

Changes to nursing education: sharing local experiences



Background

In September 2010 the Nursing and Midwifery Council (NMC) published new *Standards for pre-registration nursing education*, which provide the framework for nursing education programmes and are central to how nurses will be trained.

As 50 per cent of the programme will be delivered in practice, employers have an essential role in shaping the curricula. It is also a unique opportunity to ensure the programme delivers nurses that will meet local, future workforce needs.

This opportunity becomes even more significant when considered in the wider context of:

- the changes faced by the NHS through the Health and Social Care Bill
- the pressure to save costs while maintaining high-quality services
- the increasing media scrutiny of the nursing profession
- the challenging industrial relations environment.

“Employers have an essential role in shaping the curricula.”

Using the changes to the standards as a lever, employers can address these wider issues by identifying the tasks, behaviours and attributes they require of future nurses and incorporating them into the pre-registration curricula.

Learning from experience

The size of the change has required a phased implementation approach, with the first programmes using the new standards from autumn 2011 and all programmes required to be using them by 2013.

This means that trusts who have yet to commence with the new standards can learn from the experiences of those who already have.

The NHS Employers organisation conducted interviews with a number of employers throughout autumn 2011 to identify how they approached the changes. The interviews involved a range of questions including:

- How was the change process managed?
- How were the changes communicated?
- How did your relationship with your education provider develop?
- How were practice learning opportunities updated?
- How were mentors supported?

This brochure compiles the results of those interviews, identifying common trends and bringing together local experience and advice to help other employers implement the changes.



How was the change process managed?

Be informed

Firstly, fully understanding and keeping up to date with the changes was stressed as key to the success of the change programme. Staff who had responsibility for leading the programme needed to be fully informed, so they could distribute information to other employees as part of any communications plan and be a point of contact for any questions.

Roadshows and events run by the NMC were popular and provided a forum for organisations to ask questions, particularly around details within the standards and wider reasons for some of the changes.

The partner higher education institutions (HEI) were also an essential source of information and interviewees reinforced the importance of attending all meetings and events that the HEI arranged.

Top tips: Be informed

- Visit the NMC website for the library of standards that includes other supporting information.
- Attend any relevant events run by the NMC, SHA, HEI or other organisations.
- Use other information and products, such as that produced by NHS Employers.

Groups

Most organisations already had groups that they felt could oversee the implementation and any integrated project management into these. For example, a workforce planning group or nursing pre-registration forum.

However, other trusts did set up a specific implementation group that also included strategic oversight for mentors and placements. It was felt that the group should also consider issues around the future role of the nurse, to ensure that this was considered as part of curriculum design, local requirements for a future workforce and impact upon communication.

“It was felt that the group should also consider issues around the future role of the nurse.”



Understanding your workforce

Another trust carried out a scoping exercise with their nursing staff to identify individual information needs, as well as any concerns. This was obtained through a survey, focus groups and individual conversations and was then used to develop their communications plan.

Top tips: Managing the change

- Be as organised as possible.
- Develop a project plan.
- Ensure staff involvement in the change process and identify the accountabilities.
- Get information about the detail of the changes – find out as much as you can.
- Use staff to drive through the changes and improvements themselves.
- Find out what tools and resources are available to you and use them.
- Get started ASAP... it's a massive change!
- Don't panic!



How were the changes communicated?

Communications plan

Not everybody we spoke to developed a specific communications plan to help them strategically manage their messages. Some preferred to 'play it by ear' and others incorporated it into overall workforce plans. However, there was regret from at least one employer who hadn't developed a communications strategy and in retrospect wished they had.

For those that did develop a plan, it was felt that 'when' things are communicated is as important as 'what' and 'how'. One trust suggested being aware of 'change fatigue' and not overwhelming staff with too much information at once. Another thought that staff may not pay as much attention to key messages until it is necessary for them to do so and recommended focusing on structuring messages accordingly.

"For those that did develop a plan, it was felt that 'when' things are communicated is as important as 'what' and 'how'."

