistant Practitioner (Level 4) the post holder is expected to independently manage their own work and case load, undertaking tasks delegated by a registered practitioner with appropriate supervision in place. Having an understanding of evidence based practice and delivering care in line with current evidence, the post holder will take responsibility for taking action relative to an individual’s health and care in accordance with organisational policy and procedures.</p> <p>The post holder will be responsible for some elements of assessment, implementing programmes of care and modifying individualised care plans, reporting back to the registered practitioner. They may delegate work to others and may supervise, teach and assess other staff.</p>
<b>Qualifications</b>	<b>Qualifications</b>	<b>Qualifications</b>
Minimum of Qualification Credit Framework - <b>QCF Level 2</b> (formally NVQ Level 2) in Health/ or willingness to complete QCF qualification within agreed timeframe	Minimum of Qualification Credit Framework – <b>QCF Level 3</b> (formerly NVQ Level 3) in Health or willingness to complete in agreed timeframe	Certificate in Healthcare ( <b>120 Level 4 CQFW Credits</b> )
 JD PS Healthcare Assistant (CORE) Bar	 JD PS Senior Healthcare Assistant	 JDPS Band 4 Assistant Practitione

## 4.2 STEP 2 - Planned introduction of the role

It is proposed that a generic advert is placed, with the timing to be agreed by the SDUs in order to enable recruitment of a cohort of Assistant Practitioners to commence in September 2019. This approach will enable suitable recruits, with required academic prerequisites to undertake a bespoke induction and preceptorship programme to prepare them for undertaking their roles in more acute and subacute areas of practice and for working effectively as part of a multidisciplinary team.

#### 4.2.1 Uniform

The All Wales nursing uniform clearly identifies the appropriate uniform for Ward Sister/Charge Nurse, Ward Staff Nurses, Ward Healthcare Support Workers, Clinical Nurse Specialists, Midwives and Nursery Nurses. Arguably, uniforms make it easier for patients and staff to distinguish workers and it is recommended that a different uniform is considered for the role by the Nursing and Midwifery Board.

### 5. BENEFITS REALISATION

Benefits	Potential Challenges
Improve the experience and quality of care for individuals and families	Acceptance of the role from RNs and HCAs. Blurred role boundaries and confusion for both patients and professionals.
Develop healthcare assistants roles and provide career pathways to RN	Poor planning and implementation
Maximising premium nursing skills by supporting and freeing up RN time	Awareness and understanding of the role particularity appropriate delegation
Creating a more skilled and knowledgeable workforce	Being seen as a threat to/ replacement of RN roles
Enrich the capability and engagement of the healthcare assistant workforce to better utilise the skills and experience they already have	Poor planning and implementation
Enable nurses to undertake more advanced roles	Team awareness and understanding of appropriate delegation
Increase the supply of nurses	Barriers to graduate training

### 6. MONITORING AND EVALUATION

Progress and performance will be monitored through the High Value Opportunity Project; Top of Licence Working work stream, with reporting to the Nursing and Midwifery Board.

### 7. GOVERNANCE AND RISK ISSUES

A full quality impact assessment has been completed (see embedded document). An Equality Impact assessment screening process did not identify any adverse impact on any protected groups as a result of this proposal.

## **8. FINANCIAL IMPLICATIONS**

- To be confirmed by SDUs.
- To confirm resources for induction and preceptorship of new recruits.

## **9. RECOMMENDATIONS**

**R1** Agree content of core job descriptions.

**R2** Agree implementation of proposed HCA titles.

**R3** SDUs to identify suitable clinical areas to introduce the role and agree and support a joint approach to begin recruitment process.

**R4** Develop a bespoke clinical induction programme and resources to deliver.


**R5** Agree uniform for Assistant Practitioner role.

**R6** Agree cohort start date.

## **10. REFERENCES**

Developing Excellence in Healthcare An NHS Wales Skills and Career Framework for Healthcare Support Workers supporting Nursing and the Allied Health Professions

The Parliamentary Review Final report (2018), A Revolution from Within: Transforming Health and Care in Wales. Welsh Government Publication.

<b>Governance and Assurance</b>										
<b>Link to corporate objectives</b> <i>(please ✓)</i>	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships	
	✓		✓		✓		✓		✓	
<b>Link to Health and Care Standards</b> <i>(please ✓)</i>	Staying Healthy	Safe Care	Effective Care	Dignified Care	Timely Care	Individual Care	Staff and Resources			
		✓	✓	✓	✓	✓	✓			
<b>Quality, Safety and Patient Experience</b>										
Increasingly staff are reporting adverse incidents due to difficulties in covering registered nursing shifts and the impact this is placing on patient care. These incidents are leading to poorer outcomes and experience for patients and their families.										
<b>Financial Implications</b>										
Finance of induction programme and preceptorship to be confirmed.										
<b>Legal Implications (including equality and diversity assessment)</b>										
Equality Impact assessment screening process did not identify any adverse impact on any protected groups as a result of this proposal.										
<b>Staffing Implications</b>										
Identify resources to deliver induction and preceptorship programme.										
<b>Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)</b>										
<b>Report History</b>	First report									
<b>Appendices</b>	<b>Appendix 1</b>   TFSG - Establish Clinical HCSW Indica									