For an example of how a workforce development team designed and implemented a communications plan to implement the changes to nursing education, go to www.nhsemployers.org/nursing

Content

Those we spoke to felt that it was important to communicate the reasons for the change and the wider impact it might have, as well as details around the education programme. Providing details of the potential benefits of the change, how it would affect the organisation and dealing with myths and rumours, was seen as equally important as curriculum developments.

Developing a communications plan also allowed those managing the change to ensure that any communications material they delivered allowed them to target the needs of different audiences. These audiences included senior nursing staff, the whole nursing workforce, mentors, existing students and wider multi-disciplinary teams.

The list below outlines some of the communication mechanisms used by the interviewees. Many organisations already had forums that were relevant to the nursing workforce and felt it was better to integrate the communications plan through these, rather than creating a specific group.

Communication mechanisms

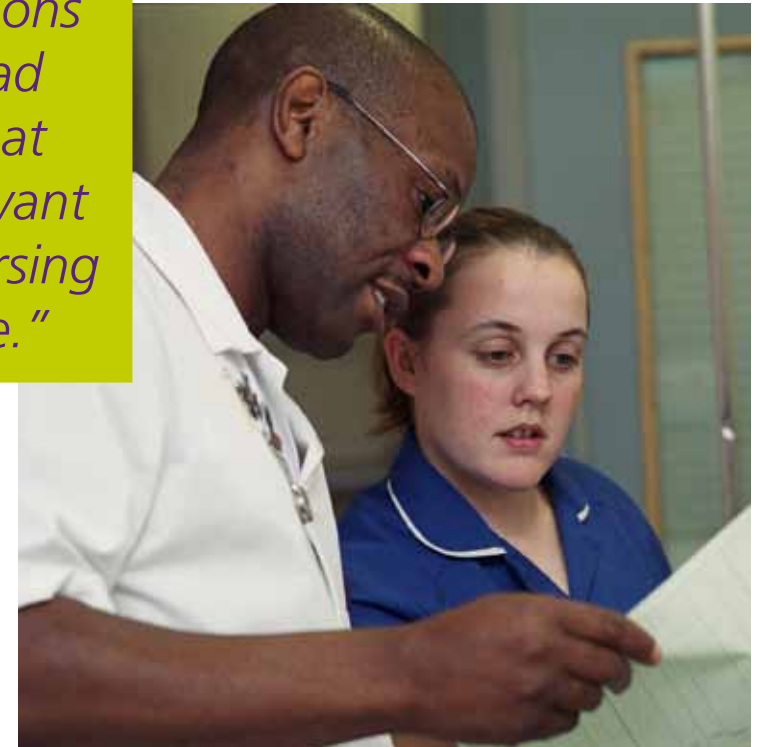
Examples of communication mechanisms used:

- mentor updates
- online updates
- intranet
- newsletters
- trust bulletin
- posters
- roadshows
- forums
- team meetings
- team briefings
- events.

Top tips: Communicating the change

- Get the message out as early as possible.
- Consider the impact of your messages.
- Communication is essential to the success of the project.
- What's the vision that you're trying to communicate?
- Be structured in how you communicate with people.

"Many organisations already had forums that were relevant to the nursing workforce."



How did your relationship with your education provider develop?

Building a better relationship

Many of the interviewees we spoke to stated they already had a good working relationship with their education provider. However, some found it challenging at times to develop and implement the programme in partnership.



One organisation wished there was better communication from their HEI, as only small bits of information filtered through at the beginning of the process. Another trust didn't realise what some of the implications of the changes would mean for them until they were further down the line than they would have liked.

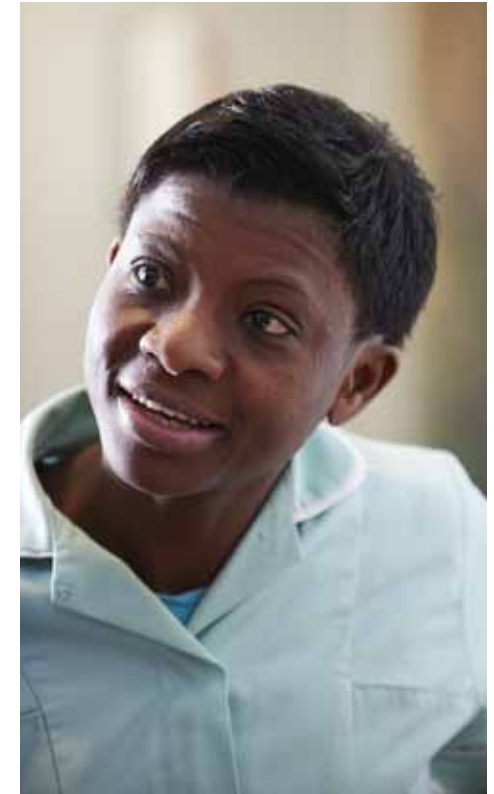
“One organisation wished there was better communication from their HEI.”

Having a designated officer

The majority of trusts had identified a designated officer as the main point of contact for their relationship with their university. The types of role that carried out this officer position included:

- education lead
- practice lead facilitator
- senior nurse
- lead nurse for pre-registration education.

One organisation that didn't have a designated officer recognised the need for one and will be implementing one soon.



Developing the curriculum

There were a variety of approaches for developing the curriculum across the trusts we spoke to. Some developed curriculum groups with the university and worked closely together, in others the university led a steering group. Another developed a curriculum 're-write' group that included practice educators, managers and those involved in wider strategic planning.

Employers felt it was important to identify and focus on what they wanted from future newly qualified nurses. In some organisations the HEI took the lead in asking about the employer's expectations of the future nurse: What skills do they

want them to have? What skills needed further development? How did they see the career pathway developing?

One employer expressed regret that they didn't engage in developing the curriculum at an early enough stage. Another had problems working with their HEI due to lack of flexibility when meeting, which was compounded by the relatively short amount of time they had to design the programme.

Changes to the selection process

Many organisations said that the university already had a very good, robust recruitment and selection procedure for entrance to nursing programmes. The majority of HEIs had raised the entry requirements for the courses and had taken the opportunity to review some of their processes.

“One employer expressed regret that they didn't engage in developing the curriculum at an early enough stage.”

Some new initiatives included:

- strengthening questions regarding professionalism, care and compassion
- introduction of numeracy and literacy testing
- group interviews
- focusing on and ensuring the student commitment to nursing.

Top tips: Partnership working with your education provider

- 50 per cent of the programme is still delivered in practice.
- Take the time to think about what your organisation wants from the process.
- What are your needs and requirements?
- How do you want to influence the curriculum?
- Make sure you get fully involved. Engage as soon as possible.
- Build a good relationship with your provider.
- Keep communicating and stay informed.
- Your relationship with the education provider is crucial and personal communication is key.
- Get to know your key contacts and start the dialogue early.
- Ensure the HEI understands what your future vision for nurses is.
- Take the opportunity to get involved at the building stage.
- Be persistent about your involvement in developing the curriculum.



How were practice learning opportunities updated?

Reviewing current practice learning opportunities

Changes to the standards provided a good opportunity to review how the practical element of the programme is delivered. Some interviewees examined what learning opportunities were currently offered and looked at how they could be mapped to the new modules.

Other organisations put the quality of the learning opportunities at the forefront, examining how they currently provided these and spent time individually with senior sisters to see how these could be improved.

New approaches

A popular new approach for some trusts was the 'hub and spoke' model. This places students with a main mentor in an area



where they are normally based for a significant period of time, usually a year (the hub). The student then experiences other areas of learning with associated mentors throughout that year to give them a range of experiences (the spoke). Using this model, some employers had managed to enable students to reach all areas of nursing within the trust.

Many trusts were trying to ensure that their approach to practice learning had enough flexibility for students to understand the patient journey. The 'hub and spoke' approach was one method of offering this flexibility, but others tried wherever possible to build in options to allow students to follow an individual patient. Inter-professional learning was a key aspect of this and the majority of employers we spoke to had built this in to their practice learning.

One trust did present an example of an innovative new practice learning opportunity. The organisation educated mental health nursing students and had explored the possibility of a

four-day placement with the police that would include time in the holding areas, incident room and accompanying officers on call. Due to funding and capacity issues this didn't proceed but is something they are holding in consideration for the future.

"The 'hub and spoke' approach was one method of offering this flexibility."

Consider the impact

The requirement for practice learning to now include a significant mix of both acute and community settings had an impact on some employers that wasn't immediately apparent when developing the curriculum.

Some acute trusts found that the amount of time students would spend with them during practice learning had been

Top tips: Practice learning opportunities

- Think about what the changes will mean for students.
- How will the learning opportunities you provide need to change?
- Is the practice learning providing the necessary skills outcomes?
- Ensure you understand the practice implications of the changes.

reduced to allow for greater time in the community. In one instance, this change wasn't fully appreciated at the beginning of the development process and the employer had to refocus placements to ensure that key acute setting skills would still be provided while students were with them.

Similarly, community nurses have perhaps been used to receiving a smaller number of students who had specifically expressed an interest in learning within the community. The changes to the standards have meant they have needed to adjust and increase their capacity to mentor students.

Organisations that have merged through Transforming Community Services and now have nurses working in both acute and community settings might want to consider how best to structure their practice learning to take advantage of this.

In light of previous changes to nursing education, employers pointed out that it's essential to consider the learning pathway for students and to be careful to not send students into inappropriate places that they're not yet ready for. The focus should be on the learning environment and quality of educational experience.

How were mentors supported?

Dealing with concerns

The employers we spoke to recognised the importance of ensuring that mentors are well informed and engaged. They are critical to the student experience and need to be confident in their role, assessing and supporting students.



Some of the common themes raised by mentors were concerns around their own academic levels, a potential return to two-tier nursing, and how changes to education might prevent some people from entering the profession. The list below identifies some of the methods employers have used to support mentors on these and other concerns.

Methods used to support mentors through the changes

- Spend time with them individually, reviewing the changes.
- Provide online information and updates.
- Hold roadshows and workshops to explain the curriculum.
- 'Update' documents.
- Provide a trust-wide mentorship group.
- Annual mandatory updates.

Further information

A range of resources to support employers with the implementation of the *Standards for pre-registration nursing education* can be found at www.nhsemployers.org/nursing

Our pre-registration web section contains a 'getting started' page with information on:

- managing the change
- communications
- partnership working
- supporting mentors
- evaluation.

The briefing, *Preparing for change: implementing the new pre-registration nursing standards* provides background information and suggestions on how employers can best get ready for the changes.

There are also additional tools and information available, including customisable communication presentations and links to external resources, such as the nursing career framework and a modernising nursing careers checklist.

Get in touch

If you have any comments about this document or would like to share your experience of implementing the changes to nursing education, please email nursing@nhsemployers.org



NHS Employers

The NHS Employers organisation is the voice of employers in the NHS, supporting them to put patients first. Our vision is to be the authoritative voice of workforce leaders, experts in HR, negotiating fairly to get the best deal for patients.

We help employers make sense of current and emerging healthcare issues to ensure that their voice is front and centre of health policy and practice. We keep them up to date with the latest workforce thinking and expert opinion, providing practical advice and information, and generating opportunities to network and share knowledge and best practice.

We work with employers in the NHS to reflect their views and act on their behalf in four priority areas:

- pay and negotiations
- recruitment and planning the workforce
- healthy and productive workplaces
- employment policy and practice.

The NHS Employers organisation is part of the NHS Confederation.

Contact us

For more information on how to get involved in our work, email getinvolved@nhsemployers.org

www.nhsemployers.org
enquiries@nhsemployers.org

NHS Employers	
29 Bressenden Place	2 Brewery Wharf
London	Kendell Street
SW1E 5DD	Leeds LS10 1JR

Published February 2012. © NHS Employers 2012.
This document may not be reproduced in whole or in part without permission. The NHS Confederation (Employers) Company Ltd. Registered in England. Company limited by guarantee: number 5252407